Trauma-Informed Care Sustainability Guide

There are two dimensions to sustainability:
1) Making changes, gains and accomplishments stick
2) Keeping the momentum moving forward for continuous quality improvement

There are a number of critical factors associated with both aspects of sustainability including:
- Ongoing presence and support of the core implementation team and/or oversight team
- Policies and procedures that are institutionalized
- Human Resources to insure that hiring practices, job expectations and employee relations support trauma informed care
- Workforce development
- Ongoing use of data to monitor progress as well as setbacks
- Strengthening the organizations role in the community

These factors are identified below in the form of questions you may ask yourself as you consider strategies to sustain gains and continue making progress:

**Organizational Infrastructure**
- Does your Core Implementation Team have representation from executive leadership, clinical staff, consumers and quality improvement/data management?
- Are members of your Core Implementation Team replaced when vacated?
- Is your Core Implementation Team meeting regularly (no less than once per month)?
- Is your Core Implementation Team setting an agenda for each meeting?
- Does your Core Implementation Team divide tasks among themselves and report back to the group on progress?
- Is your team reviewing data related to goals for each domain at each meeting?
- Is the organization’s leadership visibly supportive of all trauma-informed care efforts?
- Is your governing board engaged and knowledgeable about trauma-informed care?
- Is trauma-informed care a part of your vision and mission?
- Is trauma-informed care embedded in your strategic plan?

**Policies and Procedures**
- Do your policies and procedures support and reflect trauma-informed care principles and practices? (Screening and Assessment, Safety and Crisis Management, Consumer Involvement in Care and in Organization, Community Partnerships, Supervision)?
- Does your quality improvement process include benchmarks for trauma-informed care activities?
- Does your quality improvement data drive trauma-informed care change processes?
- Does your organization have policies and procedures to support the health and wellness of your employees?

**Human Resources**
- Do your job descriptions for all staff in the organization include key tasks associated with trauma-informed care?
• Do your performance evaluations include trauma-informed care goals, milestones, and outcomes?
• Does your new staff orientation include education/information on trauma and trauma-informed care?
• Do your job postings include language about special consideration given to those with trauma expertise?
• Does your organization’s hiring practice include various meaningful positions for people with lived experiences of trauma?

**Workforce Development**
• Does your staff development program include trauma-informed care trainings?
• Is there a plan to offer ongoing training on this topic?
• Are supervisors trained on trauma and trauma-informed care?
• Are trauma and trauma-informed care a regular topic of discussion in supervision sessions?
• Is there a mechanism in place for staff to get support to deal with Compassion Fatigue and their own trauma histories?
• Does staff understand that each person employed by the organization makes a difference in a trauma-informed environment?
• Does staff understand that performance evaluations are linked to the ability to provide trauma sensitive practices?
• Is there a mechanism in place to celebrate and encourage staff excellence?

**Community Engagement and Leadership**
• Does your organization regularly meet with other community leaders to discuss the principles and values of trauma-informed care?
• Has your organization taken a leadership role within the community to establish trauma-informed care collaboratives?
• Do you regularly invite or engage other agencies to partner with your organization to bring trauma and trauma-informed care to the attention of the community?

**Data Collection**
• Does your clinical record support documentation of trauma-informed care screening, assessment, treatment planning, and progress of treatment?
• Can your system generate individual or population based data (registries) for staff to use to support trauma-informed care efforts?
• Do you have a system in place to review and use data at Core Implementation Team and staff meetings?
• Is progress shared with leadership, the board, clinical and support staff and consumers using data generated reports?