Trauma-Informed Organizational Self-Assessment:
Long-Term Services & Supports

Purpose

The purpose of the Trauma-Informed Organizational Self-Assessment: Long-Term Services & Supports is to provide a starting place for health and human services organizations, agencies, and systems serving older adults and adults with disabilities, and to assess where an organization falls along a continuum of trauma-informed care and to engage them in a process of setting organizational improvement goals. This tool builds on previous work from a variety of fields, including aging services, behavioral health, child welfare, early childhood development, education, housing, juvenile justice, public health and victim advocacy. The self-assessment identifies organizational milestones and priority areas for inspiring active planning and is *not* intended as a measure of individual performance or data collection tool. The goal is to stimulate intra-organization dialogue on how organizations and systems can advance trauma-informed care and practice.

How to Administer the Organizational Self-Assessment

The framework is organized into ten domains drawn from a variety of disciplines. [1] Each domain includes criteria about which organizations may self-determine their level of proficiency. The process of becoming trauma-informed is a continuous one. The self-assessment is solely intended as a tool for organizations to identify strengths, weaknesses, and opportunities for further development. The five steps for completing the self-assessment are 1) organization staff (such as through a dedicated trauma-informed change team) completes the assessment instrument; 2) team reviews the results and, where warranted, facilitates a discussion about why they scored each domain as they did and any variance between the ratings; 3) results are synthesized for review by the team; 4) staff select and prioritize domain(s) for improvement for a given time period; 5) staff discussions are facilitated to help identify the need for potential discipline-specific assessments and to prioritize resource allocation and training needs.

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[1] This document utilizes and adapts a compilation of definitions, domains and items from the Substance Abuse Mental Health Services Administration's *Concept of Trauma and Guidance for a Trauma-Informed Approach* (2014), Southwest Michigan Children's Trauma Assessment Center's *Trauma Informed Systems Change Instrument* (2010), the National Center on Family Homelessness' *Trauma-Informed Organizational Self-Assessment* and *"Creating Cultures of Trauma-Informed Care: A Self-Assessment and Planning Protocol"*, Virginia's : Linking Systems of Care for Children and Youth State Demonstration Project's *Policy Review Tool* and *RFA/RFA Checklist*, and the Administration for Community Living's Guidance to the Aging Services Network.

A. Governance and Leadership

Instructions: Please indicate the level of organizational adoption for each trauma-informed attribute statement below.

A1. Organization's guiding principles and strategic plans (vision, mission and values) reflect the core principles of trauma-informed approaches (safety; trustworthiness and transparency; peer support and mutual self-help; collaboration and mutuality; empowerment, voice, and choice; cultural, historical and gender issues).

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

A2. Organization leaders discuss trauma-informed care in internal meetings and in public forums.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

A3. Organization leaders actively solicit internal input concerning trauma and how policies and practices (services) can promote healing.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

A4. Members of the organization's governing bodies (e.g. leadership teams and governing boards) are recruited to have specific training or background in trauma-informed care.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

A5. Leadership actively solicits the voice and participation of people using their services that have lived experience and/or trauma histories and are healing.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

B. Policy

B1. Written policies demonstrate a commitment to cultural differences and practices.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

B2. The organization's non-discrimination policies are inclusive of sexual orientation and gender identity and expression.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

B3. There are written policies outlining program responses to crisis (i.e. self-harm, suicidal thinking, aggression) among people who are being served (older adults, people with disabilities, residents, family members) and staff.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

B4. The organization reviews its policies on an ongoing basis to identify whether they are sensitive to the needs of trauma survivors.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

B5. The organization involves staff in its review of policies.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

B6. The organization involves older adults, people with disabilities, family members, and people receiving services in its review of policies.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

C. Physical Environment

C1. Physical environment promotes a sense of safety, calming, and de-escalation for older adults, people with disabilities, family members, residents, or participants.

not at all	minimally	moderately	significantly	fully	n/a
◯	◯	◯	◯	◯	◯

C2. Waiting/reception areas are designed and furnished to promote dignity and safety, have family-friendly features, and solicit community voice in their design (i.e. older adults, people with disabilities).

not at all	minimally	moderately	significantly	fully	n/a
◯	◯	◯	◯	◯	◯

C3. Physical environment promotes a sense of safety, calming, and de-escalation for staff.

not at all	minimally	moderately	significantly	fully	n/a
◯	◯	◯	◯	◯	◯

C4. Policies and procedures are in place outlining how the organization will address potential threats to people utilizing the physical environment (older adults, people with disabilities, residents, family members, participants) from natural or man-made threats (fire, tornado, hostile intruder).

not at all	minimally	moderately	significantly	fully	n/a
◯	◯	◯	◯	◯	◯

C5. Crisis intervention scenarios are practiced during drills and/or ongoing de-escalation strategy trainings.

not at all	minimally	moderately	significantly	fully	n/a
◯	◯	◯	◯	◯	◯

Comments (examples of successes and/or opportunities for change):

D. Accessibility

D1. The organization has an approved Accessibility Plan to address its response to service requests from older adults, adults with disabilities, residents, participants, and family members regardless of race, ethnicity, language, ability, sexual orientation, gender identity and expression, and/or religion.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

D2. The organization provides services that engage and are accessible to linguistically, ethnically, racially, and culturally diverse groups.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

D3. The organization provides services that engage and are accessible and affirming to LGBTQI+ older adults, adults with disabilities, and family members.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

D4. The organization has mechanisms to address physical and emotional barriers to services based on gender identity and expression.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

E. Engagement

E1. The organization creates systematic opportunities to include the voices, needs, concerns, and experiences of people receiving services.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

E2. The organization specifies people receiving services and their chosen support team members (family, partners, friends) will be prepared for service meetings and other planning meetings.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

E3. The organization recognizes the importance of maintaining supportive relationships and provides various means for reducing social isolation and increasing positive social connectedness (gatherings in a safe environment, affinity-based social activities, companionship programs, friendly volunteers).

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

E4. The organization assists people receiving services in adjusting to new environments and trains its staff on the risks of relocation stress syndrome and opportunities for support during transitions (giving control over changes, preparing for change, assisting with adjustments during transition, positive meaning making).

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

E5. As guided by the preferences or direction of people receiving services, the organization includes all forms of family to help identify connections, recognizing that some people who play the most supportive roles in a person's life may not be related.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

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G. Cross-System Collaboration

G1. The organization has a system of communication in place to develop/sustain common trauma-informed goals with other organizations working with the older adults, adults with disabilities, and families.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

G2. Strategies are in place to identify and work with community providers and referral agencies that have experience delivering evidence-based trauma services.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

G3. Mechanisms are in place to promote cross-sector training on trauma and trauma- informed approaches.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

G4. The organization develops strategies that promote cross-system training with out of network, non-traditional, community-based, and/or grass-roots organizations.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

G5. When possible, cross-system training is organized in a neutral and fair location that is comfortable to all participants.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

H. Screening, Assessment, and Treatment Services

H1. Timely and trauma-informed screening and assessment is available and accessible to residents and/or participants.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

H2. Screening and assessment includes/acknowledges historical trauma.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

H3. The organization has the capacity to provide or make a timely referral to a continuum of trauma-informed interventions for older adults, people with disabilities, and family members.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

H4. An individual's own definition of emotional safety is included in treatment, service, and care plans.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

H5. Staff members practice strength-based techniques with people receiving services and family members (e.g. motivational interviewing open-ended questions, reflective listening).

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

H6. A continuum of trauma-informed interventions is available for people receiving services and family members.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

I. Training and Workforce Development

I1. The organization supports training and workforce development for staff to understand and increase their knowledge of trauma, resilience, and strengths-based strategies.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

I2. The organization provides services that engage with and are accessible to linguistically, ethnically, racially, and culturally diverse groups.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

I3. The organization ensures that all staff (direct care, supervisors, front desk and reception, support staff, housekeeping, transportation, and maintenance) receive basic training on trauma and its impact, resilience, and strategies for trauma-informed approaches across the organization and across personnel functions.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

I4. Training and resources are provided to supervisors on incorporating trauma-informed practice and supervision in their work.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

I5. Part of supervision at the organization is used to help staff members understand vicarious trauma and how they may impact their work and includes ways to manage personal and professional stress.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

I6. Staff members receive individual supervision from a supervisor who is trained in understanding trauma.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):

J. Evaluation and Quality Assurance

J1. There is a system in place that measures the organization's performance (e.g. an organizational assessment) in being trauma-informed.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

J2. The organization uses strategies and processes to evaluate whether staff members feel safe and valued at the organization.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

J3. People receiving services and family members are given opportunities to evaluate the program and offer their suggestions for improvement in anonymous and/or confidential ways (e.g. suggestion boxes, regular satisfaction surveys, etc.).

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

J4. People with lived experience are invited to share their thoughts, ideas, and experiences with the organization.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

J5. The organization recruits former individuals with lived experience to serve in an advisory capacity.

not at all	minimally	moderately	significantly	fully	n/a
○	○	○	○	○	○

Comments (examples of successes and/or opportunities for change):