Using the Trauma Informed Care Screening Tool

Trauma Informed Care (TIC) is not one-size-fits-all. There is a great deal of variability in the way TIC is demonstrated. However, what we’ve learned about TIC implementation is that there are some common features. The Road Map to Trauma Informed Care introduces a developmental phased approach to organizational change and implementation. This tool illustrates the sequential movement from recognition and awareness (Phase 1 Trauma Aware) to implementation and monitoring (Phase 4 Trauma Informed). The Trauma Informed Care Screening Tool goes one step further by outlining a developmental approach across the phases (from Phase 1 to Phase 4) but also within the phases (actions for each step). We recognize that there are many actions within some of these steps (Agency Readiness, for example, has seven). We also recognize that there are degrees to which something has been achieved (e.g., a few staff have attended training versus most staff have attended training). The intent of the Trauma Informed Care Screening Tool is to represent this progress.

This tool has been created to assist organizations implementing TIC. You can begin by circling the actions that have either been started or completed in the organization. From there, we encourage you to use it in whatever ways make the most sense for your organization.

The following are additional considerations.

- Agencies or programs may use this tool as a way to highlight progress.
- Agencies or programs may find this tool most useful in understanding why they are encountering resistance. In other words, rather than a prescription for moving forward, they use the tool retrospectively to identify potential obstacles for progress.
- There is no expectation that an agency or program will accomplish every action listed. Furthermore, an agency may be doing other things to create TIC that we have not captured here.
- Some actions will be more important for some agencies than for others. Feel free to adapt however is needed.
- There is no correct way to implement TIC. Some agencies may find that they are accomplishing the first few actions of each step across several of the phases, while others may find that they are delving more deeply into one phase at a time.

As always, we would love to hear your thoughts. Please send comments to info@traumainformedoregon.org. If you would like to reference the Trauma Informed Care Screening Tool, we recommend the following citation: Trauma Informed Oregon (2018). Trauma informed care screening tool.
Trauma Informed Care Screening Tool

**PHASE 1**

**Trauma Aware**

1. At least one person in org understands need for TIC and is a champion
2. A group in org understand the need for TIC and are champions
3. A majority in org understands and can speak about the need for TIC
4. Org uses data to validate the need for TIC

**PHASE 2**

**Trauma Sensitive**

**Foundational Knowledge**

1. A few staff have attended foundational training about TIC
2. Most staff have attended foundational training about TIC
3. Most staff have knowledge about TIC
4. TIC knowledge is exchanged among staff as part of the org culture
5. A group in org can apply TIC knowledge and skills
6. Org has internal capacity to educate others with foundational knowledge

**Agency Readiness**

1. Org has stable funding and a low level of org chaos
2. Leadership is committed to TIC
3. A majority of staff are committed to TIC
4. Resources are directed to TIC efforts (e.g., time for training)
5. TIC is an organizational priority
6. Org’s leaders model TIC
7. Org’s leaders embody TIC

**Process & Infrastructure**

1. A dedicated group (e.g., workgroup) is identified as TIC change agents
2. Change agents include people with lived experience in your service systems
3. A process of communication and info sharing is established
4. Change agents are able to infuse TIC knowledge to other staff in org
5. Change agents are empowered to call into question non-trauma informed policy and practice, including power structures
Trauma Informed Care Screening Tool

**Phase 3: Trauma Responsive**

1. Workgroup uses a process for gathering info about TIC opportunities
2. Workgroup has reviewed policies, practices, and environment with trauma lens
3. The org has a process for input and feedback from staff and service users
4. The org uses other data to identify opportunities for TIC

**Phase 4: Trauma Informed**

1. Any change(s) to policy, practice, or environment has been initiated
2. Changes are reviewed and monitored—“did it work?”
3. Changes are modified as needed
4. Most changes to policy and practice have been initiated
5. Any change(s) to policy, practice, or environment has been adopted
6. Changes to policy and practice, are documented
7. Impact of TIC changes is evaluated for staff and service users
8. Impact of TIC changes is evaluated in the organization or system (e.g., org level data)

Outcomes

TIC Culture

We recommend the following citation: Trauma Informed Oregon (2018). *Trauma informed care screening tool.*

Phase language (e.g., trauma aware) is adopted from Missouri Department of Health and Parnters (2014). *Missouri Model: A developmental framework for trauma-informed.*