INTRODUCTION AND BACKGROUND

Engaging in significant organizational transformation is an endeavor that is both exciting and daunting. It is a time when professionals and systems may feel vulnerable while opening themselves up to opportunities for growth and improvement.

This commitment to create trauma informed organizations began in 2017 with the formation of the Wilson Foundation’s Trauma-Informed Care Learning Collaborative. In continuation of this work into 2021, fourteen Rochester area community-based organizations came together, over the course of many months, for learning, discussion, goal setting, sharing of ideas, and celebrating successes in their journey to becoming trauma informed. There was significant knowledge gained and organizational growth to honor!

As a result, this Trauma Informed Organizations Implementation Roadmap has been developed to continue the forward momentum, supporting organizations to sustain this work while overcoming systemic barriers.
The Trauma Informed Organizations Implementation Roadmap was developed to offer options, based on degree of need, for growing and sustaining a trauma informed organization.

It is a guiding document for organizations to review their systems and implementation of best practices that create trauma informed and responsive organizations for staff and those served. This document has been organized using the 10 Domains of Trauma Informed Organizations developed by SAMHSA (Substance Abuse and Mental Health Services Administration).

While organizations will want to assess where they land in the implementation of each domain (obtaining baseline data), it’s recommended that teams identify small wins as they layout long-term goals. In which domain(s) do strengths exist and can be built upon? These are your wins! Identify opportunities for short term goals to be set for maximum success. These are also wins!

Additionally, best practice standards and resources have been identified for each domain including TIPS which are embedded throughout to support the successful change management processes within your organization. As teams develop goals and objectives, adding resources or best practices to the holding places provided is encouraged. As knowledge and expertise grows, so too will this roadmap! It is important to return to this roadmap for monitoring progress, maintaining course, or developing corrective actions for true system change.

PLEASE KEEP IN MIND…It’s not expected to occur overnight nor should it.

This journey to becoming a trauma informed organization takes time.

This work isn’t linear. It can occur in one domain at a time or across several at once.

Slow and steady growth or change is achievable and sustainable.

TIPS - #1

MAKE THE WORK MANAGEABLE.
Articulating a PDSA (Plan, Do, Study, Act) or similar structure will help foster documentation, accountability, and progress monitoring. This will naturally support teams in seeing that they are making progress and gains even when the work becomes more subtle and nuanced. If a barrier emerges that interrupts progress, then address this with an action plan of its own, as an early and essential step. Templates: PDSA / PDSA

TIPS - #2

SLOW & STEADY WINS THE RACE!
Change is dysregulating and stressful even when conducted for all the right reasons. Working slowly but steadily to engage champions, manage feelings of stress and concern from broader staff, while also continuing to message the hopeful target of the change is critical. Teams may feel pressure to just “have leadership tell people to…” however, in the long-term when staff understand the “why” of the requirement or can be engaged to own parts of the process, more lasting results occur.
## Glossary of Common Language

### Trauma
An overwhelming event or events that contribute to a person becoming helpless, powerless, and creating a threat of harm and/or loss.

### Trauma Informed Care
Incorporates three key elements: (1) realizing the prevalence of trauma; (2) recognizing how trauma affects all individuals involved with the program, organization, or system, including its own workforce; and (3) responding by putting this knowledge into practice by implementing services that are trauma informed, training staff, and responding to participants with a trauma sensitive approach.

### Re-traumatization
A situation, attitude, or environment that replicates the events or dynamics of the original trauma and triggers the overwhelming feelings and reactions associated with them. Usually, system based.

### Vicarious Trauma (VT)
a process of cognitive change in sense of self and world, resulting from empathetic engagement with person who has a trauma experience or trauma background. This could be providers, mentors, peer support, family, friends, etc.

### Secondary Traumatic Stress
The behavior and emotions resulting from knowing about a traumatic event experienced by a significant other or by supporting an individual who has experienced trauma.

### Activated
Describes when the stress response system has been agitated by an environmental or human engagement.

### Parallel Process
When two or more systems (whether these consist of individuals, groups, or organizations) that have significant relationships with one another develop similar affects, cognition, and behaviors—both positive and negative.

### Racial Trauma or Race-Based Traumatic Stress (RBTS)
Refers to the mental and emotional injury caused by encounters with racial bias and ethnic discrimination, racism, and hate crimes.
The Importance of Applying a Racial Equity Lens...

Definition of Racial Equity

The process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color.

Trauma is at the heart of diversity, equity, and inclusion work because repeated acts of marginalization, oppression, and racism are wounds that overwhelms one’s ability to cope.¹

Racism is trauma and should be treated as such in any comprehensive trauma-informed care framework. Trauma-informed care requires a nuanced understanding of not only how trauma impacts the lives of our clients, but the root causes behind that trauma.²

Trauma Informed Organizations can’t take place isolated from the important work of racial equity. In fact, the two are deeply intertwined and, when done well, create spaces of opportunities and healthy equitable outcomes for everyone. Before going further, it’s critical that your team take time to explore resources. (See below)

Perhaps choose one to review and discuss as team. How will this shape your work? How will you remember to keep coming back to embed racial equity alongside trauma informed change?

Keep in mind, this is a journey and each person in your organization has their own place on the path. It may be uncomfortable and difficult work, and you’ll find its worth it.

Resources...

- TIC and Equity: What’s the Relationship?
- Exploring the Intersection of Racial Justice and Trauma Informed Care
- Intersection of Trauma Informed Care and Diversity, Equity and Inclusion
- How is trauma connected to diversity, equity, and inclusion work?
- Incorporating Racial Equity into Trauma-Informed Care (Center for Health Care Strategies)
- Racial Trauma (Mental Health America – MHA)
- Next Steps: Applying a Trauma-Informed Model to Create an Anti-Racist Organizational Culture (NIH)
- Addressing Race and Trauma in the Classroom: A Resource for Educators
- Being Anti-Racist Is Central to Trauma-informed Care: Principles of an Anti-Racist, Trauma-informed Organization (NCTSN)
GETTING STARTED…

Developing Your TEAM…

Trauma-informed care is most effective when it is supported by a committed team. The first step is to build a team of trauma-informed champions to lead and monitor the implementation of this work within your organization. Collaboration and input across roles and responsibilities is crucial for the integration of this work at an organizational level. Depending on your organization, it may also be appropriate to consider participation of community partners. Teams are encouraged to approach this work using a strength-based, informed, and encouraging lens.

Considerations when forming your TEAM…

Consider who within your organization is fit to lead and organize this team based on their roles, responsibilities, training, and fluency in trauma-informed approaches.

The team leader should be in a position of authority to make system wide changes within the organization. Depending on the size of your organization, it may be helpful to have more than one team leader so that the responsibility to make change happen does not fall on one individual.

The team should represent employees across departments within your organization, to ensure that trauma-informed values and practices are consistent across areas of practice. (i.e., employees from direct services, management, human resources, finance, marketing, etc.) Representation may overlap by practice or department based on the size of your organization.

Depending on the size of the organization, the team should not exceed 10 individuals. An advisory group and additional sub-committees for targeted work might be a viable alternative for larger organizations.

Participation should be voluntary with the opportunity to withdraw at any time.

As you gather your team, consider structural inequities and power dynamics that may influence the makeup of who has a seat at the table, whose table it is, and who is setting the agenda.

Consider a name for your team that reflects the groups' values and commitment like the "trauma-informed change team."

Team members should be mindful of the stages of change and that members may be at different stages at any given time.

TIPS - #3

ESTABLISH WORKING AGREEMENTS…

Even groups that work together regularly can benefit from specific agreements to support this process. This action can be used to normalize vulnerability that can emerge, and help participants think about what they need to foster trust in this process which might include:

❖ Dismantling historical practices
❖ Building consistency by extending or enhancing pockets of strengths
❖ Addressing unmet needs and areas for growth
Developing Your Team…

Stages of Change

**TEAM MEMBERS** should be mindful of the stages of change and that members may be at different stages at any given time.

- **PRE-CONTEMPLATION**
  No intention of changing behavior.

- **CONTEMPLATION**
  Awareness of need to change but no commitment to action.

- **ACTION**
  Considerable commitment of time and energy to mobilize change.

- **MAINTENANCE**
  Attaining gains and preventing the return to the status quo.

- **RELAPSE**
  Falling into old patterns of behavior.

- **PREPARATION**
  Combines awareness, intention, and behaviors.

*IDEALLY, the **TEAM LEADER(s)** should be in the **ACTION/MAINTENANCE** phase of change.*
## Developing Your Team...

<table>
<thead>
<tr>
<th>ACTIVITIES</th>
<th>CONSIDERATIONS &amp; RESOURCES</th>
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<tbody>
<tr>
<td><strong>DEVELOP AGREEMENTS</strong></td>
<td>• Guidelines for Creating a Safe Space for Discussion</td>
</tr>
<tr>
<td>...that will help guide the culture, expectations, and commitments of the group to mirror the principles of trauma-informed care.</td>
<td>• Trauma Informed Care Team Meeting Guidelines</td>
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<tr>
<td><strong>SET CLEAR EXPECTATIONS</strong></td>
<td>• Determine frequency and length of team meetings.</td>
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<tr>
<td>...for the group.</td>
<td>• Determine who will be responsible for setting the agenda, taking meeting notes, and following up with the team on action items.</td>
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<td></td>
<td>• Hosting a Meeting Using the Principles of Trauma Informed Care</td>
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<tr>
<td><strong>DEFINE GOALS</strong></td>
<td>• Choose 1-3 specific activities that the team would like to start, continue, or stop at a given time.</td>
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<tr>
<td>...that translate the group’s vision into concrete steps and measure progress towards goals.</td>
<td>• Goals should be realistic, timely, and achievable.</td>
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<td></td>
<td>• Outline activities and responsible personnel.</td>
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<td>• Identify areas of support needed from the team.</td>
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<td></td>
<td>• Goal Prioritization Matrix</td>
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<td></td>
<td>• Trauma-Informed Care – Domain Specific Action Plan Template</td>
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<tr>
<td><strong>REVISIT AND READJUST</strong></td>
<td>• Remember that transformation efforts are not always linear. There may be set-backs and shifts in priorities along the way.</td>
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<tr>
<td>...Agreements and Goals as needed.</td>
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### Tips - #4

**EXPLORE REACTIONS. SET PRIORITIES.**

After gathering baseline information, create time and space to process the results. This may be a separate meeting. Providing some structured questions can elicit productive dialogue. These may include both process questions and action questions.

- There are no wrong places to begin.
- Every step forward is a step forward.

**Sample Questions for Process:**
- What did we identify as a Medium or High Priority?
- Of these, are there any that precede the other?
- Is there any opportunity for a quick “win” to help us practice and move something forward easily?
- Are there any items on this list that stand out as critical to address with greater urgency?

**Work towards consensus on setting a priority**

### Tips - #5

**EXPLORE REACTIONS. SET PRIORITIES.**

After gathering baseline information, create time and space to process the results. This may be a separate meeting. Using some structured questions can elicit productive dialogue. These may include both process questions and action questions.

**Sample Questions for Process:**
- What was this like for you to review results?
- What stood out to you?
- What do you see as the organization’s biggest strength(s)?
SAMHSA’S TEN IMPLEMENTATION DOMAINS
TRAUMA-RESPONSIVE PRACTICES IN ORGANIZATIONS

Developing a trauma-informed approach requires change at multiples levels of an organization and systematic alignment with the ten key principles described below. The guidance provided here in conjunction with the key principles, provides a starting point for developing an organizational trauma-informed approach.

1. GOVERNANCE & LEADERSHIP
The leadership and governance of the organization support and invest in implementing and sustaining a trauma-informed approach. There is an identified point of responsibility within the organization to lead and oversee this work and peer voices are included.

2. POLICY
There are written policies and protocols establishing a trauma-informed approach as an essential part of the organizational mission. Organizational procedures and cross-agency protocols reflect trauma-informed principles.

3. PHYSICAL ENVIRONMENT OF THE ORGANIZATION
The organization ensures that the physical environment promotes a sense of safety.

4. ENGAGEMENT & INVOLVEMENT
People in recovery, trauma survivors, consumers, and family members receiving services have significant involvement, voice, and meaningful choice at all levels and in all areas of organizational functioning (e.g., program design, implementation, service delivery, quality assurance, cultural competence, access to trauma-informed peer support, workforce development, and evaluation).

5. CROSS-SECTOR COLLABORATION
Collaboration across sectors is built on a shared understanding of trauma and principles of a trauma-informed approach. While a trauma focus is not the stated mission of different service sectors, understanding how trauma impacts those served and integrating this knowledge across service sectors is critical.

6. SCREENING, ASSESSMENT, & TREATMENT SERVICES
Interventions are based on the best available empirical evidence and science, are culturally appropriate, and reflect principles of a trauma-informed approach. Trauma screening and assessment are an essential part of the work. Trauma-specific interventions are acceptable, effective, and available for individuals and families seeking services. When trauma-specific services are not available within the organization, there is a trusted, effective referral system in place that facilitates connecting individuals with appropriate trauma treatment.

7. TRAINING & WORKFORCE DEVELOPMENT
Continuous training on trauma, peer support, and how to respond to trauma is available for all staff. A human resource system incorporates trauma-informed principles in hiring, supervision, and staff evaluation; procedures are in place to support staff with trauma histories and/or those experiencing significant secondary traumatic stress from exposure to highly stressful material.

8. PROGRESS MONITORING & QUALITY ASSURANCE
There is ongoing assessment, tracking, and monitoring of trauma-informed principles and effective use of evidence-based and trauma-specific screening, assessments, and treatment.

9. FINANCING
Financing structures are designed to support a trauma-informed approach which includes resources for staff training, development of appropriate facilities, establishment of peer support, and evidence-supported trauma screening, assessment, services, and interventions.

10. EVALUATION
Measures and evaluation designs used to evaluate service or program implementation and effectiveness reflect an understanding of trauma and appropriate trauma-research instruments.
## Domain 1: Governance & Leadership

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<th>Best Practice Standards</th>
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| Organizational leadership is invested in implementing and sustaining a trauma informed approach. | - Leadership communicates its support and guidance for implementing trauma-informed care.  
- The agency’s mission articulates policies and procedures that center a commitment to providing trauma-informed services and supports.  
- Leadership centers the needs of employees and people using agency services with lived experiences of trauma. | - SAMHSA’s Concept of Trauma and Guidance for a Trauma Informed Approach (pgs. 12 – 16)  
- Tips for Talking with Leadership About the Need for Trauma Informed Care  
- TIC Organization Guidance |

## Domain 2: Policy

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| Written policies and protocols are in place that establish a trauma-informed approach as essential to the organizational mission | - Policies and procedures written with the recognition of the pervasiveness of trauma in the lives of employees and people using services.  
- Policies and procedures are written to reflect a commitment to reducing re-traumatization and promoting well-being.  
- Agency staffing policies reflect a commitment to staff training on providing culturally relevant and trauma-informed services through onboarding and in-service training  
- Human resource policies attend to the impact of working with people who have experienced trauma. | - Guide to Reviewing Existing Policies  
- Tips for Reviewing Your Employee Manual or Handbook with a Diversity, Equity and Inclusion Lens  
- CFC Trauma Informed/Racial Equity Policy Review Preliminary Checklist  
- Human Resources Practices to Support Trauma Informed Care in Your Organization  
- Principles of Trauma Informed Care |
## Domain 3: Physical Environment

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| Physical environments of an organization promote a sense of safety and collaboration | - The physical environment promotes a sense of safety for clients and staff  
- Identifying and replacing aspects of the physical environment that may be re-traumatizing to clients | - Identifying Hotspots for Re-Traumatization in the Workplace  
- Agency Environmental Components for Trauma Informed Care  
- Creating Safe Environments for Employees and Clients |

### Office Spaces

*Images collected from a Monroe County Resilience Learning Collaborative participating school*
Domain 4: Engagement & Involvement

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| Groups, including people in recovery, trauma survivors, and people and family members receiving services, have significant involvement, voice, and meaningful choice at all levels and in all areas of organizational functioning. | - People with lived experiences have the opportunity to provide feedback to the organization on quality improvement  
- Transparency and trust among staff is promoted  
- Strategies are used to reduce the sense of power differentials among staff and clients  
- Staff are actively involved in identifying strategies that contribute to feeling empowered | - [Community Resilience Cookbook](#)  
- [Encouraging Public Work](#)  
- [Enabling Client/Community Decision Making](#)  
- [Gathering Input & Data](#)  
- [Discussing & Connecting](#)  
- Disseminating Information | Model adapted from: [Organizing Engagement: Building Blocks of Engagement](#) |

Domain 5: Cross Sector Collaboration

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| Collaboration occurs across sectors and is built on the shared understanding of trauma and principles of a trauma informed approach. | - Systems of communication are in place with other partner agencies for making trauma-informed decisions  
- Collaborative partners are trauma-informed  
- Mechanisms are in place to promote cross-sector training on trauma-informed approaches | [Collaborative Effectiveness Assessment Activity](#) |

Domain 6: Screening, Assessment, Treatment Services

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| Practitioners are trained in the use of assessments and interventions that are evidence based, culturally appropriate, and reflect principles of a trauma-informed approach. | - Treatment or treatment programs are specifically designed to treat individuals who have experienced trauma  
- All clinical staff have on-going training in assessments & interventions that support individuals’ recovery from trauma  
- Staff develop and maintain respect, connection, and hope for individuals  
- Staff work collaboratively and, in a person-directed empowering manner with individuals | - [Standards of Practice for Trauma Informed Care (pp.7-8)](#)  
- [Trauma Specific Services: A Resource for Implementation & Use](#) |
## Domain 7: Training & Workforce Development

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| On-going training for current staff, hiring practices, supervision, and evaluation incorporate trauma-informed principles. | o All staff have foundational knowledge of trauma and its impact on clients served and staff including an understanding of individual and organizational wellness strategies  
  o Hiring and on-boarding include applicant prior knowledge of TIC practices and TIC content embedded in orientation processes  
  o All staff have regular supervision through a TIC lens including discussion on staff wellness | o Standards of Practice for Trauma Informed Care (pg.5-6)  
  o Human Resources: Practices to Support TIC in Your Organization  
  o Qualities of Supervision  
  o TIC Organization Guidance |

## Domain 8: Progress Monitoring & Quality Assurance

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| Consistent assessment, tracking, and monitoring of trauma-informed principles occurs | o A TIC Champions workgroup meets regularly (Who? Structure?)  
  o TIC Implementation baseline data has been gathered from all stakeholders, communicated to all stakeholders and priorities/goals established  
  o Progress toward goals is assessed at regular intervals | o Standards of Practice for Trauma Informed Care (pg. 9)  
  o Trauma Responsive Understanding Self-Assessment Tool (TRUST)  
  o Trauma Informed Care Screening Tool |

## Domain 9: Financing

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| Financing structures are designed to support a trauma-informed approach | o Include funding support for ongoing training on trauma and trauma-informed approaches for leadership and staff development  
  o Consider funding for cross-sector training on trauma and trauma-informed approaches  
  o Include funding to support a safe physical environment | o Standards of Practice for Trauma Informed Care |
## Domain 10: Evaluation

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| Evaluating implementation and effectiveness of a trauma informed approach considers an understanding of trauma and incorporates trauma aligned measures | - The organization conducts a trauma-informed organizational assessment that shows their level of trauma-informed approach  
- Develop and implement processes to solicit feedback from people who use services and ensure anonymity and confidentiality  
- Progress toward goals is regularly assessed and communicated to all stakeholders. | - Standards of Practice for Trauma Informed Care  
- Trauma Responsive Understanding Self-Assessment Tool (TRUST)  
- Trauma Informed Care Screening Tool |

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### TIPS - #6

**FAILURE IS LEARNING**

Not all plans will work but all will yield information to help articulate a more informed next step. As a team, it can be helpful to review the how or why of successes while also helping to illuminate ideas about what can be done differently. Asking curious questions can help this process while also helping team members develop insight on where change needs to happen.

### TIPS - #7

**CELEBRATE SUCCESS**

Create regular intervals to acknowledge and uplift teams’ successes. Teams can find ways to tell their story (all-staff meeting, Board, or cabinet presentation, etc.). Targeted feedback along the way is important and complements an “end of year” or “quarterly review process”. Teams are generally doing hard work in addition to their regular full-time roles so routine acknowledgement of their efforts contributes to sustaining the effort.
OTHER CONSIDERATIONS...

Many organizations have experienced staff turnover and shortages that have been exacerbated by COVID-19. This can make it difficult to maintain organizational TIC growth. Information gets lost, one or two people hold the complete knowledge and they leave... sound familiar?!

Here are some considerations for your team to think about before your efforts hit these roadblocks...

STORAGE
Decide as a team where the work will be stored.
*Will you create a Microsoft Teams Channel? A Google Folder?*
Make sure it's a place where you can organize by domains or goals or timeframe, whatever system works best for your organization. Be sure more than one person is an “owner” and that all team members have access.

COMMUNICATION
Despite turnover, when information is well communicated throughout an organization, one person is not the keeper of the knowledge. Everyone is! Determine how the work of your TIC team is communicated to everyone.
- What parts of the work?
- When?
- How often?
- Communication method(s)?
- Whose role is it?

ROTATE TEAM ROLES
We all have strengths and tend to stick to them, but when we take turns in different roles, HOW things are done isn’t lost when people leave an organization. Make sure everyone has a chance to fill different jobs on the team. Perhaps offer a time frame: “Please volunteer to be a part of this team for at least one year.” OR “We’ll all have a chance to champion different pieces of this work every few months”