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Welcome to the Snohomish County CARE Trauma Informed Care Train the Trainer Training





# Building a Restorative Trauma Informed Community in Snohomish County







### Liza Patchen-Short, MA, LMHCA, MHP, CMHS

Liza Patchen-Short works at Snohomish County in the Human Services Behavioral Health Division as the Children's Mental Health Liaison. Liza has a Bachelor's Degree in Social Work and Master's Degree in Human Services with a focus on resiliency. Liza has over thirty years working in the nonprofit sector advocating for youth and families. She is the co-chair of the Snohomish County Children's Wellness Coalition and Youth Suicide Prevention Taskforce, and is leading the charge by supporting schools, community organizations and the community at large in building a Restorative Trauma Informed Community. Liza is co-facilitating the initial cohorts learning collaboratives to build a strong foundation for a trauma informed community. Liza is married and has two wonderful sons and three great stepsons.





## Laura Mote, LSWAIC, MHP

Laura Mote is the Mental Health Community Support Specialist with Snohomish County Behavioral Health for the Denney Juvenile Justice System. Laura holds a Master of Social Work Degree with a focus in adolescent trauma. Laura has worked with high-risk youth for over ten years. She is the co-chair of the Snohomish County Children's Wellness Coalition. Laura is a dedicated leader in building a Restorative Trauma Informed Community. Laura is co-facilitating the initial cohorts learning collaboratives to build a strong foundation for a trauma informed community. Laura is devoted to her two dogs.

Together, Laura and Liza work diligently to bring Restorative Trauma Informed CARE in a way that organizations can systemically bring sustainable changes for the community at large.



# We want everyone to acknowledge and see who is here at this training so if you could please use the chat box and put in:

## Name

- Organization and Role
- One value you bring to the workplace



## Hopes for the Entire Training

Understand your role as a CARE champion and the process of becoming a CARE organization

- Understand how to apply and internalize Equity, Restorative Practices & Trauma Informed principles and frameworks in your organization and begin to use that lens in your daily work
- Understand the impacts of Brain Science, Adverse Childhood Experiences (ACEs) and Trauma
- Discuss the role and characteristics of Resiliency
- Learn the basic tenets of Self-Care, Co-Care and Secondary Traumatic Stress and it's relationship to Trauma Informed Practices
- Understand the complex cultural, social, economic, and political forces that impact the lives of our children, families, and communities as a way to identify the root cause of trauma with a shared equity analysis.





# Understand the foundation of trauma informed care and why it is important to you, your organization, and your community.



# The Ins and Outs of the CARE Training

#### How to get CEU credits?

• At the end of each training unit you will receive a quiz and an evaluation that must be completed. The quiz score must be 70% or above.

#### Structure of the entire training

- Same group agreements
- Somatic grounding exercise at the beginning of each session
- Same format Daily agendas will provide break schedules
- Reflection at the beginning of the day for the previous day's trainings
- Evaluations after each training section

#### **Deep Dive Starred Slides**

• in each presentation we have starred slides. The star is in the top right corner, and we will point them out. Those are some of the core slides of this presentation that you will use during the deep dive portion of the training. We just want you to notice them for now.



# **CARE Training Days**

#### Week 1:

- Tuesday, October 5<sup>th</sup> Introduction to Trauma Informed Care Liza Patchen-Short & Laura Mote
- Thursday, October 7th Equity and the Intersection of Trauma Informed Practices
  - Tami Farber

#### Week 2:

- Tuesday, October 12th Self-Care & Secondary Traumatic Stress (STS) Lindsey Greene
- Thursday, October 14th
  Trauma 101 & Adverse Childhood Experiences
  Joe Neigel

#### Week 3:

- Tuesday, October 19th Restorative Practices Mary Cline-Stively
- Thursday, October 21st Implementation Science & Adult Learning Mary Cline-Stively

#### Week 4:

- Tuesday, October 28th Self-Care & Secondary Traumatic Stress Deep Dive Lindsey Greene
- Thursday, October 30th Trauma 101 & Adverse Childhood Experiences (ACEs) Joe Neigel

#### Week 5:

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- **Tuesday, November 2nd** TILT, Learning Collaboratives, Structure of the CARE Liza Patchen-Short & Laura Mote
- Thursday, November 4th Questions, TIC Why again, Panel, Next Steps Liza Patchen-Short & Laura Mote



**Grounding Exercise** Take a moment to ground yourself

## Take a deep breath (Inhale slow, Hold, Exhale slow)

- Notice any sensations in your body
- > Try to name what you are feeling in the moment
- > Thank yourself for this moment and your strength



# **Zoom Tutorial & Norms**

Remember to mute and unmute to reduce background noise-Please keep camera, on for connection, if you can.

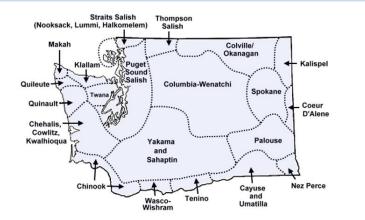






## Land Acknowledgment

#### There are over 29 federally recognized Indian tribes in WA today



And many others that are not federally recognized

https://nativegov.org/a-guide-to-indigenous-landacknowledgment/ We acknowledge that we are each residing on tribal lands of those who have lived on this land time immemorial. We pay respect to their elders past and present. Please take a moment to consider the many legacies of violence, displacement, migration, and settlement that bring us together today. We recognize the resilience of those past and present who work to build a strong and sovereign nation where Tribal members live their values and culture.

We are on the lands of the Tulalip, the Snohomish, the Stillaguamish, and Sauk Suiattle Tribes.



# **Group Agreements**

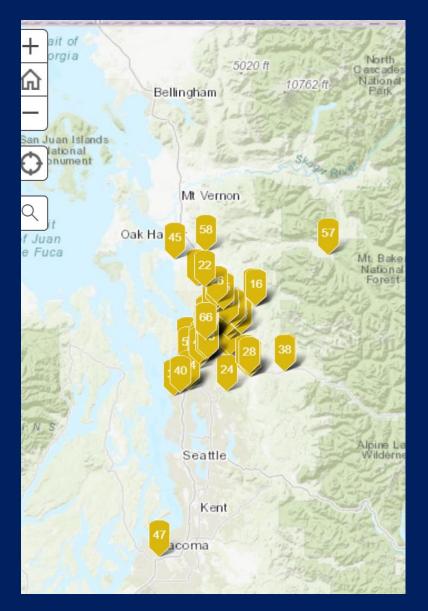
- Address impact over intent
- Embrace the power of humble, respectful listening
- Create trusting and safe spaces where a little bit of discomfort is okay.
- Learning leaves Stories stay
- Speak from your own experience instead of generalizing
- Participate to the fullest of your ability community growth depends on the inclusion of every individual voice
- We encourage you to lean in, be brave and vulnerable



## Cohort 4 CARE ORGANIZATIONS

Volunteers of America **Providence Hospital** YMCA Catholic Community Services City of Mukilteo Farmer Frog Northwest Educational District 189 Hope Works **Greater Trinity Academy** Take the Next Step Snohomish County Early Learning Head Start Peoria Home

Fleet & Family Support Center Everett **Naval Station Recovery Café** Hand in Hand ChildStrive **Housing Hope Dawson Place** Verdant Health Commission LINC NW Homage **Everett Gospel Mission** Change the Narrative





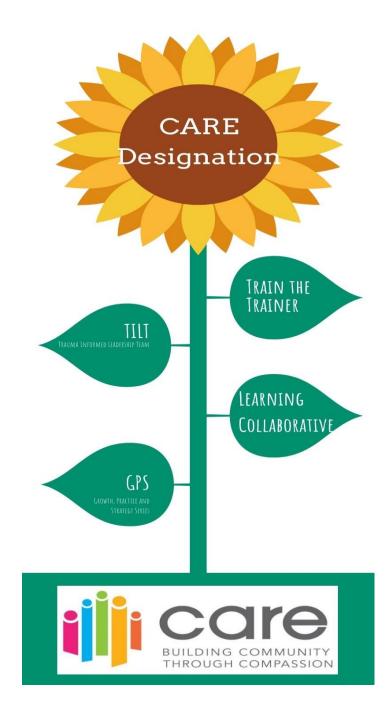
## **Interactive CARE Map**

#### What is the CARE Movement?

CARE stands for: Compassion, Appreciation, Resilience & Empowerment

Snohomish County is committed to building restorative trauma informed organizations. Over the last three years, we have trained over 45 organizations to become designated Restorative Trauma Informed CARE sites. The vision for this partnership is for all Snohomish County residents to thrive in an equitable, sustainable environment that cultivates relationships and a strong feeling of belonging.

We have engaged our local organizations from preschool to older adults. The goal is to build community resiliency, increase collaboration across agency partners and strengthen the overall wellbeing of our community.



## Ice Breaker: "Something in Common"





#### Something in Common

You will be randomly assigned to a room with 5 others

Each team has 5 minutes to:

Choose a person who will write down and report out on the following:

- Find 5 UNIQUE things that your group has in common, within those 5 minutes
- Choose 1 unique thing that you think your group will have in common with the other groups
- When we re-join in the main room 1 person for their group will report out what 1 unique thing they think they will have in common with the other groups



# KER SEF KER SET KER SE

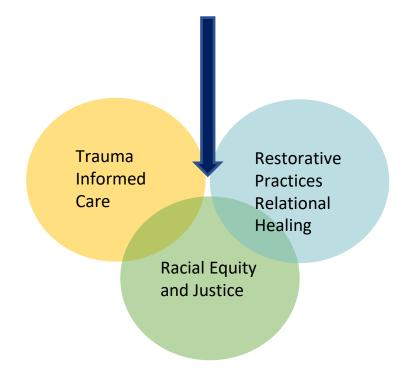








# Aligning these initiatives is vital to successful organization culture transformation











# Identify any highlights?



## What is Trauma Informed Care?



Trauma Informed Care is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma...that emphasizes relationships, being curious, non-judgmental, and creates space for physical, psychological, and emotional safety for all. This paradigm shift builds and allows for opportunities to rebuild and keep a sense of empowerment and resiliency.



What is a Trauma Informed System?



A trauma-informed system is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma on those who have contact with the system, and service providers. The entire organization embeds and sustains trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those involved using the best available modalities to maximize physical and psychological safety, facilitate healing, and support their ability to thrive.



# Josh Shipp Video



#### **Self- Reflection Question: 5 min**

When you think about trauma informed care or trauma informed systems what have you learned or surprised you?

Breakout Rooms -10 min 2-3 in a group When you think of trauma informed care, how does it connect with your personal values?

**Any Questions?** 





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- 10 Minute Break
- Take time to stretch
- Get something to drink and breathe!





# Building an Equitable Restorative Trauma Informed Workplace: A Culture of Connection and Belonging



So Why Be a Trauma A

Why be a CARE Designated Organization?

- Building relationships, a sense of belonging, trust and connection creates a workplace culture of healing.
- The paradigm shift becomes not what is wrong with you but what has happened to you.
- Trauma informed, restorative principles that are equitable aim at insuring environments and services are accessible welcoming, healing and provides a sense of belonging to all particularly those impacted by the inequities in our community.



# The benefits and importance of this work



- Staff become more regulated, flexible and resilient. A better sense of wellbeing for all
- A trauma Informed workplace is calmer, and staff have deeper relationships
- Staff and customers feel like they belong and are heard
- We prioritize human over tasks
- We find out the real story and do not make judgements or assumptions
- Mental health days are supported instead of absenteeism
- Increased productivity and retention





## What does a Trauma Informed Organization look like?



#### **Workplace Principles**

#### Safety –

Building relationships with others based on mutual respect and inclusion of all individuals. The goal is to promote a secure, safe, physically and emotionally, environment by building positive relationships that build resiliency for all in each interaction.

#### **Trustworthiness & Transparency-**

Fostering positive relationships based on trust and honesty. Share as much information as possible, relational.

#### **Peer Support-**

Identifying common concerns within the community and engaging in collective problem solving. This means recognizing and actively working towards solving the needs of every individual.

#### **Collaboration and Mutuality-**

Recognizing the importance of all roles within the organization and developing equal opportunities for decision making. Best practice is to collaborate with community members, families, and organizations within Snohomish County to promote trauma informed principles and systems of care. Allow time for social interaction for staff to stay in touch with family and team members during COVID times.





#### **Empowerment, Voice, and Choice-**

Recognizing that every person's experience is unique and requires an individualized approach. Create opportunities and systems that empower *all* individual's voice and choice. Seek staff and consumers input.

#### **Resiliency-**

Building resiliency by modeling compassion and regulation with each interaction and by providing skills and protective factors. Providing the opportunity to promote recovery and the ability to bounce back from adverse conditions.

#### Cultural, Historical, Race, Class, Gender issues-

Appreciating and celebrating the differences and each individual's unique experiences by practicing cultural competency. Implementing a competency lens of cultural, historical and gender issues in your daily work.





#### TRAUMA-ORGANIZED

- Reactive
- Reliving/Retelling
- Avoiding/Numbing
- Fragmented
- Us Vs. Them
- Inequity
- Authoritarian Leadership



#### TRAUMA-INFORMED

- Understanding of the Nature and Impact of Trauma and Recovery
- Shared Language
- Recognizing Socio-Cultural Trauma and Structural Oppression



#### HEALING ORGANIZATION

- Reflective
- Making Meaning Out of the Past
- Growth and Prevention-Oriented
- Collaborative
- Equity and Accountability
- Relational Leadership

#### TRAUMA INDUCING



#### TRAUMA REDUCING



# **Organizational Stressors**

Providers are unable to deliver quality care in an organizational culture defined by chronic stressors and collective traumas.



## **Organizational Resilience**

Leadership Commitment to equity and organizational wellness

Centering relational practices

Sense of Humor Capacity to Adapt to Changing Environment

Employee Well-Being is Prioritized

> Succession Planning

> > Antiracist policies and practices

Targeted universalism

"A resilient organization is able to adapt and thrive in times of uncertainty, pressure and ambiguity. Succeeding as an organization is much more likely when we build resilience into our strategy, culture and day-day practices. A resilient organization enables individual resilience." (Bloom & Farragher, 2013)



## **Challenges to Implementing Trauma Informed CARE**

- Getting buy in from the whole organization can be hard
- Inconsistent understanding of what it means to be trauma informed
- Most view this work as more work or just a training rather than a culture shift
- Understanding this is complex system change work. It will take the whole organizations commitment, and dedication
- Evaluating measures of trauma informed change is difficult
- Workplaces not prioritizing the work
- Building sustainable methods and systems



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## "Trying to implement trauma-specific clinical practices without first implementing trauma-informed organizational culture change is like throwing seeds on dry land."

Sandra Bloom, MD, Creator of the Sanctuary Model

#### **Self- Reflection Question: 5 min**

Where in your life have you experienced a healing organization? What happened? Were you able to do your job better? Did you feel more connected or in sync with your colleagues? Did you feel a sense of reward?

Breakout Room - **10 min 2-3 in a group** Discuss your experiences from your reflection

**Any Questions?** 





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- 10 Minute Break
- Take time to stretch
- Get something to drink and breathe!





## Key Ingredients for Creating a Trauma-Informed Approach to an Organization

- Leading and communicating about the transformation process throughout entire agency
- Engaging consumers in organizational planning
- Training clinical as well as non-clinical staff members –common language and mission
- Creating a safe environment
- Preventing secondary traumatic stress in staff
- Hiring a trauma-informed workforce
- Involving consumers in the treatment process
- Screening for trauma and ACEs
- Training staff in trauma-specific treatment approaches
- Engaging referral sources and partnering organizations
- Use reflective supervision
- Culturally competent staff

POWER OVER

YOU CAN'T CHANGE

PEOPLE NEED FIXING FIRST

**OPERATE FROM THE DOMINANT CULTURE** 

PEOPLE ARE OUT TO GET YOU

THERE'S ONLY RIGHT OR WRONG

HELPING

"YOU'RE CRAZY!"

**COMPLIANCE/OBEDIENCE** 

INFO IS SHARED ON A NEED TO KNOW BASIS

PRESENTING ISSUE

"US AND THEM"

LABELS, PATHOLOGY

FEAR BASED

I'M HERE TO FIX YOU

INSTRUCTIVE

PEOPLE MAKE BAD CHOICES

**BEHAVIOR VIEWED AS PROBLEM** 

WHAT'S WRONG WITH YOU?

**BLAME/SHAME** 

GOAL IS TO GO THINGS THE "RIGHT" WAY

PRESCRIPTIVE

Equitable & TRAUMA INFORMED CARE LENS **POWER WITH NEUROPLASTICITY CAN CHANGE PEOPLE NEED SAFETY FIRST CULTURE HUMILITY** PEOPLE CAN LIVE UP TO THE TRUST YOU GIVE THEM THERE'S MULTIPLE VIEWPOINTS LEARNING "IT MAKES SENSE" **EMPOWERMENT/COLLARBORATION** TRANSPARENCY AND PREDICTABILITY WHOLE PERSON AND HISTORY "WE'RE ALL IN THIS TOGETHER" **BEHAVIOR AS COMMUNICATION** EMPATHY BASED SUPPORT THE HEALING PARTICIPATORY **PEOPLE WHO FEEL UNSAFE DO UNSAFE THINGS** BEHAVIOR VIEWED AS A PERSONAL SOLUTION WHAT HAPPENED TO YOU? RESPECT **GOAL IS TO CONNECT** 

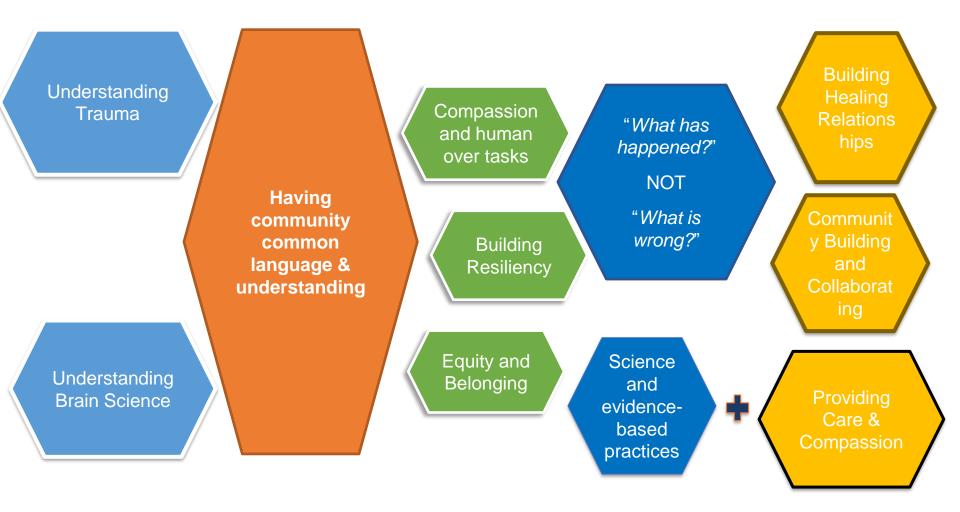


What Does the Cultural Shift of Trauma Informed Care Look Like

CHOICE



How to build a thriving community through relationship and connection



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**Breakout Rooms -10 min 2-3 in a group** What is something you misunderstood or had an incomplete understanding of trauma informed care that has become more complete or deep for you?

## Self- Reflection Question: 5 min

What is your hope with this work for yourself and your organization?

**Any Questions?** 









# In the chat: Write something you learned or appreciated about today's session





Organizational Stress as a Barrier to Trauma-Informed Service Delivery, S. Bloom

<u>The Future of Healing: Shifting from Trauma-Informed Care to Healing</u> <u>Centered Engagement</u>, S. Ginwright

Organizational Prevention of Vicarious Trauma, H. Bell et al.

Strategies to Confronting Unconscious Bias, L. Nalty

<u>Lessons Learned While Building a Trauma-Informed Public Health Behavioral</u> <u>Health System in the City of Philadelphia</u>, Beidas, RS et al.

What Happened to you, B Perry, and O. Winfrey

The Body Keeps the Score, B van der Kolk

The Four Pivots, S Ginwright (release date 1/25/21)



## Thanks for being a Trauma Informed Care Champion!

