**Northumberland County Council**

**Trauma Informed Learning Framework – Adult Social Care**

This learning framework for adult social care aims to develop practitioner understanding of trauma and to recognise the impact of trauma as being widespread and across the life course.

The ‘*Growing Resilient Children & Adults in Northumberland*’ document sets out a Learning Framework for the Children’s and Families workforce and, as a result of our C.A.R.E. (*Caring about Adversity, Resilience and Empowerment)* Northumberland multi-agency strategy, it is acknowledged that there needs to be a similar approach for our adult social care workforce. This document aims to build on the C.A.R.E. Northumberland Strategy and set out a learning framework for adult social care.

‘CARE Northumberland’ is a multi-agency strategy across both children and adult services to reduce children’s experience of adversity and minimise the impact of ACEs on the health and wellbeing of both children and adults.

C.A.R.E Northumberland aspires to having a seamless and life course approach for residents from childhood to adulthood.  We can do this by working together, learning from one another and working with organisations in our communities that can support this important work. A short animation about the C.A.R.E. Northumberland approach has been produced and can be accessed here: [https://www.youtube.com/watch?v=ilNLIBpoGmo&feature=youtu.be](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.youtube.com%2Fwatch%3Fv%3DilNLIBpoGmo%26feature%3Dyoutu.be&data=05%7C01%7CLeigh.Waller%40northumberland.gov.uk%7C56d00b6ba82d4ad9e81d08da60b96d5a%7Cbb13a9de829042f0a980dc3bdfe70f40%7C0%7C0%7C637928646753707384%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=QxsVBnJpVzuRKPEh%2F0Esp2o%2B7FG8azdtKTLTeR3P7r0%3D&reserved=0)

This Learning Framework has been informed by a range of Trauma Informed Learning Frameworks including:

* ‘*Growing Resilient Children and Adults in Northumberland*’,
* the Scottish Government’s Document: ‘*Transforming Psychological Trauma: A Knowledge and Skills Framework for the Scottish Workforce’,*
* the Welsh Government’s ‘*Adverse Childhood Experiences (ACE’s) Knowledge and Skills Framework’, and*
* Bristol, North Somerset and South Gloucestershire document: ‘*Trauma Informed System – Knowledge and Skills Framework’*

In their Framework document, the Scottish Government confirms that research tells us that traumatic life experiences can have a significant impact on people’s lives, increasing the risk of poorer physical and mental health, and poorer social, educational and criminal justice outcomes. Furthermore, trauma can affect people at any stage of their lives and that particular sections of the population are more vulnerable to trauma. The risks of poorer outcomes are compounded by the difficulties which people affected by trauma can have when accessing and using services. They go on to say that trauma should be ‘everyone’s business’ and that we all have a role to play in understanding and responding to people affected by trauma.

Defining Trauma

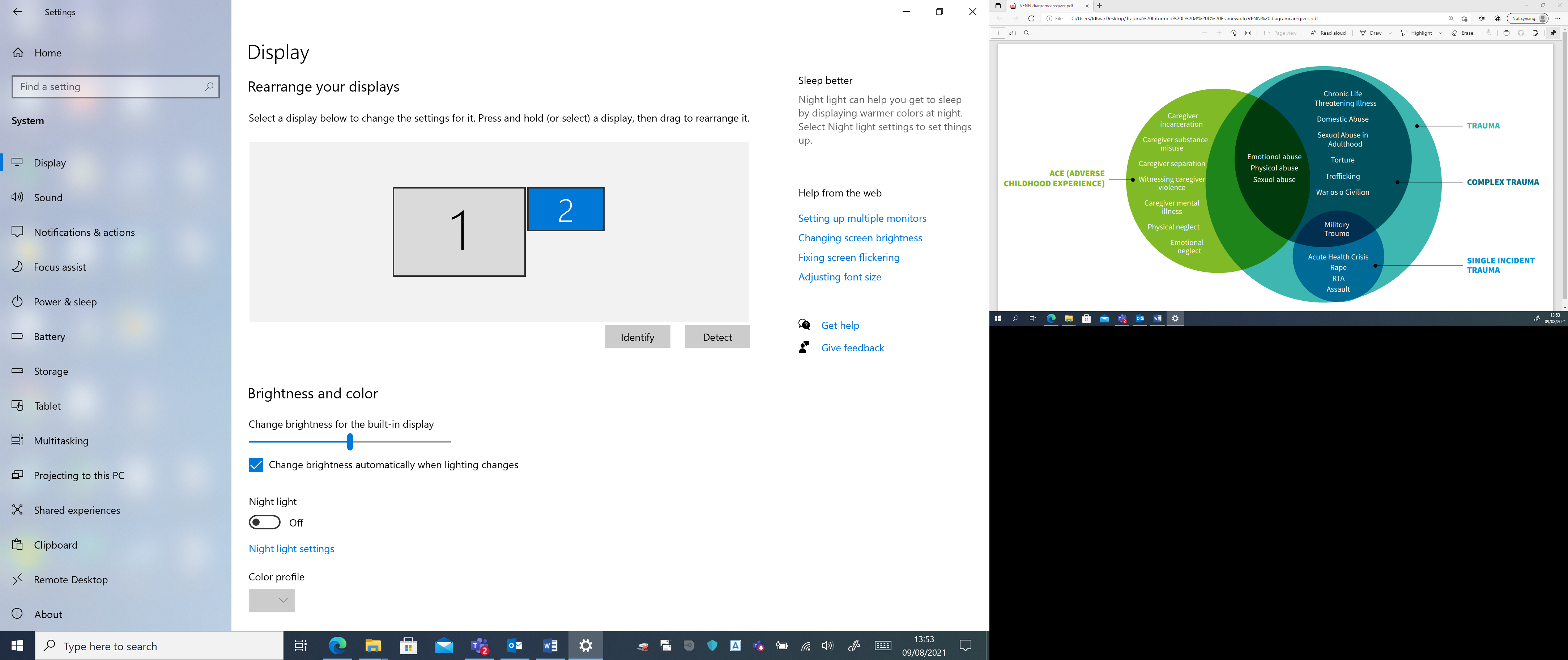
We use the word ‘trauma’ in this document to represent the broad range of abusive, adverse, harmful, and/or neglectful experiences that people can be subjected to during their lives including adverse childhood experiences.

Trauma is often subdivided into:

**Type 1 Trauma –** usually single incident events such as rape, assault, serious accident and can also include road traffic accidents, terrorist attacks or other types of major emergencies.

**Type 2 or ‘Complex Trauma’ –** usually experienced interpersonally, persists over time and is difficult to escape from. Complex Trauma is often experienced in the context of close relationships (e.g. childhood abuse, domestic abuse) but can also be experienced in adulthood in the context of war, torture or human trafficking (including criminal/sexual exploitation).

The following diagram illustrates the types of traumatic and adverse experiences:



Evidence suggests that adversity and trauma informed systems can lead to better outcomes for both people directly affected by these experiences, as well as society as a whole.

The impact of adversity, trauma and ACEs differ between individuals. Some people with multiple ACEs do well, often because of one or more secure attachment relationships to adults which compensate for the stress and distress of adversity. In contrast, some people who experience one ACE may be affected profoundly. However, the effects can be mitigated by developing trauma-aware approaches in early intervention, community and specialist services, and through the demonstration of the values of compassion, kindness and empathy.

We know that people who have experienced adversity and trauma may be less likely to ask for or receive the help and support that they need. Recognising adversity and trauma early can help children and young people to receive timely and appropriate support. This can also help young adults to break the cycle of adversity and trauma when they become parents, and is important to prevent challenges with processing trauma from being inherited through families and communities. Helping adults identify the adversity and trauma that they experienced when younger is evidenced to have a positive impact on their psychosocial health and wellbeing and their ability to provide a stable home environment.

Learning Framework for Adult Social Care

This framework acknowledges that being adversity and trauma informed is everyone’s responsibility however recognises that not every member of the workforce will require the same level of knowledge and skills.

We define the workforce in four groups:

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| Staff Group  A | Staff in this group will come into contact with people who may be affected by adversity and trauma, but who do not work with them directly i.e. HR, administrative staff, call centre operatives, finance/benefit advisors etc. |
| Staff Group  B | Staff in this group will work directly with people who may be affected by adversity and trauma, whether this is known or not. i.e. Care Managers, support workers, social workers etc. |
| Staff Group  C | Managers and supervisors who directly manage staff in Group B and who are responsible for ensuring policy is put into practice. |
| Staff Group  D | Strategic leads, policy makers, commissioners who have a remit for policy, service design and delivery. These individuals will develop and sustain organisational culture that enables the delivery of adversity and trauma informed services. |

**Staff Group A**

This staff group will have a basic understanding of adversity and trauma and the potential impact throughout the life course. They will know how to respond effectively and know where and when to seek support

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| **KNOWLEDGE** | **SKILLS/BEHAVIOURS** |
| * Understand that adversity and trauma can affect people in different ways – e.g.: mental health and well-being, physical health, capacity for learning and life chances. * The consequences of adversity and trauma can impact a person’s ability to access the care, support and treatment they may require in a range of settings e.g.: physical, psychological, education, employment, housing. * People will respond differently to adversity and trauma depending on their age at the time of their experience, the person(s) responsible for the experience and duration. Additional contextual factors like poverty, race, gender identity, sexuality and culture can also have an effect on a person’s response. * People will adopt different strategies to survive, adapt to and cope with the negative impact of their adverse experiences. * Resilience and linked protective factors are key to determining how adversity and trauma affect people. * It is important to be able to recognise when someone may be affected by adversity and trauma so that appropriate help and/or support can be given, if and when needed. * It is also important to understand that some people will manage and do well despite experiencing adversity and trauma and therefore may not want or need any additional help or support. * Good social support and relationships are key in building resilience in individuals and communities (workers and service users). * Staff member recognises and understands the need for self-care and have access to formal and informal support/supervision. * Understand the power of language in creating an adversity and trauma informed culture/setting/service. | * Be able to identify what adversity and trauma are, how someone who has experienced adversity and trauma might present and the kind of situations that might trigger memories or associated feelings. * Actively listen when a person speaks about his or her experiences of adversity and trauma. * Respond to the person with empathy and without criticism or blame and ask what help (if any) he or she would like or needs. * Recognise that a person’s behaviour or reactions might be adversity or trauma related. Observe possible signs and symptoms of adversity and trauma. * Be able to communicate with the person in an empathetic non-judgemental way, considering “What happened to you?” instead of “What’s wrong with you?” and by asking, ‘How has this affected you?’ and ‘Who is there to support you?’ * Support and enable people affected by adversity and trauma to access services, support and interventions to improve recovery and build resilience, where needed. * Know own limits and when to seek advice and support. Recognise own trauma, prioritise self-care and organisational support structures (both formal and informal) to mitigate the possible effects of secondary trauma * Reflect on and demonstrate own role in preventing, mitigating the impact of adversity and trauma and contribute to continuous improvement in relation to own practice. * Use adversity and trauma informed language. |

**Staff Group B**

This staff group will have a more detailed understanding of adversity and trauma and the potential impact throughout the life course. They will have universal knowledge, know how to communicate and respond effectively, establish trusted relationships, build resilience, reflect on their own personal and professional experience and how it may influence their work, use a range of positive and creative strategies and know when to seek advice and support.

Some senior/advanced practitioners may also have a strategic role within their organisations; these people may also want to meet the knowledge & skills recommended for Staff Group D.

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| **KNOWLEDGE** | **SKILLS/BEHAVIOURS** |
| **As Staff Group A and:**   * Understand where and how information relating to a given disclosure should be recorded and that information may need to be shared with others where disclosure indicates the risk to the individual and/or others is ongoing. * Have knowledge of approaches to empower, build strengths, skills, resources, protective factors and resilience within individuals. * Understand the importance of reflective practice, and recognition of the impact of their own personal and professional experiences on themselves and on their work. * Have a good working knowledge of local and national services, or know where to find that information. * Understand the ways in which adversity and trauma can impact on brain development and neurobiological functioning and the implications of this for stress reactions, relationships and recovery. * Understand that adversity and trauma can affect the way an individual (worker or service user) relates to others, thinks, acts and manages stress. * Understand the potential for adversity and trauma to impact on a person’s interpersonal, emotional and cognitive functioning and to have implications for relationship stability, social functioning, educational attainment, parenting and employment. * Understand the ethical duty to respond to individuals in a way which does no further harm and contributes to safeguarding those at risk. * Understand that people with learning disabilities (and other minority groups) are at potentially increased risk of exposure to adversity, trauma and abuse and may have greater difficulty in recognising and disclosing these. | **As Staff Group A and:**   * Be able to explain the fight/flight/freeze stress responses so that people affected by adversity and trauma are able to make sense of their reactions. * Support and enable people affected by adversity and trauma to access services, support and interventions to improve recovery and build resilience, where needed. * Know own limits and when to seek advice and support. * Respect the decisions made by the person, but follow organisational safeguarding procedures if needed. Share and communicate information in line with national and local legislation and guidance with respect to adult and child support and protection. * Identify collaboratively where current coping strategies are likely to be problematic in the longer term and discuss with the person possible alternatives to current coping and/ or support and/or therapy services, where appropriate to role. * Provide information on relevant local services that offer advice or support skills and training, where appropriate to role. * Use adversity and trauma informed language and challenge language used by others when appropriate. * Establish and maintain appropriate professional boundaries, seeking advice within supervision where necessary. |

**Staff Group C**

Managers and supervisors who directly manage staff in Group B and who are responsible for ensuring policy is put into practice.

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| **KNOWLEDGE** | **SKILLS/BEHAVIOURS** |
| **As Staff Group A & B and:**   * Understand the importance of developing workplace systems, structures and policies to mitigate against the effect of adversity and trauma. * Understand the power of language in creating an adversity and trauma informed culture/setting/service and that many people whose first language is not English will therefore require language support, for example use of an interpreter. This should be an independent interpreter, rather than a family member or friend. * Understand that a worker’s own experience of adversity and trauma can have implications for his or her capacity to respond to the needs of those affected by adversity and trauma in a work context. * Build knowledge and practice around employee safeguarding and protection, particularly in these situations where work may impact on a worker’s own adversity or trauma. * Ensure that workers are appropriately trained and are working within the limits of professional competences. * Understand the importance and role of reflective practice. * Ensure workers have access to appropriate support and supervision. | **As Staff Group A & B and:**   * Translate an understanding of the prevalence and impact of adversity and trauma into adversity and trauma-informed service systems and procedures and ensure effective support for staff. * Provide access to and encourage a culture of reflective practice and formal/informal support/supervision in the workplace. * Recognise the importance of workers feeling safe to speak openly in supervision about the interaction between the personal and the professional and the value of supervision structures that separate professional from line management supervision. * Understand the meaning and signs of compassion fatigue and secondary trauma and respond sensitively and empathically to staff who may be experiencing it. * Demonstrate self-awareness and an ability to recognise where their own reactions to adversity and trauma may affect their responses to workers and people accessing services, and seek advice and support to address this. * Include awareness of the potential impact of exposure to adversity and trauma (historical and present) in the organisation’s Health and Safety protocols. Carry out a comprehensive risk assessment considering the impact of adversity and trauma on current behaviour. * Recognise and, where possible, address service systems and procedures that are likely to compound distress experienced by those affected by adversity and trauma. * Contribute to the development of adversity and trauma-informed multi-agency policies and systems designed to reduce the likelihood of systemic re-traumatisation. * Recognise the value of workers’ and service users’ experiences and views in developing a safe adversity and trauma informed physical environment. |

**Staff Group D**

Strategic leads, policy makers, commissioners who have a remit for policy, service design and delivery.

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| **KNOWLEDGE** | **SKILLS/BEHAVIOURS** |
| * Ensure that adversity and trauma-awareness are embodied in service design and delivery wherever possible, recognising that being aware of adversity and trauma is everybody’s business. * Recognise the potential life-long effect of adversity and trauma on an individual. * Understand what it means to be adversity and trauma-informed as a worker, a manager, a leader, a team, an organisation and a wider system. * Recognise the co-ordinated response needed to mitigate the effects of adversity and trauma. * Understand how to have an adversity and trauma informed approach underpinning the organisation’s strategic direction, service design, monitoring and evaluation. * Understand support needs of the workforce and take steps to address them directly. | * Demonstrate open and collaborative leadership. * Model and adopt an adversity and trauma-informed approach to setting the organisational culture that values safety, trustworthiness, choice, collaboration and empowerment. * Apply an adversity and trauma informed approach to developing and implementing policies and processes and in designing, developing, monitoring and evaluating services. * Develop and implement adversity and trauma-informed policies and processes that lead and support staff in taking an adversity and trauma-informed approach. * Demonstrate an ability to plan an adversity and trauma-informed strategic direction for the service/team/organisation. * Prioritise an adversity and trauma-informed approach, recognising the needs of people, including workers and service users, who may have been affected by adversity and trauma. * Demonstrate a commitment to effective monitoring and evaluation; ensuring evidence generating practice and quality assurance of the adversity and trauma informed approach. * Provides for adequate training, resources and appropriate support for staff, including access to coaching or supervision and protected reflective practice time. * Embed trauma-informed practice into the recruitment and induction of new staff. * Ensure the engagement and participation of lived experience representatives to ensure reciprocal learning. * Use adversity and trauma informed language and challenge language used by others when appropriate. * Demonstrate self-awareness and an ability to recognise where their own reactions to adversity and trauma may affect their responses to workers and people accessing services, and seek advice and support to address this. * Recognise own trauma, prioritise self-care and organisational support structures (both formal and informal) to mitigate the possible effects of secondary trauma. |

Through increasing knowledge and skills among professionals, adversity and trauma informed practice will become embedded across organisations and cultures. Increased adversity and trauma informed practice is not about signposting and increased referrals to specialist services. Instead, it is the collective action that can be taken, including universal approaches for those who may/may not have experienced adversity and trauma, to improve health, wellbeing and life outcomes for all.

Trauma Informed Practice focusses on thoughts and feelings rather than actions and behaviour, and seeks to develop trust, choice and control.