

Virtual learning summary: Trauma-Informed Care

March-April 2019

Presenters:

- Katy Davis, Director of Trauma-informed Care Initiative, UCSF Women's HIV Program
- Wendy Ellis, Project Director, Building Community Resilience
- Jeneen Skinner, Clinical Manager, Camden Coalition of Health Care Providers
- Bill Nice, Program Manager, Camden Coalition of Health Care Providers

Session Descriptions:

The significance of trauma has become an increasingly accepted tenet of complex care. While there is general agreement on the core principles of trauma-informed care and that trauma can negatively impact an individual's health and wellbeing, there are many ways to apply a trauma-informed approach in different settings.

The presenters on this webinar shared their experiences with incorporating principles of trauma-informed care in both clinical and non-clinical settings. Dr. Katy Davis discussed the trauma-informed primary care intervention practiced at the **UCSF Women's HIV Program**, along with reflections on client feedback and next steps for the program. Dr. Wendy Ellis discussed her experience with the **Building Community Resilience** program working with community-based partners to deliver trauma-informed services that account for and address community-level trauma.

In the Office Hours session, **Camden Coalition of Health Care Providers** staff delved into specific strategies for creating a trauma-informed care team. Jeneen Skinner and Bill Nice discussed the importance of incorporating a trauma-informed approach throughout all phases of hiring and patient engagement. In addition, they described organizational- and team-level supports to encourage self-care and prevent burnout.

Expert Highlights

- Trauma-informed values and principles should be infused into every aspect of an organization's operations, including communication with patients, hiring practices, and choosing interventions to implement.
- Interventions based on traditional understandings of trauma response and recovery may not work for all populations, especially those with substance use disorder. Models can and should be adapted to meet individual needs, like the trauma-informed substance use program developed by the UCSF Women's HIV Clinic.
- To build community resilience to trauma, it's necessary to address systemic inequities. This requires not only practice and programming change, but also addressing policy barriers.
- In the process of hiring a trauma-informed care team, it is essential to look for candidates with self-awareness, emotional intelligence, and the ability to adapt using behavioral interview questions and patient case studies.

Discussion Summary:

Webinar

1. **How does the Women's HIV Program (WHP) accommodate patients with physical disabilities or limited access to transportation?**

- The program bridges transportation barriers by conducting home visits and working closely with paratransit agencies. In the case where patients are not able to participate in face-to-face visits, Women's HIV Clinic offers online groups and resources.

2. **How can a community-based program connect disparate stakeholders in a sustainable way?**

- Building Community Resilience (BCR) uses a multi-pronged approach to help partnering organizations develop and maintain a stakeholder network, starting with an asset mapping process. Once the network is identified, stakeholders are brought together to conduct a visioning exercise to set collective measures for success. This process leads to shared accountability among the stakeholders.

3. **How does WHP work with clients who are involved with the criminal justice system?**

- By developing and maintaining a relationship with the San Francisco jails, WHP is allowed access into the facilities to provide legal and social support for clients who may be incarcerated. WHP also contacts the jail system in order to locate a client who is unaccounted for.
- Beyond clinical practice, WHP also advocates for increased mental health and psychiatric services within the criminal justice system.

Office Hours

1. **When hiring to work with individuals with complex health and social needs, is it more important to hire someone who already has the necessary skills or who has the ability to learn?**

- It can be beneficial to hire in either scenario. In either case, Camden Coalition staff emphasized that it is important for candidates to demonstrate mental flexibility since, in working with this population, it is common to be confronted with unexpected situations. Once hired, this characteristic is fostered through ongoing professional development and case conferencing with other care team members.

2. How do you assess a candidate's ability to be patient-centered and mentally flexible?

- During the hiring process, candidates are shown a documentary about a supervised drug injection site (linked in the resources below). This is a useful technique to see people's reactions to various methods of harm reduction and how they respond to approaches that they might not agree with.

Resources:

- Webinar: [Trauma-informed approaches in clinic & community settings](#)
- Office Hours for Complex Care: [Building a trauma-informed care team](#)
- Substance Abuse and Mental Health Services Administration, [SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach](#)
- [Building Community Resilience tools and resources](#)
- Harm reduction documentary: [Insite - Not Just Injecting. But Connecting](#)

About the National Center

The National Center is an initiative of the Camden Coalition of Healthcare Providers in Camden, New Jersey. The National Center works to engage a wide range of national stakeholders across the spectrum of healthcare and health policy around improving care for high-cost, high-need consumers. The founding sponsors of the National Center are the Robert Wood Johnson Foundation, the Atlantic Philanthropies, and AARP. Learn more about the National Center on our website: nationalcomplex.care.

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