


Promote Trauma-Informed Policies and Procedures

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Promote Trauma-Informed Policies & Procedures

- Policy and Procedure Development and Review
- Trauma-Informed Policies and Procedures
- Trauma-Informed Implementation
- Ongoing Assessment of TIC Capacity

Policy and Procedure Development and Review

- Use a trauma-informed framework to develop and review policies and procedures (e.g., guiding principles, ARC framework)
- Review policies and procedures regularly and adjust as needed to ensure trauma responsiveness
- Involve staff and survivors in the development and review of policies and procedures.

Policy and Procedure Development and Review

The agency reviews policies for their risk of triggering or re-traumatizing service users.

Policy and Procedure Development and Review

Potentially re-traumatizing practices:

- Rigid, punishment-driven policies and procedures
- Harsh disciplinary practices that mimic abusive experiences
- Crisis intervention practices or emergency procedures that further traumatize survivors
- Disrespectful treatment of participants
- Communication with community partners that disregards survivor privacy and confidentiality
- Diminished survivor voice
- Policies that minimize choice and control
- Disorganized, unpredictable, or unsafe service settings

Policy and Procedure Development and Review

The agency reviews policies for the extent to which they align with the guiding principles of a trauma-informed approach.

Guiding Principles of a Trauma-Informed Approach	
Trauma Awareness	Recognize the scope and impact of trauma on service users, providers and systems, and adopt effective approaches for supporting healing and resilience.
Safety	Ensure physical and emotional safety for service users and the workforce.
Voice, Choice & Empowerment	Empower service users to make decisions about the services and supports they need and how they are provided.
Cultural & Gender Responsiveness	Ensure culturally relevant and gender responsive practices.
Transparency	Maximize open communication and trust among providers and between providers and service users.
Integration	Maintain a holistic vision of health promotion and service provision.
Collaboration & Shared Decision-Making	Promote power sharing and partnership within and across systems and with service users.
Relationship-based	Demonstrate a commitment to establishing safe, authentic and positive relationships.

Policy and Procedure Development and Review

Guiding questions:

- How does this policy/procedure promote or hinder a trauma-informed approach (i.e., align with the guiding principles of a trauma-informed approach)?
- Is this policy/procedure/rule necessary?
- What purpose does it serve?
- Who does it help? Harm?
- Were survivors included in its development?
- Could it re-traumatize survivors (e.g., limit control, choice, disempower, and lead to fear and mistrust)?

Policy and Procedure Development and Review

Example: Attachment, Regulation, and Competency or ARC framework. Programs may use this framework to ensure that all policies and procedures:

- 1) support a survivor's sense of connection to their children, staff, and members of the community with whom it is safe to engage;
- 2) strengthen self-regulation and coping skills among survivors and their children; and
- 3) aid survivors in building new competencies and skills.

Policy and Procedure Development and Review

Reflection Questions:

1. How does your agency consider trauma and resilience in its approach to developing policies and procedures?
Does the program use a particular guiding framework?
2. What is the process for reviewing policies and procedures?
3. How are survivors and staff involved in the development and review of policies and procedures?
4. What might be done differently to further ensure a trauma-informed approach?

Trauma-Informed Policies and Procedures

- There is an established, written commitment to trauma-informed care.
- Policies related to protecting privacy and confidentiality of survivors and children are in place (communication among staff, with other providers, where information is discussed, who enters private living spaces in shelter).
- Procedures such as room checks – when done – are done in a trauma-informed manner.

Trauma-Informed Policies and Procedures

- Policies and procedures related to intake and assessment processes, case management practices, hot line procedures, incident reporting, consequences, and discharge or termination of participants are informed by an understanding of trauma and a commitment to a trauma-informed approach.
- Safety, crisis prevention and response, and emergency procedures are trauma-informed (i.e., uphold the guiding principles)
- Policies include a written commitment to culturally responsive practice (e.g., staff training and hiring, organizational practices that honor cultural differences).
- Policies and procedures reflect a commitment to engaging with survivors in a collaborative manner.

Trauma-Informed Policies and Procedures

- There is a formal commitment to hire staff with similar life experiences to those being served.
- Training on trauma and trauma-informed care is mandatory for all staff across all programs, both as part of new hire orientation and as part of ongoing meetings and training.
- Expectations related to trauma-informed care are built into hiring practices and job descriptions.
- There are formal processes for staff debriefing after crises.
- There are policies and procedures in place for ensuring staff well-being (training, supervision, feedback loops)
- There are formal procedures in place for monitoring program fidelity to a trauma-informed approach. (This may include the use of formal and informal assessment tools, staff observation, and regular discussions.)

Trauma-Informed Policies and Procedures

Reflection Questions:

1. If you could change one policy, procedure or rule in your organization that would make it more trauma-informed, what would that be and how would you change it?
2. What other policies and procedures may be needed to support a trauma-informed approach at your agency?
3. What additional policies and procedures have you considered that have not been discussed here?

Trauma-Informed Implementation

Policies and procedures

- are understood by all agency staff,
- serve a purpose
- do not cause additional harm
- are uniformly implemented and consistently enforced
- are enforced compassionately, respectfully and with flexibility

Consider how you **phrase** rules/policies.

~~RULES~~

Children's Bedtimes

- A. Children must be in bed by 8:30 pm (or earlier, depending on age). Children under 12 months are permitted to be with their mothers past regular children's bedtimes.
- B. Children are required to be in their bedrooms by 8:30 pm. This is a great opportunity to begin bedtime routines. Please stay in your room with your child until he/she is asleep. If you need help establishing bedtime routines to ensure that your child gets a good rest, please speak with one of the residential counselors or with your case manager.

4. YOU CAN'T

~~RULES~~

Drug and Alcohol Use

- A. Many families living at Sample House have been touched by the devastating effects of drug and alcohol abuse. There are often women at Sample House who are courageously struggling with their own substance abuse issues and are committed to working on their own recovery. We ask that you remain drug and alcohol free throughout your stay at Sample House.
- B. While residing at Sample House, residents are NOT allowed to use alcohol or drugs in or out of the shelter.

4. YOU CAN'T

Rules

Drug and Alcohol Screening

A. It is critical to the safety of everyone living here to understand that Sample House is a drug and alcohol free zone. As a result, anyone found to be in possession of drugs or alcohol will be terminated from Sample House. We reserve the right to do random urine screening for drugs and alcohol and currently have an outside agency come to Sample House twice a week to do testing.

B. Staff will conduct alcohol/drug screens of residents based on suspicion. If a resident refuses to submit to a drug/alcohol screen or tests positive for alcohol/drugs, he/she will be terminated from the program.

1. you can't

Rules

Parenting and Child Care

A. Violence or the threat of violence is not an appropriate way to communicate with each other or to discipline your children. It is important that we work to teach your children ways of dealing with anger that does not involve hitting others. We take the threat of violence against children very seriously therefore we have a "No Hitting Policy." The staff of Sample House are MANDATED REPORTERS of child abuse and neglect.

B. In order for all adults and children to feel safe at Sample House, parents are asked not to use physical punishment to discipline their children. Physical discipline is defined as hitting, slapping, or spanking. If you need support in developing alternate methods of disciplining your child, please speak with your Case Manager or join our Mother's Group.

1. you can't

Rules

Your Room

A. Upon your arrival, you will have a private room with a shared bathroom. We ask that you keep your room clean and free of clutter. You may have a small refrigerator in your room. Microwaves and hot plates are not allowed, as these are fire hazards.

B. You have been assigned to room _____. You are expected to keep your room clean. The following appliances are not permitted: holiday lights, hot plates, electric heaters, air conditioners, microwaves, and refrigerators. Towels, sheets, and clothing cannot be hung out the window.

2. you can't

4. you can't

- Avoid creating a list of everything that is NOT ALLOWED.
- Include explanations within the rule if necessary.
- Consider how to create an inviting/welcoming tone.
- Consider how to be clear, but respectful.

Consider how you **uphold or enforce** rules and policies.

- Avoid public confrontations and shaming language.
- Ask questions about why the rule was not followed.
- Explain why the rule exists.
- Ask how best to support the person in the future (anticipating future challenges and thinking proactively).

Trauma-Informed Implementation

Reflection Questions:

1. How do you currently enforce policies and procedures (e.g., level of consistency, disproportionality in enforcement across subpopulations, tone and quality of enforcement)?
2. How does your way of enforcing policies and procedures align with a trauma-informed approach (e.g., informed by an understanding of trauma, designed to promote safety, choice, and empowerment for survivors, culturally responsive)?
3. What do you want to do differently related to implementing policies and procedures to ensure a trauma-sensitive approach?

Ongoing Assessment of TIC Capacity

- Use of formal and informal assessment tools, staff observation, and regular discussions
- Need for identified benchmarks to assess for fidelity.

Ongoing Assessment of TIC Capacity

Reflection Questions:

1. How will you assess for fidelity to a trauma-informed approach over time (e.g., tools, processes)?
2. What is the next step for your agency as it relates to adopting a trauma-informed approach?
3. What are the biggest ongoing challenges to these efforts?
4. What are your biggest lessons learned to date related to implementing a universal, trauma-informed approach?

Thank you for the work that you
do and for your time today.

For more information, please contact:
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To learn more about our trauma work visit our website at
<http://www.air.org/resource/trauma-informed-care-service-systems>