System of Care Trauma-informed Agency Assessment

Thank you for agreeing to complete this confidential agency self-assessment.

Instructions: The following six key domains of the trauma-informed approach are as follows: Physical and Emotional Safety; Youth and Family Empowerment, Choice and Control; Trauma Competence; Trustworthiness; Commitment to Trauma-informed Approach; and Cultural Subpopulations and Trauma. Each of these domains has a set of standards associated with it in the questions which follow.

The purpose of this assessment is to improve the entire system that is dedicated to meeting the mental health needs of Maine's youth and families. Please help to assess the practice in your own agency by scoring each of the items and completing the comment box. Your answers will be aggregated with other respondents from your agency to help develop an agency profile. This profile will be used to identify areas where your agency is doing well, and to guide next steps for making your agency even more trauma-informed.

Scoring: Each standard is outlined in the left-most column and the rating scale is listed across the top. The standards are rated on a scale of 1 to 5 that measures the degree to which the agency demonstrates that aspect of the Trauma-informed Approach, with 1 being "Low" to 5 being "High." When assigning a score, consider both the **extent** to which the standard is met by agency policies and guidelines, as well as the **consistency** with which the standard is met in practice. For example: if an agency has a policy or guideline in place that covers all aspects of standard but the standard is not consistently upheld in practice, you may want to score it a 3 or 4, depending on the level of consistency. You may add comments to support your score.

Agency/County: _____

Your role in the agency (select one):
- o   Administrator
- o   Supervisor
- o   Case Manager
- o   Clinician
- o   Behavioral Health Aide/Health Support Staff
- o   Other Support Staff (e.g., Administrative, Janitorial)

I. Physical and Emotional Safety

Best Practice Standard	Rating Scale					Score
	Low **1**	**Low-Moderate** **2**	**Moderate** **3**	**Moderate-High** **4**	**High** **5**	
1. **Space:** Agency displays map of space showing exits, restrooms, parking, offices; reception area is secure; rooms are labeled, private and soundproof; all areas are well-lit.	Comments:					☐
2. **Privacy**: Private waiting spaces are available staff do not discuss youth and families in identifiable manner; information is gathered in private areas.	Comments:					☐
3. **Quality Improvement, Safety**: Agency routinely checks facilities and staff practices for safety and privacy concerns. Reported safety incidents and privacy violations are reviewed regularly and changes are made as needed.	Comments:					☐
4. **Incident Reporting**: Incident reporting is easy; youth and families are informed of the process at intake; anonymity is granted; agency response is timely (e.g., 30 days); a finding is clearly communicated to person(s) reporting incident.	Comments:					☐
5. **Information Sharing Within Agency**: Youth and families do not have to repeat information collected by other divisions, practitioners or staff in agency. Information sharing includes history of traumatic events with enough detail to provide a proper understanding of the role of trauma.	Comments:					☐
6. **Information Sharing Across Agencies:** Agency accepts/solicits information from other agencies, with proper consent, so youth and families do not have to repeat information. Guidelines outline what information staff should routinely request from other agencies. Information exchange includes trauma history with enough detail to provide a proper understanding of the role of trauma.	Comments:					☐
7. **Safety Plans**: Safety (crisis) plans are created for all youth who have experienced trauma. Agency promotes plans that minimize potential retraumatization (e.g., coercive hospitalization). Plans required to include: triggers and coping techniques; youth and family preferences; community supports; clear outline of key components (if X happens, Y will occur); how plan will be shared, and with whom.	Comments:					☐

II. Youth and Family Empowerment, Choice and Collaboration

In this section, score your agency's work with youth versus family members separately.

Best Practice Standard

	Rating Scale				
	Low **1**	Low-Moderate **2**	Moderate **3**	Moderate-High **4**	High **5**

Best Practice Standard	Youth	Family
1. **Informed Consent**: At intake, informed consent is reviewed with both youth and family; consent is reviewed orally; consent is provided in written format; consent is understandable at 8th grade reading level.	Score: ☐	Score: ☐
2. **Service Preferences**: Youth and family preferences are ensured by: informing youth and family about various kinds of available agencies, services, and treatments; asking youth and family their preferences; permitting choices to extend to using other agencies.	Score: ☐	Score: ☐
3. **Strengths-based:** Individual service or treatment planning builds on youth and family strengths and works to develop and/or maintain natural supports. Plans draw upon informal support networks (e.g., relatives, neighbors) and community resources (e.g., after school programs, boys and girls club, sports). Flexible funding is used to support the above activities.	Score: ☐	Score: ☐
4. **Youth and Family Involvement**: Youth and family are meaningfully involved in setting service and treatment goals; youth and family may invite others to be involved in setting goals; conflicts between youth and family goals are resolved in a manner that respects all parties; youth and family have a way to monitor the progress and effectiveness of their own case plan and treatment on a routine basis.	Score: ☐	Score: ☐
5. **Other Agency Involvement**: Youth and family may invite individuals from other agencies to participate in treatment/service planning; decisions made among all agencies involve youth and family; progress is shared among all parties; youth and family are aware of key meetings; staff communicate with other agencies to obtain relevant information about common clients.	Score: ☐	Score: ☐
6. **Youth and Family Feedback on Services**: Agency routinely solicits youth and family feedback on services; results of satisfaction surveys are shared with youth and family members; youth and families help interpret results; youth and families suggest changes based on feedback.	Score: ☐	Score: ☐
7. **Agency-level Involvement**: Youth and families with trauma histories are invited to participate in agency administrative functions, such as: hiring and performance reviews; standing committees and governance; staff training and education; accountability reviews; and safety checks. Youth and families are compensated for their time.	Score: ☐	Score: ☐

III. Trauma Competence

In the following, "competencies" always refers to "competencies in managing or treating persons with trauma histories."

Best Practice Standard

	Rating Scale				
	Low	**Low-Moderate**	**Moderate**	**Moderate-High**	**High**
	1	**2**	**3**	**4**	**5**

1. **Trauma Competencies in Personnel Decisions**: Identifiable competencies for trauma-informed service delivery are included in hiring process; competencies are tied to definable job functions; training is delivered to develop and maintain staff competencies; competency is evaluated as part of performance reviews.

   Score: ☐

2. **Trauma Training for All Staff**: All staff including non-service staff (e.g., frontline, administrative, janitorial, and translators) participate in required trauma competency training as part of employee orientation. Training covers: causes of trauma; impact of trauma on children's emotional development and behavior; ways to avoid re-traumatizing people in everyday interactions; recognizing potentially unsafe situations; and de-escalation techniques.

   Score: ☐

3. **Evidence-based Trauma Practices:** Agency uses (or has access to) at least two kinds of trauma-informed evidence based practices (EBPs); EBPs are a good "fit" for the majority of the service population; all service staff are familiar with EBPs; referrals are made for any eligible youth or family; agency capacity is sufficient to treat any youth or family who qualifies for EBPs; referrals to other agencies for trauma-informed EBPs are made where appropriate.

   Score: ☐

4. **Supports for Families**: Agency provides five or more supports for staff working with youth and families who have experienced trauma. Supports could include: professional support; stress reduction training; counseling; peer to peer mentoring; therapeutic time off; team approach to trauma work; recreational or wellness activities; formal Employee Assistance Program; variety of job responsibilities.

   Score: ☐

5. **Staff Sensitivity to Trauma**: Staff are sensitive and aware of trauma in all interactions with youth and families; staff acknowledge the importance of youth and family trauma experiences; staff are not judgmental of families in difficult situations. Staff ask permission before they approach a person, engage in conversation, or make physical contact.

   Score: ☐

6. **Agency Practices Sensitive to Trauma**: Agency has written policies and/or procedures to minimize retraumatization through the use of potentially coercive or disruptive practices (e.g., involuntary hospitalization, residential placement, or foster family placement). Policies are reviewed to ensure that they are sensitive to individuals with trauma histories.

   Score: ☐

IV. Trustworthiness

Best Practice Standard	Rating Scale				
	Low 1	Low-Moderate 2	Moderate 3	Moderate-High 4	High 5
1. **Informed Consent**: Informed consent procedure contains: when/how services will be terminated; limitations to confidentiality (e.g., mandated reporting); potential risks/benefits; goals of the service or treatment; and limitations of the service or treatment.			Score: ☐		
2. **Grievance Policy**: Grievance policy and reporting procedures are fully disclosed at the start of agency involvement; policy is explained orally and in writing in easily understandable language; policy includes a mechanism to address incidents or complaints short of filing a formal grievance; agency identifies trained individuals to help youth and families navigate process; grievances and complaints are reviewed by agency staff, youth and family member; results and reasoning and provided to youth and family in timely fashion.			Score: ☐		
3. **Consistent Communication with Youth and Families:** Written policies, procedures and practice support consistent communication with youth and families, including: agency mission; eligibility criteria; rights and responsibilities; services and treatments available; service and treatment practices; program or treatment expectations.			Score: ☐		
4. **Recognition of Power Dynamic:** Formal policy and practice recognizes the power dynamic of the service provider over the youth and family, particularly those with trauma history; defines professional boundaries that all employees are expected to uphold, including availability/ reachability; discusses consequences for failure to maintain proper boundaries.			Score: ☐		
5. **Family Informed of Staff Changes**: Policy requires that youth and family be informed of changes to their case manager or treatment provider and reasons for same in timely fashion. Process takes into account: the potential for re-traumatization due to the loss of a trusting relationship; youth and family preferences in selecting new provider (efforts to make appropriate match); adequate preparation for new staff to take over (e.g., "bridge" meeting, sharing case files).			Score: ☐		

V. Commitment to Trauma-informed Philosophy

Best Practice Standard	Rating Scale				
	Low 1	Low-Moderate 2	Moderate 3	Moderate-High 4	High 5
1. **Trauma-informed Policy**: Agency has a trauma-informed policy that includes: written definition of trauma; acknowledgement of impact of trauma on child behaviors and outcomes; intention of agency to be trauma-informed in its overall approach to working with youth and families; commitment to using trauma-informed evidence-based practices.			Score: ☐		
2. **Routine Trauma Screening**: Agency uniformly screens all youth and families for trauma. Formal process includes: screens for nonverbal signs of trauma; a more in-depth assessment if person screens positively for trauma; record of trauma history included in youth and family file.			Score: ☐		
3. **Trauma-informed Development Plan**: Agency has written plan to develop, implement and support trauma-informed agenda. Agency has identified trauma champions and has high level staff trained in advanced trauma competencies.			Score: ☐		
4. **Promotes Trauma-informed Competence with Others:** Agency promotes, enhances and supports trauma competence and the trauma-informed approach at the agencies and organizations it works with.			Score: ☐		
5. **Trauma-informed Accountability**: Agency maintains formal procedures for accountability reviews including: examination of key trauma elements (e.g., trauma competence, trustworthiness, physical and emotional safety); trauma-related outcomes for youth and families (e.g., reduction in trauma symptoms); examination of fidelity to trauma-informed evidence-based practices. Results are used to change agency policies and practices as indicated.			Score: ☐		

VI. Cultural Subpopulations and Trauma

Cultural subpopulations should be taken broadly to include race, ethnicity, country of origin, sexual orientation, religion, traditions and beliefs.

Best Practice Standard

	Rating Scale				
	Low **1**	Low-Moderate **2**	Moderate **3**	Moderate-High **4**	High **5**

1. **Agency Accessible to Diverse Groups**: Agency has a policy to make services accessible to all groups; uses promotional materials to appeal to different cultural subpopulations; has a language access policy; makes available translators and cross-cultural staff who have been trained in the concepts of trauma and trauma-informed practice.

Score: ☐

2. **Culture Considered in Client Behavior:** Agency's policies, procedures and practices acknowledge that client behaviors and responses to trauma are influenced by culture (e.g., how sexual abuse within the family is perceived); agency recognizes (in training or materials) that assimilation and acculturation themselves can be traumatic; agency makes accommodations to foster appropriate responses with different cultural groups.

Score: ☐

3. **Culture Considered in Service Planning**: Agency considers the use of cultural, ethnic and faith-based organizations in service planning; works with families to develop and maintain cultural supports; supports and promotes cultural and trauma competence when working with other agencies.

Score: ☐

4. **Consultation with Cultural Organizations**: Agency consults with cultural organizations to learn more about trauma perceptions within other cultures and how better to address them when working with identified subpopulations.

Score: ☐

5. **Culture Considered in Accountability:** Agency uses formal procedures for accountability reviews which include collecting and analyzing culturally specific demographic data on the service population; examining effectiveness of trauma-informed services relative to culturally diverse communities; and evaluating service and program outcomes on the basis of culturally relevant objectives.

Score: ☐