



Organisational Toolkit Information Booklet



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Introduction

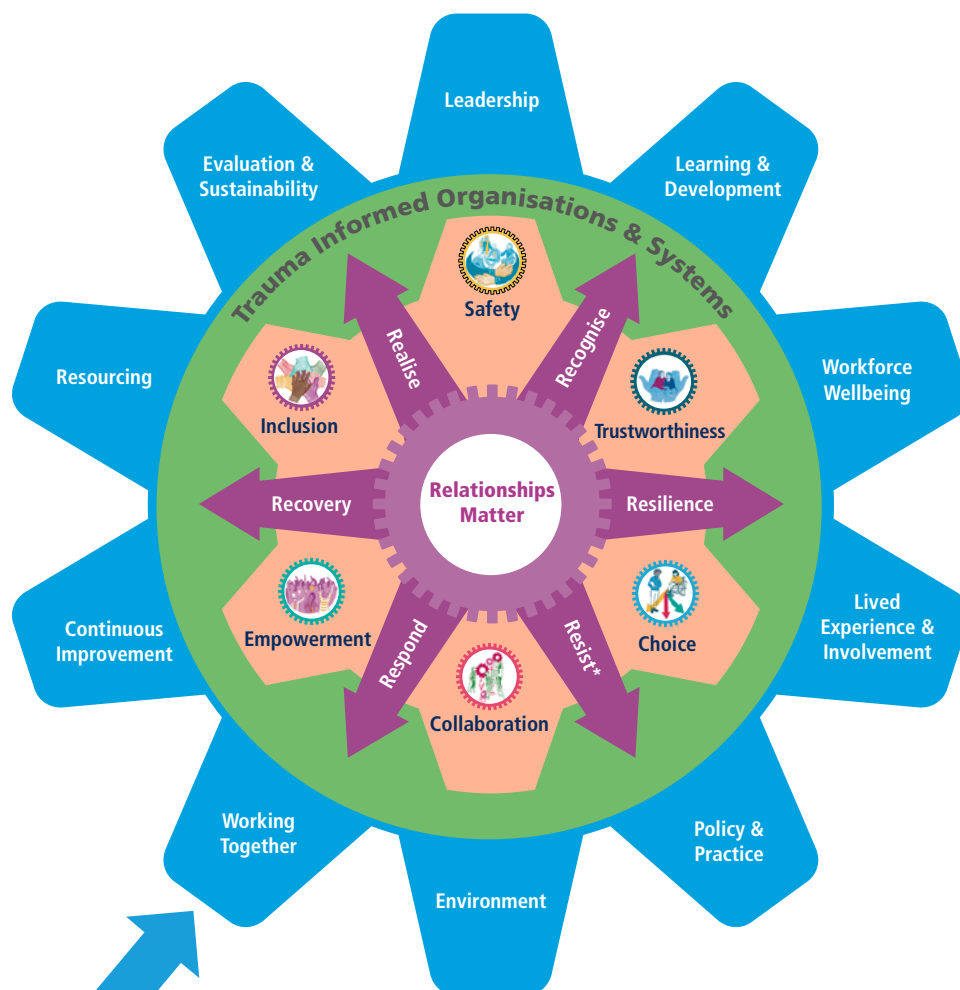
Developing a trauma-informed organisation is best thought about as a step by step approach, a process and a journey.

This information booklet is intended to be used in conjunction with the **SBNI Trauma Informed Toolkit – Embedding a Trauma informed Approach within Organisations and Systems**. It is one of a series of ten booklets exploring the toolkit focus areas.

The ten focus areas and associated checklist were adapted from the Substance Abuse and Mental Health Services Administration's (SAMHSA) original ten implementation domains. These implementation domains were based on **organisational change management** literature embedded with models of trauma informed practice.

Alongside the key trauma informed principles, this framework provides a pathway (with multiple potential starting points) to embed a trauma-informed approach (TIA) across your organisation. While we recognise extended periods for implementation are required, we also emphasise the importance of small steps on the journey.

This resource will focus on the integral importance of **Working Together**, in authentic, transparent relationships, within organisations, with partner agencies, across sectors and with service users.



* Resist re-traumatisation
Adapted from SAMHSA

Key Considerations:

Evidence has shown that implementing a trauma informed approach goes beyond the services that target individuals, but requires whole system collaboration to have lasting and meaningful impact. A **'culture of collaboration'** was found to be an important enabling factor for trauma informed approach (TIA) implementation in the Queen's University Belfast (QUB), TIA Implementation Report 2024. Applying the six principles of a trauma informed approach will be easier for organisations that value and respect the relationships within its own internal structures and with external partners/sectors. Ways to do this will include:

- Clear lines of communication with all staff members, stakeholders, partner agencies and service users
- Authentic, transparent and consistent communication and messaging
- Mechanisms for shared learning internally and externally, and recognition of good practice
- Coordinated efforts to ensure smooth transition for individuals between services
- Collaborating on shared trauma informed goals and support from leadership for working across sectors whenever possible

In Northern Ireland legislation and guidance such as [Cooperating to safeguarding Children and Young people](#) (DoH, 2017) and [Children's Services Co Operation Act \(Northern Ireland\)](#) (DoE, 2015) stipulate that collaboration is essential if we are to effectively prevent harm to children, respond appropriately when they have been harmed and take steps to protect children.

Organisations implementing a TIA will understand:

- collaboration across sectors is built on a shared understanding of trauma and the principles of trauma-informed practice (SAMHSA 2022)
- acting **with** others in order to help meet well-being objectives (internally to organisation and externally) is essential
- the need for consistency of approach across the multiple agencies and services that an individual family or group can be in contact with at any one time or across their lifetime, as this will increase the effectiveness of all services.



Collaboration (Internal and External)

Working together is fundamental to implementing a trauma informed system. We need to function as one whole system that understands itself, and understands the prevalence of trauma in our own communities, our workplaces and society as a whole. If we do this, people who are working in or accessing a system will experience consistency and **safety** and the risk of re-traumatisation is reduced.



The Institute for Collaborative Working (2022) found that collaboration had a positive effect on organisations and when an organisation takes the approach of working together this can have a greater impact on production both internally and externally.

[benefits_of_collaboration.pdf](#) (instituteforcollaborativeworking.com)

In order for a system to work together in a trauma informed way it has been recommended that the 4 R's are initiated to coordinate a cross system strategy. (SAMHSA, 2014)

| 4 R's | Action |
|-------------|--|
| Realising | the prevalence of trauma in the lives of the people access services |
| Recognising | the impact of trauma on people, service providers and organisations, and communities |
| Responding | collectively in ways that are informed by an understanding of trauma and what is needed to support recovery and resilience |
| Resisting | enacting policies or engaging in practices that are retraumatising for people across systems |

In the QUB TIA Implementation report (2024) evidence review collaboration was also mentioned as significant, particularly the need to engage with multiple key stakeholders, such as local agencies, mental health professionals and children's caregivers (Wassink-de Stigter et al., 2022). For example, Phung (2022) noted the need for *"a strong cross-system collaboration among teachers, staff, and mental health professionals"* (p. 8), while Avery et al. (2021) advocated the use of care co-ordination teams that provide family-driven and student-involved planning and practices.

Working together, while proven beneficial for organisations and communities, can also be multifaceted and there needs to be a commitment from leadership to promote collaborative engagement internally and externally. This will also require acknowledgement and acceptance of the investment of time and money.

Internal collaboration

A trauma informed organisation will realise the prevalence of trauma within its own staff group. Pathways should be in place and guidance available to ensure staff have the supports they need in work. Employees need to feel valued and invested in and therefore time should be protected for supervision, appraisals, team meetings, shared learning forums, CPD and indeed the support and promotion of interprofessional or interagency learning/information exchanges. More information on this can be found in the Workforce Wellbeing and Learning and Development supplements.

Working together provides:

- an opportunity to bring different disciplines together to explore more effective ways of working
- time and space to learn from others
- addressing and problem-solving complex issues
- establishing support systems when working under pressure.

It provides multidisciplinary teams with the time to construct more organic ways of working, to step away from a '*blame culture*' that can be created when people do not have the time to understand each other and the pressures each system is under. What a trauma informed approach will bring is a spotlight on the importance of relationships, seeing **the person not the problem**. The more opportunities there are to build trusting and compassionate relationships, the easier it will be to address any issues or concerns. Working together in this trauma informed way means there will be better problem solving, increased trust, continuous improvement and the development of new competencies & skills.

(Warwick Business School).



External Collaboration

Effective trauma informed collaboration requires organisations to be clear about what level of partnership working is required to achieve their goals and if the right amount of time, resource and commitment can be provided to make them work. When working with partner agencies consideration should be given to:

- if they are informal or formal partnerships
- the needs of the organisation and the partners involved
- the types of networking, cooperation and collaboration, and what they working to achieve i.e. Memo of understanding (MOU)
- the resource needed from the organisation to maintain the partnership
- the complexity of the issues and the level of collaboration required between partners.

Whilst external collaboration can have its challenges organisations need to be clever and creative in making the most out of opportunities when one workforce interfaces with another.

Communication

Collaboration and working together successfully is dependent on clear, transparent and **inclusive** communication. A TIA recognises the power of relationships and relationships are built on connection and communication. If we are to work together effectively, internally and across sectors, opportunities must be provided for all voices to be heard.



Communication with Service users

People access services across the life span from pre-birth to end of life care. Working together we can improve and enhance people's experiences of these services and ensure we do our best to avoid re-traumatisation. Poor communication or a breakdown in communication can distort how people provide and receive services. For example, a lack of clarity around referral pathways or systems and procedures for information sharing can create high levels of frustrations for both staff and service users. This can have an impact on relationships within organisations / departments as well as damaging public confidence in services. Relationships matter and how we communicate with people, especially at transition points is of significant importance. This can be an anxious time for service users and a "warm handover" is an integral part of a TIA.

"A Warm Handover is where you have a conversation with a client or patient and identify other support that they would benefit from that your organisation does not provide, but that you know others do".

Joining the Warm Handover » Suffolk Information Partnership
(onesuffolk.net)

A TIA to communication would ensure frontline staff:

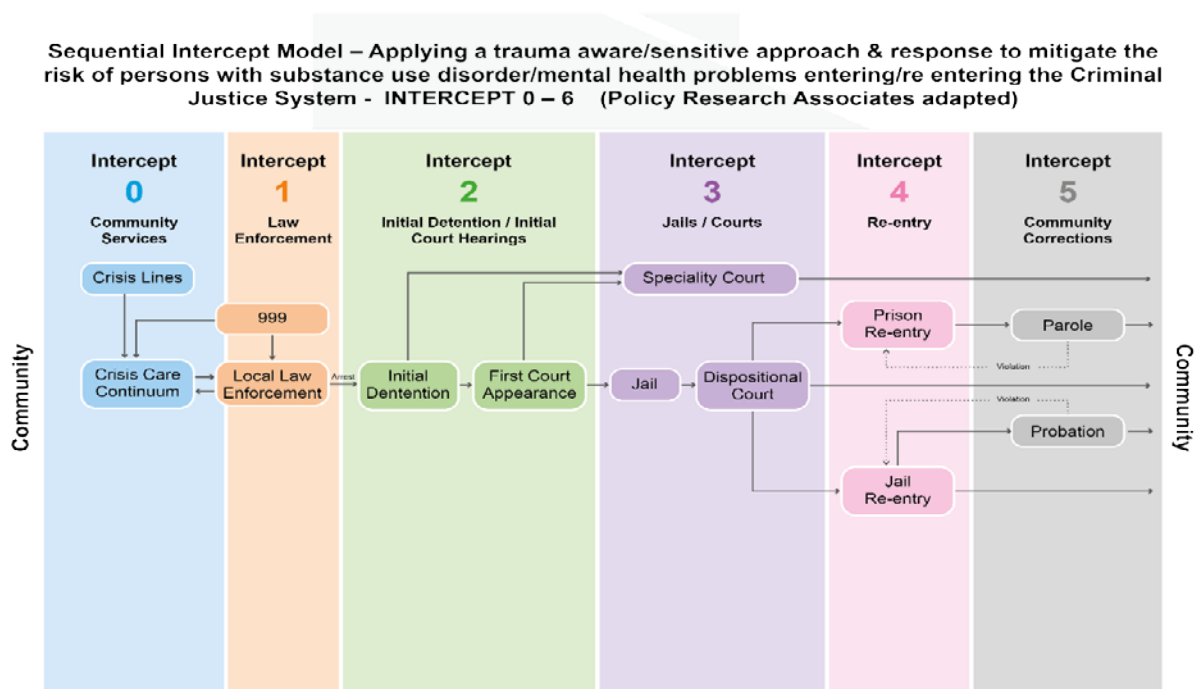
- are aware of all internal and external referral pathways
- feel equipped to transition service users in a warm and supportive manner
- can advising re: access to other appropriate internal and external services
- have the right information and skills to engage with and respond to service users and be able to de-escalate any potential confrontation that may arise from dissatisfaction.

Communication with staff and across sectors

Communicating with staff, stakeholders and partner agencies should always be timely and appropriate. Attempts should be made to level the power differentials between different staff groups, partner agencies and people accessing the service. How and when people are communicated with will help with meaningful engagement and collaboration i.e. if staff and service users feel informed or consulted with, at the right time and in the right way, they are more likely to feel respected and empowered. This will be discussed in more depth in the 'Lived Experience and Involvement' information booklet. Are decision making processes inclusive and transparent? Are changes or any restructuring communicated to staff and partners using a trauma informed lens? If so this will support people to build trusting relationships and navigate any challenges or change. Language matters and it is important organisations understand the importance of this as part of a TIA and have leaders and staff who model this for others.

The Sequential Intercept Model (SIM) 'mapping process' has been developed as an important strategic planning tool to bring stakeholders and communities of interest together to engage in facilitated mapping exercises to consider the pathway of justice-involved persons through the CJS, assess available resources, determine service gaps and develop shared priorities for action (Willison et al., 2018). Collaborative and co-ordinated efforts across systems and services are identified as essential to avoid justice-involved persons with complex needs falling through the inevitable gaps that emerge when multiple service providers do not take shared responsibility for the person's welfare and commit to working together to this end. It is noted as essential for effective outcomes that co-ordinating bodies develop 'community buy-in' through shared identification of priorities, funding streams and accountability mechanisms (Policy Research Associates, 2018). It is in this regard that emerging evidence confirms that the SIM mapping process has been well-received and has led to enhanced cross-sector collaboration and co-ordination (Bonfine and Nadler, 2019).

The 'Sequential Intercept Model' – a trauma-informed diversionary framework (safeguardingni.org)



Data capture and continuous improvement

Providing a trauma informed commissioning system would address any power imbalance by ensuring services are funded based on need, and an understanding of why people are accessing, or not accessing services. It can help commissioners, service providers and policy makers understand the importance of coproduction, how to reduce re-traumatisation and ensure services are promoting supportive practice, safety and wellbeing. Services must be committed to and have processes for gathering ongoing feedback from clients about the services they receive. What mechanisms are in place for collecting regular and meaningful information from service users but also from staff? Is the organisation using:

- Research
- Feedback boxes
- Online surveys
- Focus groups
- Inspection reports
- Informal reporting.

It is imperative that feedback, concerns or suggestions are responded to in a timely, sensitive and thoughtful manner (Treisman Trauma Informed Health). Please refer to the information booklets on Policy and Practice, Continuous Improvement, Resourcing and Evaluation and Sustainability for more in depth information and guidance.

Trauma Informed Whole System Approach

Working across different organisations and across sectors can create an additional level of planning, leadership and management. When working outside your organisation it can be difficult to manage power imbalances, therefore partners need to:

- be clear of each member's expectations of the partnership
- understand the different roles and responsibilities
- manage the balance of funders and commissioners
- ensure the members are working for an overarching agreed aim.

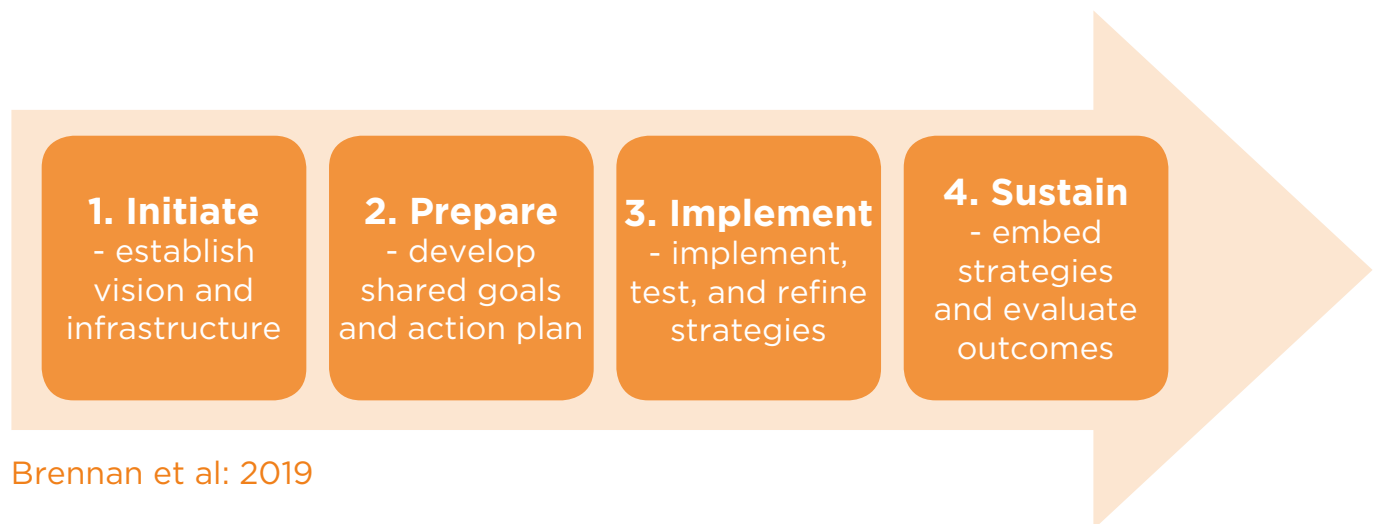


Transforming Power Relationships In
Partnership Working | The King's Fund (kingsfund.org.uk)

If our overall aim is to have a trauma informed society and communities with improved health and well-being, then time together agreeing cross sector priorities and objectives is essential. This time needs to be protected and valued to allow organisations to apply the six trauma informed principles and to generate a sense of togetherness and safety.

This will create an environment where, difficult conversations can take place, opportunities for shared learning and where trauma informed organisations can 'model the model' therefore informally educating others.

Steps to implementing a multi-system trauma-informed approach include:



Brennan et al: 2019

Having a shared framework for operationalizing trauma-informed principles helps to coordinate, within-system or cross-system strategies for promoting consistent standards of trauma-informed care. Organisations engaged or working towards system change may find the 10 focus areas useful for reflecting on and assessing current practice within and across participating agencies. The Toolkit and Checklist could help inform and develop cross-sector, trauma-informed action plans. Naturally particular practices or protocols within each focus area will require some level of adaptation depending on the system (education, juvenile justice) and context (statutory or community sector). (Please see resources in Toolkit library)

Taking a whole-system approach



Potential benefits of co-operation

- **Co-operation can ultimately result in better outcomes for children and young people.**
- Co-operation can create synergies by bringing together different stakeholders who are working in the interest of children and young people.
- Co operation can lead to the creation of better policies when they are jointly developed, informed, owned or implemented by more than one Children's Authority.
- Co-operation can result in a more holistic approach to addressing the needs of children and young people.
- Co-operation can ensure the seamless provision of services for children and young people and their families.
- Co-operation can help overcome barriers to effective government.
- Co-operation can prevent, reduce or remove duplication of services or resources.
- Co-operation can result in the better use of limited resources.

Image taken from [Interim Guidance on the Children's Services Co-operation Act \(Northern Ireland\) 2015](#)

Section B: Local examples of good practice

Example 1:



Include Youth, VOYPIC and **Viable** (our social enterprise HR/finance organisation) moved into a new building, 100 Great Patrick Street in December 2022. This venture between the 3 organisations, was 10 years in the making with monies from Atlantic Philanthropies and we required much fundraising to purchase the building.

Young people were involved in the design and set-up of the building from the outset, as this was to be their youth space and we wanted to make sure they had a voice at the very start of the journey. VOYPIC and Include Youth have a similar ethos and shared values and both work predominantly with young people who are care experienced. This helped form this partnership as both organisations could see they had a common purpose and goal. There was an understanding that the young service users needed to be in a safe, relaxed space.

Practitioners led a young person's advisory group who met regularly and joined with VOYPIC's practitioners to look at designing the downstairs space. Part of the space is shared and Include Youth and VOYPIC have their own separate young people's space also. The trauma informed principles of inclusion, collaboration, safety, empowerment and choice are infused throughout this project.

Example 3: Bizz in the Priz



A very original and creative health initiative took place in Hydebank Wood Secure College and Women's Prison in 2019 that was co-designed and produced with people who live in custody. As a result, it was decided to create a comic book that addresses health and wellbeing issues in prison. A multi-disciplinary Steering Group was set up, involving people who work and live in secure establishments. It was agreed that the first edition would focus on addiction - as this is a major issue in these settings. A series of workshops was arranged with prison, health, partner agency staff and service users to brainstorm ideas, artwork and story boards for the comic. Crucial to this, was the involvement of a person who had previous lived experience of prison and is a volunteer artist for the Prison Arts Foundation. Those in custody took the lead on character development, storytelling, artwork and, most importantly, relevant language. The

comic book focuses on the character 'Diaze - Man' who is addicted to prescription medication and his fight with his drug enemies - the Zolpidem Zombie King, Budzilla, Opioid Ogre and others. He gets help from people who work in prison to overcome his enemies, and turns into 'Mentor Man', who is able to help others. The comic was launched in November 2019, and work on the second edition begins in April 2020. It also won the Public Health Agency's Involve Fest Chairman's Award 2019/20 for Best Community and Voluntary Initiative. View a copy of it at: <https://www.mhfi.org/BizInPris.pdf>

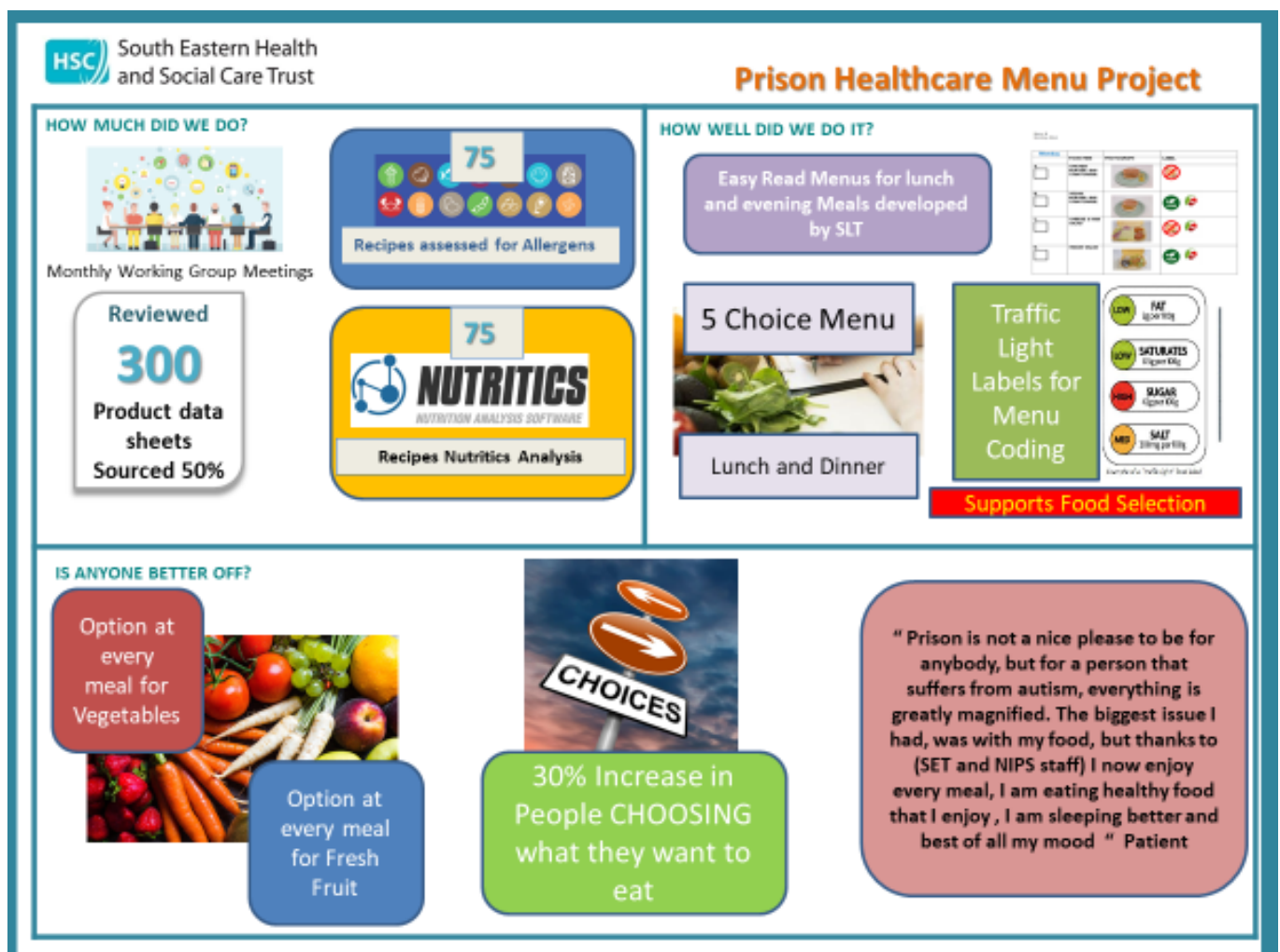
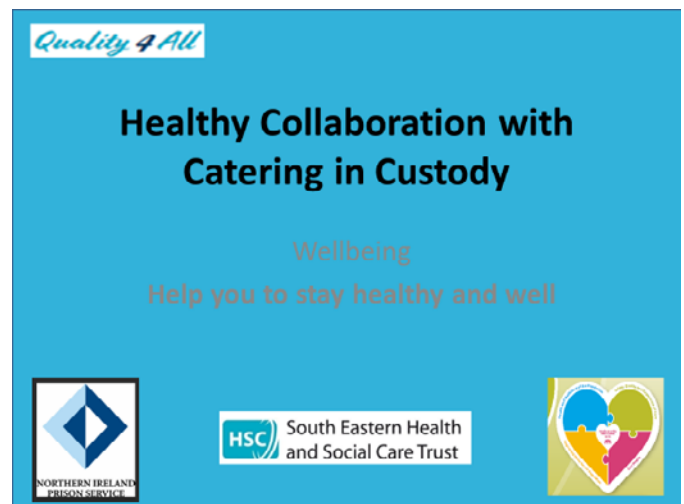


Example 4: Healthy Collaboration with Catering in Custody

This was a multi-disciplinary, interagency project in Maghaberry prison which saw services coming together to improve the daily living experience of those in their care. The project demonstrated effective partnership working between health and Northern Ireland Prison staff and involvement of service users to make informed choices about their health and wellbeing.

The project team included the catering staff in Maghaberry, Speech and Language Therapy, Dietitian, Nutritionist and some of the men who live in Maghaberry.

The team listened to people's current experience of using the prison menu and responded to their suggestions for improvements. This collaboration is an excellent example of how working together, across systems, in a trauma informed way can nurture an improved culture of health and wellbeing to reduce health inequalities.



In summary

Working together in an open and authentic way is an essential component of embedding a trauma informed approach. Leaders need to spend time really listening, to understand their staff, their partner agencies and importantly the communities they serve. This will allow for services that are designed with compassion and tailored to meet the needs of individuals and communities:

'Cross sector leaders recognize that the most robust and sustainable solutions will come from designing with (and not just for) the communities most affected.'
(Becker and Smith 2018)

Building trusting relationships that allow organisations to look beyond the traditional boundaries will help them connect with communities in creative and innovative ways. This is what is needed to embed a trauma informed systemic change that is sustainable.

Your feedback matters

Thank you for taking the time to read the information booklet. We welcome all suggestions for improvement. Please feel free to share any new or existing local examples for inclusion by contacting us on SBNI.Info@hscni.net. To download the toolkit or contact a member of the team directly please click here [Trauma Informed Toolkit](#).



Adapted from SAMHSA, 2014

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Children's Services Co Operation Act (Northern Ireland)

Cooperating to safeguarding Children and Young people

benefits_of_collaboration.pdf (instituteofcollaborativeworking.com)

Transforming Power Relationships In Partnership Working | The King's Fund
(kingsfund.org.uk)

The Sequential Intercept Model - Policy Research Associates

Joining the Warm Handover » Suffolk Information Partnership (onesuffolk.net)

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