Finger Lakes Resiliency Network

Action Planning for creating a trauma-informed and healing-centered organization

# Why do we need a Trauma-Informed Organizational Model?

* + Provides a framework for becoming a trauma-informed organization/system.
	+ The model will allow an organization/system to gain insight and direction needed during this organizational change process
	+ Many parts of your organization/system likely already reflect aspects of a trauma-informed approach.
	+ To help you identify what is already in place and how to move forward, the model consists of **phases** (see below)**, key development areas** (see below), and **domains of consideration** (on FAQ document).

# How do we implement a Trauma-Informed Organizational Model?

(University of Buffalo, School of Social Work, Institute for Trauma and Trauma-Informed Care)

Organization progresses through **3 phases of implementation** while addressing **10 key development areas**

## 3 Phases of Implementation

**Phase I: Pre-Implementation (PI)**- organization/system prepares for and builds a foundation for trauma-informed organizational change.

**Phase II: Implementation (I)**- Organization/system implements action steps specific to trauma-informed organizational change.

**Phase III: Sustainability (S)**- Organization/system further integrates trauma-informed practices into its fabric by establishing mechanisms to consolidate gains, monitor progress and “tweak”/adjust implementation as needed.

## 10 Key Development Areas (KDAs) (Based on SAMHSA)

### Each phase focuses on certain Key Development Areas or action steps.

* + For example: Phase I (**Pre-Implementation)** focuses on 5 KDA’s- #1, #2, #5, #8, & #9 and a solid understanding of these is layered upon in Phases II **(Implementation)** and III **(Sustainability)**

### KDA #1: Leading and Communicating

* Having leadership/administration exhibit and foster buy-in, investment, and consistent messaging around importance of this work
* Establishment of a Core Implementation Team (CIT) leading the change process

### KDA #2: Hiring & Orientation Practices

* Ensuring HR practices are conducted in ways that are trauma-informed and trauma-sensitive

### KDA #3: Training the Workforce (Clinical and Non-Clinical)

* Creating a realistic and sustainable plan for providing ongoing trauma-informed education and training to ALL levels of the organization

### KDA #4: Addressing the Impact of the Work

* Increasing workforce awareness of how to prevent/manage secondary traumatic stress, vicarious trauma and compassion fatigue
* Implementing organizational/system structures to help support workers and promote self-care, vicarious resilience/vicarious post-traumatic growth

### KDA #5: Establishing a Safe Environment

* Taking a deliberate look at the environment and atmosphere of the organization/system to ensure that physical space, aesthetics, and culture are trauma-informed and trauma sensitive.

### KDA #6: Screening for Trauma

* Deciding whether screening for trauma and/or adversity is appropriate in the organization/system
* If so, what tools, resources and follow-up structures are in place to do so

### KDA #7: Treating Trauma

* Having on-site, trauma-specific treatment interventions or accessible referrals in place for individuals who are seeking treatment for their trauma.

### KDA #8: Collaborating with Others (Partners and Referrals)

* Building on and/or creating mechanisms with partner organizations/systems to collaboratively ensure trauma-informed networks, communities, and systems.

### KDA #9: Reviewing Policies & Procedures

* Confirming that all policies, procedures, and protocols are written and conducted in a way that is in line with a trauma-informed and trauma-sensitive approach.

### KDA #10: Evaluating and Monitoring Progress

* Putting mechanisms in place to evaluate and monitor trauma-informed organizational change
* Tracking and measuring impact on the organization/system in relation to outcomes