Trauma-Informed Care and Assessing the Needs of the Southeast Kansas Mental Health Center

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Presenters



Meredith Scafe, PhD Children's Mercy - KC



Doug Wright, PhD
Southeast Kansas Mental
Health Center



Whitney Henley, MPH
The University of Kansas
Medical Center



Disclosures

 The presenters have no financial disclosures or conflicts of interest in relation to this presentation.



Learning Objectives

1. Demonstrate an understanding of the widespread impact of trauma.

2. Demonstrate an understanding of the components of trauma-informed care in a mental health setting.

3. Demonstrate the importance of training clinical staff who already have a basic understanding of trauma-informed care.



CDC: Adverse Childhood Experiences



Abuse

Emotional Physical Sexual



Neglect

Emotional Physical



Household Challenges

Substance use
Mental Illness
Suicidal Behavior
Divorce/Separation
Incarceration
IPV



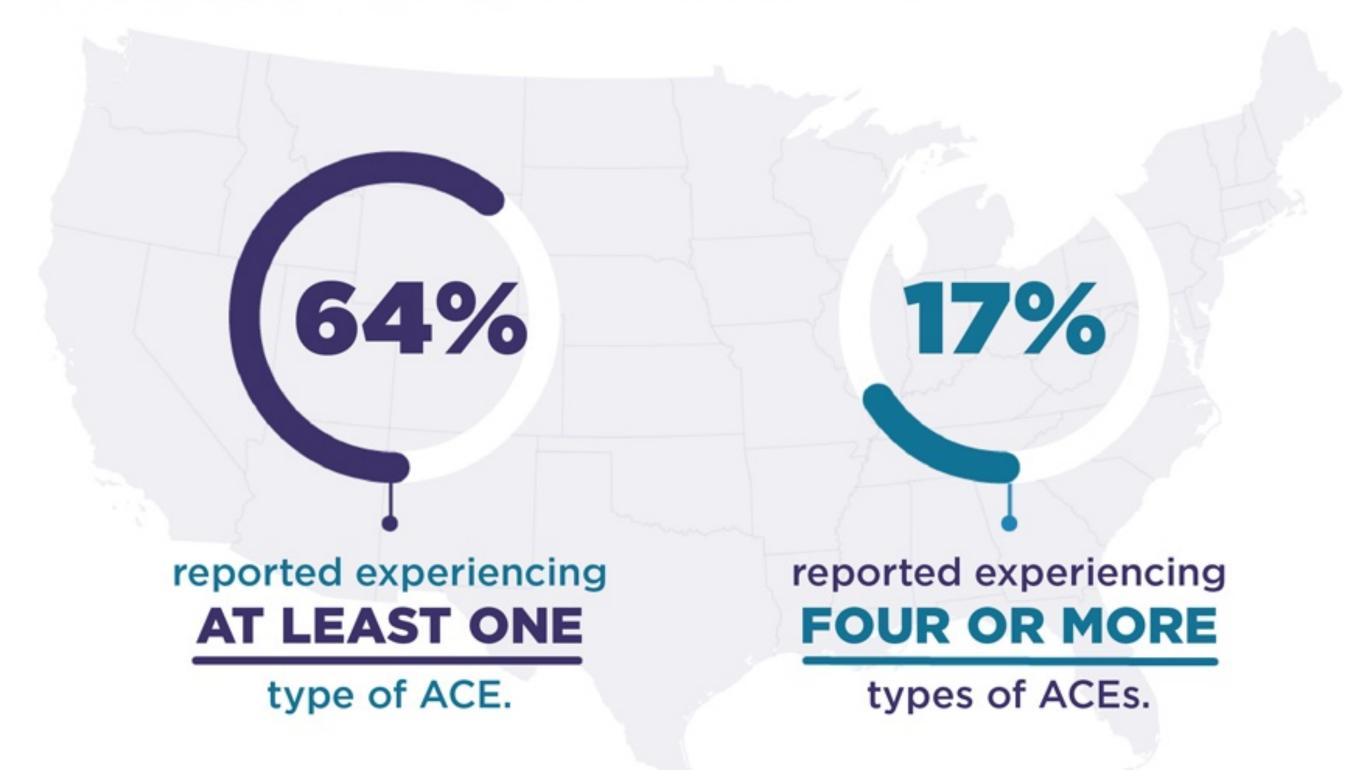
Other Adversity

Bullying
Community Violence
Natural Disaster
Refugee/Wartime
experiences
Terrorism



Many People Report ACEs

According to data collected from adults across all 50 states and the District of Columbia between 2011 and 2020:

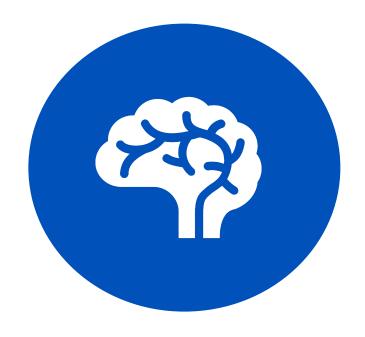


Research shows that experiencing a higher number of ACES is associated with many leading causes of death.



Chronic Health Conditions

- Heart Disease
- Stroke
- Asthma
- COPD
- Cancer
- Kidney Disease
- Diabetes
- Obesity



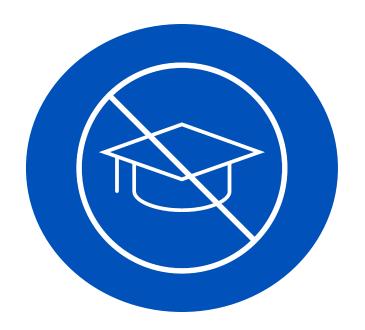
Mental Health & Substance Use Disorders

- Depression
- Alcohol Use
- Opioid Use
- Tobacco Use



Health Risk Behaviors

- Smoking
- Alcohol Use
- Physical inactivity
- Risky sexual behavior
- Suicidal thoughts and behavior



Social Outcomes

- No insurance
- Unemployment
- Less likely to graduate high school

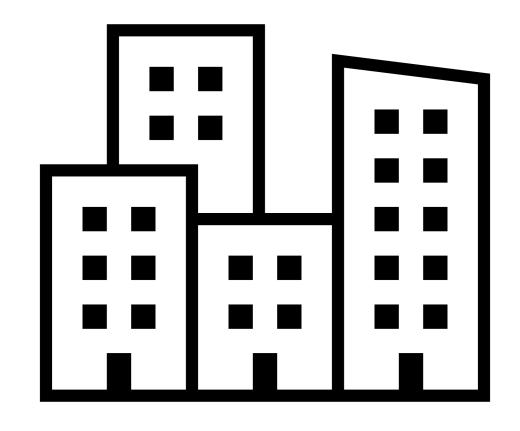


What is Trauma-Informed Care?

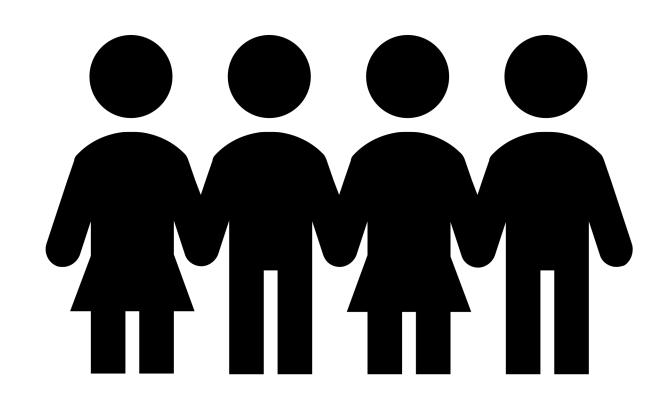
- Realizing the widespread impact of trauma and the paths for recovery
- Recognizing the signs & symptoms of trauma
- Integrating knowledge about trauma into policies, procedures, and practices
- Seeking to actively resist retraumatization



Key Ingredients of Trauma-Informed Care



Organizational Practices



Clinical Practices



Organizational Practices

- Leading and communicating about the transformation process
- Engaging patients in organizational planning
- Training clinical and non-clinical staff members
- Creating a safe environment
- Preventing secondary traumatic stress in staff



Clinical Practices

- Involving patients in the treatment process
- Screening for trauma
- Training staff in trauma-specific treatment approaches
- Engaging referral sources and partnering organizations.





NCTSN Trauma-Informed Organizational Assessment

Trauma Screening

Assessment, careplanning, treatment

Workforce development

Strengthening resiliency & protective factors

Addressing caregiver trauma

Continuity of care and cross-system collaboration

Addressing, minimizing, & treating secondary traumatic stress

Partnering with youth and families

Addressing intersections of culture, race, trauma



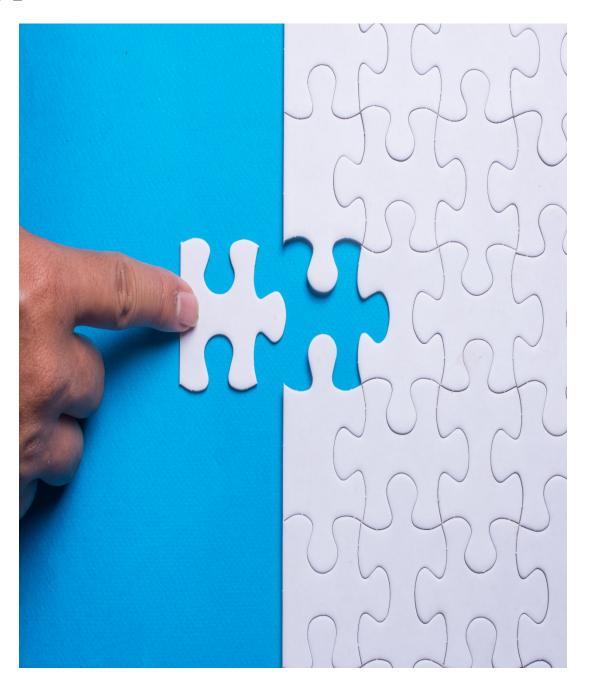
Southeast Kansas Mental Health Center

- One of 26 Mental Health Centers in Kansas
- One of the first Certified Behavioral Heath Clinics (CCBHC)
- Serves 6 rural counties including: Allen, Anderson, Bourbon, Linn, Neosho, and Woodson
- Provides full array of outpatient mental health services
- Population served: primarily lower SES, Medicaid (60%), SPMI, and SED
 - However, serve the full community.



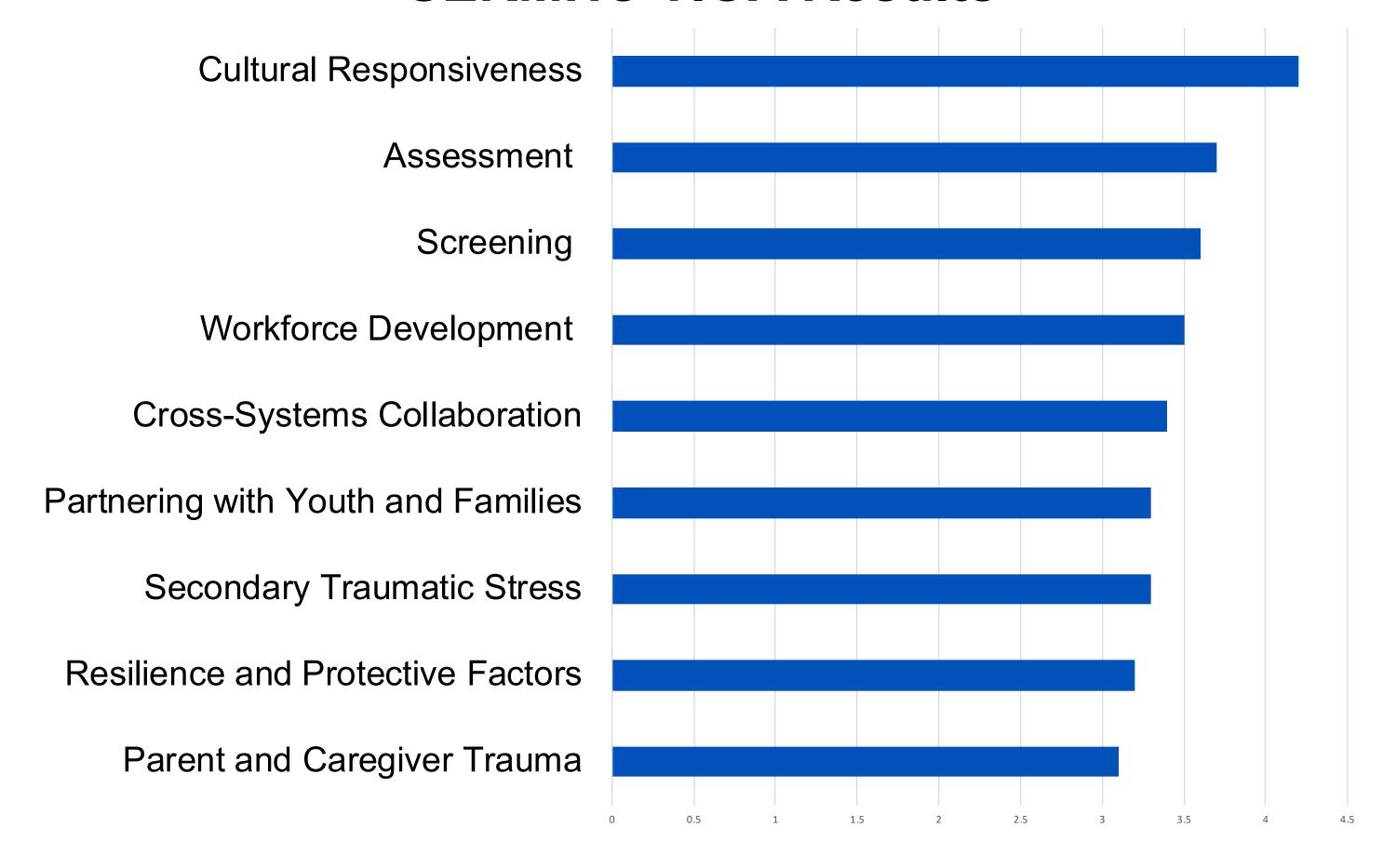
KUMC and **SEKMHC** Collaboration

- SAMHSA-CMHC Grant Funding
- Built upon previous partnership with KUCTT
- Needed assessment expertise
 - What are we missing?
- Wanted to build a sustainable training





SEKMHC TIOA Results





SEKMHC Key Takeaways

 Screening: Learning evidenced-based screening practices (e.g., measures, ways to ask these questions in a safe/trusting manner, etc.)

• Secondary Traumatic Stress: Providing psychoeducation to staff about secondary traumatic stress and ways to manage it through coping.

Parents: Providing psychoeducation on how to discuss and assess
parents' traumatic experiences and having knowledge of referral sources
for parents in the event they need their own services.

SEKMHC Key Takeaways Continued

Treatment:

- Identification of referral sources for youth who need traumaspecific services.
- Provide training to behavioral health providers in traumaspecific treatment programs (e.g., TF-CBT, Prolonged Exposure, CPT).





SEKMHC Use of Results

- Began assessing caregivers for trauma needs
- Began providing services for caregivers
- Developed resiliency training for staff and clients
 - Recognized staff as care givers (secondary trauma_





Implementing the Trauma-Informed Care Assessment

Develop a **Finalize** Discuss the **Encourage all** Conduct an short-term and Team Goals, staff and/or TIOA process and in-person long-term action **Expectations**, programs to commeeting to goals plan based on Commitments with all staff plete the TIOA review results and the results of the and Timelines reach TIOA, an consensus implementation framework, and applicable **NCTSN** resources



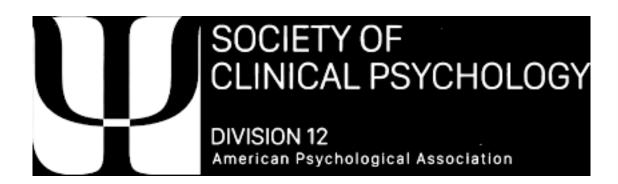
Additional Resources















Questions and Comments



References

Centers for Disease Control and Prevention. (2023). *Adverse Childhood Experiences (ACES)*. https://www.cdc.gov/violenceprevention/aces/index.html

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