Trauma informed care: Assessment and implementation of change in a large academic medical setting

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## **CONFLICT OF INTEREST DECLARATION**

The authors have no conflicts of interest



## Objectives

- 1. Describe what trauma informed care is and what it looks like in their unique setting.
- Explore the challenges of and opportunities for introducing TIC into multi-disciplinary complex systems.
- 3. Identify steps for cultivating buy-in from stakeholders and creating strategies to begin an implementation process for TIC within attendees' unique settings.



### **Partners HealthCare**









BRIGHAM AND WOMEN'S Faulkner Hospital





























### Massachusetts General Hospital



- Founded in 1811
- Harvard teaching hospital
- 950 inpatient beds
- 1.5 million outpatient visits
- 24,000 employees
- Largest NIH research center in the US



# MGH Center for Community Health Improvement

### Violence Prevention and Intervention

Helping Abuse and Violence End Now (HAVEN)

Police Action Counseling Team (PACT)

Violence Intervention Advocacy Programs (VIAP)





### Partners HealthCare Trauma Informed Care Conference

### October 24, 2013 Panel and Poster Session





### MGH Interpersonal Trauma and Violence Committee



**Social Services** 

Employee Assistance Program (EAP)

Child Protection Team

**Emergency Department** 

Police and Security

**Primary Care** 

Leadership & Programs from CHCs

Human Trafficking Clinic

Nursing & Patient Care

Trauma and Surgery



# **Common Definition of Trauma**

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.





## Common Definition of Trauma Informed

- A program, organization, or system that is trauma-informed:
- •*Realizes* the widespread impact of trauma and understands potential paths for recovery;
- •Recognizes the signs and symptoms of trauma in clients,
- families, staff, and others involved with the system;
- •*Responds* by fully integrating knowledge about trauma into policies, procedures, and practices; and
- •Seeks to actively resist *re-traumatization*.





# Spreading Trauma Informed Care Across the Hospital

#### Outcomes Associated with ACEs: A Life Course Perspective



**Center** on Domestic Violence, Trauma & Mental Health





Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol

Roger D. Fallot, Ph.D. and Maxine Harris, Ph.D.



### Trauma Informed Care Assessment Domains

#### Trauma Informed Practice Assessment Draft Questions—7/7/2014

This survey was created by the MGH Interpersonal Trauma and Violence Committee, an interdisciplinary group charged with assessing the hospital's response to victims of violence. The committee decided to focus on Trauma Informed Care and Practice within the hospital. This includes policies around trauma informed care, how the care is put into practice, and ways to improve policies and procedures around trauma informed care.

We want to elicit your feedback about Trauma Informed Care in order to improve how MGH responds to survivors of trauma and the staff who care for them. Please be sure to answer each question so that we have the most complete data possible.

### Policy and Organizational Commitment

### **Physical Safety**

Patient Engagement

Staff Support



### Trauma Informed Care Assessment

Process and Procedures of Assessment:
1. Setting the stage
2. Data collection (survey & focus groups)
3. Analyzing the data
4. Report back to stakeholders

5. Create strategic and implementation plan





# Strengths/Observations



### Slow and steady



### **Lessons Learned**



# Using "Trauma" at a Hospital



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