



# TRAUMA-INFORMED CARE IN A TIME OF COVID-19: EMPOWERING ADMINISTRATORS

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# A Shattered World



“One size *does not* fit all”



# Individual Responses are Multifaceted

- Pre-pandemic circumstances and resources
  - Prior exposure to adversity
  - Physical and mental health vulnerabilities
  - Economic and social supports
  
- Exposures encountered since the pandemic:
  - Illness of a family member
  - Loss of job or health insurance
  - Job status – essential health care workers
  - Time immersed in social media, news, over-exposure to information
  - Community-level stressors – e.g., “Hot spots”

# Trauma-Informed Care

- ▣ SAMHSA's Trauma-Informed Approach:
  - ▣ Behavioral Health is essential to health
  - ▣ Prevention works
  - ▣ Treatment is effective

# Trauma Informed Care Elements

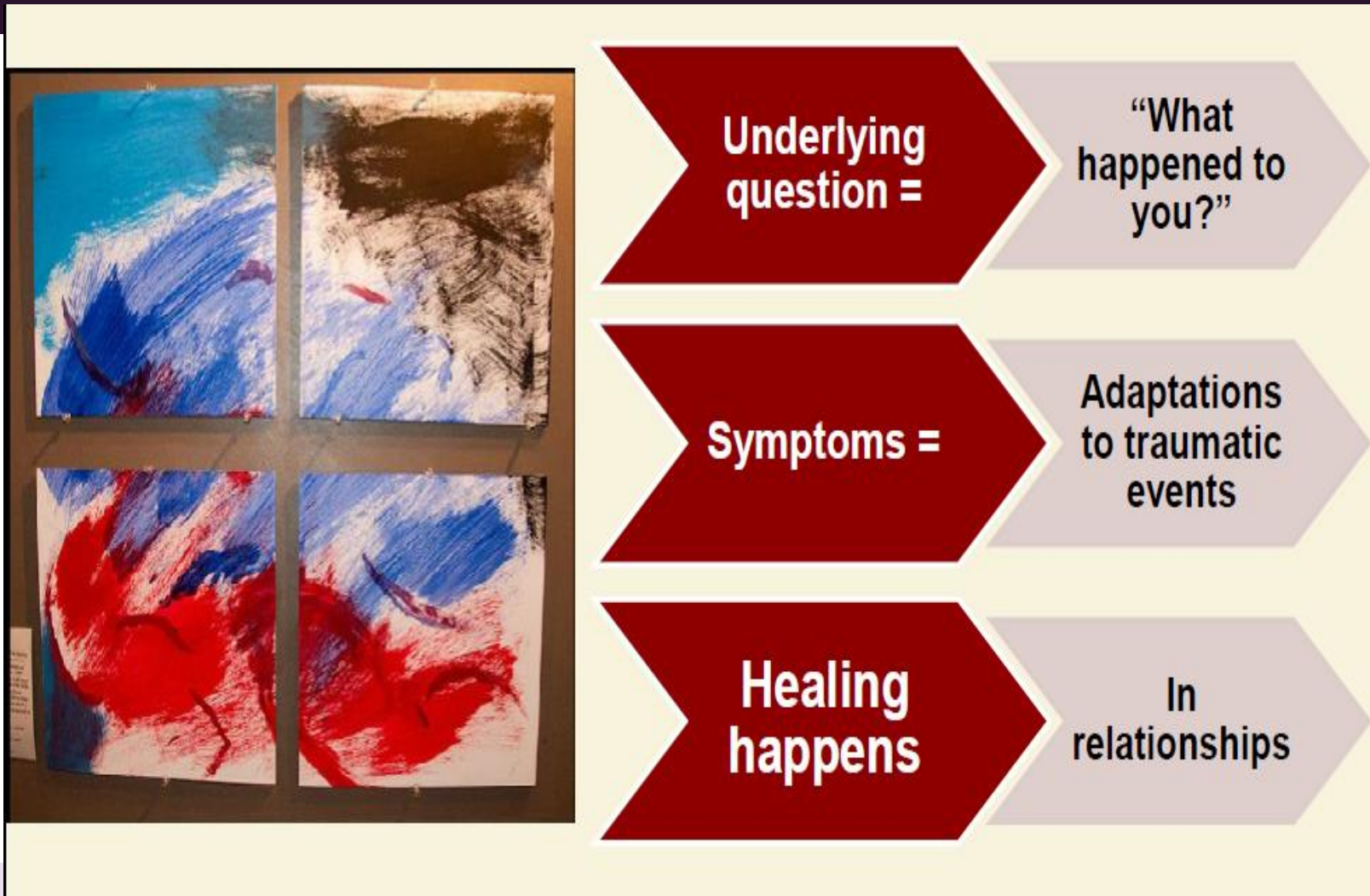
Understanding the **prevalence** of trauma

Recognizing how trauma **impacts** individuals

Putting this knowledge into **practice**

to **actively resist re-traumatization**

# Prevalence of Trauma: Approach





# What is Trauma?

Individual trauma results from an **event**, series of events, or set of circumstances **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, or spiritual well-being



# Potential Traumatic Events

## **Abuse**

- *Emotional*
- *Sexual*
- *Physical*
- *Domestic violence*
- *Witnessing violence*
- *Bullying*
- *Cyberbullying*
- *Institutional*

## **Loss**

- *Death*
- *Abandonment*
- *Neglect*
- *Separation*
- *Natural disaster*
- *Accidents*
- *Terrorism*
- *War*

## **Chronic Stressors**

- *Poverty*
- *Racism*
- *Invasive medical procedure*
- *Community trauma*
- *Historical trauma*
- *Family member with substance use disorder*

# Prevalence of Trauma

Exposure to trauma is ubiquitous: seven out of ten respondents worldwide and nine out of ten adults in the USA report experiencing one or more lifetime traumas.

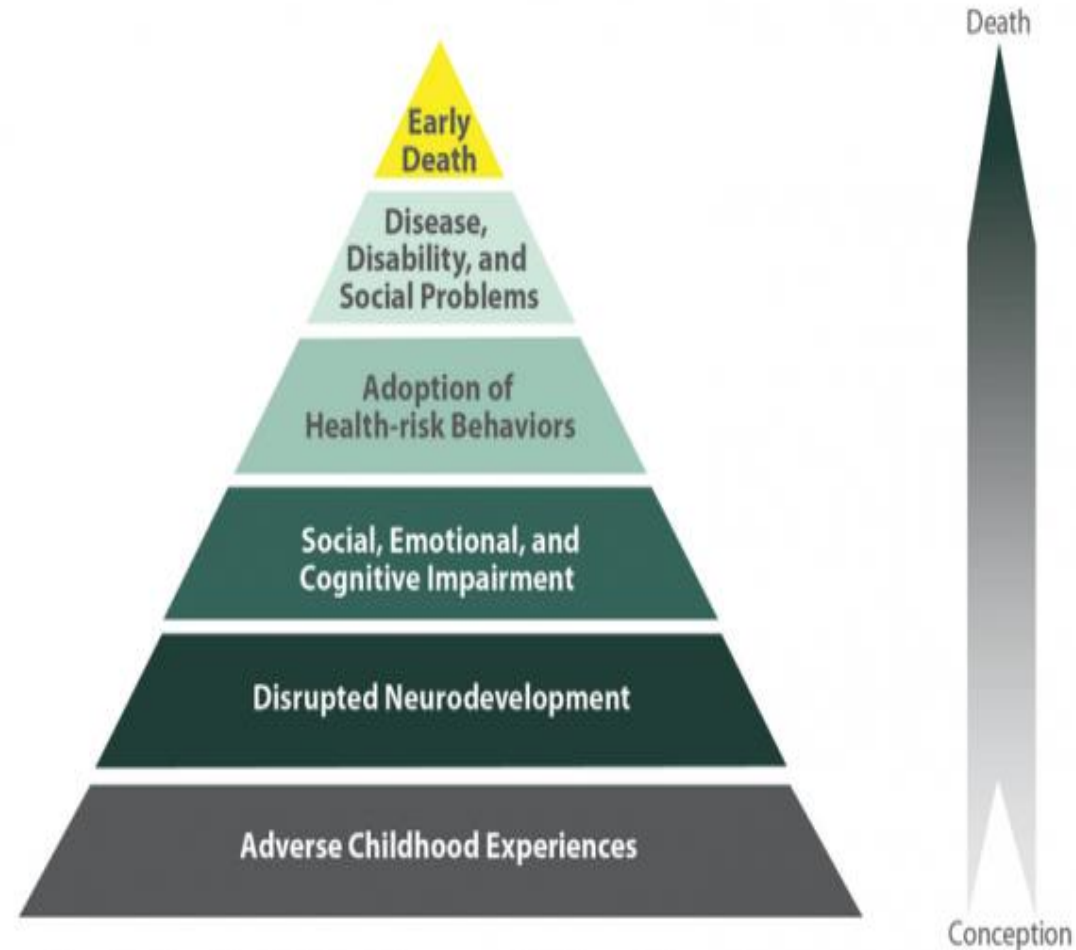
# Impact of Trauma



# Impact of Trauma on the Brain

- The brain has a bottom-up organization
- Experiences build brain architecture
- Fear activates the amygdala and shuts down the frontal lobes of the cortex.
- Toxic stress derails healthy development, and interferes with normal functioning

# Impact of Trauma: Adverse Childhood Experiences



Mechanism by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

# Impact of Trauma

**The effect of trauma  
on an individual can  
be conceptualized as  
a normal response to  
an abnormal  
situation**

# Impact of Trauma: Problems OR Adaptations?

**Fight**

**“Non-compliant, combative”**

**OR**

**Struggling to regain or hold onto  
personal power**

**Flight**

**“Treatment resistant, uncooperative”**

**OR**

**Disengaging, withdrawing**

**Freeze**

**“Passive, unmotivated”**

**OR**

**Giving in to those in power**



# Impact of Trauma: Signs of Trauma Responses

## **Additional Signs**

- Flashbacks or frequent nightmares
- Sensitivity to noise or to being touched
- Always expecting something bad to happen
- Not remembering periods of one's life
- Feeling emotionally numb
- Lack of concentration
- Irritability
- Excessive watchfulness, anxiety, anger, shame or sadness

# Practice of Trauma Informed Care during COVID-19

# Trauma Brain = Dysregulated Behavior

- As residents' anxiety increases, their “thinking” brains become less engaged and behavior becomes more dysregulated.
- Staff need to develop skills to help residents regulate and related by becoming calmer and more connected.
- This is achieved by:
  - Warmth
  - Validation
  - Flexibility
  - Structure
  - Hope for the future
  - Humor
  - Being part of a connected community

Who best to do that?



# Supporting a Frightened Staff

- Healing happens in relationship.
- Staff need to have strong connections with managers/supervisors to feel safe in turning to them when they need help.
- Leadership starts with assuming good intentions and staff's desire to provide good care to residents.
- Seek out and listen to staff's ideas.
- Understand the additional stress your staff may be experiencing outside of your organization (e.g., child care, financial burdens, caregiving at home)

# Transparency of Information

- ▣ Information-sharing is essential in preventing panic.
- ▣ Predicting and preparing staff by providing regular information updates keeps fears to a minimum.
  - ▣ Regular check-ins
  - ▣ Group texting apps
  - ▣ Open Zoom calls to talk with administrators directly
- ▣ Seek out the latest knowledge and share it with staff: Knowledge is Power!

# Maintaining Connection

- ❑ Create mechanisms for staff to share their challenges, their successes, self-care strategies, and use of humor.
- ❑ Go out of your way to check in on people.
- ❑ Encourage the use of humor – sharing jokes or videos.
- ❑ Remain open, engaged, and reassuring.



# Taking Care of YOU

- Administrators need to have their own method of staying connected, checking in with each other.
- Staff look to you for guidance, and you play a big role in leading through example.
- If you model self-care and connection, your staff will likely follow suit.

# We are in this TOGETHER

- Convey hope and the message that “we will get through this together.”
- Share positive stories with staff, elicit positive reflections on the day/week.
- Catch people doing good work – Highlight the extra effort that staff are taking to ensure good care of residents.
- Reinforce healthy behaviors – compliment staff who are washing hands, helping a resident connect with meaning or family, taking extra care to sanitize high-touch spaces.



Thank you



# Trauma Informed Care: Further Reading

Judith Herman (2015) Trauma and Recovery

Linda Sanford (1991) Strong at the Broken Places

Robert Sapolsky (2004) Why Zebras Don't Get Ulcers

Bessel Van Der Kolk (2014). The Body Keeps the Score

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SAMHSA (2009) Substance Abuse Treatment: Addressing the Specific Needs of Women. Treatment Improvement Protocol (TIP) Series, No. 51. Center for Substance Abuse Treatment. Rockville (MD): Substance Abuse and Mental Health Services Administration.

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<https://www.dhs.wisconsin.gov/tic/skildev.pdf>

# RESOURCES

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# Trauma-Informed, Person-Centered Care Resources

- **NORC**

- Trauma-informed care – <https://ltcombudsman.org/issues/trauma-informed-care>
- Person-centered care - <https://ltcombudsman.org/issues/person-centered-care>

- **Consumer Voice**

- Resident-Directed Care/Culture Change <https://theconsumervoice.org/issues/for-advocates/resident-directed-care>
- My Personal Directions for Quality Living - [Blank Form](#) & [Sample](#)
  - A tool from Consumer Voice, with edits by SAGE, for individuals to share what matters to them for person-centered care.
- Information for LTC consumers - <https://theconsumervoice.org/issues/recipients>
- Information for Family Members - <https://theconsumervoice.org/issues/family>

# Resources

## National Long-Term Care Ombudsman Resource Center (NORC)

[www.ltombudsman.org](http://www.ltombudsman.org)

- Coronavirus Prevention in Long-Term Care Facilities: Information for Ombudsman Programs  
[https://ltombudsman.org/omb\\_support/COVID-19](https://ltombudsman.org/omb_support/COVID-19)

## National Consumer Voice for Quality Long-Term Care (Consumer Voice)

[www.theconsumervoice.org](http://www.theconsumervoice.org)

- Coronavirus in Long-Term Care Facilities: Information for Advocates  
<https://theconsumervoice.org/issues/other-issues-and-resources/covid-19>
- Coronavirus in Long-Term Care Facilities: Information for Residents and Families  
<https://theconsumervoice.org/issues/other-issues-and-resources/covid-19/residents-families>



# The National **Long-Term Care** **Ombudsman** Resource Center

***Connect with us:***

[www.ltcombudsman.org](http://www.ltcombudsman.org)

[ombudcenter@theconsumervoice.org](mailto:ombudcenter@theconsumervoice.org)



**The National LTC Ombudsman Resource Center**



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