

Health Home Learning Collaborative ~ 2023

**Trauma Informed Care
at Orchard Place**



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Orchard Place PACE Center**



Trauma Informed Care



Objectives:

Trauma Informed Care (TIC) is an organizational structure and treatment framework. Orchard Place embraces a Trauma-Informed approach to every service provided. TIC emphasizes physical, psychological, and emotional safety for families, children, and providers. TIC aims to provide policies, procedures, and principles that are welcoming and safe for everyone involved.



Trauma Informed Care



October 1, 2010 – Trauma Informed Care Project launched

Website: www.traumainformedcareproject.org



Two Goals:

- Educate the larger system – policies/practices/organizational structures
- Educate and train those who work within all of the systems

Trauma Informed Care Conference – June 6 & 7, 2023 Holiday Inn ~ Airport



Trauma Informed Care



Trauma Informed Care Conference –

Annual since 2011



Over the years, speakers include Dr. Sandra Bloom, Dr. Robert Anda, Dr. Robert Macy, Dr. Bruce Perry, Dr. Tina Payne-Bryson, J. Stuart Ablon... to name a few...

Dr. Sandra Bloom came and taught us about “The Sanctuary Model” in 2014.





The Sanctuary Model

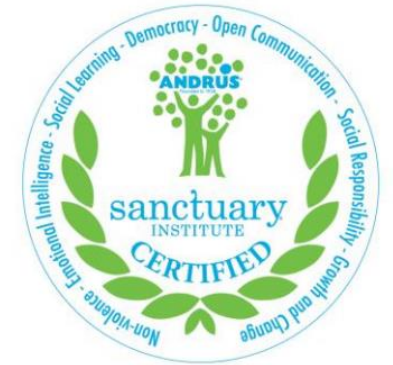


The Sanctuary Model is an organizational and treatment intervention based on the principles of trauma theory.

Sanctuary provides guiding principles as well as tools

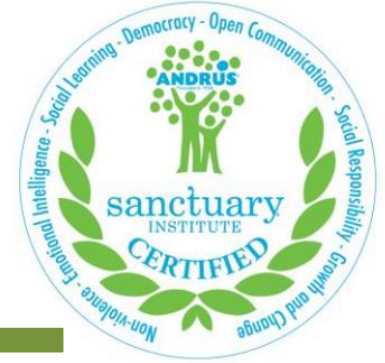
Trauma, Adversity, and Chronic Stress influence individuals as well as the whole organization

This model has a client/patient AND organization/employee focus... fine lines... vicarious trauma... burnout & compassion satisfaction.





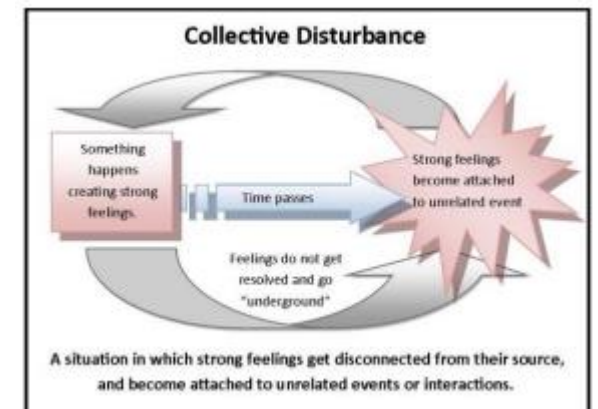
The Sanctuary Model



Sometimes, organizations who help those who have experienced trauma, become “*trauma-organized.*”

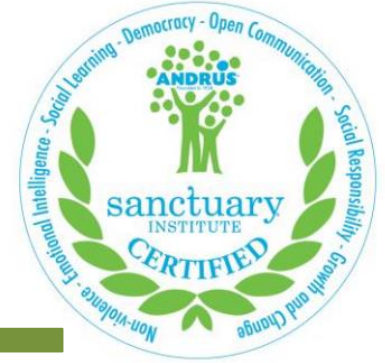


The Sanctuary Model helps us mitigate the harmful effects trauma may have on the individuals who work in the organization, and the organization itself.





The Sanctuary Model



Commitment to Non-Violence: Living safely outside (physical), inside (emotional), with others (social), and doing the right thing (moral)

Commitment to Emotional Intelligence: Managing our feelings so that we don't hurt ourselves or others

Commitment to Social Learning: Respecting and sharing the ideas of our peers and teams

Commitment to Democracy: Shared decision making among clients and staff

Commitment to Open Communication: Saying what we mean, but not being mean when we say it

Commitment to Social Responsibility: Together we accomplish more; everyone makes a contribution to the organizational culture

Commitment to Growth and Change: Creating hope for our clients and ourselves





The Sanctuary Model



In this field, Self Care isn't just a "good idea"

It's a requirement...

...we need our staff to stay healthy – employees are the biggest and most important investment – nonprofits spend the majority of their budgets on staffing.



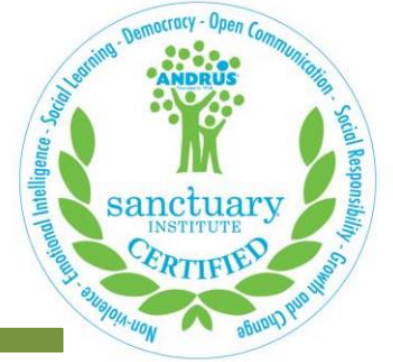
Pro
QOL

Professional Quality of Life





The Sanctuary Model



Some of the various tools include ...

The Community Meeting

SELF in Treatment Planning

The SELF Model

Red Flag Reviews

Team Meetings

The Reenactment Triangle

The Collective Disturbance

Parallel Process

Safety Plans

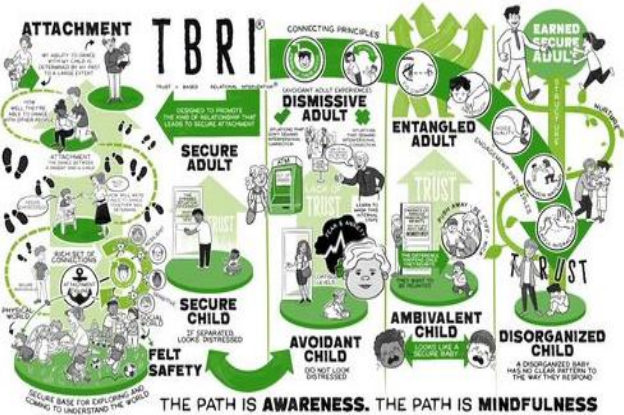
Self Care Plans

Safety, Guidance, and Regulation Plan



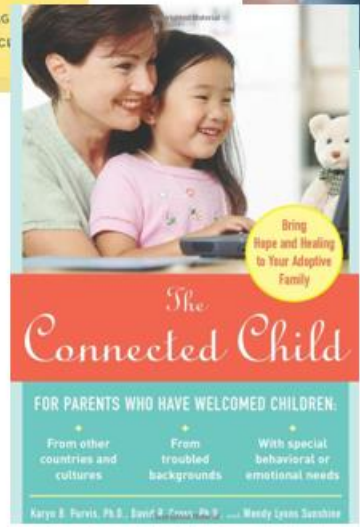
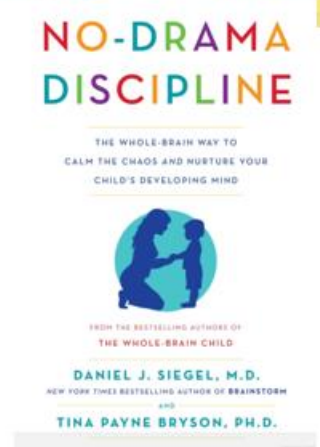
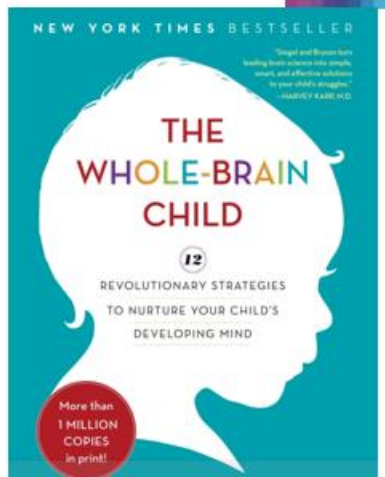
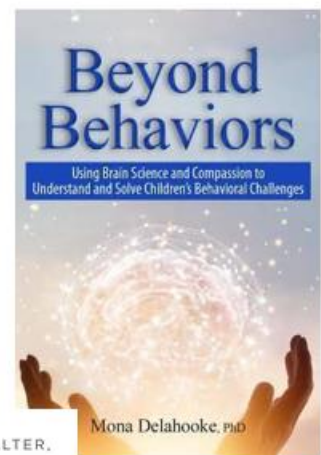
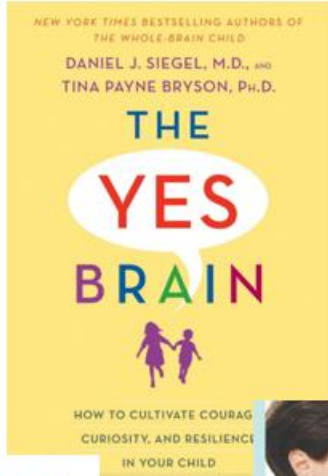
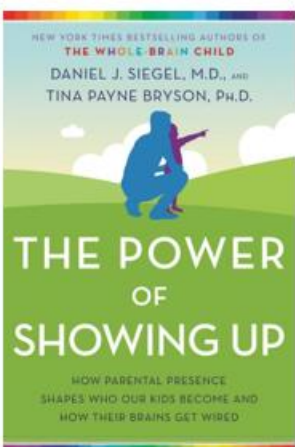
Who is it for and who should use it?

TBRI® is designed to meet the complex needs of children who have experienced adversity, early harm, toxic stress, and/or trauma. Because of their histories, it is often difficult for these children to trust the loving adults in their lives, which often results in perplexing behaviors. TBRI® offers practical tools for parents, caregivers, teachers, or anyone who works with children, to see the “whole child” in their care and help that child reach his highest potential.



Why use it?

Because of their histories, children who have experienced trauma have changes in their bodies, brains, behaviors, and belief systems. While a variety of parenting strategies may be successful in typical circumstances, children with histories of harm need caregiving that meets their unique needs and addresses the whole child. That said, we've found that *any* child benefits from a nurturing, trusting relationship with a safe adult.





TRUST-BASED
RELATIONAL
INTERVENTION®

TBRI® Connecting Principles

Mindfulness Strategies
Engagement Strategies

TBRI® Empowering Principles

Physiological Strategies
Ecological Strategies

TBRI® Correcting Principles

Proactive Strategies
Responsive Strategies

All employees participate in two full day trainings at the start of their employment – all employees need to have a consistent caregiving plan.



Connection... understanding what happened... to the kid... and to me...



■ **Mindfulness Principle**

- *Look at our own past. What influences my reactions/responses? (we all have them)*
- *What is my attachment type? What is my adult relationship style?*
- *Where did I get my caregiving style from? Who taught me how to take care of others?*



...keeping in mind, experiences does impact the brain... even if not in the conscious mind.

■ **Define trauma**

- *Big T, Little T ~ even elements of culture*
- *An event that happened that later led to a change in our behavior could be considered a trauma.*
- *Epigenetics*
- *Historical Trauma*



TBRI® Principles

Proactive Engagement and Correcting Strategies

- Playful Engagement
- Warm Eye Contact
- Voice Quality (Tone, Volume, and Cadence)
- Behavior Matching and Proximity
- Offering Choices
- Suggesting and/or negotiating client requested Compromises
- Scripts “No Hurts” “Use Your Words” “Stick Together” “Ask Permission”
- Setting the Bar – expectations based on child’s age and ability level
- Using the Appropriate Level of Response – 1) Playful Engagement
2) Structured Engagement 3) Calming Engagement 4) Protective Engagement

The use of these strategies is part of an employees performance evaluation – these are not just “best practice,” these items are expectations of one’s employment.



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RELATIONAL
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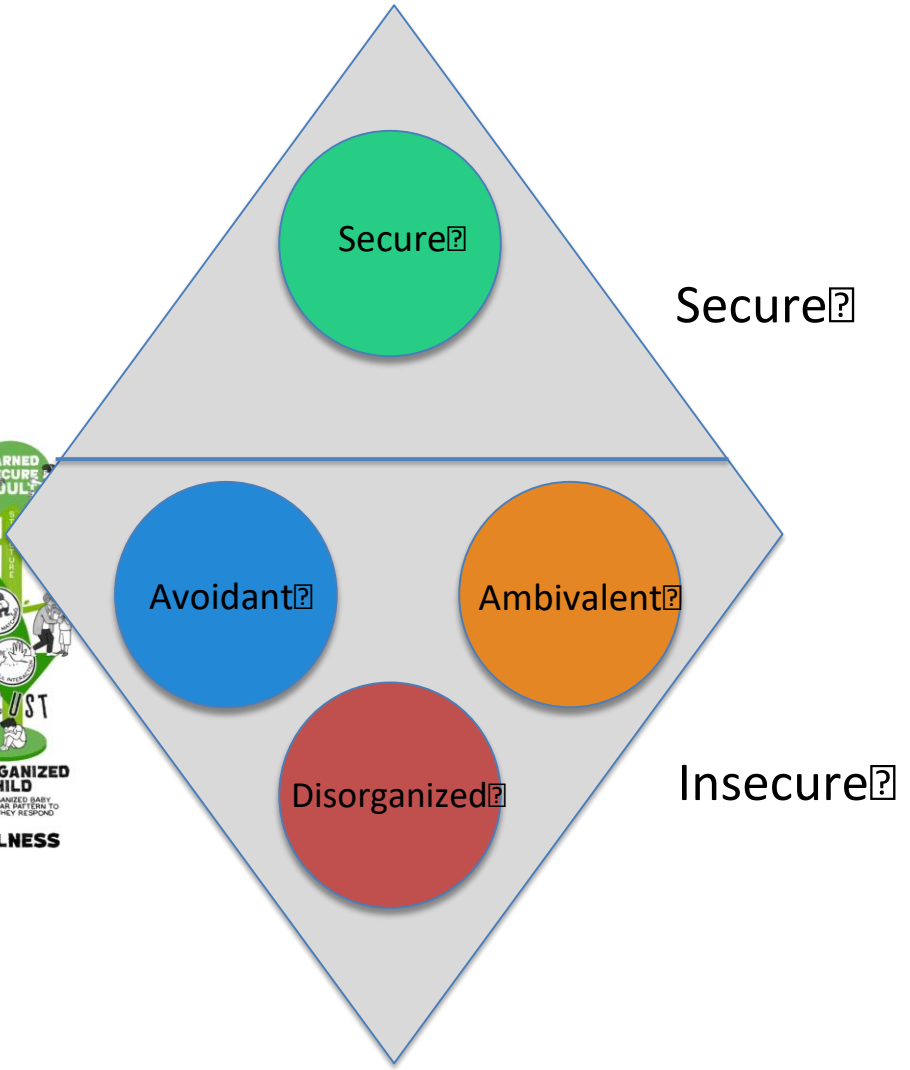
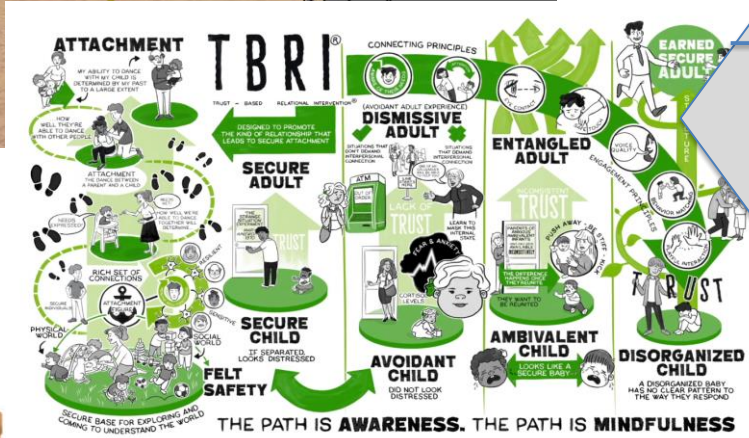
TBRI® Principles

Proactive Empowering Strategies

- Assessing and Addressing Physical / Medical Needs
(hydration, blood glucose)
- Assessing and Addressing Sensory Needs
(sensory seeking, sensory defensive)
(Vestibular, Proprioceptive, Tactile)
- Regulation, regulation, regulation...



Attachment Theory and TBRI

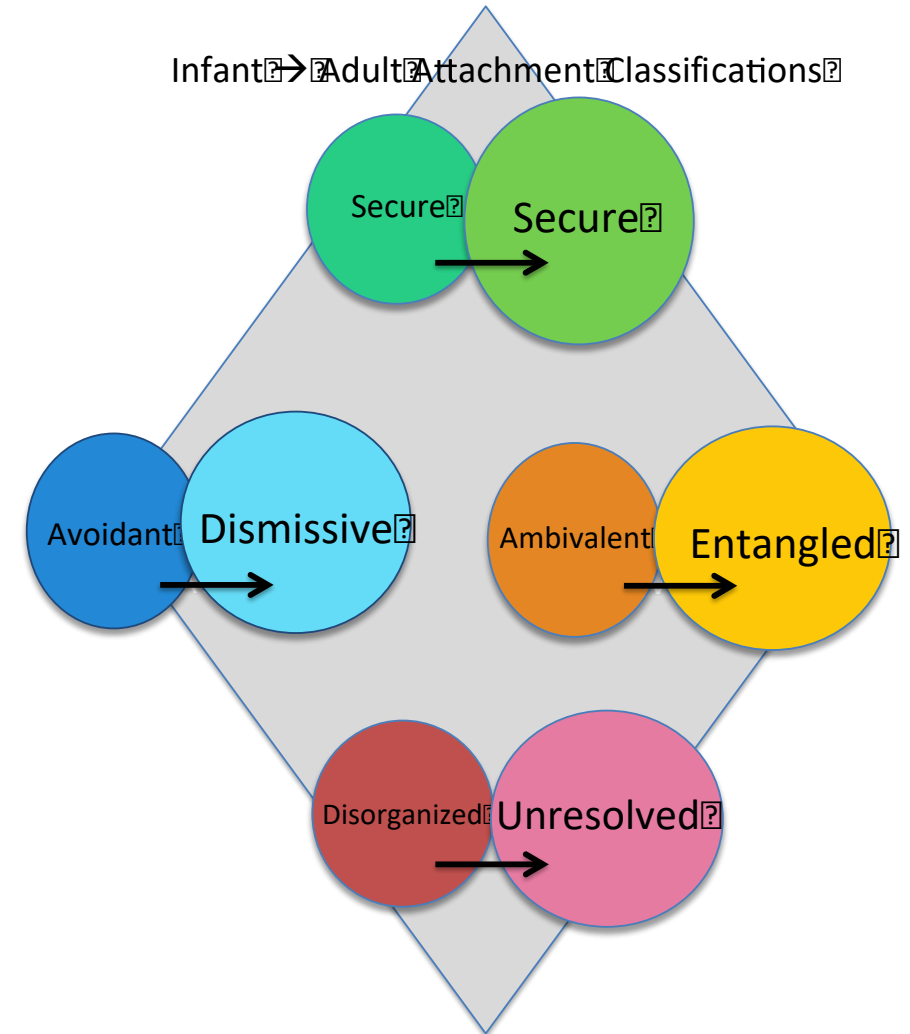


Adult Attachment = Adult Relationship = Adult Caregiving

Infant Attachment Type → Adult Relationship Type

→ Adult Caregiving Style

- *Caregiver's own history heavily influences type of care given to child*
- *Without awareness, attachment style at 12m carries throughout life*



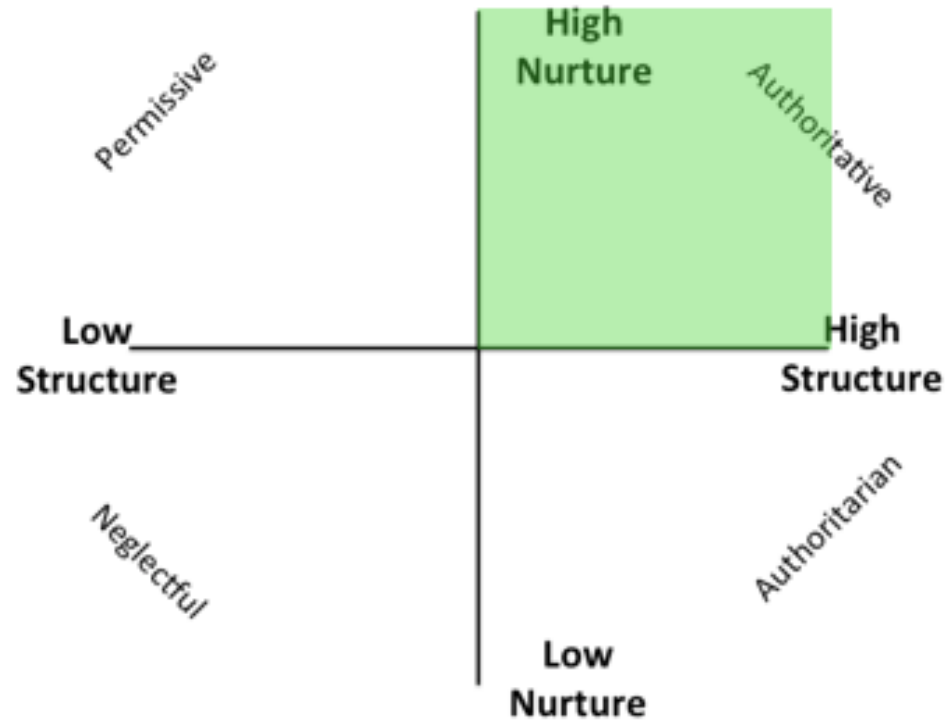


Mindful Caregiving

- **Noticing child's cues allows you to be *proactive***
 - *This is called being attuned*
- **Noticing your own triggers allows you to respond rather than react.**
- **Considering all kinds of other things that may be contributing to my child's behavior** (*rather than only willful disobedience*).
- **Becoming the detective:**
 - * *Figuring out the need → Meet the need (coach not warden)*

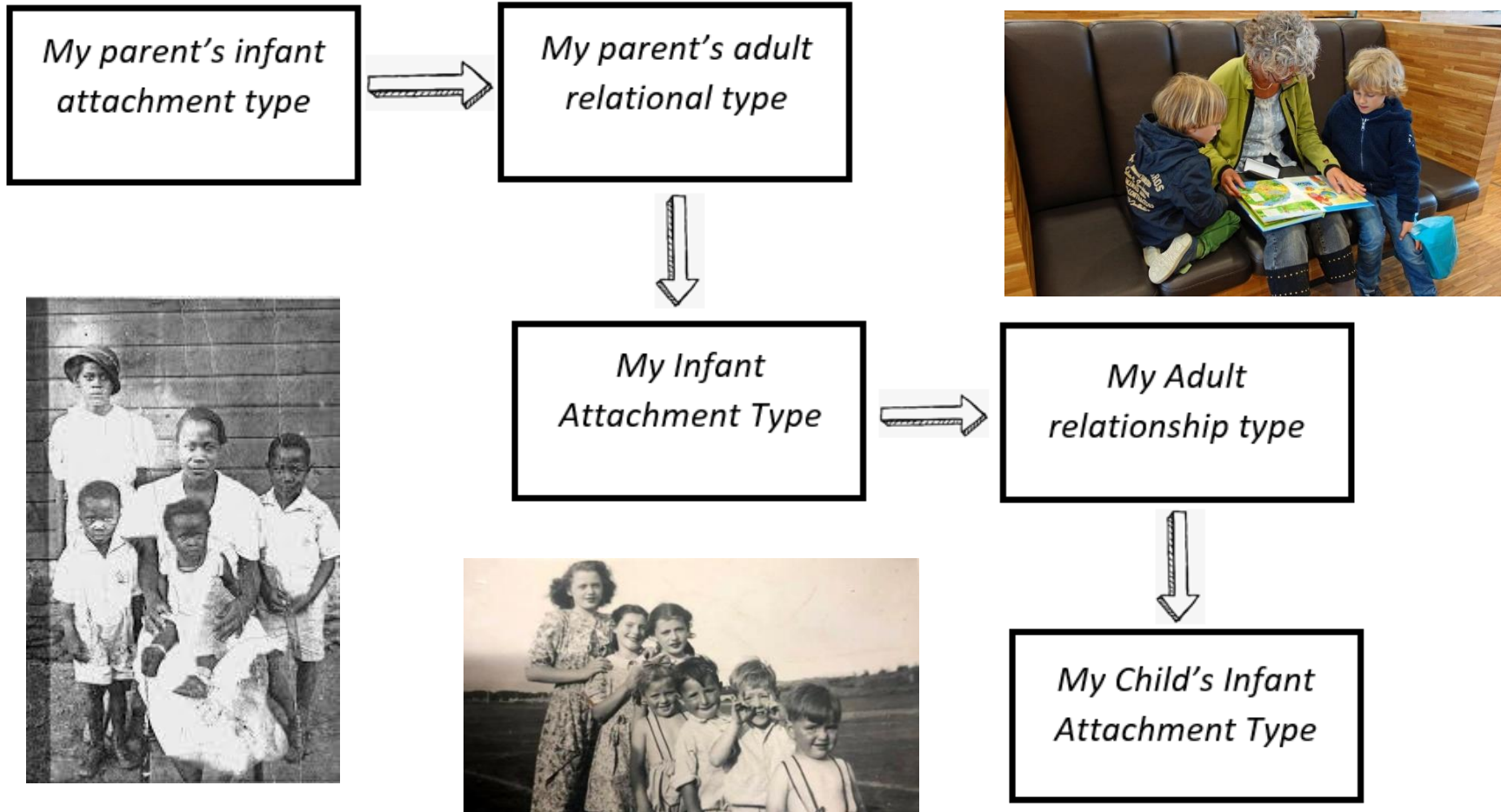
Authoritative Caregiving

- Structure/Nurture balance
 - Gentle guidance
 - Emotional support
 - Limits/Rules
 - High expectations
 - TBRI®





Intergenerational Attachment





How does one gain a secure attachment style?

- *How was one cared for as a child?*
- *How safe was the environment in which you were raised?*
- *How safe has the individual's environment been throughout their life?*

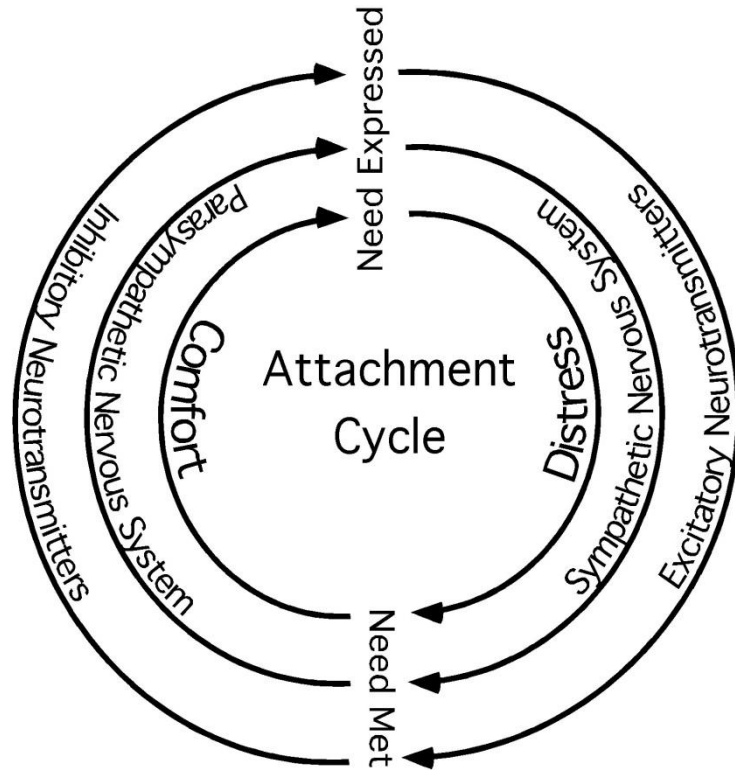


Attachment and Self-Regulation

- In optimal development, caregiver acts as regulation for the first year of life – how?
- Child learns to regulate on own – how?

External Regulation → Co-Regulation → Self-Regulation

The Attachment Cycle

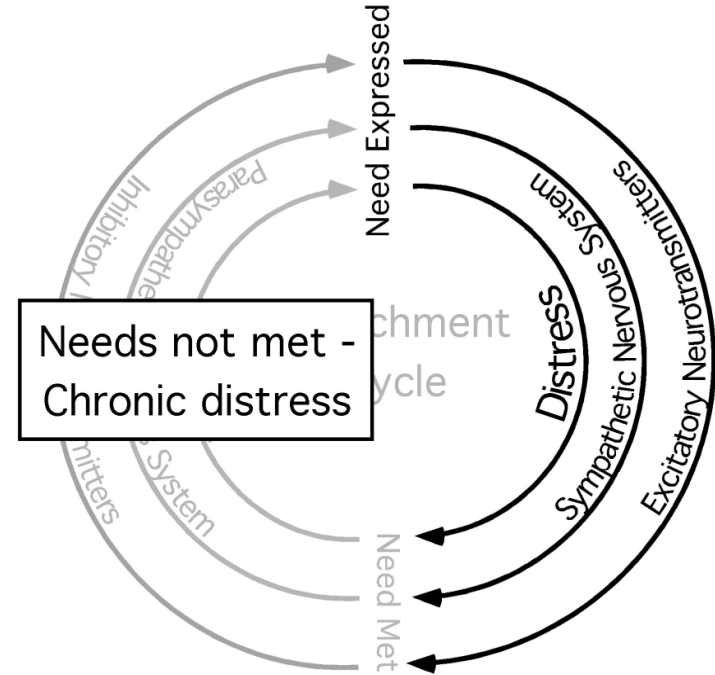
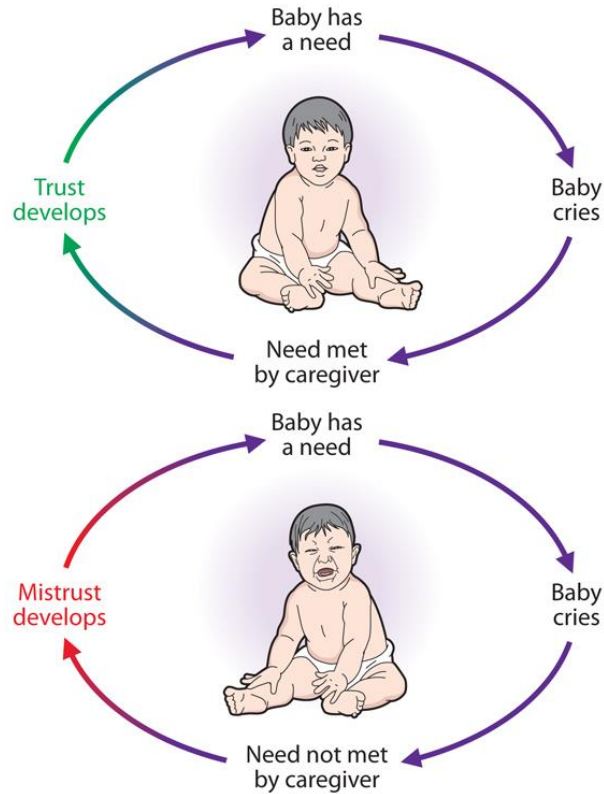


Foundation for:

- Trust**
- Self-worth**
- Self-efficacy (voice)**
- Self-regulation**
- Mental health**

Trajectory of Mental Illness

Infant Attachment Cycle



2-3 yrs.

Behavioral
Dysregulation

4-6 yrs.

ADD/HD
Symptoms

8-10 yrs.

Depression/
Anxiety
(Agitated
Dep./Agg.)

12+ yrs.

Bipolar
Disorder
(Beh./Emot.
Disintegration)

Circle of Security[®]

Parent Attending To The Child's Needs

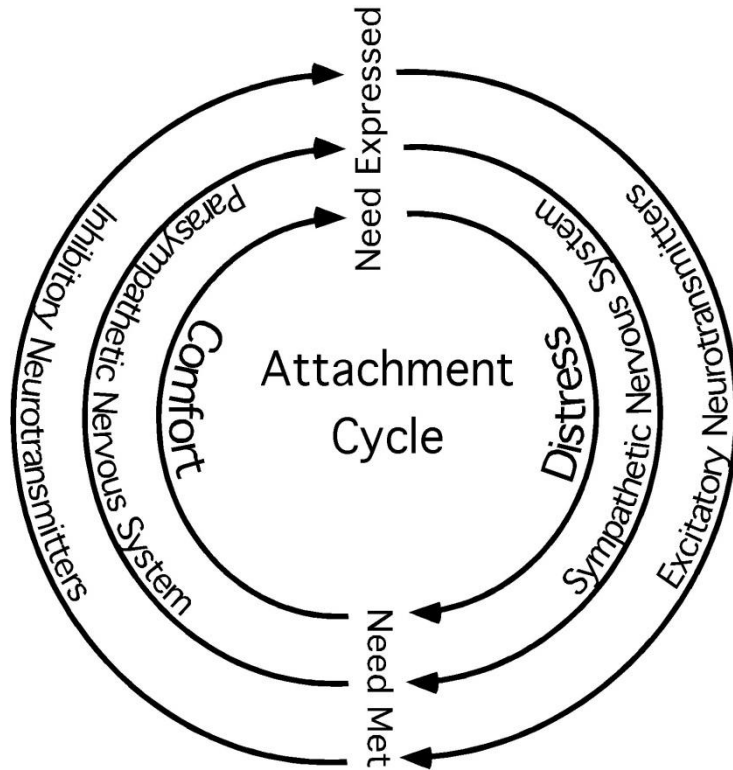


What are examples of needs a baby has?

What are examples of needs a child has?

What are examples of needs a teenager has?

The Attachment Cycle



Foundation for:

- Trust**
- Self-worth**
- Self-efficacy (voice)**
- Self-regulation**
- Mental health**



Growing the Parasympathetic Nervous System

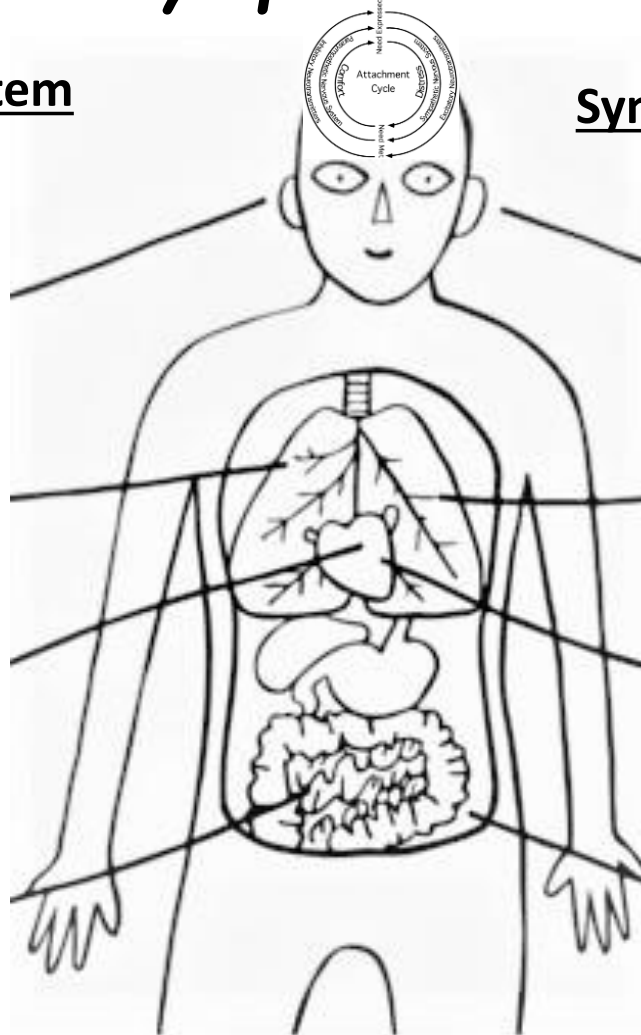
Parasympathetic Nervous System *simmers down*

Pupils go back to normal

Breathing goes back to normal

Heart rate and blood pressure goes back to normal

Digestive system returns to normal functioning



Sympathetic Nervous System – *revs up*

Pupils Dilate – expand (*to better see threat*)

Hearing becomes sensitive (*to hear threat better*)

Fast and shallow breathing

Heart rate increases – blood vessels constrict (*to keep from bleeding out when attacked*)
increases blood pressure

Gut inactive – energy moves from digestion to muscles in extremities (*“that gut feeling”*)



Diversity ~ Equity ~ Inclusion

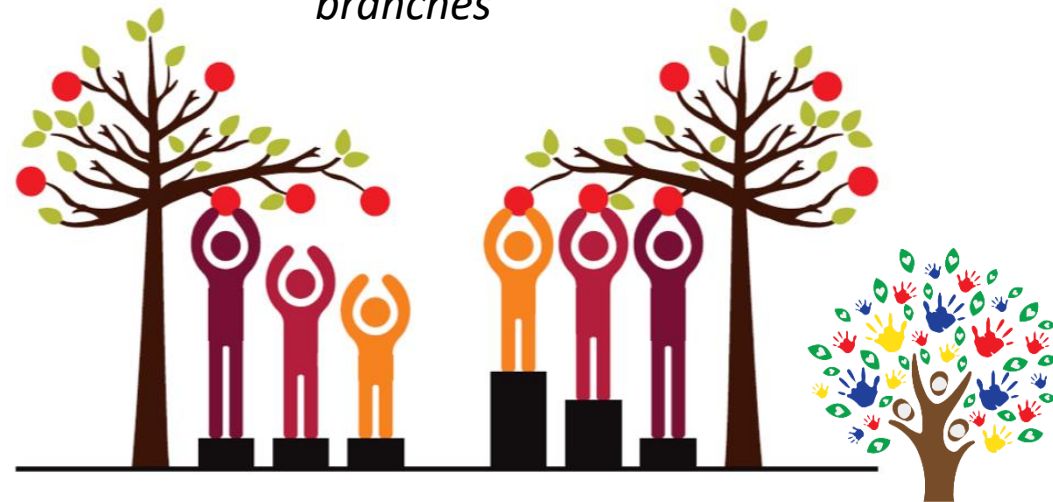
In 2020, overwhelmingly, leadership and staff across the board felt there was still something missing.

Racial Trauma, Discrimination, and trauma related to identity was not a focus... more needed to be done.

Summer 2020 – DEI committee formed, including a robust training committee

Fall 2020 – DEI Consultant Hired

- *Updated employee recruitment and hiring practices*
- *All employees, no matter what they do, complete a twelve-part training (takes a year)*
- *Implementation of DEI Huddles at all branches*



Trauma Informed Care at Orchard Place

Integration of Three Models





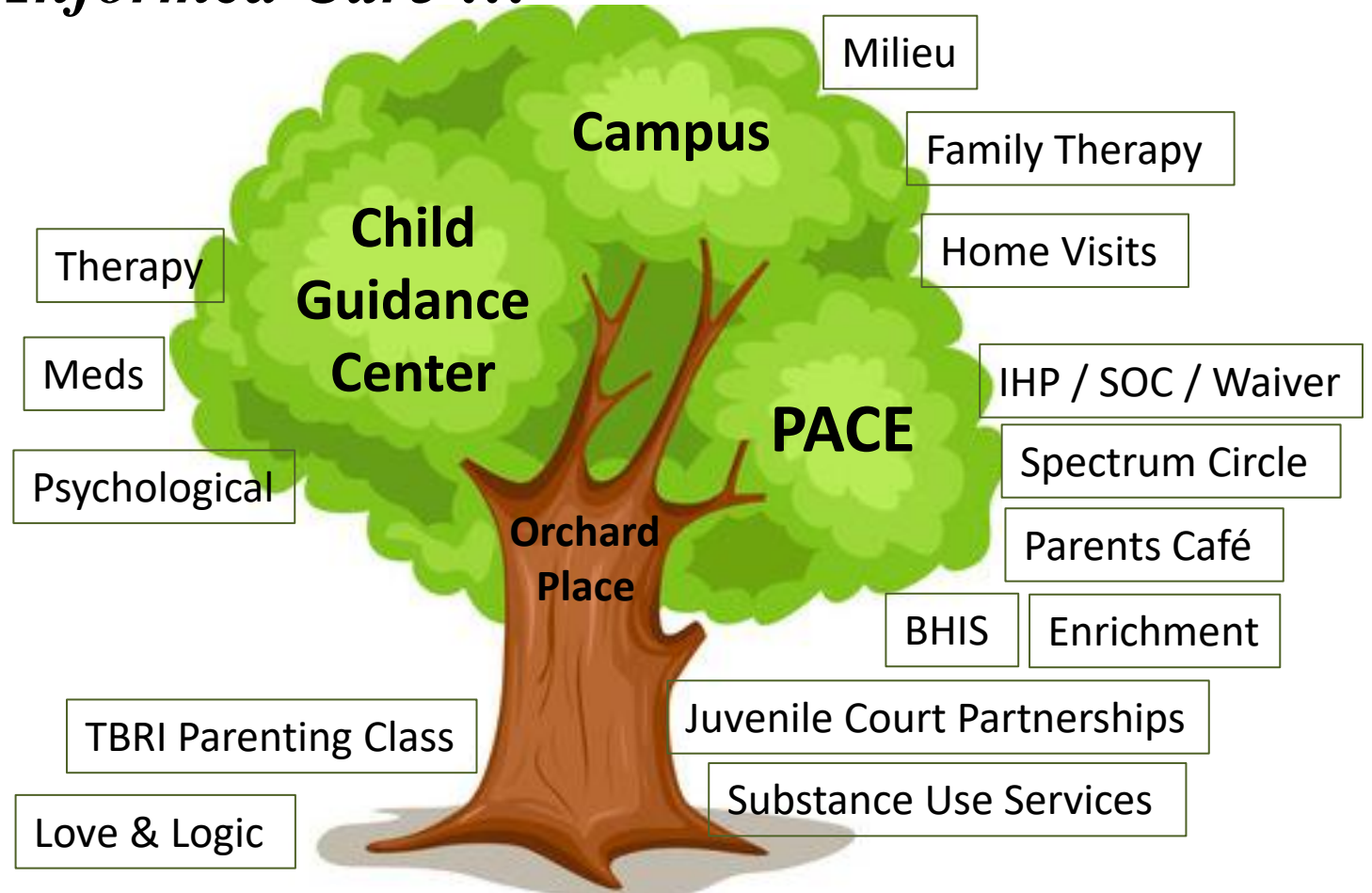
All Employees Trained – Integrated Approach

Integration, and Trauma Informed Care ...

Everyone is trained... any position... any role... all branches... all programs...

Internal Referrals... many families experience all of the branches

Case Consultations & Provider Meetings - virtual has helped



Sanctuary ~ Trust Based Relational Intervention – Diversity, Equity, & Inclusion

iSELF

Information (First name & initial, age, grade/school, diagnosis, meds, family situation, brief social history, problem you need help with)

Safety (list all safety issues and safety NEEDS for the child regarding home, school, family, etc.)

Emotion (list emotions felt by the child, family, staff, etc.)

Loss (list losses the child and family have experienced).

Future (Problem Solving – Next Steps – who’s responsible – things to try)
Must explore the child and family’s NEEDS as well as services.

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Concerns / Problem / Reason I'm asking for help:

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Thing that have been tried:

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TBRI PROBLEM SOLVING FORM				
Section 1 – Completed by the person requesting consultation				
Date:	Program:	Client:	DX	LOS
Challenging Behavior	Attachment History	Trauma History	Strengths	
Section 2 – Completed during Consultation and follow up session with TBRI Practitioner				
TBRI Practitioner Name		Message Behind Behaviors		
FIVE QUESTIONS to ask yourself	ACTION STEPS To meet the youth's needs	FOLLOW UP: How did it work?		
Am I connected?	Steps to connect	Follow up Date and Results		
Am I empowering?	Steps to empower:	Follow up Date and Results		
Am I teaching proactively?	Steps to teach proactively:	Follow up Date and Results		
Am I catching it low (level 1)?	Steps to catch it low:	Follow up Date and Results		
Do I have a plan for calming engagement?	Plan for calming engagement:	Follow up Date and Results		



*Integrated Health Program...
...Family Peer Support Specialists
are so important...*



- P A R E N T C A F E -

Family Peer Support Specialists (FPSS) draw on their own experience as a parent or primary caregiver of a child with an emotional, behavioral, or mental health need. They work to empower families by teaching skills that assist them in finding their own voice.



... "What I love the most about these is that you can come together with other people that you may not know, but really start to form a connection with them after a short period of time. It is all in the structure of the program."

~Tara Carr, FPSS

~ Spectrum Circle ~

Orchard Place

Spectrum Circle



Autism Support Group



10am-11am
or
6pm-7pm

Feb
7

Join us for another meeting of the
Spectrum Circle support group for caregivers
and loved ones of individuals on the autism spectrum.

620 Eighth St, Des Moines, IA

rkahlsdorf@orchardplace.org & 515-661-7870

No childcare provided at this time.

Orchard Place Presents:

LUCKY TO BE A

family

-PARENT CAFE-

MARCH 28TH

5:30-7:30 PM

620 8TH ST

DES MOINES, IA 50309

RSVP (515)-608-2042

MDIAWARA@ORCHARDPLACE.ORG

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Thank You !!

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