

The background of the slide is a dark, black sky filled with numerous small, glowing orange lanterns. These lanterns are scattered across the frame, some appearing as bright points of light and others as slightly larger, more detailed shapes with visible flames. They create a sense of depth and movement, as if they are floating or drifting through the air.

STAFF WELLBEING -TRAUMA INFORMED PRINCIPLES OF SAFETY AND TRUST

Emotional and Organization Support

Facility Culture and Trauma-Informed Care (TIC)

Simply put, facility culture is *the way we do things around here*

- How people are greeted
- How meetings are run
- How information is shared

Becoming a trauma-informed organization is not an item on a checklist

- It is an ongoing, fluid process *with no end date*

Your organization is likely already engaged in some elements of trauma-informed care

6 Principles of Trauma-Informed Care

“A trauma-informed approach reflects adherence to six key principles rather than a prescribed set of practices or procedures. These principles may be generalizable across multiple types of settings, although terminology and application may be setting- or sector -specific:

- Safety
- Trustworthiness and Transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice and choice
- Cultural, Historical

A safe work environment includes:

- Physical plant, security, disaster planning, policies and procedures

Creating safety within a trauma-informed framework *exceeds* those standard expectations

Includes *emotional* safety

- Feeling empowered to speak up, safe to discuss challenges, zero tolerance for blaming, bullying or retaliation

Attitudinal promotion of safety is important but to be trauma-informed, *the organization needs to consider and create means to process distressing circumstances.*

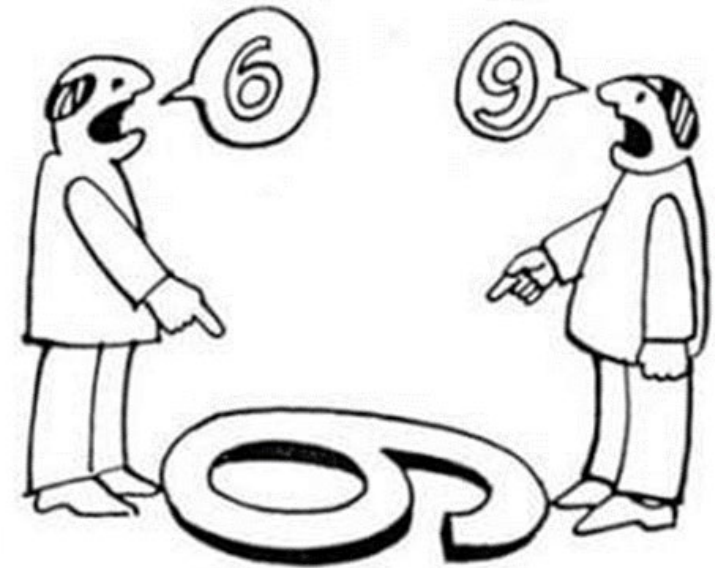
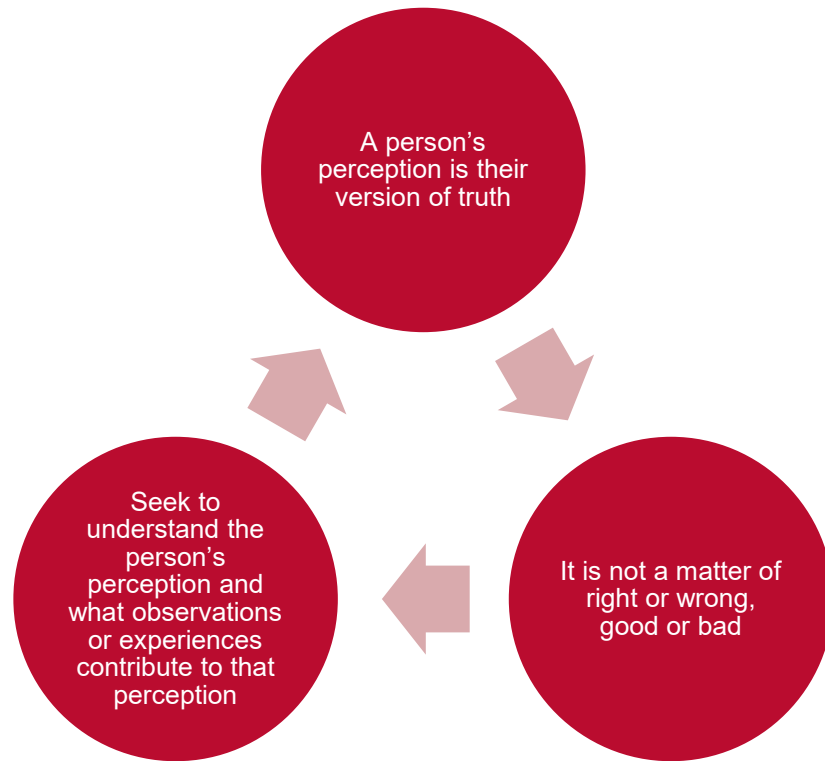
Trust includes qualities of respect, compassion and a genuine desire to be present with and relieve another person's suffering

Predictability with processes and daily activities helps build trust

The organization makes conscious efforts to not retraumatize staff

Emphasis is not on 'getting it right all the time' but rather how situations are handled when circumstances provoke feelings of being vulnerable or unsafe

Perception is crucial



4 Concepts of Trauma-informed care

1) **Realizes** the widespread impact of trauma and understands potential paths for recovery;

2) **Recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system;

3) **Responds** by fully integrating knowledge about trauma into policies, procedures, and practices; and

4) Seeks to actively **resist re-traumatization.**"

A trigger is anything (a smell, a sound, an emotional state, a situation, etc.) that reminds a person of a trauma.

Re-traumatization is “...any interaction, procedure or even something in the physical environment that either replicates someone’s trauma literally or symbolically, which then triggers the emotions and cognitions associated with the original experience.”

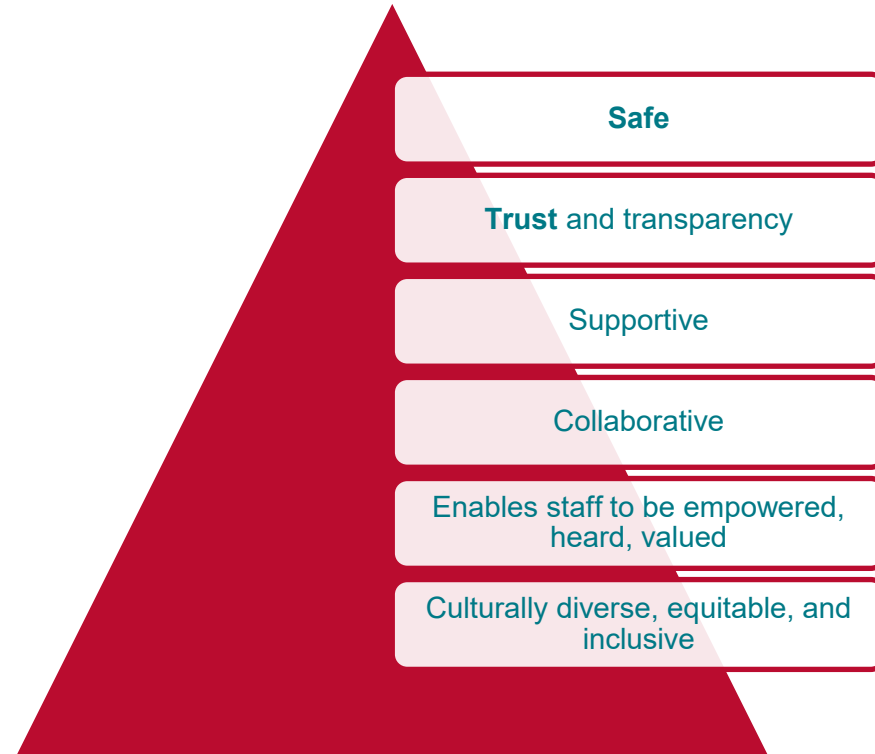
Emotional and Psychological Trauma

- The average cost to replace an employee in nursing home facilities ranges from \$3,500-\$5,000.
- Turnover rates ranging from 40-75% and organizations can easily spend \$375,000 or more in employee turnover over the course of the year.
- Turnover and burnout compromises resident care and outcomes.
- Dissatisfied staff create toxic culture among colleagues and between leaders, which can lead to poor reputation in the community.

“If you’re not taking care of your caregivers, how are they going to deliver good care for your clients [residents]?”

“In all the years I’ve worked here, I’ve come away with so much more than I have given to anybody. I have become a better person, a kinder person, a better listener, because of the residents.”

What is a Trauma-Informed Environment?



How Can Emotional Safety and Trust be Built into Processes to Support Staff Wellbeing?

Characteristics of Emotional Safety:

- Feeling **empowered to speak up**, **safe** to discuss challenges, **zero tolerance for blaming**, bullying or retaliation.

Characteristics of Trust:

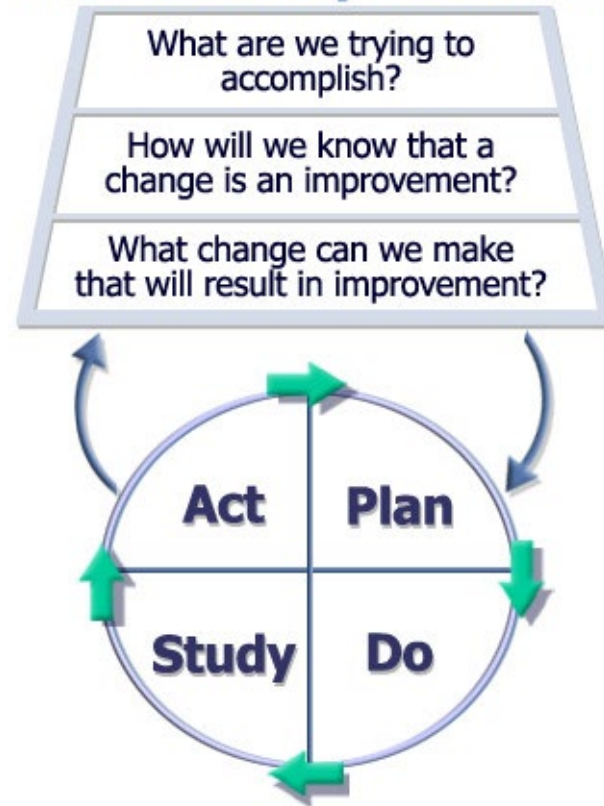
- **Respect**, compassion and a **genuine desire to be present**.
- **Predictability** with processes and daily activities.
- How situations are handled when circumstances provoke **feelings of being vulnerable or unsafe**.

Processes:

- Morning meeting
- Resident rounds and care conferences
- Huddles

The Basis for Testing and Learning Model for Improvement: IHI and API

Model for Improvement



Learn in Small Doses

- Try out the idea with a small number of staff/residents, gather and incorporate the feedback to enhance **trust** and **safety**.
- Use **staff feedback** and **feelings** to **iterate and improve the idea**; Stack the deck in your favor so that the idea is most likely to succeed and gain the buy in.
- **Communicate the plan** and next steps. Learn from small samples, get your process working, and then spread.
- **Celebrate** and share successes; **learn from failures**. Acknowledge that the process and humans are imperfect...and that's ok. Thank staff for sharing their feedback, emotions, and openness to change.

The Improvement Guide, 2nd Edition, Langley, Moen, Nolan, et.al., Jossey-Bass 2009

Additional Resources

- TIP 57 Trauma-Informed Care in Behavioral Health Services by the Substance Abuse and Mental Health Services Administration (SAMHSA),
<https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4816.pdf>
- Trauma-Informed Organizational Change Manual From the University of Buffalo,
<http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/Trauma-Informed-Organizational-Change-Manual0.html>



Dawn Jelinek
Senior Clinical Quality Consultant

OFMQ- GWEP- OkDCN

Age-Friendly LTC and Clinical Practices

djelinek@ofmq.com

405-651-4796

