Creating a Trauma Informed System: Practice and System Level Strategies

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Today's Agenda

- 1. Identify the 6 principles of trauma informed care and behaviors that are trauma informed.
- How to apply trauma theory to your service system creating trauma informed practice and system level strategies.
- 3. How to engage family, youth and other stakeholders in the creation of a trauma informed system.
- 4. How to determine and measure whether services are trauma informed.
- 5. How to create an initial work plan for implementing the principles in your organization/practice.



OBJECTIVE #1

Identify the 6 principles of trauma informed care and behaviors that are trauma informed



The Trauma-Informed Domains

- 1. Physical and Emotional Safety
- 2. Youth & Family Empowerment, Choice and Collaboration
- 3. Trauma Competence
- 4. Trustworthiness
- 5. Commitment to Trauma-Informed Philosophy
- 6. Language Access and Cultural Competency



The Trauma-Informed Principles

- 1. Safety
- 2. Trustworthiness
- 3. Choice
- 4. Collaboration
- 5. Empowerment
- 6. Language Access and Cultural Competency



Safety

- Ensure that all have a sense of physical and emotional wellbeing and safety
 - To what extent do program's activities and settings ensure physical and emotional safety of consumers and staff.
 - How can services be modified to ensure safety measures are effective and used consistently



Trustworthiness

 Is one of the domains that challenge agencies, practitioners and systems to ask tough questions and be vigilant about expecting each person to uphold policy not only by word but also by action.

 If consumers are not involved in collaboration and power sharing trust is next to impossible.



Choice

- Maximizing consumer choice and control
- Allows the consumer to choose where, how and when they will receive services and they also have a active voice selecting a provider



Collaboration

- Policies, practices and relationships that encourage empowerment, partnership, and participation, as well as strength based and community-based approaches
- Having the ability to share power and value both perspectives
 - ➤ Collaboration with the consumer allows for very specific insight. Only the consumer knows their responses, their needs and history better then anyone else does.



Empowerment

- It is the state of feeling self-empowered to take control of one's own destiny.
- To become aware that one's experience can enhance service systems and promote change
- Program opportunities to develop skills and enhance knowledge of the consumer



Language Access & Cultural Competence

- Extent to which policies, procedures, staff, services and treatment are sensitive to family and youth:
 - > cultures
 - > traditions
 - > beliefs
- Ensure language access thru:
 - > policy
 - > training
 - > reimbursement



OBJECTIVE #2

How to apply trauma theory to your service system creating trauma informed practice and system level strategies



Steps For Clinical Services

- Identified Trauma Specific Treatments
- Ensured that the treatment met trauma informed principles
- Included consumer perspective on the learning collaborative team
- Focus on clinician and provider self care: "effects of trauma work"



Steps For Clinical Services Continued

- State changed policy, reimbursement and contract language to support TFCBT and CPP
- Staff provided education on intergenerational trauma to various agency stakeholders
 - > Partnering with family organizations to engage caregivers



Steps for Child Welfare

- Provided initial training on trauma-informed approach
 - >creation of Trauma-Informed Champions,
 - >Action Plans
- Co-located Family Partners
- Provided local training (now statewide)
- Helped nurture leadership commitment to TI



Steps for Child Welfare Continued

- Provided training and guidance
 - > NCTSN Child Welfare toolkit
 - ➤ NCTSN Resource Parent training

 Changes in practice can be assessed in the areas of Safety, Permanency, Well Being



Steps For Juvenile Justice

- Provided training to Juvenile Justice staff on Trauma-informed Approach
 - ➤ Worked with them to create action plans
- Clinical Coordinator provided consultation on using trauma assessments
- Presented TFCBT at annual JJ conference



Steps For Education

- Piloted NCTSN toolkit for educators in local school district
- Provided consultation to Safe Schools Healthy Students
- Providing training on trauma, refugees and learning in a year long learning series



Steps For Family Organizations

- Provided trauma-informed trainings to family organizations
- Developed and embedded trauma-informed module in State Wraparound Family Partner Curriculum
- Created and disseminated Family Information sheet on trauma, ACES and intergenerational trauma



Considerations for youth organization

- Youth organizations allow youth the opportunity to connect with other's who have shared experience
- Youth organizations support resiliency by
 - Allowing youth positive ways to contribute
 - Connecting them with other peers and caring adults
 - Allows them to contribute to issues that impact them
 - Builds off strengths youth have
- Youth organizations can support providers and systems by
 - Providing trainings on youth voice, best practices for youth engagement
 - Development of materials in language and terms that youth can relate & understand
 - Advise on committees and provide support with implementation for new initiatives



OBJECTIVE #3

How to engage family, youth and other stakeholders in the creation of a trauma informed system



Youth & Family Engagement

- Understand how trauma shapes ones world view
- Meet youth and families where they are at
- Understand how trauma impacts a young persons ability to build connections
- Understanding the impact of intergenerational trauma on outcomes
- Provide training to youth and families on the value of being trauma informed



OBJECTIVE #4

How to determine and measure whether services are trauma-informed



Why Assess?

 To improve the entire mental health system for youth and families.

 To identify areas where agencies are doing well, and to guide next steps for making the system even more trauma-informed.



Assessing Trauma-informed Approach in Maine

- Trauma-Informed Agency Assessment (TIAA)©
 - ➤ A two-pronged assessment: measures 6 key trauma elements across multiple perspectives
 - Three tools developed to gauge the level of trauma-informed approach to services
 - Agency Staff Self-Assessment
 - Family Questionnaire
 - Youth Questionnaire



Sustaining the Trauma-informed Approach

- Statewide Assessment
 - **➤** Contractual Obligation
 - ➤ Biennial Administration
- Continuous Quality Improvement (CQI)
 - ➤ CQI Plan Required
 - ➤ Ongoing Technical Assistance and Training



The Contract Language

System of Care Principles:

- 17. The goal of DHHS is that Providers of Children's Behavioral Health Services are integrated in a **Trauma Informed System of Care**. Providers will promote the Federal Substance Abuse and Mental Health Services Administration's (SAMHSA) System of Care Principles of 1) Family Driven, 2) Youth Guided, and 3) Culturally and Linguistically Competent care. These three System of Care Principles are described at http://systemsofcare.samhsa.gov/.
- 18. An additional principle for a Maine's Children's Behavioral Health System of Care is that it is **Trauma Informed**.
- 19. By January 1, 2010, the Provider shall administer a system of care self **Assessment Tool** approved by the Department that addresses the principles referenced in paragraphs 18 and 19 herein.
- 20. By January 1, 2011, Provider, in collaboration with Children's Behavioral Health Services, will include in its **Quality Improvement Plan** developed under Rider "A" areas of need identified by the Assessment Tool and plans to meet those needs

www.maine.gov/dhhs/purchased-services/contract-2010/rider-e/RIDER-E-CS.pdf



Statewide CQI Plan

Additional Technical Assistance as needed Conduct TIAA Assessment

Agency and DHHS
Review
Results

Implement CQI Plan / Plan Do Study Acts



Prioritize Areas of Need

from Thrive
Consultants/
Use of TIAA Crosswalk

Create
Continuous
Quality
Improvement
Plan for DHHS
Contract

Guidance from DHHS
Regional Coordinator
leads to initial contact
with Thrive



OBJECTIVE #5

How to create an initial work plan for implementing the principles in your organization/practice



Agency Report: TCMHS

	Agen	Agency Results			Statewide Results			
Trauma-informed Domain	Agency (N = 107)	Family (N = 50)	Youth (N = 24)		Agency	Family	Youth	
I. Physical and Emotional Safety	73%	83%	73%		82%	84%	77%	
II. <u>Youth</u> Empowerment, Choice and Control	78%	x	66%		78%	x	70%	
II. <u>Family</u> Empowerment, Choice and Control	80%	77%	x		82%	80%	X	
III. Trauma Competence	75%	81%	74%		70%	85%	74%	
IV. Trustworthiness	84%	83%	76%		86%	87%	77%	
V. Commitment to Trauma-informed Philosophy	73%	x	x		65%	x	x	



Technical Assistance and Training

- Trauma-Informed System of Care Crosswalk
 best practice guidelines
- Family and Youth as Co-trainers
- Identify Agency Trauma-Informed SOC Champions
- Continuous Quality Improvement Feedback



Work Plan Example

- May want to focus on one specific domain at a time
- Consider feasibility, impact and available resources
- Identify goal, specific steps to reach each goal, resources needs to achieve each goal, realistic timeframe for achievement of each goal
- Goal: Increase Family rating on: empowerment, choice and control
- Options: 1. add questions to employee survey, 2. involve consumer advisory board, 3. incorporate more training into staff orientation, 4. change hours, days of operation (add evening, week-end hours)



Conclusion, Resources and Contact Information

www.thriveinitiative.org

www.nctsn.org (national child traumatic stress)

www.chadwickcenter.org

www.acestudy.org

www.nccp.org (national center for children in poverty)
http://mentalhealth.samhsa.gov/nctic/

For more information please contact aperez@tcmhs.org

