



5 Key Elements to Trauma-Informed Care

In today's world of whole health focus and integrated care, assessing for and effectively treating trauma is key to providing quality care and achieving positive clinical outcomes.

“Trauma-informed care is now the expectation, not the exception, in our service delivery system.”

The experience of trauma has widespread impact on the lives of those we serve, leading to or exacerbating mental illnesses, substance use and physical health conditions. In a truly integrated, whole health system of care, effectively treating behavioral and physical health conditions must involve addressing the impact of trauma.

Unfortunately, despite our best efforts, the very services and systems designed to help people become healthy can be re-traumatizing. Our staff can also be negatively impacted by doing the work. Trauma-Informed Care is how we can address these concerns and position our organizations to meet the demands of our ever changing health care field.

This effective framework involves real time strategies that create staff and organizational wellness and equip organizations to meet critical outcomes, including increased staff retention, decreased number of critical incidents, and increased client engagement in treatment planning and adherence. Trauma-Informed care is not a “hot topic” or the current “fad” in behavioral health, it is becoming a standard practice across all of healthcare.

If your organization is considering becoming trauma-informed or you think you are currently a trauma-informed organization, we can help.

Here are a few things to consider before you embark on the journey.

The Five Key Components in Implementing and Maintaining a Trauma-Informed Framework



1. Organizational Assessment

Important to conduct initial/baseline assessment and continue to reassess and use feedback to improve.



2. Paradigm Shift

Practicing in a TIC framework requires a significant paradigm shift from how “we’ve always done things” and traditional approaches. It’s not a one-time implementation



3. Safety

The foundation of the trauma-informed approach and arguably the most important of the foundational principles of TIC is creating a safe environment for those you serve and all who work at your organization.



4. Wellness and Self-Care

The organizational culture needs to be one of overall wellness and self-care, not just of those you serve but all employees and supervisors.



5. Everyone Included

TIC isn’t a clinical intervention, it’s an approach to every element of your business and involves all staff. If your implementation of TIC involves direct care/clinical staff only, you aren’t truly trauma-informed.

We will explore each component and help you move your practice to a trauma-informed approach, and stay that way.



1. Conduct an Organizational Self-Assessment

Whether you are shifting your organization to a trauma-informed approach or evaluating how well you are currently practicing within this approach, the first step is to conduct an organizational self-assessment. The evaluation needs to be thorough, measureable and use a proven tool. The benefit of using a tool allows you to create a baseline and then re-assess throughout the process.

A measureable baseline will help you identify areas that are improving, areas to strengthen, and any areas that are showing a negative trend.

One example of an evaluation tool is the Organizational Self-Assessment© (OSA) tool that National Council for Behavioral Health developed. This tool is used as part of their consultation package and many organizations have used it to improve their service delivery approach. The purpose of the OSA is to identify the key components of a TIC organization and assess organizational readiness to adopt a TIC approach. The OSA is developed for both organizations seeking to shift to a trauma-informed approach and those who have been working within this framework and seek to improve.

To learn more about National Council’s services and the OSA, [click here](#).

SAMHSA’s National Center for Trauma Informed Care has also developed a self-assessment tool and other resources to help organizations deliver trauma informed services and improve their overall programs. (NCTIC, Center for Mental Health Services, 2007).

Assessment Tools in Addition to National Council's OSA:

[Agency Self-Assessment](#) plus additional information at [Trauma Informed Care Project](#)

[ARTIC: Attitudes Related to Trauma Informed Care](#) created by [Traumatic Stress Institute](#)

[Creating Cultures of Trauma Informed Care \(CCTIC\)](#) available for purchase at [Community Connections](#)

[Trauma-Informed Care – Organizational Self-Assessment Tool \(TIC-OSAT\)](#) can be found at [Coordinated Care Services, Inc](#)

*Additional [TIC Organizational Assessment resources](#) can be found at [ACEs Connection](#)

There are additional organizational self-assessment tools identified by SAMHSA that can be used for both evaluating an existing program's effectiveness and developing a new program. These are designed for staff and/or consumers and provide valuable feedback on how to improve trauma-informed services.

Unlike implementing a new program, service line or evidence-based practice, becoming trauma-informed requires an overall organizational paradigm shift in how you view the people you serve and the model with which you provide care. Launching a trauma-specific clinical service hiring a trauma specialist or offering lunch and learn staff training opportunities can be steps in advancing trauma-informed care, but as stand-alone activities, are not effective methods to creating a trauma-informed organization.



2. Paradigm Shift

The trauma-informed approach is the lens with which the entire organization views itself and provides services to the community. It becomes a strength based perspective by which we understand maladaptive or unhealthy behavior through the lens of survival.

The biggest shift in how we view and treat those we serve is best summed up in the question “what happened to you?” vs. “what’s wrong with

you?” When we shift the focus, we are changing how we think about and view the people we serve, ourselves and each other. This is the big paradigm shift at the foundation of trauma-informed care. This reframe gives us a new lens that all of our interactions, policies, practices and procedures are filtered through.

This different way of thinking moves us from the disease model to the strengths, resiliency and wellness model. The purpose behind this focus is to connect life events and current level of functioning. This reframe can open up a whole new world for us as service providers and the people we serve, and help them to change internal messages around their perceived weaknesses and deficits. The message “I am broken and weak” can become “I am a survivor/thriver and very strong.”



3. Safety

The six key principles of a trauma-informed approach are:

1. Safety
2. Trustworthiness and Transparency
3. Peer support
4. Collaboration and mutuality
5. Empowerment, voice and choice
6. Cultural, Historical, and Gender Issues

National Council's Organizational Self-Assessment[®] (OSA) is based on the National Council's Seven Domains of Trauma-Informed Care. The seven domains of trauma-informed care are:

1. Early screening and assessment
2. Consumer-driven care and services
3. Nurturing a trauma-informed and responsive workforce
4. Evidence-based and emerging best practices
5. Creating safe environments
6. Community outreach and partnership building
7. Ongoing performance improvement and evaluation

If there is one foundational principle of this approach, it is the concept of safety. By safety, we're not talking about just creating a safe therapeutic environment for the people you serve, but one across the whole organization. Safety includes physical, emotional and psychological safety of those you serve AND those at your organization. It begins with an evaluation of the physical environment, the facility itself and the policies surrounding a safe workplace. Ideally the overall safety of the organization is a collaborative, ongoing project that involves those you serve.



For your staff to be most effective, the concepts of physical and emotional safety extend to them as well. The people employed by your organization need to feel valued and safe. They should be able to ask for help when needed and open to express challenges with the work they do, especially those in direct care roles. The roles of leaders.



4. Employee Wellness & Self-Care

A key component of trauma-informed care is the importance of taking care of employees; the organization taking care of its employees and helping employees take care of themselves. The impact on professionals of working with trauma is well documented; concepts like compassion fatigue, burnout and secondary trauma are addressed in numerous publications. It is an accepted truth that this work impacts the professionals and caregivers and therefore an effective program must have systems in place to take care of employees.

Employee wellness is a two sided coin; one side is the importance of a healthy and well-functioning workforce and the other side is the importance of role modeling healthy behaviors for those you serve. When your employees are practicing both proactive, whole health self-care techniques and healthy coping techniques when experiencing difficulties, the whole organization benefits.

The airplane airbag analogy is very fitting; you can't help others if you haven't helped yourself first. In order to work in a trauma-informed way, staff need to take care of themselves physically, emotionally and in every way. The quality of the services provided and staff effectiveness is directly tied to employee self-care. As an organization, your employee wellness program



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goes beyond employee satisfaction and reducing turnover, Wellness is defined broadly in a trauma-informed approach; physical, emotional, psychological, social, financial and spiritual factors are all important components of overall health. As your employees take better care of themselves, practice what they preach to those you serve, the impact of this role-modeling and overall healthy environment on the people you serve is noticeable. Many organizations have seen how employee health programs like tobacco cessation, healthy eating and exercise have naturally extended to those they serve.

This is another area where managers and leaders are a key component of success. For direct care and clinical staff, the importance of trauma-informed clinical supervision can’t be emphasized enough. However, for all managers and supervisors, it can be a very effective strategy for any type of supervision and enhances professional development.

There are different approaches to supervision and different types of supervisory relationships. It’s important to define which hat or role you are engaged in for different activities with employees:

- Human resources (HR) related tasks (ex. attendance, approving time off, performance reviews)
- Clinical supervision (supervising clinicians as they work towards licensure, focused on clinical practice, techniques, etc.)
- General employee supervision (focused on professional development, overall improvements and growth within their role and advancement within the organization)

An effective and well-trained clinical supervisor can focus on more than clinical effectiveness; they can help employees cope with compassion fatigue, secondary trauma and overall employee burnout. For trauma-informed organizations, supervisors who are aren’t designated as “clinical supervisors” can still provide the same guidance and have a meaningful, positive impact on all employees’ well-being.

In a trauma-informed framework, supervisors genuinely care about staff members as human beings, taking the time to ask, “how are you doing?” and actively working to support their health and wellness. Ensure that your supervisors and managers have the skills, training and support to incorporate trauma-informed care into the manager-employee relationship.

If your Human Resources department doesn't already have a well-defined and fully implemented employee wellness program, this is a great opportunity to implement components of one. In addition to the above benefits, employee wellness programs often have direct benefits from your employee health plan, including cost savings for your organization. It's not very often an employee focused program can have a direct, positive impact on various aspects of your business; employee burnout, turnover, health care costs, and quality of care provided to those you serve.



5. Every Person at Your Organization

An organization who is working within a trauma-informed framework involves all aspects of business, all employees and works on transforming the whole organization. Trauma-informed care across the entire organization can't be achieved by hiring one trauma specialist or dedicating one department to work with trauma clients. All employees are involved, including those who don't do clinical work.

It's more than clinical interventions. It's in our attitudes, beliefs, documentation, physical environment and how we treat each other. As we noted previously, it is a paradigm shift that occurs at all levels of an organization and with all staff. To be truly trauma-informed, all staff at an organization must be trained in the



framework and incorporate changes into their daily tasks. Trauma-informed care begins with someone's first contact with your organization; when a client walks in the door, the appearance and layout of the building, the administrative staff, a community worker approaching a home.

One of the key opportunities for communicating this framework and shifting the organizational culture is in the new hire orientation. Include in your onboarding program the principles of trauma-informed care and how each employee can embrace and demonstrate this approach in their work. Like any other organizational shift or cultural element, this concept will need to be reinforced and over-communicated to both new and existing staff.

In order to involve all staff in every department and job role, this framework needs to be fully embraced by leadership. We cannot be trauma-informed with those we directly serve if our entire organization is not committed to the approach. As a leadership team, it's important to incorporate both formal and informal organizational culture shifts in this process; policies, procedures, ongoing all staff communication, leadership involvement at all levels and environmental changes. Creating lasting change requires everyone at the organization to be committed and involved; TIC is no different in terms of organizational change than any other initiative.

Conclusion:

Any significant organizational change can be overwhelming and challenging to undertake. Often paradigm shifts are partially implemented and not fully supported. This means ongoing communication, staff development and training and the constant support of leadership aren't present.

Trauma-Informed care is not a current hot topic that will lose its luster like a fashion trend. It is a framework that has a meaningful, long-lasting positive impact on those you serve in both their mental health and physical health. The future of healthcare is a whole-health approach where all types of healthcare organizations coordinate and communicate to effectively treat the whole person. Implementing and maintaining a trauma-informed approach is worth the challenges because the benefits are meaningful and measurable.

This is just the first step and you are not alone in making changes, organizations can help. Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Council for Behavior Health have many resources, services and publications that can educate and support. Ongoing staff training and development as well as formalized communication are key for success, Relias has helped many organizations develop their employees and managers to improve service delivery.

To learn more about how Relias can help your organization, contact us.

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For more than 6,000 healthcare organizations and 3 million caregivers, Relias continues to help its clients deliver better clinical and financial outcomes by reducing variation in care. Our platform employs performance metrics and assessments to reveal specific gaps in clinical knowledge and addresses them with personalized, engaging learning.

Resources

1. Blog posts. authors: Karen Johnson, Director of Trauma-Informed Services, NCBH. Cheryl Sharp, Exclusive Consultant for Trauma-Informed Services, NCBH. Linda Henderson-Smith, Director of Children and Trauma-Informed Services, NCBH)
 - a. <https://www.relias.com/blog/12-questions-about-trauma-informed-care>
 - b. <https://www.relias.com/blog/trauma-informed-care-and-clinical-practice-top-questions-asked-by-professionals>
 - c. <https://www.relias.com/blog/trauma-informed-care-and-compassion-fatigue-top-questions-asked-by-professionals>
2. National Council for Behavioral Health: <http://www.thenationalcouncil.org/topics/trauma-informed-care/>
3. Substance Abuse and Mental Health Services Administration, National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC):
<http://www.samhsa.gov/nctic/trauma-interventions>
<http://www.samhsa.gov/nctic>
4. Substance Abuse and Mental Health Services Administration. Trauma-Informed Care in Behavioral Health Services. Treatment Improvement Protocol (TIP) Series 57. HHS PublicationNo. (SMA) 13-4801. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

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