National Council for Behavioral Health
Trauma-Informed Learning Community

Domain 3
Creating A Trauma-Informed, Educated and Responsive Workforce

June 5, 2017
Agenda

• Why TIC Workforce Development is Important
• Role of Leadership
• Workforce Development and TIC Domains
• Supervision and Staff Support
• Lessons from the Field - Family Counseling Service of the Finger Lakes
• Lessons from the Field – Oaks Integrated
• Resources and Q & A
Today’s Presenters

Cheryl Sharp, MSW, ALWF

Reba Smith, MS
We Want to Hear From You

Please type questions into the chatbox as they arise. We will answer them during and after the webinar.
Everyone Matters!

“A community is like a ship, everyone ought to be prepared to take the helm.”

Henrik Ibsen
Why a TIC Educated Workforce

• Fits with the mission of the organization
• Increases staff retention
• Reduces costs
• Competence reduces staff stress
• Competence improves outcomes
• TIC implementation relies on everyone
Behavioral Health Staff Turnover

- Up to 40% for entry level positions
- Decreases dramatically as you go up the ladder, much less for professionals
- Little to no “C-suite turnover

(Linda Rosenberg, President and CEO of National Council for Behavioral Health)
Top 7 Reasons for Turnover

Reason 1: Job or workplace was not as expected
Reason 2: Mismatch between job and person
**Reason 3: Too little coaching and feedback**
Reason 4: Too few growth and advancement opportunities
Reason 5: Workers feel devalued and unrecognized
Reason 6: Workers suffer from stress due to overwork and work-life imbalance
Reason 7: There is a loss of trust and confidence in senior leaders

Role of Leadership

Ensures that TIC is:

• Part of strategic plan
• Reflected in mission/vision
• Communicated to ALL staff
• Reliant on ALL staff
• Promoted through support and participation
• Sustained through P & P, mission/vision, website, meeting agenda
• Is about caring for staff and consumers
Polling Question 1

Leadership has communicated that each and every staff person plays an integral part in our trauma-informed efforts

Yes

No
Staff Hiring, Orientation and Performance Practices

• Hiring practices emphasize experience in trauma related interventions or skills
• Job ads include TIC language
• Hiring panels include consumers
• Interview questions explore TIC behaviors, experiences and practices
• TIC education included in staff orientation for all
• Performance evaluations include TIC competencies
Polling Question 2

What steps has your organization taken to increase workforce competencies in trauma-informed care?

• Hiring focuses on those with experience healing from trauma
• Hiring focuses on those who have worked with trauma survivors
• Consumers are involved in interviews
• New employee orientation includes TIC training
• Performance evaluations contain TIC principles
Workforce Development and the 7 Domains
Domain 1: Screening and Assessment of Trauma

Staff are

• Involved in identifying tools/questions
• Trained to sensitively ask about trauma
• Engaged in giving feedback regarding process
• Trained to screen early and again later
• Encouraged to discuss changes in diagnosis
• Educated about the impact of their own trauma
Polling Question 3

Staff has received specific training on how to sensitively screen and assess for trauma

- Yes
- No
- NA for our department but staff realize need for TI Screening and Assessment in system
- NA for our department but staff do not realize need for TI Screening and Assessment in system
Domain 2: Consumer Voice, Choice and Advocacy

Peers/consumers/family are:

- Included on new staff hiring panels
- Included in staff orientation
- Involved in staff training development and implementation
- Hired in various positions within the organization
Polling Question 4

Our peer workforce has had training on trauma-informed peer support

- Yes
- No
- We do not have a peer workforce
- NA for our department but peers in our system are trained
- NA for our department but peers in our system are not trained
Domain 3: Workforce Development

- Department or committee is responsible for planning and implementing training
- Trauma Champions and Consumer/Peers are represented
- Training agenda includes trauma-specific training
- Training agenda ensures TIC is embedded in training for all staff
- Expectation that staff behavior aligns with trauma-informed practices
- Agency prioritizes staff wellness
Domain 4: Trauma-Informed Evidence Based/Emerging Best Practices

Staff

• Receive new employee orientation on trauma and TIC
• At all levels receive training and ongoing education about trauma and TIC
• Have input into trauma-specific training options
• Receive training and supervision to deliver trauma-specific treatment approaches
Polling Question 5

Our staff has been trained in at least one trauma-informed evidence based best practice, (i.e., Seeking Safety, WRAP, TF-CBT, EMDR, Motivational Interviewing)

• Yes
• No
• NA for our department staff, but are aware of the need for our system to provide these interventions
• NA for our department staff, but are unaware of the need for our system to provide these interventions
Domain 5: Safe and Secure Environment

- Organization has Environmental Team
- Surveys used to gain staff perception of safety and comfort
- Conversations rather than rules
- Mechanisms available to share stresses and trauma experiences as needed
- Staff self care and wellness policy in place
- Access to EAP
Polling Question 6

Staff has been involved in shaping our environment to reflect trauma-informed principles and practices

Yes

No
Domain 6: Community Partnerships

Shared understanding that we don’t do this work alone
Domain 7: Performance Monitoring and Evaluation

- Staff response to training is evaluated
- Outcomes are used for supervision and training plans
- Surveys, focus groups, supervision, meetings are used to elicit satisfaction and feedback
- Leadership addresses and reports back
- Policies and procedures are developed and revised to support TIC efforts related to workforce development
Supervision

- Provided to all staff
- Relies on techniques that are trauma-informed
- Reinforces EBPs and skills
- Encourages staff to view behaviors, experiences, situations through a trauma-informed lens
Staff Support

• Prioritize education on compassion fatigue, burnout and vicarious trauma
• Offer EAP services
• Promote sharing of personal trauma experiences, needs, recommendations
• Prioritize staff appreciation
• Separate administrative from career/personal support – “Check & Chat”
Is burnout an ethical problem?
Compassion Satisfaction

The ability to receive satisfaction from caregiving

Measuring Compassion Satisfaction and Compassion Fatigue: The *Professional Quality of Life Scale (ProQOL)*

- A 30 item self report measure of the positive and negative aspects of caring
- Measures Compassion Satisfaction and Compassion Fatigue
- Compassion Fatigue has two subscales
  - Burnout
  - Secondary Trauma
- Free tool

Beth Hudnall Stamm, 2009, www.proQOL.org
Provider Resilience App

PROFESSIONAL QUALITY OF LIFE

It's been 30 days since your last update.

COMPASSION SATISFACTION

MED 25
Average Score...TAP TO READ MORE
You've scored in the average range of Compassion Satisfaction. Approximately 25% of individuals completing this scale...

BURNOUT

LOW 22
Low Score...TAP TO READ MORE
Your score associated with Burnout is in a range that is lower than approximately 75% of the scores of those who have taken this...

SECONDARY TRAUMATIC STRESS

MED 33
Average Score...TAP TO READ MORE
Your Secondary Traumatic Stress score is in the average range. Approximately 25% of individuals completing this scale scored hi...
Apps to Support Mindfulness Practices

The Mindfulness App by MindApps:
http://www.mindapps.se/?lang=en

Headspace
https://www.headspace.com/headspacemeditation-app

Mindful Meditation by Mental Workout:
http://www.mentalworkout.com/store/programs/mindfulness-meditation/
Web Resources

www.self-compassion.org

www.mentalhealthrecovery.com

www.proqol.org/CProQOL Compassion Fatigue

www.intentionalpeersupport.org

Polling Question 7

Our organization has made staff self-care and organizational wellness an expectation

Yes  No
Welcome to Family Counseling Service of the Finger Lakes, Inc.

Kaitlyn McWilliams, LCSW
Director of Professional Services
315-789-2613 x2131
kmcwilliams@fcsfl.org
Family Counseling Service of the Finger Lakes, Inc. (FCSFL)

- Small Not-for-profit agency
- Cover four counties, all rural areas
- Have three main locations and 7 satellite sites with at least one employee in those areas, including co-located services at the local pediatrician’s office, two schools, and a child advocacy center. Looking still looking to expand.
- Provide professional counseling and support services to individuals, children and families to improve the quality of their life at home and in the community.
- Counseling/Trauma, EAP, School-based services, DV, LGBTQ, DVAP,
Kaitlyn McWilliams, LCSW
Director of Professional Services

- BSW- Keuka College, Keuka Park, NY
- MSW- University at Buffalo, State University of NY, Buffalo, NY
- Residential work 2009-2010
- Hired at FCSFL in 2010 as a therapist in the child and adolescent sexual abuse program and promoted to Director of that program in 2011.
- Director of Professional Services 2012-Present
- Continue to provide counseling to individuals (children, teens, adults) and families in FCSFL’s Trauma Services program serving Wayne and Ontario County Department of Social Services
- Serves as the Mental Health representative for Ontario County CAC’s Multidisciplinary Team (MDT)
- Trained Forensic Interviewer
- NMT
- Finger Lakes Resiliency Network and ACEs training
Core Implementation Team

- Executive Director, Barb Pierce-Morrow
- Director of Professional Services, Kaitlyn McWilliam
- Director of Finance, Trish Costello
- Director of Administrative Services, Cathy Thurston
- Domestic Violence Supervisor, Jessica DeFazio
- Director of EAP/Counseling Services, Robert Tocco
- Board Representative, Jay Roscup

- Notice all Executive Employees are on the Implementation team
  - All are still employed and serving as our CORE team. We have since added two additional counseling supervisors which are new positions since going through the learning community and one staff retired.
Our Structure

• The whole CIT met once a month for about an hr. The clinical TIC team would meet bi-weekly for 1-2 hrs.
• CIT vs TIC teams
• Results from the OSA/PMT allowed us to identify areas to improve in each domain immediately.
• The TIC team to continue discussion and improvements on assessment and treatment to clients.
• The most important factor we have found in maintaining a successful team is to keep everyone motivated on the momentum the agency has and share results.
Domain 3: Committed and Developing Workforce

- Hiring Practices
- OSA Results
- New Employee training and employee check sheets
- Policy and Procedures
- Employee Surveys
- Tours of our locations
- NMT
- All staff trained in ACEs/ TIC
Domain 3: Committed and Developing Workforce; Training and Supervision

• Trauma Informed Educated & Responsive Workforce
• Provide training and supervision and annual evaluations
• Sent support staff to Mental Health First Aide and ACES training
• Neurosequential Model for Therapeutics (NMT) 9 employees in training in the year long training, six months in TTTT in NMT
• Robert Tocco: “You know your agency is trauma informed when you look at how they treat their employees.”
What Went Well for Us!

• Buy in from the top down
• Used our resources and tools NATCON has provided (OSA, PMT, environmental assessment, etc.)
• Who is on our CIT and/or TIC team matters
• Commitment to time, our clients, our agency, our community and ourselves!
• Grant funding
• A committed Community, agency and individuals
• Small agency
• Just wrapping up our 3rd year of TIC and completing the OSA
What Didn’t 😞

• Money, Money, Money
• Small agency
• Employee moral at times (TED talk Cultivating Collaboration green/red zone chickens; Jim Tamm)
• Each employee has multiple job duties, work in more than one office location and programs
• New employee hiring, on-boarding, training
Contact Information:

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Trenton Health Team
Oaks Integrated Services
Team Accomplishments

Domain 3: Trauma-Informed Educated and Responsive Workforce

Toolkit topics 1-5:
- TK1- Establishing a Supportive Environment
- TK2- Establishing a Safe Environment
- TK3- Supporting Staff Development-Training and Education
- TK4- Moving Training into Practice
- TK5- Trauma Informed Supervision

Subtopics/trainings in toolkits:
Examples of topics covered in TK2/ Example of parts of Toolkit 2 on next slides
- TIC & Safe Working Environment
- TIC & Environmental Safety
- TIC & Emotional Safety
- TIC & Emotionally Safe Workplace
- TIC & Addressing Safety Concerns

Share any barriers and how you addressed them
In earlier toolkit wanted them to be relatable for all staff- made live trainings available to administrative staff

Need for trainers to feel competent and ready- offered train the trainer sessions
Live training vs Relias/E-learning training- training department now attends train the trainer events held by “developers” of toolkits and they then provide their own “live trainings.”
Trauma Informed Toolkit Two:
Establishing a Safe Environment

THIS PACKET IS FOR MANAGERS & TRAINERS ONLY.

Through the trainings in this toolkit, we hope to further establish a safe environment. Traumatic experiences rob some survivors of their sense of security and safety. Safety is not absolute. There are degrees of safety just as there are degrees of danger. Furthermore, the meaning of safe can change from person to person or situation to situation.

*Remember:* All included trainings need to be completed, but you can tailor this to your program. This toolkit is a foundation and a starting point to discuss the relationship between safety and trauma. *Don't forget:* Additional resources are available on Ulitpro in the Trauma Informed Corner.

**What to do with this toolkit?**

1. Review the *entire* toolkit first before completing activities with staff.
2. This toolkit includes 5 sections to be completed during team meetings in June, July and early August. Look for *Action Steps* throughout the toolkit to guide you. For staff unable to attend meetings, a video training tool is available in Relias Training. ALL of your staff members must be trained.
3. Instruct **ALL** staff to complete survey on trainings. You also need to complete this survey. This is a different survey than the one for Toolkit One, but it is just as important. The web-based survey is located at: [https://www.surveymonkey.com/r/Toolkit2allstaffsurvey](https://www.surveymonkey.com/r/Toolkit2allstaffsurvey)

   4. **Management Staff must** complete a separate mandatory survey: [https://www.surveymonkey.com/r/managementtoolkit2](https://www.surveymonkey.com/r/managementtoolkit2)

**When is this due?**

*August 12, 2015:* ALL trainings in this toolkit must be completed.
5. Trauma Informed Care & Addressing Safety Concerns

*In the final step of this toolkit we want to talk about safety concerns and what to do when one is possibly feeling unsafe. Our goal is to wrap up this toolkit by acknowledging that even with precautions and awareness taken by all of us, staff and consumers still may feel unsafe at times. To address any concerns staff and/or consumers may have, Twin Oaks does have procedures in place.

**Action Steps**

1. **BEFORE** your next staff meeting, review page 12 of this toolkit and decide where you will post the flyer. It should be posted in a common area that all staff have access to such as a bulletin board, a kitchen, etc. Also, print out a copy for each staff member so they have their own copy.

2. Review the above paragraph marked with an asterisk(*) to your staff.

3. At Twin Oaks we have an open door policy where safety issues can be addressed up the chain of command. However, if staff need to make an anonymous report they can utilize the compliance hotline. See flyer for this information.

4. Review the printed flyer and talking points with your staff at your next Team Meeting.

5. Please be aware that consumers have a different process of reporting. The Bill of Rights/Grievance Procedures reviews how a consumer would make a complaint. The internal process is the same throughout the agency. However, the external process might differ depending on the program. You can find all of the Bill of Rights/Grievance Procedures on UltiPro/My Company/Electronic Forms. The Consumer Compliance policy can be found in the CQI (Continuous Quality Improvement) Manual on UltiPro/My Company/Company Info. For any further questions please contact The Compliance Officer for staff related concerns and/or the Ombudsperson for consumer related concerns 609-267-5928.

6. Lastly, complete the activity about safety planning on page 11 with your staff.

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**TIC Tip**

You can find more resources for consumers’ complaints and concerns in the Trauma Informed Corner section on the UltiPro homepage.

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Trauma Informed Toolkit Two  TIC@twinoakscs.org
**Safety Plan Activity**

**Directions:**

1. Read aloud to the group: Feeling safe is a personal thing. Feeling safe is not something we discuss often. Yet if you think about it, most of us can say that we feel safe on a fairly regular basis. Safe can be defined as free from harm or hurt. So, feeling safe means you do not anticipate either harm or hurt, emotionally or physically. But there are times when we might not feel safe to some degree.

2. Ask the group to silently reflect on the question, “Do you have things or people that trigger negative thinking, emotions or behavior in you?”

3. Explain to staff, “A safety plan is a tool that some use to better manage those difficult emotions. A good safety plan identifies activities that can be used anytime, anywhere... Activities should be safe, effective, and self-soothing.”

4. Ask the group to THINK about at least five immediate steps that you can take when you find yourself in a challenging, stressful or dangerous situation. Some steps can involve other people or removing yourself from the space. At least two activities should be things you can do on your own and without leaving the space you are in (for example, deep breathing or squeezing a stress ball).

5. Ask the group to write their own personal safety plan. If available, have the staff write it down. This is to be confidential. There is no need to share. Remind staff, it can be a good idea to carry your safety plan with you so it is available when you need it.

6. Read aloud:

   **The following are examples of steps in some personal safety plans:**
   - Take a deep breath
   - Use positive self-talk
   - Take a walk
   - Think about being in a safe place
   - Talk to a friend
   - Listen to music
   - Leave the room
   - Write or draw

**Adapted from:** [www.crsok.org](http://www.crsok.org)

**Trauma Informed Toolkit Two**

TIC@twinoakscs.org
2. Trauma Informed Care & Environmental Safety

*The second goal in this toolkit is to expand our knowledge on perceived physical safety and how it is linked to trauma informed care. Sights, sounds, smells, people, places, things, words, colors and even one’s own feelings can bring up intense and terrifying feelings. Sometimes, one may understand what is happening, but sometimes these connections can be subconscious.*

**Action Steps**

1. **BEFORE** your next staff meeting, **REVIEW** the activity on page 4.

2. **THEN** at your next staff meeting, read the above paragraph marked with an asterisk(*) to your team and complete the activity on page 4 together.

3. **AFTER** the activity, guide a discussion with the following talking points:
   
   a) How can we be more sensitive to others’ potential triggers?
   b) What could we add and/or remove to our space to feel safer or more secure?
   c) How has this increased your awareness of your physical surroundings?
   d) As a group, brainstorm ideas on how to be supportive to those who might not feel safe/secure in the space and how to implement suggestions from question b.

*Please consider that both employees and consumers could be trauma survivors.*
“What’s In The Room?”

Developed by Lisa Lipka, Supervisor of FPS Burlington County, Chair of Trauma Informed Committee

Goal: The purpose of this activity is to have staff gain an understanding of the environment they are in and how staff and consumers can look at that same environment in different ways. Some might feel “safe” while some might not.

Materials: Staff and common area/training room

Directions:

1. At the next staff meeting, ask staff to sit quietly in place. Read the above “goal” paragraph to staff.

2. Read the following to your staff: Please look around the room. Take in the sights, the sounds, the smells and the feel of the room. Then, for a few minutes think about how a consumer or staff member could possibly feel in this space. Ask yourself: What type of access does one have to a doorway or to an exit? How much personal space does one have? Would one’s needs be met here? Is this a calming space? Is it a neutral space? Could anything be triggering someone in this space? Why? How?

3. Guide staff in a discussion about their thoughts on the above questions. Encourage staff to think creatively during this activity. Encourage staff to think about things that could be triggers.

4. Facilitate a discussion with the talking points found on page 3.
Domain 3 – Educated Workforce

5 separate toolkits were developed and trained on- Live (expectation)/E-learning provided for each toolkit

• In addition-Agency wide presentations
  – 3 Management trainings
  – Train the trainer for each toolkit
  – Presentation to board
  – Present regularly to our Quality Council( CEO, President, Chiefs and VP’s)

• Our agency has trained 1800 staff
Other Ways to Raise Staff Awareness

- Development Department (PR) within our agency promoted TIC messaging
- Quarterly newsletter
- Tip of the month
- Agency Facebook page
- TIC Corner on company employee website- additional materials gathered and placed on company website to accompany each training
- Agency implemented TIC Crisis Prevention Intervention (CPI) vs CPI
- Hosted a Mental Health First Aid-TIC version training series at our site and opened it up to community members and our entire TIC Committee was also certified
August message of the month from our Trauma Committee-

As we wrap up Toolkit 2 and open enrollment, now is a great time to remind everyone about the importance of taking care of your own health and wellness! It's easy to forget to take care of yourself when you're busy being the caretaker of others. To continue to offer our consumers the best care possible and prevent burnout, you must make time to take care of yourself. Read a book, take a walk, see a movie or, if you need to, seek professional help.

Remember- Oaks Integrated Care’s Employee Assistance Program (EAP) gives all employees and your household members 24/7 access to professional, confidential services and referrals FREE of charge. Call for advice or a referral for service on topics such as relationship difficulties, emotional/psychological concerns, work or family stress and anxiety, grief issues, legal/financial services and much more. View the attached flyer for more details.

If you have comments or questions for the Trauma Informed Committee, please email TIC@oaksintcare.org.
What's Coming Up

Hunger Doesn't Take A Vacation
Summer 2015
Operation Fill-A-Backpack
August 1 - 21

Inside

Page 2
Diaper Derby
Donor Spotlight: PFG

Page 3
Twin Oaks Community Scrapbook

Page 4
Project Dress Up

Safety: The Path to Increased Engagement

All of us have experienced trauma in some shape or form throughout our lives. This could mean a family member passing away, a relationship ending badly, the loss of a pet or other traumatic experience. Our journeys are filled with little and big bumps in the road. These “bumps” can change the way we take care of ourselves and interact with others.

Every day at Twin Oaks we help children and adults with histories of trauma and acknowledge the role trauma has played in their lives. Trauma can leave one feeling emotionally and physically unsafe, overwhelmed with distrust and fearful of rejection. To help move past these feelings, our number one priority is to engage individuals in the treatment process and provide a compassionate support system in a safe, comforting environment.

When a person feels emotionally and physically safe, they are better able to move toward recovery. The National Center on Domestic Violence, Trauma and Mental Health offers several tips that we use at Twin Oaks to enhance safety:

1. Understand emotional safety. Emotional safety means feeling accepted; it is the sense that one is safe from emotional attack or harm. It may be difficult for someone who has experienced trauma to find a day-to-day sense of calm and safety even after receiving care.

2. Provide a soothing place. When we provide a calming space, we are telling consumers we care about how they feel and are interested in what happens to them emotionally as well as physically. A soothing space may be as simple as a private room, comfortable chair or colorful mural on the wall to help restore a feeling of calmness.

3. Help manage feelings. Trauma may affect a person’s ability to find emotional balance. Survivors may experience a flood of feelings and worries that make it difficult to make decisions, follow plans and tend to responsibilities. Our job is to help activate and engage the thinking processes and work to identify achievable goals which can lead to greater safety and control.
TIC Corner sample:
**Toolkit 1 Additional Resources**-Below please find additional resources to accompany Toolkit One. Questions?
Email [TIC@oaksintcare.org](mailto:TIC@oaksintcare.org)

**Labeling**
Bring Change to Mind Fact Sheet- [http://bringchange2mind.org/learn/the-facts/](http://bringchange2mind.org/learn/the-facts/)
Kind Words Change Lives Photo- `kind-words-save-lives.jpg`
Label Jars Not People Flyer- `label-jars-not-people.jpg`

**Cultural Competency**
The National Child Stress Network- Culture and Trauma- [http://www.nctsn.org/resources/topics/culture-and-trauma](http://www.nctsn.org/resources/topics/culture-and-trauma)

**Emotional Safety**
NYU-SOS for Emotions- Tools for Emotional Health- [http://www.nyu.edu/content/dam/nyu/studentHealthServices/documents/PDFs/mental-health/CWS_SOS_for_Emotions_Booklet.pdf](http://www.nyu.edu/content/dam/nyu/studentHealthServices/documents/PDFs/mental-health/CWS_SOS_for_Emotions_Booklet.pdf)
Compassion Fatigue Awareness Project- [http://www.compassionfatigue.org](http://www.compassionfatigue.org)
Compassion Fatigue- [http://compassion-fatigue.org/](http://compassion-fatigue.org/)

**Flyers**
- Make Time for Yourself- `Make-Time-For-Yourself.pdf`
- Keep Calm and Practice Self-Care- `keep-calm-and-practice-self-care.jpg`
- Refill Your Own Cup- `Refill-Your-Own-Cup.jpg`
- Self-Care Wheel- `Self-Care-Wheel.pdf`
Impact and Lessons Learned

– Our overall philosophy of care- relating TIC to customer service and the idea of the trauma lens spans from our staff at the front desk to the driver picking up a child, to the clinician doing an assessment, etc...

– Seen impact in the physical environment-some programs making areas of their buildings trauma informed- safe space for consumers- having children write their own rules to feel safe in the space, etc....

– More discussions are happening with staff, staff have taken more opportunities to talk about how consumers or how situations have made them feel. Also more management staff is reporting feeling more comfortable talking about the EAP and discussing using our debriefing team when a traumatic incident occurs.

– We do a “post” survey with each toolkit to measure lessons/ideas learned and a survey is just given to managers/trainers also about what looks different in their programs since inception of toolkits, and if they have any comments about the toolkit. Examples of comments/feedback made in surveys:
  • “Staff have been using trauma-informed conversations and more readily ask about trauma related issues with clients and family/collaterals”.
  • “I hear staff using trauma informed language and giving observations regarding consumers that reflects their learning of the impact & symptoms of trauma as well as recognizing the importance of providing an emotionally & physically safe environment.”
Impact and Lessons Learned continued

• “the video is powerful in representing both the pervasive impact of trauma and the resiliency possible through hope & healing... the symptoms sheets by developmental phases will be very useful for staff in increasing their awareness of consumers w/ trauma history... the information regarding early childhood trauma's long term impact on someone... I loved the question for discussion: "How can we portray hopefulness to consumers at Oaks Integrated Care?" So important!!”

– Learned that in person trainings have a deeper impact on staff, so have provided more all over agency, and the training department now sends their staff to our “train the trainers” to train staff all over the agency.

– Have devised better tracking elements to document trainings of TIC toolkits, and we are going back to train staff missed in the upcoming months.

– Working with HR department and other departments to make sure messaging and trainings happen from day one with new employee and that the messaging and learning does not end, it is constantly growing and trainings need to continue.
Next Steps

• What are your agency’s next steps in your trauma-informed initiative?
  – Complete training of toolkits, go back to make sure all staff are trained
  – Continue to present TIC messaging monthly
  – Present quarterly in management meetings on different TIC topics
  – Pairing with committees for cross over topics- Diversity Committee, Debriefing Committee, BIC Committee

• What are your plans for maintaining the momentum for this initiative?
  – Continue TIC committee, Continue to assess needs of agency, Continue to offer trainings and presentations

• What resources does your organization need in order to sustain this work?
  – A budget and support for outside trainers on TIC topics, training support for evidence based trauma interventions (TFCBT, etc)
Resources

• Staff Training Evaluation
• Staff TIC Surveys
• “Healing Neen” Video and Guide
  https://www.Vimeo.com/82555312
• Paradigm Shift YouTube Video
  https://www.youtube.com/watch?v=JlRK1vqcuvg
• Many resources on TIC website
  http://www.nationalcouncildocs.net/trauma-informed-care-learning-community
National Council Training and Technical Assistance

- Training Trauma-Informed Peers (TTIPS)
- Trauma-Informed Workforce Training
- TIC for Primary Care, Schools, Probation/Parole, Substance Abuse Providers
- Secondary Traumatic Stress/Vicarious Trauma (Compassion)
- Trauma-Informed Supervision

Contact Karen Johnson at karenj@thenationalcouncil.org
What are your challenges?

Identify your most significant challenge in developing your work force to become more trauma-informed
Contact Information

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