



Trauma Responsive Care

Manager's Supplement

aldrige • palay



©2016, 2020. All Rights Reserved

Authors: Lara Palay and Kevin Aldridge

Aldridge Palay Group
167 South State Street, Suite 50
Westerville, OH 43081-2236
614.787.0544

www.aldrigeppalay.com



Table of Contents

Introduction	3
Supervising in a Trauma Responsive Care Environment	5
The CALMER Skills: Strategies for Supporting Staff	9
Tips for Good Supervision in Trauma Responsive Care	12
The Manager as Linchpin	16
Further Reading	17

Introduction: How it all fits together

Trauma Responsive Care (TRC) is a comprehensive system for agencies who provide services and supports for people with intellectual and developmental disabilities. TRC ensures that the people supported by your organization feel *safe, connected, and in control*. Trauma Responsive Care doesn't really work, however, without committed leadership to carry its message.

Everything must line up between the administrative and the operational sides of the agency. Management must make sure that policies, procedures, management practices, and decision making all reflect Trauma Responsive Care values. This is how your front-line staff will bring this message to the people you serve. Good leaders model these values with everyone in the organization. This encourages all staff to do the same.

Background: Trauma-Informed Care

From a mental health perspective, the Substance Abuse and Mental Health Services Administration (SAMHSA) provides a framework for trauma-informed care: start with increased awareness through identification and assessment; next, implement specific treatment-based responses—including decreasing the likelihood of re-traumatization. According to SAMHSA's trauma-informed approach, a program, organization, or system that is trauma-informed exhibits the “Four R’s”. You can find these in *KAP KEYS for Clinicians* (see Additional Resources, below):

- Realizes the widespread impact of trauma and understands potential paths for recovery.
- Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system.
- Responds by fully integrating knowledge about trauma into policies, procedures, and practices.
- Resist re-traumatization.

SAMHSA also outlines sixteen principles of trauma-informed treatment for the clinical staff of behavioral health providers. But what about the rest of a person's life, interacting with staff, going to work, living out in the community?

The Next Step: Trauma Responsive Care

Being trauma-informed provides a solid foundation but being “informed” about something doesn’t provide detailed guidance for relationships and day-to-day interactions. Relationships are the heart of healing from trauma. Many people who come to our agencies for help have struggled with traumatic stress, in some cases for their whole lives. The SAMHSA framework presumes that agencies can identify and assess trauma accurately and consistently. Even if we screen for trauma, some people will slip through the cracks; maybe their traumas were never disclosed or weren’t believed. For some of the people we serve, the everyday “little t” traumas aren’t even measurable. Trauma Responsive Care solves this problem with three fundamental principles. Trauma Responsive Care is

- **relationally-based.** Healing from traumatic injury happens in supporting and caring relationships. A trauma-responsive environment must create and sustain these relationships in a systematic way.
- **universally applied.** A trauma-responsive environment uses TRC as a universal precaution: Treat everyone as if they need to feel safe, connected, and in control, before anything else.
- **organization-wide.** A trauma-responsive environment is not just for the individuals you serve, or just for direct care staff. Everyone benefits from feeling safe, connected and in control. Everyone in your agency should make everyone feel safe, connected and in control, all the time.

As you think about these three principles it becomes clear that managers, especially supervisors of direct service staff, are the key to long-term success.

This guide will present information and ideas that will help you succeed in creating a truly trauma-responsive environment.

Supervising in a Trauma Responsive Care Environment

Two Big Ideas

As a manager and supervisor of staff in a human services organization, you are the linchpin that holds everything together. You are the conduit of information, values, commitment and mission from the senior management to the people who actually provide the services. Whether or not your agency really incorporates Trauma Responsive Care depends on you understanding two new ideas and taking them to heart.

Idea #1: You provide relationships. Your agency does not provide habilitative services or educational services or housing services or healthcare services or mental health services or youth-related services—all of this is **how** you do it, yes, but **what** you provide are the relationships in which these things happen. Billable units are how we measure it, but what your agency is really paid for is to provide healing relationships.

Idea #2: These relationships have to be modeled. The single best way for you to help your staff help others feel **safe, connected** and **in control** is to help *them* feel **safe, connected** and **in control**. It's as simple as that.

The organization needs direct service professionals to help people feel safe, connected, and in control.

The only way this can happen is if direct service professionals themselves feel safe, connected, and in control. Ensuring this is the supportive role of management. Anything else a manager does comes second to this.

Supervising in Trauma Responsive Care: What it is-and what it isn't

Supervision, when you think about it, is part traffic cop, part cheerleader, and part disciplinarian. One minute you are patching the schedule together, the next you're encouraging someone who just had a rough shift. Then, you're talking to someone else about their habit of being chronically late for work. On balance, most of these interactions are either neutral or even pleasant, but there are some interactions with subordinates that are not pleasant.

Sometimes, staff people commit serious and/or continuing rule violations. Managers and administrators are responsible for correcting this. In those cases, it's easy to confuse a trauma-responsive environment with being a pushover. Helping a struggling staff person feel safe, connected, and in control means it's actually easier to be direct and firm with them about what is going wrong. You can say, "This is a problem that needs to change now. Let's talk about how that can happen," while still showing that you value and respect them as a person. When they feel valued and respected (really just another way of saying *safe, connected, and in control*), they can actually hear what you are trying to tell them, instead of getting defensive, angry, or shutting down. When this happens, you have a chance to make progress on the problem *and* not back down, because whatever the problem is, it needs to change without creating an ugly situation or a power struggle. You can address the problem without confronting an angry or defensive person. Any action the manager takes is solely to allow the staff person to pause, consider their actions, and stop whatever is causing the problem. There are no guarantees of course, and some people are hard to reach no matter what. But in our experience, managers who use TRC to guide a difficult conversation have a better chance of that conversation being calm, clear and productive.

The first and most important thing to remember about supervising using Trauma Responsive Care is this. You are still required to follow your agency's policies. None of the skills change any of that. Your personnel policies tell you when and how to implement any disciplinary actions, including how to respond to serious issues like abuse or theft, and other things that may require termination. These remain in full effect even though you are now trying to help your

staff to feel safe, connected, and in control. But even in those tough situations that call for termination, remember, the object is to inform the person that they can no longer work here and why. Helping them feel safe, connected, and in control, even then can help defuse a potentially tense meeting.

So, how does Trauma Responsive Care change how we supervise? The changes are easier to understand when we think of them in terms of what supervision in a trauma responsive environment *isn't* as well as what it *is*.

- It isn't being nice all the time. It is being calm all the time (or as often as we can).
- It isn't giving people a pass. It is closely following your agency's personnel policy.
- It isn't something that only applies here. It is something that can help you throughout your career.

A Word About Anger

We are now going to look at good management practices that are particularly helpful in your quest, as a boss, to make the people who work for you feel safe, connected and in control. Before we move on, however, lets talk about anger. Anger is often a masking emotion. I may feel angry, but when I look deeper, I realize that really, I'm afraid, hurt or ashamed. As supervisors, you need to be even more vigilant about this when you feel angry at work. You have a lot of responsibility and so it is completely natural to feel some fear of failure, hurt or aggrieved, or a sense of shame when you do fall short of your own or someone else's expectations of your performance. Remember, part of being a manager is taking on responsibilities for things you may not have complete control over. We can do our jobs better, if we build our capacity to dig beneath our anger and examine our deeper feelings.

Anger also has an exaggerated role in the workplace. We tend to use it as a means of communicating importance. Remember the staff member who is chronically late for his shift. All too often, he doesn't really "get" the importance of being on time until his boss gets mad about it. He may actually be confused by facing disciplinary action for something that no one

actually yelled at him about. One of the most subtle and most profound changes in your management practices in Trauma Responsive Care is undoing this expectation- that your anger communicates importance. As you strive to be more self-aware in your own style as a manager, and you become better at addressing issues in a calm manner, you may find it helpful to remind people that just because you are not visibly angry about something does not mean it is not important.

Practicing the CALMER Skills in Supervision

As you think about the two Big Ideas above and how they impact your role as a supervisor, the second of the two is particularly important—modeling. If you want your staff to help the people they work with feel safe, connected, and in control, the best way to get them to do that is for you to help them feel safe, connected, and in control. How do you do this? The same way they do—by using the CALMER Skills.

Think of the daisy-chain system to put fires out when no water is near the fire. One person fills the bucket and hands it to another, who hands it to another until it gets to the front and that person pours the water on the fire and hands it back. The direct care professional is in the front, by the fire, and everyone else in the agency is the daisy chain handing in buckets of the cooling water of safety, connection, and control up to the front of the line. A Trauma Responsive agency works this way, from the top executive’s office all the way to the person who fills the van’s gas tank. Everybody takes care of everybody else.

The CALMER Skills: Strategies for Supporting Staff

RELAXATION RESPONSE: Relax.

Think of a phrase that is meaningful to you, a prayer, a line from a poem, or a verse from scripture. Breathe in deeply and say the phrase to yourself as you exhale. Repeat 5 times. Breathe naturally and settle into a steady inhale for four counts then pause your breath and exhale for four counts. Do this a few times. Then, while keeping your inhale at four counts, pause your breath and exhale for a count of five. Repeat this a few times then increase your exhale after the pause to six counts. Repeat this a few times. Always keep your inhale at four counts.

CHECK IN: What's up with me?

Ask them, "How do you feel? What are you feeling? What's under that feeling?"

Ask them to be specific including stressors at work and stressors outside of work.

Ask them to tell you what they need.

Dragon Slayer

Help the person to talk about what they're worried about. Reassure them about their concerns, either by explaining why something won't be a problem, even though it seems like it might, or by reassuring them that they can handle it and will have people around them to help.

ACCEPT: Whatever is up with me is OK.

Two can play at this game!

In Poker Face, you learned to think about your own "tells" for feelings. In Two Can Play, you gently or playfully help the person to learn their own tells. "When you pace back and forth, I can tell you're probably worried. I wonder if you're worried right now?"

Tell them, "All feelings are OK. All feelings will pass." Repeat if needed.

Give them permission to feel their feelings, without acting it out.

LOVING-KINDNESS: I have strengths.

Confirm and validate their feelings.

Name three things the person is doing well right now. Name three good things about the person's character that they can bring to help in this situation.

Get in the boat

Is someone telling you about a feeling, a worry, or a problem? Instead of telling them how to fix it, get in the boat with them for a minute. A staff person might be afraid or frustrated over safety concerns. Instead of explaining why its not bad, get in the boat! "Yeah, it can be scary and we're going to have to get used to some big changes. I'm concerned about that, too. Let me know what you need, and we'll get through it together." The conversation may need to go on to problem-solving, but much of the time, just validating the concern might be enough. At any rate, it will always help.

MINDFUL: What's happening and what's not happening?

Ask them, "What is happening right now?"

Then ask them, "What is not happening right now?"

Insist gently on non-judgmental observations. Don't allow negative talk about others or negative self-talk.

Check to see if you're calm. If you are, then get CALMER! By adding the 'er' to the word calm you move to an active role. You have to be calm before you can actively become calmer.

"Sittin' on the dock of the bay"

Just like in the old Otis Redding song, "I'm just sittin' on the dock of the bay", you can just sit and watch your responses, without acting on them. Let your feelings roll in and roll away again before you act.

EXPRESS: Take your feelings for a walk

Identify who, if applicable, they need to approach.

Talk about, and write down if possible, “What should we do with or about this?” Let them direct it but help them as needed.

Rehearse conversations using ICE.

When sharing your feelings, use “I” statements: “I feel . . .”

ICE it down!

I-C-E reminds you how to have a tough conversation calmly.

*I feel (sad, angry,
disrespected, etc., when
you (specific behavior). I am asking you to
Change in the behavior this specific way,
and, in
Exchange, I will try to (action
to make things better or
easier for that person to do
what you are asking).*

RESPOND: Safe, Connected, and In Control

Check in with them: Do they feel safe, connected, and in control – This may take some time.

You might try ending with the Relaxation Response.

Check in with them: Are they taking care of themselves. Discuss contacting your EAP if appropriate—write it down.

Pouring from a full cup

You can't pour from an empty cup! Your job requires you to give a lot of energy to other people—and you probably have a home life as well! Make sure you are replenishing your physical and emotional strength regularly.

Tips for Good Supervision in Trauma Responsive Care

So far we've talked specifically about practicing the CALMER Skills in supervision and provided some practices for each skill. Beyond that, here are some tips that can improve your skills as a trauma-responsive manager. Some of these strategies are not directly related to Trauma Responsive Care, but they all support a positive and safe work environment.

Seek to manage systems, not people. This is important because, really, you can't manage people-you can only manage the systems through which they manage themselves. A supervisor cannot be everywhere at once and cannot directly supervise every interaction. In most cases, the person in any given interaction is going to know much more about it than their supervisor. It's better to think in terms of agency policy and understood guidelines, reinforced by high levels of communication. You manage the way your staff do the work; they do the work. Here's an example. Imagine a new bookshelf has to be assembled. Assigning that task to someone is like "managing the system". Reading each step of the instructions aloud and watching them execute it is like "managing the person". The don't stop and wait after each step to be difficult, they stop and wait because they have nothing else to do. Just hand them the instructions and get out of their way.

This mindset will help you **try to be persuasive, not coercive.** Most of the work we do is not, like in a spy movie, "need-to-know-only". Taking into consideration confidentiality, you can have a conversation with staff about what needs to happen and why. Remember, they probably know more about the situation on the ground than you do. If you just bark out orders, they may do it, but you miss out on all of their insights. If you approach the task in a persuasive manner, it becomes a team effort with the benefits that come with buy-in.

These first few tips work best when you **know the people you work with-and you like them.** You should make an effort to know the people who work for you, specifically the character strengths they bring to the job. Character strengths are inherent to us, part of our birth personality, not skills that can be learned. Integrity and commitment are character strengths,

knowing how to complete paperwork is not. Proper documentation may be a good thing to know, but you should go deeper. Check out *Values in Action*, listed in the Further Reading section. This will help you get to know and appreciate your staff more, and they will feel it.

We spoke earlier about the importance of a high level of communication. You should **be actively accessible and then actively listen**. If you're accessible, you answer the phone when your staff call you. To be actively accessible means you pick up the phone and call them—sometimes for no particular reason. Think of a time when you were struggling with something at work—not an insurmountable problem, but something a little troubling. How different would you have felt if out of the blue, your boss walked up to you or called you and said, “Hey, I just wanted to see how things are going and see if there was anything I could help with.” Even if you don't take them up on it, it feels good and you know they are there if you need them.

Never speak or act in anger. We discussed this earlier, but it bears repeating. You can notice your anger, non-judgmentally, and then watch it diminish—then you will have learned from it and can act even more appropriately.

Attack the problem, not the person. This advice is from Roger Fisher and William Ury in their book on negotiation called *Getting to Yes* (See Further Reading). A good manager will separate the person from the problem. Remember, the whole point in a tough conversation is to solve the problem. Treat them respectfully, ask about how they're doing in other areas of their life, how their kids are adjusting to school—just being polite and friendly can communicate that you are not taking the situation as a reflection of their worth as a person. You can ask an underperforming staff

To solve a problem,

think about these steps and solve the problem *with* the staff person in question:

- Identify and express emotions (this is for both of you)
- Identify character strengths you depend on them for
- Communicate concerns (remember “I C E”)
- Discuss the concerns in light of the character strengths they bring
- Analyze the problem and break it down if necessary (maybe not all of it needs to be figured out right now)
- Brainstorm ideas for solutions
- Pick an option
- Make a plan

person if they're feeling better from their cold, and then address the productivity issue. Like everything else in Trauma Responsive Care, this starts with calming down initial emotional reactions (yours and theirs), and that means identifying and accepting emotions. Unidentified or unacknowledged emotions can mix with other dimensions of the situation, like the pressures of time or expectations, and blow things out of proportion. Calming down will automatically improve the odds of an acceptable solution. From this starting point, you can break the problem into segments and better understand your options.

During this process, especially when communicating concerns, you may need to clearly identify something in the person's job performance that needs to be corrected or improved. Another good management tool is the [positivity sandwich](#). Put the negative feedback between (genuinely) naming a strength or a recent good action they've done. This reinforces that you are concerned about specific correctible behaviors and not attacking them as a person.

Though most interactions you have with your staff are positive, it's the few negative and emotionally charged interactions that stick out. Emotional reactions can be upsetting, for you and for your staff. No matter what the cause of irritation or fear or anger, you want to help staff move from a reactionary state—brain stem (body function) and the hippocampus (emotions) to the cortex (thinking) for an integrated response.

When tensions are high, there is little point in confronting or letting yourself get caught up in it. Use the CALMER Skills to help the person shift from a reactionary mode to a responsive mode. This may take a few minutes but it's well worth it. You might ask the person to take a brief walk or arrange to meet in another room in five to ten minutes. Then your time together will be much more productive.

First, seek to understand
before being understood.

This is the sixth ‘habit’ of Stephen Covey’s “Seven Habits of Highly Effective People”, Ask questions to guide the people involved in the situation to explain their perspective. This tip is

especially useful if you’re dealing with a conflict between two people. When you think you understand, repeat it back and ask if you have it right. In these kinds of situations, it’s always helpful to start with questions and end with a check in. And this brings us right back to the beginning of the CALMER Skills.

Ten Tips for Managers

- Use the CALMER Skills
- Seek to manage systems not people
- Strive to be persuasive as opposed to coercive
- Know the people you work with and you like them
- Be actively accessible and then actively listen
- Never speak or act in anger
- Attack the problem, not the person
- Make a positive sandwich
- Seek to understand before being understood
- Start with questions and end with a check in

The Manager as Linchpin

Frontline managers are the linchpin of every human services organization. Trauma Responsive Care doesn't work if you don't carry it through in the middle of a crisis or when everything is rushed and there doesn't seem to be the time to calm down. You have to help each other. Talk to each other about how you are using the CALMER Skills and these tips, and jot down new ideas that you come up with between yourselves. If you stick with it, your jobs will get easier, and—because you are the linchpin—if your job gets easier, everybody's job gets easier.

As a manager you have to **remind** staff generally of Trauma Responsive Care and the value of helping people feel safe, connected, and in control. Then you can **refine** this message with staff meetings or in individual interactions with staff and constantly **reinforce** the concepts and the skills. As you do this, your organization will begin to **realize** the power and potential of a trauma-responsive environment. These three steps, remind, refine, and realize, are part action and part outcome. It starts with you but then becomes something that happens naturally.

Think of it like a plant. You plant it, you water it, and you nurture it. Those are your actions. *It* sprouts, grows and flowers. You don't sprout the plant or grow for the plant.

Trauma Responsive Care will eventually take root and grow on its own—if you nurture it.

Further Reading

Covey, Stephen R. The 7 Habits of Highly Effective People. Simon & Schuster. New York, New York. 1989, 2004.

Drucker, Peter F., The Practice of Management, New York: Harper Business, 1986.

Roger Fisher & William Ury "Getting to Yes" London; Penguin Group. 1981

Gharajedaghi, Jamshid., Systems Thinking. Managing Chaos and Complexity: A Platform for Designing Business Architecture, Boston: Butterworth Heinemann, 2006.

Substance Abuse and Mental health Services (SAMSHA). <https://www.samhsa.gov>. KAP KEYS For Clinicians. Based on Trauma-informed Care in Behavioral Health Services (TIP 57). sma15-4420.pdf.

Substance Abuse and Mental health Services (SAMSHA). <https://www.samhsa.gov>. Trauma-informed Care in Behavioral Health Services (based on TIP 57). sma15-4912.pdf, p. 11-20.

Values In Action Institute. <https://www.viacharacter.org>. VIA has some wonderful resources on character, including a survey to help you and your staff identify a person's character strengths.