Trauma-Informed Care
“Creating Environments of Resiliency and Hope”

May Dugan Meeting
April 19, 2016
Trauma Symptoms = Tension Reducing Behaviors

“How do I understand this person?”

rather than

“How do I understand this problem or symptom?”
Science of Trauma

“New lens through which to understand the human story”

• Why we suffer
• How are persons in the MH, DD and AoD systems treated, supported and empowered toward personal wellness
• How we parent, raise and mentor children and treat one another
• How we might better prevent, treat and manage illness in our medical care systems
• How we can recover and heal on deeper levels
• A hurt that must be healed
The ACE Comprehensive Chart

<table>
<thead>
<tr>
<th>Adverse Childhood Experiences</th>
<th>Neurobiological Impacts and Health Risks</th>
<th>Long-term Health and Social Problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>The more types of adverse childhood experiences...</td>
<td>The greater the neurobiological impacts and health risks, and...</td>
<td>The more serious the lifelong consequences to health and well-being</td>
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Ohio’s Trauma-Informed Care (TIC) Initiative

Vision:
To advance Trauma-Informed Care in Ohio

Mission:
To expand opportunities for Ohioans to receive trauma-informed interventions by enhancing efforts for practitioners, facilities, and agencies to become competent in trauma-informed practices
Ohio’s Trauma-Informed Care (TIC) Initiative

Infiltration of TIC in Regional Psychiatric Hospitals (RPHs)

**Goal:**
RPH infrastructure will support cultural and environmental changes that support effective care and excellent outcomes. RPHS will be recovery-oriented; trauma-informed; culturally and linguistically competent; and address health and wellness.

**Progress to date:**
- Training of all Regional Psychiatric Hospitals (RPHs)
- Continued consultation from the National Center for Trauma-Informed Care (NCTIC) on next steps in Hospital Services
- TIC Implementation ongoing at all 6 RPHs
- Value-Based Interview Questions
  - 43% increase in the retention rate at Appalachian Behavioral Health
Ohio’s Trauma-Informed Care (TIC) Initiative

Infiltration of TIC in Department of Developmental Disabilities (DODD) Developmental Centers (DCs)

Goal:
DCs become trauma aware, knowledgeable and responsive to the impact and consequences of traumatic experiences for residents, families and their communities.

Progress to date:
• Initial training of all Developmental Centers completed in FY 2015
• Implemented strategies in response to secondary/vicarious trauma on staff at Montgomery and Youngstown Developmental Centers scheduled to close June 30, 2017
• Five part TIC webinar training series: impact of trauma, how to respond to it, how to support a person as they recover, and how to become an agency that specializes in applying TIC practices.
Ohio's Trauma-Informed Care (TIC) Initiative

Infiltration of TIC in Ohio communities

Goal:
Expand opportunities for Ohioans to receive trauma-informed interventions by enhancing efforts for practitioners, facilities and agencies to become competent in trauma informed practices.

Progress to date:
• Train-the-trainer model – 170 trainers available throughout the state
• More than 4,000 trained on Trauma-Informed Approaches: Key Assumptions and Principles
• [http://mha.ohio.gov/traumacare](http://mha.ohio.gov/traumacare)
Ohio’s Trauma-Informed Care (TIC) Initiative

TIC Communication Plan/MHAS/DODD organizational and administrative commitment to TIC

**Goal:**
Develop an educational and communication campaign on trauma and its association to health that encourages the adoption of trauma-informed practices among facilities, agencies and practitioners to support both their customers and their workforce in achieving better health.

**Progress to date:**
- MHAS website developed as a “clearinghouse” for information related to TIC distributing up-to-date information about TIC to the field, including materials for clinicians and health professionals, those who may have experienced trauma and other interested individuals
- Combined TIC training for Central Office staff of OhioMHAS, DODD, and Attorney General, ODJFS, ODE, ODH
Save the Date

Third Annual Trauma-Informed Care Summit and Institute

Columbus, Ohio • June 22-23, 2016

Registration opens May 1, 2016

Registration Closed
Ohio’s Trauma-Informed Care (TIC) Initiative

Partnership Work

**Goal:**
Support the implementation of trauma-informed care systems and trauma-specific services across Ohio’s social services systems.

**Progress to date:**
- Formation of a Statewide TIC Advisory Committee by coordinating existing experts on a state and regional basis
- Partner with the Ohio Department of Health on their Early Childhood Comprehensive Systems (ECCS) Grant – *Understanding Toxic Stress: Protecting Infants and Young Children From the Life-Long Impacts of Prolonged Adversity*
- Partner with Attorney General’s Office VOCA (Crime Victim’s Fund) programming
- Central Office Staff training for OhioMHAS, DODD, ODE, ODH, AGs Office, EPA, ODJFS
- Ohio Department of Aging strategic planning May 25, 2016
- Ohio Veterans Homes strategic planning May 24, 2016
Ohio’s Trauma-Informed Care (TIC) Initiative

Regional Trauma-Informed Collaboratives

Goal:
Expand opportunities for Ohioans to receive trauma-informed interventions by enhancing efforts for practitioners, facilities and agencies to become competent in trauma informed practices, and facilitate cultural change within organizations, addressing gaps and barriers and taking effective steps based on the science of implementation.

Progress to date:
• Six Regional TIC Collaboratives formed
• Staffed by MHAS and DODD personnel – (DODD Regional Liaisons)
• Transitioning to local leaders
Trauma-Informed Care
Regional Collaboratives
What we **CAN** do . . .

- Treat everyone with universal precaution: Assume that the person has experienced trauma even if you don’t know their personal history.

- Create a welcoming environment that promotes a feeling of safety and non-violence.

- Be very aware of personal space.

- Recognize that certain practices (e.g., seclusion and restraint) may create trauma and trigger traumatic memories.

- Support meaningful power-sharing and decision-making – Voice and Choice!

- Use tools/approaches that help calm fear/anxiety/anger/defensiveness as a preventative and healing method.
Ohio’s TIC Initiative Overview

The Ohio Departments of Mental Health and Addiction Services (OhioMHAS) and Developmental Disabilities (DODD) collaborate on a statewide Trauma-Informed Care (TIC) Initiative intended to incorporate trauma-informed practices of trauma-sensitive care.

What’s New

Federal homeless youth study released. US Health and Human Service’s study on runaway and homeless youth paints a grim picture. It indicated: the average youth spent nearly two years living on the streets. More information can be found at the OhioMHAS website.
Jump to

- Adults
- Addiction
- Assessment and Screening Instruments
- Bullying
- Children, Youth and Adolescents
- Culture
- Disabilities
- Domestic Violence
- General
- Health Care/Primary Care
- Homeless
- Human Trafficking
- Immigrants/Refugees
- Justice
- LGBTQ
- Men
- Older Adults
- Peer Support/Mutual Self-Help
- Policy
- SAMHSA Evidence Based Programs and Practices
- Schools and Trauma Informed Care Tip Sheets
- Trainers
- Veterans Military
- Women
- State Level
- National Resources

Adults

- CDC Grand Rounds - A Public Health Approach to Prevention of Intimate Partner Violence (2014)
- Intimate Partner Violence in the US (2010)
Outcomes with TIC

- Improved quality of care and impact of care
- Improved safety for consumers, families, and staff
- Decreased utilization of seclusion and restraint
- Fewer no-shows
- Improved consumer engagement
- Improved consumer satisfaction
- Improved staff satisfaction
- Decreased “burnout” and staff turnover
Support in “4”

First ask, “What happened to you?”

Then, support a survivor, in 4 difficult sentences:

1. I believe you.
2. Thank you for trusting me enough to tell me.
3. I am sorry that happened to you.
4. I support you whatever you choose to do.

Then, listen and be present. And then, listen and be present some more.

• You’ll experience an urge to take care of the person. That’s normal, because you care. But you must, must, must sit still with it and let the person take care of herself or himself.
• Trauma is (in part) about having control over your body and your choices taken away.
• Survivors need safe environments where they can take back control. Sit still, notice that you care, be kind to yourself, and sit still some more.
• You have given the greatest gift you can give; yourself. Your caring attention.

• And then go take really good care of yourself!
TIC: Why is this important?

“What Happened to You?”
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