

## Trauma-Informed Agency Self-Assessment

#### Purpose

The purpose of the Trauma-Informed Agency Self-Assessment is to provide a starting place for agencies and systems from a variety of fields, including child welfare, behavioral health, public health, juvenile justice, education, early childhood development, housing, and victim advocacy, to assess where they fall in a continuum of trauma-informed care and to engage them in a process of setting agency improvement goals. The self-assessment identifies organizational milestones and priority areas for inspiring active planning and is not intended as a measure of individual performance or data collection tool. The goal is to stimulate intra-organization dialogue on how agencies and systems can increase their collective resolve and systematically engage in on-going advancement of trauma-informed care and priormed care and practice.

## How to Administer the Agency Self-Assessment

The framework is organized into ten domains drawn from a variety of disciplines, including health care, behavioral health, child welfare, housing, and advocacy.<sup>1</sup> Within each domain are various operational criteria about which agencies can self-determine their level of proficiency. Recognizing that the process of becoming trauma-informed is a continuous one, the self-assessment is solely intended as a tool for agencies to identify strengths, weaknesses, and opportunities for further development.

The five steps for completing the self-assessment are 1) agency staff completes the assessment instrument; 2) staff review the results and, where warranted, facilitate a discussion about why they scored each domain/criteria as they did and any individual variance between the ratings; 3) the vetted results are synthesized for review by a trauma informed workgroup, management team, or other appropriate staff; 4) staff select and prioritize which domain(s) should be the focus for improvement for a given time period; 5) staff discussions are facilitated to help identify the need for potential discipline-specific assessments and to prioritize resource allocation and training needs. (An Action Planning Tool for agencies to guide this process is included in Appendix A.)

#### Resources

Recognizing that the process of becoming trauma-informed is a continuous one, a list of system-specific resources is provided in an appendix at the end of the self-assessment (Appendix B). This resource list is not exhaustive, but is offered as a starting point to take a more comprehensive approach to the on-going work of advancing trauma-informed care and practice in your organization or system.

#### Definitions

**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.

A trauma-informed program, organization, or system is one that:

- 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
- 4. Seeks to actively resist *re-traumatization.*

Vicarious trauma, also referred to as secondary trauma, is the exposure to the trauma experiences of others and is an occupational challenge for those who have experienced violence and/or trauma. Working with victims of violence and trauma changes the worldview of responders and puts individuals and organizations at risk for a range of negative consequences. A *vicarious trauma-informed agency or system* recognizes these challenges and proactively addresses the impact of vicarious trauma through policies, procedures, practices, and programs.

**Historical trauma** is often described as multigenerational trauma experienced by a specific racial, ethnic, cultural, or marginalized group. Historical trauma can be experienced by anyone living in families at one time marked by severe levels of trauma, poverty, dislocation, war, etc., and who are still suffering as a result.

## A. Leadership and Mission

# Instructions: Please indicate the level of agency adoption for each TI attribute statement below.

A1. The agency's guiding principles and strategic plans (vision, mission, and goals) reflect a commitment to providing trauma-informed services and supports.

	not at all	minimally	moderately	significantly	fully	n/a
A2.	The agency'	s leadership ac	ctively solicit inp	ut in internal m	eetings co	oncerning
	trauma and I	how policies ar	nd practices (ser	rvices) can pror	note heali	ng.
	not at all	minimally	moderately	significantly	fully	n/a
A3.	The agency'	s leadership in	tentionally and o	consistently eng	gage with	and solicit
	input from in	idividuals with	lived experience	Э.		
	not at all	minimally	moderately	significantly	fully	n/a
A4.	The agency'	s leadership m	odel a healthy li	fe/work baland	ce.	
	not at all	minimally	moderately	significantly	fully	n/a
A5.	The agency'	s leadership ar	e aware of the ir	mportance of c	ultural hui	mility and
	responsiven	ess and incorp	orate this aware	ness into daily	practice a	nd
	organization	al operations.				
	not at all	minimally	moderately	significantly	fully	n/a
A6.	Members of	the agency's g	overning bodies	s (e.g., leadersh	ip teams a	and
	governing bo	oard/committe	e) reflect the div	verse identities	of the cor	nmunities

that are served.

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## A. Leadership and Mission continued

A7. Members of the agency's governing bodies (e.g., leadership teams and governing board/committee) have knowledge of trauma-informed care.

r	not at all	minimally	moderately	significantly	fully	n/a
		,	,	, j	,	
mme	nts (examp	oles of success	ses and/or oppo	ortunities for ch	lange):	

## B. Management and Supervision

B1. The agency's decisions are made in collaboration with all staff and conducted with transparency.

	not at all	minimally	moderately	significantly	fully	n/a
B2.	0 ,	ed power amo	made in ways th ng staff, clients,			
	not at all	minimally	moderately	significantly	fully	n/a
B3.	0 ,	ecific cases, pr	heduled individ ojects, and the i	e	•	
	not at all	minimally	moderately	significantly	fully	n/a
B4.	•	ma and how it	nelp staff memb may impact the			
	not at all	minimally	moderately	significantly	fully	n/a
B5.		adily available a and/or critical i	and accessible t ncident.	to staff and volu	unteers foll	owing a
	not at all	minimally	moderately	significantly	fully	n/a
B6.	The agency e	ngages in recr	uitment and hiri	ng strategies to	o develop a	a staff and

B6. The agency engages in recruitment and hiring strategies to develop a staff and volunteer force that reflects the diversity of the children, families, and individuals being served. Virginia HEALS

## **B. Management and Supervision** *continued*

B7. The agency engages in active and on-going support of staff and volunteers that reflect the diversity of the children, families, and individuals being served.

not at all minimally moderately significantly fully n/a

Comments (examples of successes and/or opportunities for change):

# C. Policy

C1. The agency's written policies, procedures, and forms clearly demonstrate a commitment to diverse identities and cultural and linguistic differences.

	not at all	minimally	moderately	significantly	fully	n/a
C2.	0,	oth the mental	es, procedures, a and physical he			
	not at all	minimally	moderately	significantly	fully	n/a
С3.	responses to	crisis situation	cies and proced s (e.g., self-harm children, familie	n, suicidal think	ing, aggre	ssion)
	not at all	minimally	moderately	significantly	fully	n/a
C4.		incorporates ir	ng policies, proo nput from childr			0 ,
	not at all	minimally	moderately	significantly	fully	n/a
C5.	to determine	-	vs and updates are sensitive to t d language.			
	not at all	minimally	moderately	significantly	fully	n/a
C6.	involves front		ng policies, prov uding those prov s.			
	not at all	minimally	moderately	significantly	fully	n/a

# C. Policy continued

C7. The agency's policies and practices promote team building and supportive relationships among all staff.

not at all	minimally	moderately	significantly	fully	n/a

Comments (examples of successes and/or opportunities for change):

## **D. Environment**

D1. The agency's environment promotes a sense of safety and calm for children, youth, and individuals being served.

	not at all	minimally	moderately	significantly	fully	n/a
D2.	The agency's	environment	promotes a sen	se of safety and	d calm for	staff.
	not at all	minimally	moderately	significantly	fully	n/a
D3.			otion areas are c child-friendly fe	-		
	not at all	minimally	moderately	significantly	fully	n/a
D4.	0 ,		reflects and inco ork, diverse read	•		al
	not at all	minimally	moderately	significantly	fully	n/a
D5.	will address p	ootential threat	nd procedures i ts to children, yo eats (e.g., fire, to	outh, individual	s, and staf	0 /
	not at all	minimally	moderately	significantly	fully	n/a
D6.			appreciation for n, notes in pers			ningful
	not at all	minimally	moderately	significantly	fully	n/a
Com	ments (examp	oles of success	ses and/or oppo	ortunities for ch	ange):	

# E. Accessibility

E1. The agency has a detailed accessibility plan to address the agency's response to service requests from children, youth, and individuals being served, regardless of language, ability, sexual orientation, gender identity and expression, and/or religion.

	not at all	minimally	moderately	significantly	fully	n/a
E2.		·	nd procedures ese language ac	•		
	not at all	minimally	moderately	significantly	fully	n/a
E3.	0 ,		ces that engage ially, and cultura			iffirming to
	not at all	minimally	moderately	significantly	fully	n/a
E4.		provides servio dren, youth, an	ces that engage d individuals.	and are access	sible and a	affirming to
	not at all	minimally	moderately	significantly	fully	n/a
E5.	underserved		ces that engage e.g., people expe s).			. ,
	not at all	minimally	moderately	significantly	fully	n/a
E6.		s staff feel safe	e coming forward xual orientation,	d to discuss iss	ues relate	-
		•				
	not at all	minimally	moderately	significantly	fully	n/a

Comments (examples of successes and/or opportunities for change):

## F. Engagement

minimally

#### Youth Engagement

F1. The agency provides children and youth routine opportunities to voice needs, concerns, and feedback.

	not at all	minimally	moderately	significantly	fully	n/a
F2.	<b>o</b> ,	•	children and you Ianning meeting		ared for s	ervice

F3. The agency specifies how meetings and/or information developed for children and youth will be age and developmentally appropriate.

moderately

significantly

fully

n/a

not at all	minimally	moderately	significantly	fully	n/a

#### Family Engagement

not at all

F4. The agency includes all forms of family to help identify connections, recognizing that some people who play the most supportive roles in a child or youth's life may not be legally related.

not at all	minimally	moderately	significantly	fully	n/a

F5. The agency provides family members routine opportunities to voice needs, concerns, and feedback.

not at all	minimally	moderately	significantly	fully	n/a

F6. The agency specifies how efforts will be made to schedule meetings with family members at a time, location, and setting that will be accessible and accommodate their needs.

not at all	minimally	moderately	significantly	fully	n/a

## F. Engagement continued

F7. The agency specifies how family members will be prepared for service meetings and other planning meetings.

	not at all	minimally	moderately	significantly	fully	n/a
F8.	The agency	clearly commu	inicates to famil	ies how family i	input and	feedback will
		l and incorpora			,	
	not at all	minimally	moderately	significantly	fully	n/a
Com	monte (over	plac of success	sos and /or onno	ortunition for ob		
Com	ments (exam	pies of succes	ses and/or oppo	ortunities for ch	ange):	

## G. Cross-System Collaboration

G1. Strategies are in place to identify, communicate, and work with community partners and referral agencies that have proven experience delivering evidence and trauma-informed services.

	not at all	minimally	moderately	significantly	fully	n/a	
G2.	confidentiality has access to t	(e.g., the kinds	bout the extent of records that n, and when the or police).	are kept, wher	re they are k	•	
	not at all	minimally	moderately	significantly	fully	n/a	
G3.		are in place to p aed approaches	promote cross-s s.	system training	on trauma	and	
	not at all	minimally	moderately	significantly	fully	n/a	
G4.	. The agency develops strategies that promote cross-system training and collaboration with non-traditional, culturally-specific, community-based, and/or grass-roots organizations.						
	not at all	minimally	moderately	significantly	fully	n/a	
G5.	Cross-system all participants	0 0	inized in a neutr	ral location that	t is comfort	able to	
	not at all	minimally	moderately	significantly	fully	n/a	
Comments (examples of successes and/or opportunities for change):							

## H. Screening, Assessment, and Treatment Services

H1. Timely and universal (is administered to everyone) trauma-informed screening and assessment is available and accessible to children, youth, and individuals being served.

	not at all	minimally	moderately	significantly	fully	n/a		
H2.	The screening/assessment tools used by the agency include/acknowledg historical trauma.							
	not at all	minimally	moderately	significantly	fully	n/a		
Н3.			to provide or m ed interventions	-		dividuals		
	not at all	minimally	moderately	significantly	fully	n/a		
H4.	An individual's safety plans. not at all	own definition	of emotional sa moderately	afety is include	d in treatm fully	ent and n/a		
H5.	Staff members incorporate motivational interviewing techniques with children, youth, and individuals being served (e.g., open-ended questions, reflective listening).							
	not at all	minimally	moderately	significantly	fully	n/a		
H6.	A continuum of trauma-informed interventions is available within the agency to support children, youth, and individuals being served.							

not at all	minimally	moderately	significantly	fully	n/a

## I. Training and Workforce Development

11. The agency provides orientation for new staff and volunteers on their job role and tasks.

	not at all	minimally	moderately	significantly	fully	n/a
12.	support staff, I	housekeeping, d strategies for	staff (direct care and maintenan trauma-informe	ce) receives ba	sic training	on trauma,
	not at all	minimally	moderately	significantly	fully	n/a
I <u>3</u> .	0	•	rovided to supe nd supervision in moderately		rporating fully	n/a
l4.	0 7 1	ipports strateg	g and education ies to address v			vicarious
	not at all	minimally	moderately	significantly	fully	n/a
15.	0 71	rovides training ity and respons	g and educatior siveness.	for staff and vo	olunteers th	nat enhance
	not at all	minimally	moderately	significantly	fully	n/a
Com	ments (exampl	es of successe	es and/or oppoi	tunities for cha	nge):	

## J. Evaluation and Quality Assurance

J1. There is a routine practice in place of measuring the agency's performance in being trauma-informed (e.g., an organizational assessment).



Appendix A

# **Action Planning Tool**

Target Completion Date			
Person Responsible Ta			
Activities for Improvement			
Current Rating			
Criteria		 	
Domain			

#### Appendix B: System-Specific Resources

#### Advocacy

Building Cultures of Care: A Guide for Sexual Assault Services Programs (Sexual Assault Demonstration Initiative) https://www.nsvrc.org/sites/default/files/2017-10/publications\_nsvrc\_buildingcultures-of-care.pdf

Tools for Transformation: Becoming Accessible, Culturally Responsive, and Trauma Informed Organizations http://www.nationalcenterdvtraumamh.org/wp-content/uploads/2018/04/ NCDVTMH\_2018\_ToolsforTransformation\_WarshawTinnonCave.pdf

#### **Behavioral Health**

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach (Substance Abuse and Mental Health Services Administration) https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA\_Trauma.pdf

Trauma-Informed Care in Behavioral Health Services (Substance Abuse and Mental Health Services Administration) https://www.ncbi.nlm.nih.gov/books/NBK207201/

#### **Child Welfare**

Child Welfare Trauma Training Toolkit (National Child Traumatic Stress Network) https://www.nctsn.org/resources/child-welfare-trauma-training-toolkit

Trauma-Informed Child Welfare Practice Toolkit (Chadwick Trauma-Informed Systems Dissemination and Implementation Project) https://ctisp.wordpress.com/trauma-informed-child-welfare-practice-toolkit/

#### Courts/Justice

Resource Guidelines: Improving Court Practice in Child Abuse and Neglect Cases https://www.ncjfcj.org/publications/enhanced-resource-guidelines/

Preparing for a Trauma Consultation in Your Juvenile and Family Court https://www.ncjfcj.org/wp-content/uploads/2015/03/NCJFCJ\_Trauma\_ Manual\_04.03.15.pdf

#### Appendix B: System-Specific Resources

#### Education

Child Trauma Toolkit for Educators (National Child Traumatic Stress Network) https://www.nctsn.org/resources/child-trauma-toolkit-educators

Issue Brief: Trauma-Informed Schools (Family & Children's Trust Fund of Virginia) http://www.fact.virginia.gov/wp-content/uploads/2017/04/FACT-ISSUE-BRIEF-TRAUMA-INFORMED-SCHOOLS-final1.pdf

#### **Health Care**

Trauma Informed Care in Child Health Systems (American Academy of Pediatrics) https://publications.aap.org/pediatrics/article/148/2/e2021052579/179781/Trauma-Informed-Care-in-Child-Health-Systems

Issue Brief: Key Ingredients for Successful Trauma-Informed Care Implementation (Center for Health Care Strategies) http://www.chcs.org/media/ATC\_whitepaper\_040616.pdf

#### Housing

Trauma-Informed Organizational Toolkit for Homeless Services (National Center on Family Homelessness)

https://www.air.org/sites/default/files/downloads/report/Trauma-Informed\_Organizational\_Toolkit\_0.pdf

Issue Brief: Trauma-Informed Practices in Homeless Intervention Services (Family & Children's Trust Fund of Virginia)

http://www.fact.virginia.gov/wp-content/uploads/2017/11/FACT-ISSUE-BRIEF-TRAU-MA-INFORMED-Homeless-Intervention-FINAL.pdf

#### Juvenile Justice

Think Trauma: A Training for Staff in Juvenile Justice Residential Settings (National Child Traumatic Stress Network)

https://www.nctsn.org/resources/think-trauma-training-staff-juvenile-justice-residential-settings

A Trauma Primer for Juvenile Probation and Juvenile Detention Staff (National Council on Juvenile and Family Court Judges) https://www.ncjfcj.org/wp-content/uploads/2015/08/NCJFCJ-Trauma-Primer-Final-10.08.15.pdf

#### Appendix C: Additional Resources

A Guide to Trauma Informed Supervision https://pcar.org/sites/default/files/resource-pdfs/trauma\_informed\_supervision\_guide\_508.pdf Competency-Based Supervision for the 21st Century: Trauma-Informed Supervision https://www.lpcaga.org/assets/docs/CPCS/Trauma%20Supervision%20 Workshop%20Macon%202018%20by%20Diane%20Levy.pdf

#### Notes:

This document utilizes, adapts, and expands upon a compilation of definitions, domains and items from the Substance Abuse Mental Health Services Administration's Concept of Trauma and Guidance for a Trauma-Informed Approach (2014), Southwest Michigan Children's Trauma Assessment Center's Trauma Informed Systems Change Instrument (2010), the National Center on Family Homelessness' Trauma-Informed Organizational Self-Assessment and "Creating Cultures of Trauma-Informed Care: A Self-Assessment and Planning Protocol" and Virginia HEALS' Policy Review Tool and RFA/RFA Checklist.

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