

Title: Trauma Informed Practice Report

Wards Affected: All

To: Health and Wellbeing Board **On:** 15 December 2022

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Background

Trauma and Trauma Informed Practice

What is Trauma?

Trauma can be defined as ‘an emotional wound, resulting from a shocking event or multiple and repeated life threatening and/or extremely frightening experiences, or set of circumstances, that may cause lasting negative effects on a person, disrupting the path of healthy physical, emotional, spiritual, and intellectual development

(National Child Traumatic Stress Network)

Trauma can result from a single event such as an accident or assault, but more commonly refers to developmental trauma i.e., trauma resulting from an event or series of events in childhood such as physical, sexual, or emotional abuse, or events in the household like parental death, imprisonment, substance use, or domestic abuse.

What is Trauma Informed Practice?

Trauma-Informed Practice is a way of working that responds to the evidence that trauma is prevalent in the population, and knowledge around the potential impact on people who have experienced trauma.

Why is it important to use a Trauma Informed Approach?

Trauma Informed practice draws on the evidence that trauma is prevalent in the population (both within the communities we serve, and the workforce) The now famous Adverse Childhood Experiences study in the US recruited participants from 1995 to 1997 and undertook long term follow up. The study demonstrated a clear link between adverse childhood experiences (ACE’s) and health and social problems across the lifespan. The study found that ‘ACE’s’ were common amongst the cohort and that there was a direct and graded relationship to various health issues such as heart disease and cancer. In addition, a link with other issues was identified – for example having 4 ‘ACE’s’ in childhood was associated with a 4-to-12-fold increase in

problematic use of alcohol and drugs, depression and suicide attempts compared to those with no 'ACE's'. Adverse community experiences (for example poverty, housing, and discrimination) can both drive and compound adverse childhood experiences. The clear linking of ACE's and 'social problems' across the lifespan gives a clue for our work; that we can be sure that a proportion people who come into contact with 'helping services' or the Criminal Justice system have a history of trauma.

It's important to recognise that response to trauma is not reductive – a variety of factors determine the impact of trauma – for example the severity and length of the traumatic event(s), whether there are other trusted adults in the child's life, and material circumstances. (i.e. the impact of, for example, maternal depression on a child in a single parent family living in poverty with no support network would be different to that of a child in an affluent family with a large support network and other trusted adults)

Childhood trauma impacts on development - "Trauma produces actual physiological changes, including a recalibration of the brain's alarm system, an increase in stress hormone activity, and alterations in the system that filters relevant information from the irrelevant." (Bessel van de Kolk) - and can therefore impact on the ability to form relationships and navigate social situations in adults - and can lead to 'attempts to survive' such as drug or alcohol use, violence, unusual behaviours etc.

It is therefore clear to see that many people whose behaviour is troubling to communities or services may have a history of trauma. This is not to 'excuse' their behaviour, but to change the narrative from 'something's wrong with this person' to 'something has happened to this person – they have a story of adversity which has traumatised them' which can be helpful in formulating our response both as practitioners and as a system.

Trauma informed practice can be characterised by a shift in thinking from 'something's wrong' with a person to 'something's happened to them' The recent Government working definition of Trauma Informed practice has the following principles:

- Safety
- Trust
- Choice
- Collaboration
- Empowerment
- Cultural consideration

What has been achieved in the past six months? Trauma Informed Practice Programme

We are delivering a Trauma Informed Practice programme to staff who work in services where they are very likely to be working with people who have experienced trauma.

This programme runs over 8 months (half a day a month) and combines information, skills and opportunities to reflect on practice. The programme is delivered by a local organisation, Zebra Collective, who specialise in work around Trauma and Trauma Informed practice.

The first programme ran in 2021 and was delivered to 85 staff and volunteers working with people experiencing homelessness. Phase 2 of the programme, funded by the Community Safety partnership and Public Health, is working with 250 staff across service such as Drug and Alcohol teams, Domestic Abuse services, Police, Probation, School nurses, Children's centre staff, Community Safety etc.

150 of these staff completed the programme in September 2022, and the third programme with a further 100 staff has begun.

The programme is being evaluated by Plymouth University. A light touch interim evaluation of the 2021 programme has been completed and showed real impact on thinking and practice for the staff that completed the programme for example some comments from staff - 'there's a buzz around trauma informed practice in the office' 'It's completely changed my perspective and how I work with people'

The full evaluation will be completed in May 2023.

Groups to support Trauma Informed learning

The following groups have been established to support staff in embedding trauma informed practice. The groups all meet monthly and are well attended and valued. Staff from across Drug and Alcohol services, Public Health, Community Safety, Adult Social Care, Children's services, Housing Associations, Domestic Abuse support services, Probation, Police and Mental Health providers attend.

- Trauma Informed practitioners' group – provides a space for people working directly with people to come together and reflect on their experience of embedding trauma informed practice in their work.
- Trauma Informed teams/services group – for managers/team leaders looking to embed trauma informed practice in their team/service. The group is working on Trauma Informed staff supervision and will then move on to first contact with services. They produce documents to be shared, as well as sharing experiences and reflecting on making changes within their teams.
- Trauma Informed strategic group – for staff looking to embed trauma informed practice through their strategic roles e.g., commissioning. The group is working on using activities such as procurement and contract management to embed trauma informed practice.

Trauma Informed Network

The numbers of people signed up to the Trauma Informed network has risen from 30 in October 2021 (when the Trauma Informed Approaches Project Manager came into post) to nearly 300 members in December 2022, showing the impact of dedicated

time for Trauma Informed work. A Torbay Trauma Informed Network You Tube channel has recently been created - [Torbay Trauma Informed network - YouTube](#)

Trauma Informed work within the Torbay MCN Alliance

The Torbay MCN Alliance (Homelessness services, Drug and Alcohol services and Domestic Abuse support services) has adopted Trauma Informed as one of its guiding principles. All staff within the Alliance have either completed or are participating in the Trauma Informed programme.

Regional Work

Torbay (Debbie Freeman – Project Manager for Trauma Informed approaches) initiated regional work around Trauma Informed practice with Trauma Informed leads in Plymouth, Devon, and Cornwall. This led to a large well attended regional conference in July 2022 with speakers such as Nazir Afzal OBE, and subsequent joint guest speakers across the Peninsula.

Relational Council work

A Relational Council approach is being adopted and developed within Torbay Council. This approach will include Trauma Informed Approaches and Restorative approaches (the approach used in Children's services) These two approaches fit together well and share common elements. The approach has been welcomed by SLT and will now proceed to Council. A long-term plan for embedding relational approaches is being developed, both internally and in work with the community in Torbay.

What is the planned activity for the next six months?

Trauma Informed Practice Programme

The current programme of Trauma Informed practice learning comes to an end in April 2023. There is a lot of interest from various organisations in accessing the programme in an ongoing way (for new starters in organisations where staff have attended the programme, and for staff in organisations that have heard about the programme and wish to access the learning) Cross organisational co-commissioning opportunities are currently being explored to enable the programme to continue being available.

The full evaluation of the 2022/23 programme is expected to be completed by May 2023.

Regional Work

Regional work is planned to develop some regional principles for Trauma Informed work. We plan to host another conference in summer 2023.

Trauma Informed work within the Torbay MCN Alliance

The Torbay Alliance takes over delivery of services from February 2023. The Project manager for Trauma Informed approaches is supporting Trauma Informed work within the Alliance. We aim to have staff from all services attending Trauma Informed practice groups, have Trauma Informed practice discussed at all Team meetings and in staff supervision within the next 6 months.

Relational Council work

A project plan is currently being developed for this work.

Background Papers:

The following documents/files were used to compile this report:

[About the CDC-Kaiser ACE Study |Violence Prevention|Injury Center|CDC](#)