

The purpose of this survey is to collect information that will be used to assist the Northeast Region to determine needs to collaborate around Trauma Informed Care.

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?  
Warrensville Developmental Center
2. What population does your agency serve?  
DD/MI
3. What are the typical ages of the people you work with?  
17-93
4. What is your agency's knowledge of Trauma Informed Care?  
We are well informed.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?  
  
Sexual, physical abuse, usually at the hands of family.
6. Does your agency utilize any trauma assessments?  
Our Psychologists and Psychology Assistants use them during their assessments of individuals.
7. What types of treatment does your agency provide to those who have experienced trauma?  
Mental, Behavioral, environmental and physical.
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?  
More treatment collaboration between MH agencies and DD agencies.
9. Is there something your agency is doing in TIC that they could share with the NW region?

Contact information: Name: Michelle Dobbins email: michelle.dobbins@dodd.ohio.gov

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**YOUR INFORMATION IS VERY IMPORTANT AND WE WOULD APPRECIATE YOUR RESPONDING BY: August 18, 2014 to [lisa.bosler@dodd.ohio.gov](mailto:lisa.bosler@dodd.ohio.gov)**

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency? Child Guidance & Family Solutions
2. What population does your agency serve? Children ages 2-18 and adults in Summit and surrounding counties.
3. What are the typical ages of the people you work with? All ages.
4. What is you agency's knowledge of Trauma Informed Care?

Our agency is knowledgeable in the area of Trauma Informed Care. As suggested by SAMHSA, the key elements of Trauma Informed Care include realizing the prevalence of trauma, recognizing how trauma affects all individuals, and responding by putting knowledge into practice. The staff in our agency attend monthly best practice meetings to consult on trauma focused cases and stay up to date on recent trauma research and practices. We utilize resources such as the National Child Traumatic Stress Network and Child Trauma academy to stay informed on prevalence of trauma and how to provide education and treatment.

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

We have seen a variety of trauma, including abuse (physical, sexual, and emotional) and neglect; children who have witnessed domestic violence; children whose parents are incarcerated, abuse substances, or have mental illness. We have also worked with children who have experienced deaths of loved ones; children who have had multiple health issues or hospitalizations; school violence; suicide of peers; bullying. In regards to trends, we have seen many cases of abuse, neglect, parents with mental illness/substance abuse/incarceration, bullying, and chaotic homes.

6. Does your agency utilize any trauma assessments?

Our agency is currently piloting the use of the UCLA PTSD Reaction index. Previously we have utilized the SCARED.

7. What types of treatment does your agency provide to those who have experienced trauma?

Our agency offers individual counseling, trauma focused group counseling, family counseling, psychoeducation, trauma focused CBT, play therapy, biblio-therapy, Community Psychiatric Supportive Treatment (CPST), intensive home based or co-occurring treatment if needed, evaluations (psychiatric, psychological, alcohol and other drug) if needed, medication management.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

The region would benefit from continued education on the prevalence of trauma and providing resources to families. Providing a safe, secure, and supportive environment provides the best opportunity for those that have experienced trauma to heal. Education that trauma occurs more frequently than is recognized and how to seek help for those who have experienced trauma would be beneficial.

9. Is there something your agency is doing in TIC that they could share with the NW region?

Our agency provides HOPE (Healing, Opportunity, Protection, Education) group for children of all ages and their parents. This group follows the TF-CBT model and is designed for children that have experienced any type of trauma. This group allows clients to see that they are not alone in their experiences and to learn coping skills and receive education on the impacts of trauma.

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### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?

Lorain County Board of Mental Health

2. What population does your agency serve?

Our Board funds agencies that provide a continuum of mental health services across the lifespan.

3. What are the typical ages of the people you work with?

See above

4. What is your agency's knowledge of Trauma Informed Care?

Our Board has focused to providing training to clinicians within the network regarding research based practices:

- Six agencies have had clinicians participate in Trauma Focused Cognitive Behavioral Treatment Training (which is coordinated by the Board annually) and ongoing consultation calls with Erna Olafson, Ph.D. (one of Ohio's two certified trainers)
- Board staff coordinate a learning collaborative of adult-serving clinicians who are learning and practicing research based interventions for treating adult clients of trauma. Initially, the clinicians from three agencies received consultation with Erna Olafson, Ph.D., but during CY 14, Barbara Boat, Ph.D. has provided consultation on utilizing Cognitive Processing Therapy.
- Audits of clinical agencies assess if agencies are adequately assessing for the impact of trauma.
- Our Board partially funded training for early childhood intervention workers to learn to implement Child-Parent Psychotherapy, a researched based practice for working with young children who have experienced or witness domestic violence.

Our Board has worked collaboratively with other systems to enhance trauma informed care:

- The Board has developed and disseminated a brochure about TFCBT and where (within our network) this service can be accessed.
- The Board has collaborated with a funded agency and Lorain County Children's Services to have staff on NCTSN curriculum for child welfare workers.
- Board staff have provided or coordinated training for educators, Board Members and other partner agency staff regarding the impact of trauma and the role of protective factors.

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

Clients seen within our system have experienced a very wide array of traumatic adverse life events including: physical abuse; sexual abuse (including incest); witness to murder, traumatic death of siblings, children, partners and friends; domestic violence, accidents, community violence, and medical trauma.

6. Does your agency utilize any trauma assessments?

The agencies are expected use the Trust Events Survey (parent and child version) to determine a child's trauma history. They use the Child Behavior Checklist to determine the impact of trauma in terms of symptoms.

**7. What types of treatment does your agency provide to those who have experienced trauma?**

Child-Parent Psychotherapy for young children with exposure to domestic violence) and their parents  
TFCBT for school aged children. Cognitive behavior therapy using Briere's *Principles of Trauma Therapy* as a guide and Cognitive Processing Therapy.

**8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?**

We believe there is a great need to educate the community regarding the impact of trauma and the role or protective measures. We would like to learn from others in the region about what is being done to help the general public better understand trauma and that there is effective treatment for trauma related symptoms.

**9. Is there something your agency is doing in TIC that they could share with the NW region?**

We would be happy to share information regarding our learning collaboratives. We would also consider partnering to sponsor additional training/education opportunities, particularly EMDR.

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## **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency?  
Geauga County Board of Mental Health & Recovery Services
  
2. What population does your agency serve?  
All residents of Geauga County
  
3. What are the typical ages of the people you work with?  
Through our contract agencies we deal with all ages, individuals with severe and chronic mental illness tend to be ages 18-65, but we provide clinical and prevention services to the entire population.
  
4. What is your agency's knowledge of Trauma Informed Care?  
After the Chardon High School shooting, we implemented a full array of TIC training, certification, and recovery response models. We have trained approximately 60 clinicians, preparing them for national certification in TIC, and are having 4 professionals nationally certified as trainers themselves.
  
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?  
While the major trauma in our system has been due in large part to the Chardon shooting, we also see higher incident rates of domestic violence, youth mental health issues (higher rates and severity), veterans, and higher mental health issues throughout the population.
  
6. Does your agency utilize any trauma assessments?  
Different agencies use different assessment tools.
  
7. What types of treatment does your agency provide to those who have experienced trauma?  
Agencies which identify individuals traumatized by events in their lives have a wide variety of interventions and treatment modalities available depending on severity, impact on daily living, symptomatology, and a number of other factors.
  
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?  
  
Ongoing training in schools, religious organizations, youth programs, MH and AoD professionals, and the population as a whole in what TIC is and how it can influence lives. Youth Mental Health First Aid training.
  
9. Is there something your agency is doing in TIC that they could share with the NW region?  
We have done extensive training in how to provide effective mental health response to a traumatizing event, how are grief and trauma different, how to design and develop trauma response protocols for emergency situations, etc. We also currently have two professionals nationally certified in Youth Mental Health First Aid training that are available to northeast Ohio groups.

Contact information: Name: Jim Adams

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency? Lake County ADAMHS Board
2. What population does your agency serve? We provide funding for mental health, AOD, and prevention services.
3. What are the typical ages of the people you work with? Birth to death
4. What is you agency's knowledge of Trauma Informed Care? Many staff have had training in trauma informed care.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? N/A
6. Does your agency utilize any trauma assessments? N/A
7. What types of treatment does your agency provide to those who have experienced trauma? N/A
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? I would be interested in learning what other areas are doing as it relates to TIC.
9. Is there something your agency is doing in TIC that they could share with the NW region? N/A

Contact information: Name: Christine Lakomiak email: [clakomiak@lakeadamhs.org](mailto:clakomiak@lakeadamhs.org)

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency? Cuyahoga County Board of Developmental Disabilities
2. What population does your agency serve? People with developmental disabilities, many of whom have co-occurring mental health diagnoses. The MH diagnoses range from the most mild to the most severe.
3. What are the typical ages of the people you work with? We serve people from birth to death. Most of our behavioral services are provided to adults but also to school age children to a lesser extent.
4. What is your agency's knowledge of Trauma Informed Care? We employ a group of approximately 25 mental health professionals along with nurses and paraprofessionals. While our professional staffs possess varying levels of knowledge related to trauma, we are in the process of bringing additional focus to this area.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? Most types, including abuse, neglect, victims of crime, rape, incarceration, and less dramatic but still important life event with a traumatic component such as the loss of important relationships, chronic loneliness, lack of control in daily choices, etc. In terms of trends or patterns, I am not sure. We certainly serve many people with severe challenges related to emotional regulation.
6. Does your agency utilize any trauma assessments? We do biopsychosocial assessments as part of our planning. I am currently looking at options for more uniform screening of trauma history.
7. What types of treatment does your agency provide to those who have experienced trauma? We link people for traditional mental health treatment and in some cases provide supports to help people access those services (reminders, transportation, attending appointments, medication passing, etc.). Our behavioral group also assists directly with the mental health and behavioral needs of county board-served individuals via bio-psychosocial assessments, behavior support planning, training of direct care staff, consultations on person-environment fit issues, liaison to court services and trainings on a variety of issues. In some cases we also provide individual or group counseling, but most often only when those needs cannot be better met by a community mental health provider. We do not offer psychiatry services.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? Ongoing access to education to aid in a more complete adoption of TIC methods. Increased awareness of trauma related issues for relevant non-mh settings such as DCFS staff, foster parents, school districts, police departments.
  
9. Is there something your agency is doing in TIC that they could share with the NW region? I am developing training that I will soon be offering to our own staff, provider agencies and perhaps other community groups if there is interest and if time permits.

Contact information: Name: Richard Cirillo, Ph.D., Chief Clinical Officer  
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### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?  
Ohio Department of Job and Family Services
2. What population does your agency serve?  
Children and Adults
3. What are the typical ages of the people you work with?  
All ages, but we don't work directly with children or adults
4. What is your agency's knowledge of Trauma Informed Care?  
N/A
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?  
N/A
6. Does your agency utilize any trauma assessments?  
N/A
7. What types of treatment does your agency provide to those who have experienced trauma?  
N/A
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?
9. Is there something your agency is doing in TIC that they could share with the NW region?

Contact information: Name: Kathy A. Yuzwa      email: Kathy.Yuzwa@jfs.ohio.gov

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency? Ravenwood Mental Health Center
2. What population does your agency serve? All ages, male and female
3. What are the typical ages of the people you work with? All ages
4. What is your agency's knowledge of Trauma Informed Care? Many of us have been trained and are Certified Trauma Specialists. I am also in the process of becoming a trainer. (TLC)
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? Sexual Abuse and effects from the Chardon Shooting are the highest volume in cases we currently see. Yet we also work with Trauma related to home removals, multiple placements with children, DV, Drug addictions, etc.
6. Does your agency utilize any trauma assessments? (TSCC, TSI) We are looking to incorporate more tools and would like any information that others have found helpful.
7. What types of treatment does your agency provide to those who have experienced trauma? Interventions from the TLC, art therapy, Pharmacological Management. Many times we use a combination of individual, group and in home family therapy.
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? More collaboration/Information sharing
9. Is there something your agency is doing in TIC that they could share with the NW region?

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### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?

ACCESS Homeless Shelter

2. What population does your agency serve?

3.

Homeless Women and Children

4. What are the typical ages of the people you work with?

We serve all ages.

5. What is your agency's knowledge of Trauma Informed Care?

Nothing at this time.

6. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

Physical, emotional and sexual abuse

7. Does your agency utilize any trauma assessments?

Not at this time

8. What types of treatment does your agency provide to those who have experienced trauma?

Recommend client to counseling

9. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

I am not familiar enough with TIC to appropriately comment.

10. Is there something your agency is doing in TIC that they could share with the NW region?

Not at this time.

Contact information: Name: Joy Trachsel  
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### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?

Ohio Department of Developmental Disabilities- Warrensville Developmental Center

2. What population does your agency serve?

We serve individuals with intellectual disabilities in a residential setting, as well as doing some work in the community doing consultations for individuals with ID who may be experiencing some behavioral challenges.

3. What are the typical ages of the people you work with?

Typically adults of all ages; however, we are currently serving individuals from age 16 to 92.

4. What is you agency's knowledge of Trauma Informed Care?

We have been working with individuals with intellectual disabilities for a long time, and many of the individuals we serve have a history of trauma, often multiple traumas. We have always been aware of the documented traumas that people experienced prior to coming to us, but I don't think we treat everyone as though they have experienced traumas, which I am sure they have. Also, I think, after attending the initial training for TIC, that we need to do more training with all of our staff and also look more creatively at addressing/recognizing the traumas people have experienced, as well as developing policies/philosophies that will help us to not re-traumatize people. Also, there has been very little discussion or acknowledgement of the traumas that our staff members have experienced, both outside of our center and inside our center (being attacked by aggressive individuals, having medical emergencies and deaths of our individuals while they were working, etc.).

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

Much verbal, physical, and sexual abuse, as well as neglect and abandonment. It is very common for individuals with disabilities to have experienced these types of traumas, unfortunately.

6. Does your agency utilize any trauma assessments?

No, not specifically.

7. What types of treatment does your agency provide to those who have experienced trauma?

Some individuals are involved in individual counseling, if they are at an intellectual level to be able to benefit from this. It is more of a challenge to address in individuals who have severe and profound intellectual disabilities. For them we probably look more at symptoms, such as behavioral difficulties, than causes.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

I am really not aware of what the needs of other agencies are? I do feel that we at WDC need to form relationships with other agencies/fields and find out what work is already being done.

9. Is there something your agency is doing in TIC that they could share with the NW region?

Not that I can think of.

Contact information: Name: Kimberly Morgan, Community Resource Coordinator  
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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency?  
**Community Counseling Center (Ashtabula, Ohio)**
2. What population does your agency serve?  
**This ranges from children age 4 and above, all the way to older adults.**
3. What are the typical ages of the people you work with?  
**More than half of our clients are under age 18.**
4. What is your agency's knowledge of Trauma Informed Care?  
**We held an afternoon workshop in August that focused on introducing the ACES study and the importance of TIC. Most staff were in attendance. Other than that, knowledge varies by provider in relation to workshops they have attended or self-study.**
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?  
**No specific data is available at present, though we see cases of child neglect (especially in relation to parents addicted to opiates and other drugs), adults and children who are victims of violence or have witnessed violence, sexual assault/violence.**
6. Does your agency utilize any trauma assessments?  
**Not at this time, though we are very interested in doing so.**
7. What types of treatment does your agency provide to those who have experienced trauma?  
**Outpatient psychotherapy, case management, and psychiatric medication management. CBT is utilized, though we do not have staff trained in trauma focused CBT at this time.**
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?  
**Staff training on specific treatment models, and community-wide TIC awareness training, including the schools.**
9. Is there something your agency is doing in TIC that they could share with the NW region?  
**Not at this time.**

Contact information: Name: **Paul Bolino**

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency?- Pastoral Counseling Service (PCS)
2. What population does your agency serve? Children, Adolescents, Adults
3. What are the typical ages of the people you work with? 5-70
4. What is you agency's knowledge of Trauma Informed Care? The staff was required to watch a TF-CBT Web course and obtained 10 CEU's through The National Child Traumatic Stress Network. [www.musc.edu/tfcbt](http://www.musc.edu/tfcbt). We also have weekly time available for our therapists to consult with our expert on TF-CBT.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? We are in the process of data collection.
6. Does your agency utilize any trauma assessments? Yes, we use The Childhood Trust Events Survey (CTES) and the Child PTSD Symptom Scale (CPSS).
7. What types of treatment does your agency provide to those who have experienced trauma? TF-CBT, CBT, Dialectical Therapy
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? I look forward to discussing this as our agency is just starting to collect data.

9. Is there something your agency is doing in TIC that they could share with the NW region? Not at this time.

Contact information: Name: Ann Robson  
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email:

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. **What is the name of your agency?**  
Positive Education Program
2. **What population does your agency serve?**  
SED children and youth and their families pre-K to 22.
3. **What are the typical ages of the people you work with?**  
Most of our clients are between 12 and 18 years of age.
4. **What is you agency's knowledge of Trauma Informed Care?**  
The agency is certified by the Sanctuary Institute as a trauma informed program. We invested 3 years in the process and involved every employee in the agency. We are up for re-certification next year.
5. **What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?**  
Neglect, abuse and abandonment are themes. Many have witnessed or been subject to community violence. As over 80% of the children we serve are Medicaid-eligible, poverty is a great source of stress.
6. **Does your agency utilize any trauma assessments?**  
Yes, as a routine part of intake and in the course of treatment as clinically indicated.
7. **What types of treatment does your agency provide to those who have experienced trauma?**  
Our day treatment programs use a trauma-informed milieu and our case managers link children who may benefit from therapy to other providers.
8. **As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?**  
One of the greatest needs is to provide care to the care-giver. Compassion fatigue is real and it is expensive to help staff get the support they need to prevent or recover from secondary trauma.
9. **Is there something your agency is doing in TIC that they could share with the NW region?**  
We could share our whole agency education and training plans.

Contact information: Name: Habeebah Rasheed Grimes email: [hgrimes@pepcleve.org](mailto:hgrimes@pepcleve.org)

10/8/14

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### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?  
SHC/The Arc of Medina County
2. What population does your agency serve?  
intellectually disabled adults + children
3. What are the typical ages of the people you work with?  
20-40 y/o camp + respite 6-18
4. What is your agency's knowledge of Trauma Informed Care?  
new - but aware of impact of trauma on individuals
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?  
physical, sexual & verbal abuse of individuals before coming to SHC
6. Does your agency utilize any trauma assessments?  
None specific
7. What types of treatment does your agency provide to those who have experienced trauma?  
counseling / programming / group therapy
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?  
learning
9. Is there something your agency is doing in TIC that they could share with the NW region?  
not at this time

Contact information: Name:

Shelley Wharton

email:

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency? *Beech Brook*
2. What population does your agency serve? *Primarily SED children and teenagers and SMI transitional youth and their families*
3. What are the typical ages of the people you work with? *Primarily children, adolescents, and transitional youth*
4. What is your agency's knowledge of Trauma Informed Care? *Beech Brook has been implementing trauma-informed care for more than a decade. This process has been advanced through an internal Trauma-Informed Care Team. The agency has participated in four national learning communities/collaboratives sponsored by SAMHSA to disseminate trauma-informed care and trauma-informed evidence-based practices. Beech Brook was a founding member of an OMDH-OACCA Learning Community to advance trauma-informed care and restraint reduction. Beech Brook won an ODMH award for state-leading efforts at restraint reduction among child-serving agencies. The agency also has been an enduring member of the Cuyahoga County Trauma Collaborative now operated out of the Cuyahoga County ADAMHS Board. Beech Brook has a long history of training others about trauma-informed care, including but not limited to the Cuyahoga County Department of Children and Family Services and Lorain County Children Services.*
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? *An extremely large proportion of agency clients are survivors of childhood adversity, especially abuse and neglect. Many have been exposed to complex trauma.*
6. Does your agency utilize any trauma assessments? *Yes, we screen for trauma at the front door using the Childhood Trauma Events Survey. When, further assessment is indicated clinically, the UCLA-PTSD Index and the DES are utilized.*
7. What types of treatment does your agency provide to those who have experienced trauma? *Parent-Child Interaction Therapy, Trauma-Focused-CBT, Alternatives for Families-CBT, Trauma-Grief Component Therapy for Adolescents, and Children and Residential Experiences.*
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? *It would be ideal to have trauma screening, trauma-informed care, and trauma-informed EBP's used at all child-, adult-, and family serving organizations across the region.*
9. Is there something your agency is doing in TIC that they could share with the NW region? *Beech Brook is eager to share its experience with trauma-informed care and practices with others.*

Contact information: Name: Mark R. Groner, MSSA, LISW-S      email: [mgroner@beechbrook.org](mailto:mgroner@beechbrook.org)

The purpose of this survey is to collect information that will be used to assist the Northwest Region to determine needs to collaborate around Trauma Informed Care.

**YOUR INFORMATION IS VERY IMPORTANT AND WE WOULD APPRECIATE YOUR RESPONDING BY: August 18, 2014 to [lisa.bosler@dodd.ohio.gov](mailto:lisa.bosler@dodd.ohio.gov)**

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?

Welcome House, Inc.

2. What population does your agency serve?

Adults who have Intellectual and Developmental Disabilities

3. What are the typical ages of the people you work with?

18 years and older but we do have a higher population of older adults.

4. What is your agency's knowledge of Trauma Informed Care?

Several administrative staff participated in the summit. We have begun incorporating the ideal of trauma informed care into staff training. We have also done training and used concepts from the efforts in Positive Intervention Culture initiatives.

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

Some of the people we serve previously lived in large state run facilities in previous decades. People with IDD are from four to ten times more likely to be victimized, often by care givers. Many of the people we support have been physically or verbally abused. Due to the lack of services adults with IDD often live with parents into late adulthood. When a parent, who is also the primary caregiver, dies or is no longer able to provide the care the adult child goes through the adjustment to a new home in addition to their grief. Finally, many of the people we support have experienced bullying because of their disability. The trend and pattern that we are most concerned about is a general lack of sensitivity and respect in the day-to-day interactions of some direct support staff.

6. Does your agency utilize any trauma assessments?

None at this time.

7. What types of treatment does your agency provide to those who have experienced trauma?

We work with mental health and other social service providers to address trauma for individual clients. These services vary and are built into the Individualized Service Plan.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

For the IDD field training and resources for front line staff is a key need.

9. Is there something your agency is doing in TIC that they could share with the NW region?

Not right now, our motivation for involvement in TIC is to learn from others and develop a more comprehensive/assertive plan.

Contact information: Name: Bobbi Burkey, program Director

email: [bburkey@welcomehouseinc.org](mailto:bburkey@welcomehouseinc.org)

The purpose of this survey is to collect information that will be used to assist the Northeast Region to determine needs to collaborate around Trauma Informed Care.

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency? Akron Children's Hospital
2. What population does your agency serve? Pediatric pts. birth to 21, Adult bus patients, adult's with chronic diseases of childhood.
3. What are the typical ages of the people you work with? 5yrs to 17yrs
4. What is your agency's knowledge of Trauma Informed Care? The inpatient behavioral health unit is acutely aware of TIC. The organization as a whole is working mightily towards education of all individuals
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? Physical, sexual, verbal, emotional abuse and neglect.
6. Does your agency utilize any trauma assessments? Patients age 8 and older receive CTES during admission.
7. What types of treatment does your agency provide to those who have experienced trauma?  
TF-CBT
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?  
a greater understanding of the survival coping skills victims of trauma develop. Instead of labeling them "bad kids" recognize something has happened to them.
9. Is there something your agency is doing in TIC that they could share with the NW region?  
Providing education to the public schools related to trauma, types of trauma, biological and psychological effects of trauma, how trauma victims survive & cope, and how to care for  
Contact information: Name: yourself when dealing mail: 2 trauma victims

The purpose of this survey is to collect information that will be used to assist the Northwest Region to determine needs to collaborate around Trauma Informed Care.

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency? University Hospitals Case Medical Center.
2. What population does your agency serve? Inpatient Adult Psychiatry and Gero Psych.
3. What are the typical ages of the people you work with? 18yr and above.
4. What is you agency's knowledge of Trauma Informed Care? Very Knowledgeable and we provide annual trauma education for all employees and student orientation who come to our unit for their psych rotation. We include Trauma education in all of our Crisis Intervention Classes which includes many ER and ICU staff.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? The numbers are very high for the inpatient psychiatric population. Patterns—the most challenging and self-injurious patients usually all have histories of Trauma.
6. Does your agency utilize any trauma assessments? Yes, but this is one area that we need to greatly improve on.
7. What types of treatment does your agency provide to those who have experienced trauma? This is a tricky area. Because our length of stay is so short 5-7days, we are careful not to bring up deep trauma issues prior to D/C. We pass this information on to their out-patient therapist to address. If someone is comfortable with their trauma past, we will provide 1:1 trauma education.
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? 1. To educate as many Health-Care Professionals as possible, not just those who have an interest in TIC. When I train at various Hospitals, I am amazed how many employees have no knowledge of trauma in our society and possible long-term effects on patients. Many of them are hearing this information for the first time! 2. Our schools need to start educating students on this subject, especially health-care degrees.

9. Is there something your agency is doing in TIC that they could share with the NW region? How we have incorporated TIC into our annual mandatory training sessions. We are also installing information posters in key location for visual reminders to staff about proper procedures working with individuals with trauma histories.

Contact information: Name: Robert Garcowski email: Robert.Garcowski@uhhospitals.org

The purpose of this survey is to collect information that will be used to assist the Northeast Region to determine needs to collaborate around Trauma Informed Care.

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency? University Hospitals Parma Medical Center
2. What population does your agency serve? All – primarily adult and geriatric patients
3. What are the typical ages of the people you work with? On the Behavioral Center for Older Adults, a geropsych unit, ages 55 and older typically
4. What is your agency's knowledge of Trauma Informed Care? Unaware of hospital's knowledge as a whole.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? War veterans
6. Does your agency utilize any trauma assessments? No
7. What types of treatment does your agency provide to those who have experienced trauma?
8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? Education on TIC and our responsibilities as caregivers
9. Is there something your agency is doing in TIC that they could share with the NW region?

Contact information: Name: Alison Henton

email: [ahenton@parmahospital.org](mailto:ahenton@parmahospital.org)

The purpose of this survey is to collect information that will be used to assist the Northeast Region to determine needs to collaborate around Trauma Informed Care.

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?

MetroHealth Medical Center Department of Psychiatry.

2. What population does your agency serve?

Adults 18 and older

3. What are the typical ages of the people you work with?

Majority of Patients are between ages 35-55. But we see people as young as 18 and also some in their 80's.

4. What is your agency's knowledge of Trauma Informed Care?

It is our understanding that TIC involves training staff to be aware of trauma symptoms and its impact on the population we serve. It is to learn ways to prevent further traumatization and to offer trauma specific services.

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

Large population of Childhood Sexual Abuse survivors (mental/sexual/physical).  
Domestic violence  
Gun shot wound survivors

6. Does your agency utilize any trauma assessments?

Patients are screened at assessment for trauma history.  
Some individual therapists have more detailed assessments to screen for PTSD and severity of PTSD.

7. What types of treatment does your agency provide to those who have experienced trauma?

We offer an Art Therapy based trauma group, a six week educational group on trauma, a group that utilized the Trauma Recovery + Empowerment model.

Two therapists are trained in Prolonged Exposure Therapy.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

Trainings and in-services on TIC.

9. Is there something your agency is doing in TIC that they could share with the NW region?

We are currently utilizing the TREM model in groups

and are working on starting up M-TREM and possibly

G-TREM. All staff are learning deescalation techniques that do not involve restraints

Contact information: Name: Kristen Livishie

email: [klivishie@metrohealth.org](mailto:klivishie@metrohealth.org)

The purpose of this survey is to collect information that will be used to assist the Northeast Region to determine needs to collaborate around Trauma Informed Care.

### TRAUMA INFORMED CARE (TIC) SURVEY

1. What is the name of your agency?

Northwest Behavioral Healthcare

2. What population does your agency serve?

adults - community admits - no insurance, in psychiatric crisis / forensic admits

3. What are the typical ages of the people you work with?

clients? - 18 and older

long term  
- restoration

4. What is your agency's knowledge of Trauma Informed Care?

- well trained on premise
- some training on application

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

- various abuses - adult, child, physical, sexual, emotional
- accidents - things witnessed

6. Does your agency utilize any trauma assessments?

no

7. What types of treatment does your agency provide to those who have experienced trauma?

- trauma therapy group - more involved
  - unit groups
  - comfort box
- Assaulted Staff Action Program - for staff

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

- discussion of strategies for implementation - how to affect cultural change

9. Is there something your agency is doing in TIC that they could share with the NW region?

trauma therapy group

Contact information: Name:

Tom Ference

email:

thomas.ference@mha.ohio.gov

## Waite, Pamela

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**From:** Patrick Boyle <patrick.boyle@case.edu>  
**Sent:** Thursday, October 09, 2014 8:29 AM  
**To:** Waite, Pamela  
**Subject:** Re: Trauma Informed Care Kick-off at the NE Regional Behavioral Health Group November Meeting

Hi Pam,  
The short answer to your question is "yes".

Our staff of 13 trainers and consultants provide a range of education and consultation for the implementation of various evidence based practices targeted for organizations or individuals treating people with mental disorders and co-occurring substance abuse disorders - (IDDT, ACT, SE/IPS, Motivational Interviewing, Peer Support). we work throughout Ohio and have been very involved in the state hospitals over the past 15 years.

we are now in the process of enhancing issues of trauma and trauma related care into our trainings (you can find more about us on our website at [www.centerforebp.case.edu](http://www.centerforebp.case.edu). I intend for our staff to "join" each collaborative (since we live in work throughout the state).

Though I cannot make this 11/7 meeting (teaching that day), one of our staff, Deana Leber-George, may be attending the meeting.

On Thu, Oct 9, 2014 at 8:17 AM, Waite, Pamela <[pamela.waite@chanet.org](mailto:pamela.waite@chanet.org)> wrote:

Hi Patrick,

Does your program provide any education in this area?

And yes, #8 is a typo – we are Upper NE.

Thanks,

Pam

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Pam Waite, MSN, RN-BC, MHSA  
Director, Healthcare Workforce/NEONI Operations  
The Center for Health Affairs / NEONI  
[216.255.3650](tel:216.255.3650) | [chanet.org](http://chanet.org) | [Connect with The Center](#)

**The purpose of this survey is to collect information that will be used to assist the Northeast Region to determine needs to collaborate around Trauma Informed Care.**

## **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency?

Near West Side Multi-Service Center DBA May Dugan Center

2. What population does your agency serve?

We are a community center provides comprehensive health and human service programs to individuals and families on the Near West Side of Cleveland.

3. What are the typical ages of the people you work with?

While we work with families and individuals of all ages; however, our average clients are 33-50 years of age.

4. What is you agency's knowledge of Trauma Informed Care?

We sought out resources to help us adapt our Education and Resource programs to support individuals with trauma when our first students presented diagnoses of PTSD in fall 2010. Since then, we have sought out training opportunities to adapt our program delivery, staff development, and client education process to trauma informed philosophies and protocols.

5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns?

Demographically, our clients live below the poverty line. Most self-disclose experiencing food scarcity, housing instability, and arbitrary use of authority. In addition, in our Community Education programming, 75% of students seek the environment because it is a trauma-sensitive learning environment. In 2013-14, that equated to 181 out of 240 students.

6. Does your agency utilize any trauma assessments?

Our Community Counseling Department uses the Soqic Diagnostic Assessment. Our Community Education program uses the Trauma Affect Regulation Guide to Education and Therapy (TARGET) Seven Step Freedom Approach and Trauma Recovery and Empowerment Model as tools in individual goal planning.

7. What types of treatment does your agency provide to those who have experienced trauma?

We have two departments that work with clients individually on trauma. Our Community Counseling Department provides out-patient individual mental health counseling to all members of the community. In addition, we work with the LGBTQ community through Cleveland Metropolitan School District in high school Gay Straight Alliance programs, as well as through group counseling at the LGBT Center of Greater Cleveland.

Our Community Education Program is open to all community members, and does not require a trauma diagnoses for access. That said, the majority of students come to the Center after referrals from homeless

shelters, addiction recovery and support programs, political refugees, the Taskforce of Greater Cleveland, permanent-supported housing agencies, and social service departments at Metro, and Lutheran. Our trauma-specific protocols are an active draw for the majority of our students.

That said, every aspect of the agency is sensitive to trauma. From how we arrange the lobby on Food and Clothing Day, to how our reception area is designed to interact with the public, we continually look for ways to welcome and accommodate the individuals who walk through our doors.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region?

A robust and deliberate referral system among agencies would benefit us tremendously.

9. Is there something your agency is doing in TIC that they could share with the NW region?

We are exceptionally proud of how we serve a diverse demographic and maintain a calm environment even when the building is extremely busy. We have protocols that work.

Contact information: Name: Sue Marasco, Director of Education email: [smarasco@maydugancenter.org](mailto:smarasco@maydugancenter.org)

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### **TRAUMA INFORMED CARE (TIC) SURVEY**

1. What is the name of your agency? IBH Addiction Recovery Center
2. What population does your agency serve? IBH is a residential treatment program for adults with a primary DSM-5 diagnosis of a Substance Use Disorder. Clients are typically Summit County residents.
3. What are the typical ages of the people you work with? We have adults as young as 18 or 19 up to people in their 50's or 60's. The drug of choice for the young adults is usually heroin or another opioid.
4. What is you agency's knowledge of Trauma Informed Care? There has been agency-wide training on Trauma-Informed Care.
5. What types of trauma have you seen in those you serve? Has your agency identified any trends or patterns? Many of the female clients were sexually abused as children. Some of the women have "danced" in strip clubs or prostituted themselves to support their drug use. One of the typical patterns is that the woman prostitutes herself to get money for drugs (and is usually high while prostituting) and then feels so ashamed and degraded that she uses more to numb her feelings, and then has to prostitute or dance more to get more drugs. In the past year, we have had several young women get beaten up by boyfriends or husbands while doing drugs in a motel room and we've had two women return to abusive husbands after completing residential treatment and then call us from psychiatric units after suicide attempts.  
Several of our male clients in the past year served in the Armed Forces overseas and have PTSD as well as Substance Use Disorders. Several of our male clients in the past year were physically and/or sexually abused.  
The pattern for our female clients is that if they relapse after treatment, they experience more trauma and start using more or "harder" drugs (e.g., IV heroin).
6. Does your agency utilize any trauma assessments? IBH assesses for trauma, but is not using a particular instrument.
7. What types of treatment does your agency provide to those who have experienced trauma? As indicated previously, IBH offers residential treatment for chemical dependency and addresses co-occurring disorders. Clients often come from jail or Detox and many are not treatment-ready when they arrive. The goal of the first phase of treatment (the first 14 to 28 days of treatment) is to stabilize, motivate, and engage them. Almost all of our clients have legal, housing, employment, and child custody issues, so a great deal of case management is happening alongside the individual and group counseling for addiction. In the time that we have to work with clients (a total of 75 to 90 days), we typically only have time to help the client identify that he/she has been traumatized and that outpatient counseling following treatment could be of help.

8. As the Northwest Region collaborates on TIC, what do you feel are the needs of the region? We also see eating disorders co-occurring with trauma and chemical dependency. There is a need for residential programs and affordable outpatient programs for this combination of issues.
  
9. Is there something your agency is doing in TIC that they could share with the NW region?

Contact information: Name: Deborah Foster-Koch  
email: [deborahfoster-koch@ibh.org](mailto:deborahfoster-koch@ibh.org)  
telephone: 330-644-4095 x349