Trauma-Informed Organizational Self-Assessment Staff Survey (58 Responses)
Concepts with the Highest Number of Disagree and Strongly Disagree Reponses

I. Supporting Staff Development

A. Training and Education

Staff at all levels of the program receive training and education on the following topics:

Cultural differences in how people understand and respond to trauma.

B. Staff Supervision, Support and Self-Care

Topics related to self-care are addressed in team meetings (e.g. vicarious trauma, burn-out, stress- reducing strategies).

Part of supervision time is used to help staff members understand their own stress reactions.

Part of supervision time is used to help staff members understand how their stress reactions impact their work with consumers.

The agency helps staff members debrief after a crisis.

II. Creating a Safe and Supportive Environment

A. Establishing a Safe Physical Environment

Staff members ask consumers for their definitions of physical safety.

B. Establishing a Supportive Environment

Information Sharing

Consumer rights are posted in places that are visible (e.g. room checks, grievance policies, mandatory reporting

Materials are posted about traumatic stress (e.g. what it is, how it impacts people, and available trauma-specifics resources).

Cultural Competence

Program information is available in different languages.

Safety and Crisis Prevention Planning

For the following item, the term "crisis-prevention plan" is defined as an individualized plan for how to help each consumer manage stress and feel supported.

Each consumer has a written crisis prevention plan which includes a list of triggers, strategies and responses which are helpful and those that are not helpful and a list of persons the consumer can go to for support.

Open and Respectful Communication _____

Staff members ask consumers for their definitions of emotional safety.

The agency uses "people first" language rather than labels (e.g. 'people who are experiencing homelessness' rather than 'homeless people').

III. Assessing and Planning Services

A. Conducting Intake Assessments

The intake assessment includes questions about:

Cultural strengths (e.g. world view, role of spirituality, cultural connections).

Previous head injury.

Quality of relationship with child or children (i.e. caregiver/child attachment)

Children's trauma exposure (e.g. neglect, abuse, exposure to violence)

Children's achievement of developmental tasks.

C. Offering Services and Trauma-Specific Interventions
The program educates consumers about traumatic stress and triggers.
The program has access to a clinician with expertise in trauma and trauma-related interventions (on-staff or available for regular consultation).

IV. Involving Consumers

A. Involving Current and Former Consumers
The program recruits former consumers to serve in an advisory capacity.
Former consumers are invited to share their thoughts, ideas and experiences with the program.

V. Adapting Policies

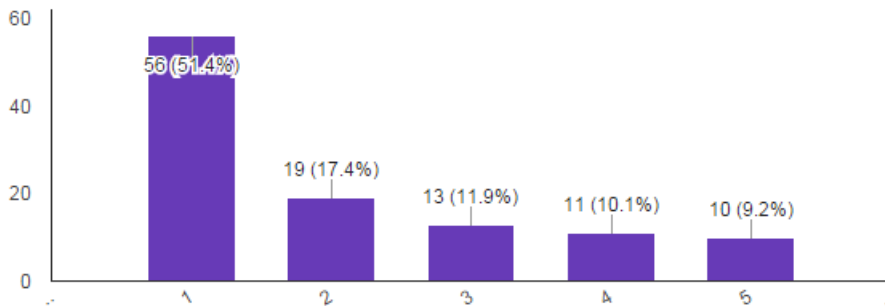| **B. Reviewing Policies** |
|---|
| The program involves consumers in its review of policies. |

I am asked about any stressful life experiences that may harm my health and emotional well-being.
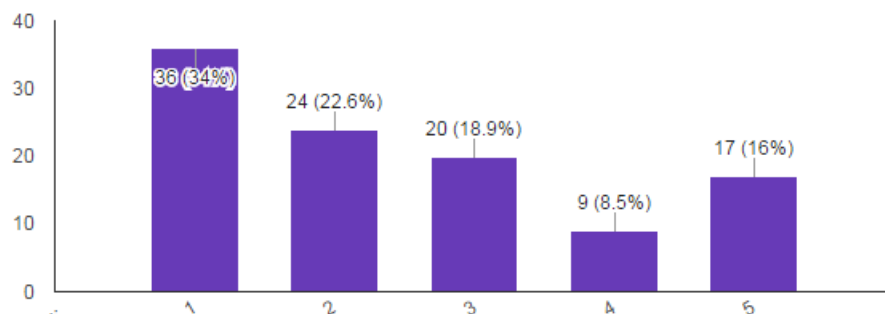(107 responses)
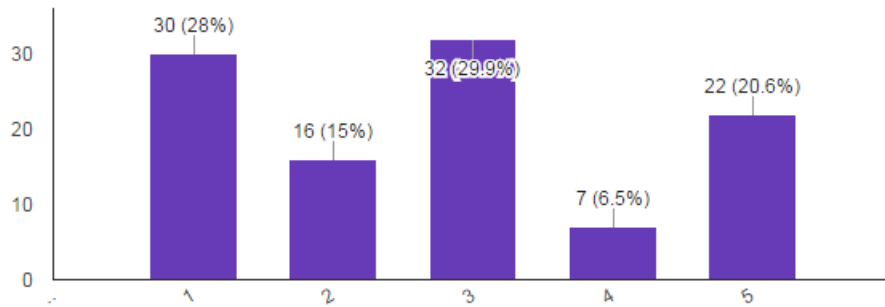
I feel comfortable sharing my past and current stressful experiences with at least one staff person in this program.
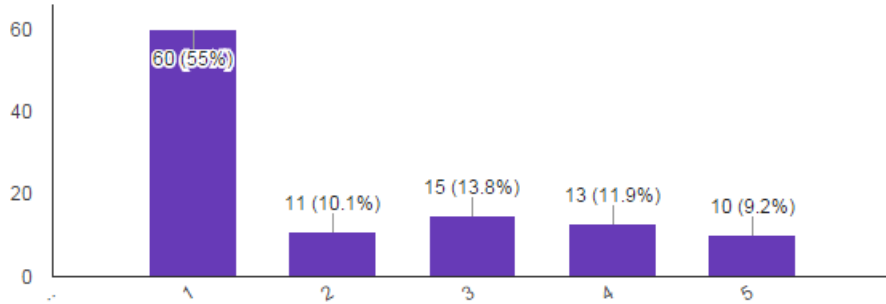(109 responses)

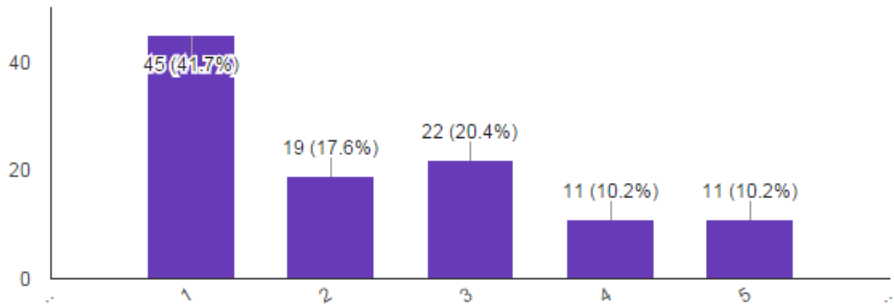I am given information about how my stressful life experiences may affect my overall health.
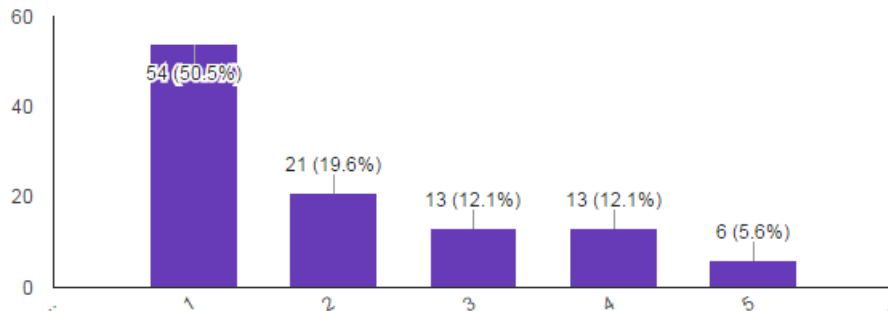(106 responses)

All the employees in the program are friendly and helpful. (109 responses)

60 (55%)
11 (10.1%)
15 (13.8%)
13 (11.9%)
10 (9.2%)

I experience this program as soothing and calming. (108 responses)

45 (41.7%)
19 (17.6%)
22 (20.4%)
11 (10.2%)
11 (10.2%)

The staff in this program seem to really enjoy working here. (107 responses)

54 (50.5%)
21 (19.6%)
13 (12.1%)
13 (12.1%)
6 (5.6%)

I do not feel judged and criticized by the people in the program. (108 responses)

61 (56.5%)
15 (13.9%)
13 (12%)
11 (10.2%)
8 (7.4%)