# **Kent and Medway RELATE framework** to support a traumainformed approach



The RELATE framework supports organisations to reflect on and consider further ways to embed trauma informed approaches in their work, including being sensitive to the impacts of trauma, supporting recovery and seeking to prevent (re) traumatisation within services.

This framework supports organisations in Kent and Medway become trauma informed and takes inspiration from existing frameworks, for example SAMSHA's\* work in the United States. in addition to a review of published research and consultation with local organisations embedding a trauma informed approach in their work.

The framework acts as a guide, noting that:

- Organisations purpose, context and priorities will vary and therefore the framework will need to be personalised accordingly.
- Creating a trauma informed organisation is a fluid, ongoing process, requiring a commitment to learning from staff and service users to assess how well patterns of practice are being embedded and sustained over time.

### Framework purpose

#### Organisational assessment

Help an organisation, small or large, to consider how well the principles are incorporated in its values, policies, processes, culture and staff behaviours, using the example activities to prompt reflection and identify improvements.

#### Commissioning

Help commissioners and providers to articulate expectations of and share how they deliver a trauma informed approach.

#### Education and training

Help to promote discussion, peer support and learning.

# Part of a wider system response

A trauma informed approach forms part of a public health response to Adverse Childhood Experiences (ACEs), helping develop a strong professional workforce that are able to meet the needs of children, adults and families struggling with past trauma, including training and supervision as well as the time necessary to establish strong relationships. It also shares commonalities with high-quality care environments, including:

consistent culture of care.

4) Reflective learning linked to effectiveness and innovation.



1) Shared decision making, service user involvement and collaborative learning with patients and families.

2) Integrated working with partner organisations to help develop a

3) The principles of compassionate leadership.

# The **RELATE** framework

# Realise

Description Awareness of the impact of adverse childhood events and the importance of a trauma informed approach.

# **E**mpower

Strengths based, empowering and collaborative approaches to care.

Link up

Collaborative working with partner organisations.

(Be) Aware

Understanding signs/ symptoms through caring centred support.

# Transform

A trauma informed approach becomes part of organisational culture.

Organisational leaders are able to Aims articulate and role model trauma informed care.

> All people at all levels of the organisation/ system have a basic realisation about childhood adversity, understand how trauma can affect families, groups, organisations, and communities as well as individuals. Training is in line with the estimated exposure to trauma of the communities they work with

A strengths based, resilience building approach that provides choice, flexibility and control about support opportunities/ care, delivery of care and recognises selfmanagement strategies adopted in the past in addition to relevant inclusion of support/ family networks.

Staff and service users help co-produce services, including in the design, delivery and review stages.

There is an understanding that a trauma informed approach needs to be consistent across the services and sectors that individuals, families and communities are in contact with i.e. schools, criminal justice, family welfare support.

Ability to recognise the signs of trauma

Staff feel confident and supported in having sensitive conversations about trauma with people using their services.

Care is focused on the needs of the person compared to the needs of the service.

Local population data with understanding of its relationship to childhood adversity is used to support service design.

Integration of knowledge into policies, procedures handbooks) and practice

All staff understand the

benefit of their work. Adoption of common lar assessment processes

agencies. Trustworthiness and tran promoted and implement organisation and when w Efforts are made for cor with individuals and fam Pathways to trauma spe

are in place if requested.

Sense-check existing/ future policies to ensure they reflect trauma informed principles, including safety, trust and collaboration.

Board level awareness, ongoing training and induction processes for new staff include the organisation's trauma informed approaches and policies.

Staff are given time to reflect/feedback on how they feel about the organisational changes and what might help integrate trauma informed practice more fully into the organisation in addition to observed barriers.

Service user experience is used to learn what is and is not working at an organisational level.

Organisational values reflect trauma informed principles, are visible to staff and influence the content and design of communication plans.

Example

activities

Development of staff champion(s) to support ongoing learning.

Staff training provided, including an identified organisational budget/ resource for ongoing development.

Impacts of trauma discussed at team meetings, full member events and at meetings with close working organisations.

The service recognises the resources and resilience people have adopted in the past. People are asked what support they think they need.

Collaborative relationships are built with community organisations that can help develop coping mechanisms.

Peer support and self-help are part of the service offer.

Sharing of training materials/ trauma informed approaches with close working/ partner organisations.

Discussions with close working/ partner organisations on how to support consistency, safety and the opportunities to build trusting and transparent relationships between staff and service users/people.

A shared data and case management system is in place to assist closer working.

Encourage conversations that are respectful, sensitive and offer choice in response.

Safe, trusting spaces are developed to help establish strong relationships.

People and/or their close networks are supported to see the links between what is happening to them in the moment and how this may relate to past experiences. If routine enquiry is used, relevant training and support is provided.

Changes to internal systems such as appointment times to support conversations around childhood adversity.

Suitable supervision methods and workforce support for staff, including complex case consultation support where appropriate.

in clients, families and staff and others involved with the organisation.



# **Embed safety**

## A physically and psychologically safe space for practitioners and people using the service.

e about trauma (such as in staff	Services collaborate to ensure safe, holistic and personalised care is in place.
es. impact and	Staff well-being and resilience is supported in the work of the organisation, including recognising the
nguage and across multiple	potential impact of secondary trauma and providing visible and acceptable ways to access support.
isparency are lited across the rorking with others. Insistent working	The physical environment, service design and delivery of care of the organisation seeks to actively resist re traumatisation by providing a physically and psychologically
ecific interventions	safe space. The workplace encourages an open learning culture.

Conversations take place that help service users identify and share what safe care looks like.

Managers are aware of secondary trauma symptoms and how best to respond, including how to access further support if required.

Staff are supported to self-assess for signs and symptoms of secondary traumatic stress.

Opportunities are provided in the work environment to support well-being, for example mindfulness.

The physical environment supports the collaborative aspects of a trauma informed environment, for example, openness and shared spaces.

Service environment and delivery (process) allows for reasonable adjustments to meet individual needs.

# Definitions

**Trauma informed approach:** An organisational transformation model that improves awareness of trauma and its impacts, supports services to consider and put in place appropriate support, and prevents re-traumatising those accessing or working in services.

**Trauma:** Refers to events or circumstances that are experienced as harmful or life-threatening and can have lasting impacts on mental, physical, emotional and/ or social well-being.

Adverse Childhood Experiences (ACE): Refers to some of the most intensive and frequently occurring sources of stress that children may suffer early in life. Such experiences include multiple types of abuse; neglect; violence between parents or caregivers; other kinds of serious household dysfunction such as alcohol and substance abuse; and peer, community and collective violence. Exposure to multiple ACE is associated with health harming behaviours and physical and mental health conditions in adulthood.



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