

The RBN Team



Abby Mitchell Ouji, LCSW



Anne Rockwood, LCSW



Angelica Santiago, ASW



Fiona Lundy, LCSW



Gen Reis, LCSW



Gillian Fynn, LCSW



Maggie Edmunds, MD



Niyi Omotoso, MD

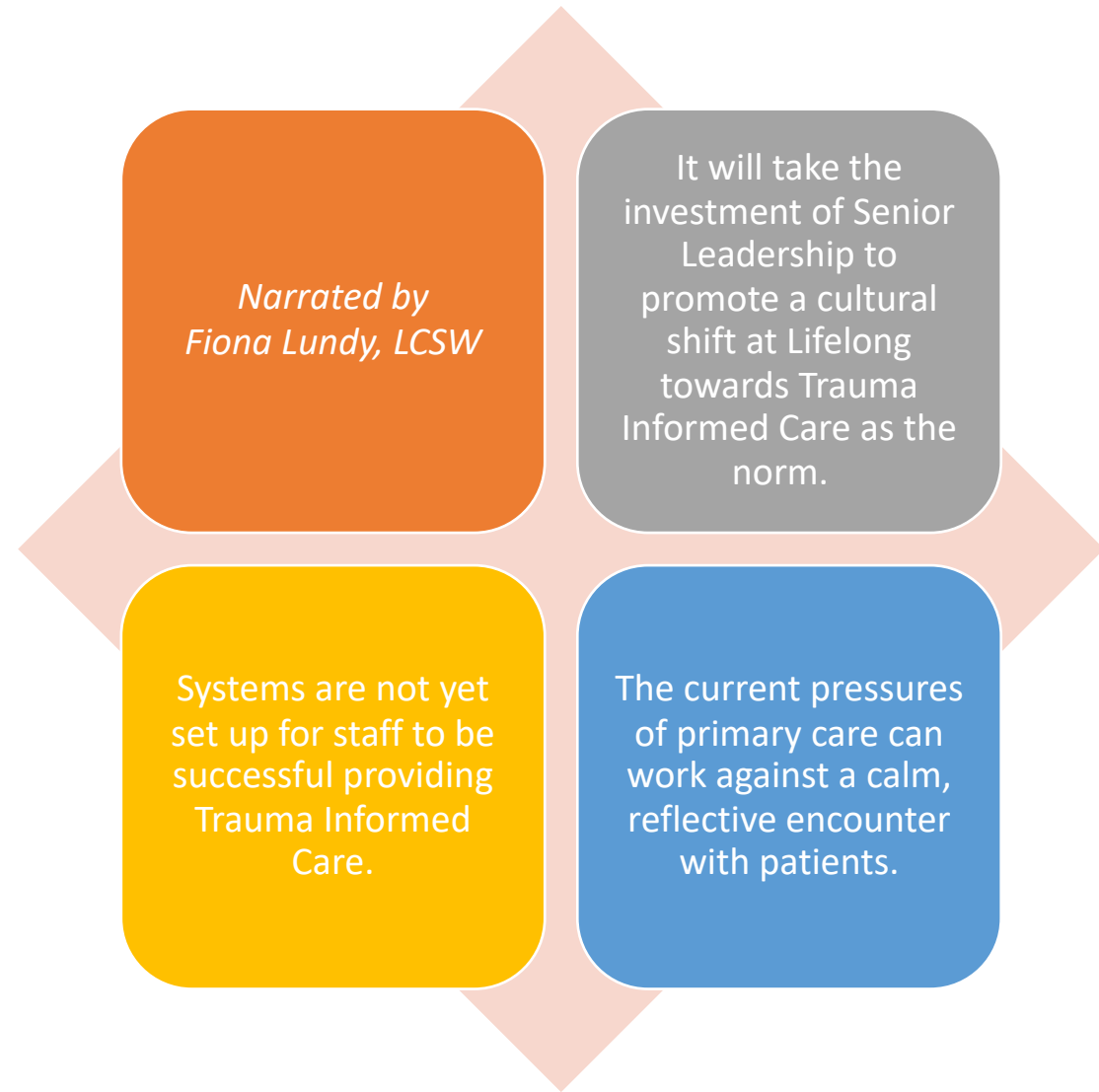
A close-up photograph of a healthcare provider, likely a dentist or pediatrician, examining a young child's mouth. The provider is wearing a blue clinical shirt and is using a dental mirror to inspect the child's teeth. The child, who has dark curly hair, is looking up at the provider with an open mouth. A parent, wearing a grey cap and glasses, is visible on the left, holding the child's head steady. The background is a plain, light-colored wall.

Our Desired Future

A pediatric care delivery system that is trauma-and-resilience informed.

Narrated by Abby Mitchell Ouji, LCSW

The Challenge



Our Current State

Narrated by Gen Reis, LCSW and Angie Santiago, ASW

Healthcare workers are experiencing their own trauma and feel stretched to the limit.

Making TIC a priority throughout Lifelong would be a significant investment in our own workforce.

We need to partner with our patients for solutions.



Our Plan for Year 2

Invest in our assets

Narrated by Omoniyi Omotoso, MD, MPH, FAAP

Staff training, mentorship and wellness

Empower patient-families – strengthen our Patient Voice Collaborative partnership

Innovative Models of Care - Fully integrate our existing healing, patient-centered clinical practices

Strategic Plan for Sustainability – Program Manager role



Why we should continue this work

Narrated by Magdalen Edmunds, MD, MPH

- TIC will **benefit** both patients and staff
- We can **prevent future chronic disease** in the most vulnerable of the 5000 children aged 0-5 that we serve at LifeLong in a year.
- We can **prevent burnout and loss of staff**

What happens if we Don't Move Forward with This Work

Narrated by Anne Rockwood, LCSW

Staff burnout and turnover will increase.

Traumatized patients will not get the care they need and 10% of them are likely to develop chronic diseases.

We will leave \$ on the table.

What We Need for Ongoing Success



Narrated by Gillian Fynn, LCSW, Project Lead



Lifelong Leadership to message their commitment and investment in Trauma Informed Care to all staff.



A Program Manager to communicate, coordinate and implement Trauma Informed Care agency wide.



Protected time for staff training and coaching to provide Trauma Informed Care.



Thank you for your time!

Abby Mitchell Ouji, LCSW, William Jenkins - Psychosocial Director

Angelica Santiago, ASW, Brookside San Pablo

Anne Rockwood, LCSW, Rosa Parks School-based

Fiona Lundy, LCSW, West Berkeley

Genevieve Reis, LCSW, Brookside San Pablo - Psychosocial Director

Gillian Fynn, LCSW – RBN Project Lead

Maggie Edmunds, MD, Deputy Chief Medical Officer

Niyi Omotoso, MD, MPH, Associate Medical Director of Pediatrics

For more information contact: gfyenn@lifelongmedical.org;
oomotoso@lifelongmedical.org

The Transformation To Becoming A Trauma Informed Organization

South of Market Health Center

Simone Ippoliti, NP - Zeke Montejano - Ali Rodriguez, NP -

Asia Ward, MA - Mark Rha, RN

Nov 4, 2021





Our path....our journey our beginnings

- Identifying the need to become a more trauma-informed organization.
- Amplifying the voices of our community, recognizing that trauma is impacted by all.
- Listening to our community partners and residents and learning from them.
- Build trust within our community



Our challenges and barriers-

- Staffing shortages
- Slow process of readiness for change in our main clinic providers who have previously not screened for ACEs
- Burn-out amongst existing staff/providers in being all things to all
- COVID-19 staff fatigue

Our Current State



- Cannot ignore COVID related stress outside and inside workplace and its impact on workplace culture and productivity
- The value of naming and recognizing the trauma experiencing by all front-line workers as well as our most impacted families in the COVID-19 pandemic
- Having fewer staff allowed us to limit bureaucracy in the short-term and be more adaptable to community needs but this also led to staff being more impacted by burn-out in the need to be both providers, community responders and clinic staff all at once.
- Staff Wellness activities-



RBN Year 2 Plan:

Driving a culture of change to become a trauma informed care organization.

Taking a trauma-informed approach when caring for patients ensures we don't inadvertently re-traumatize them, and results in tailored interventions likely to improve the overall patient experience. - Dr. Mark Lachman

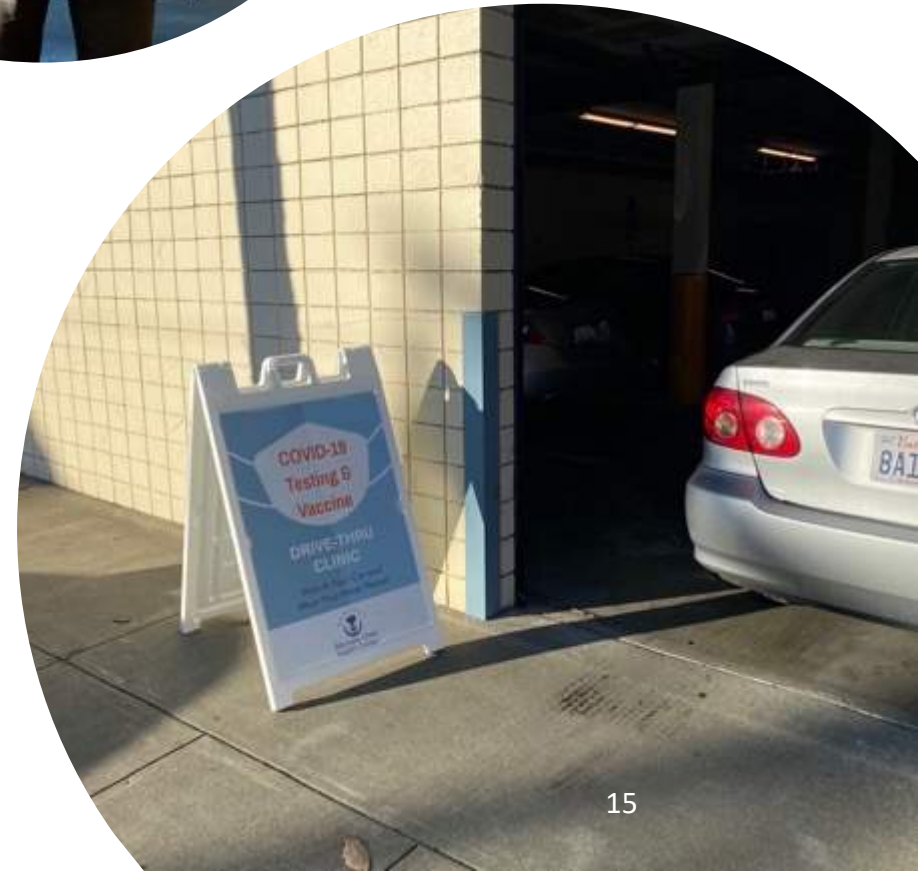
Benefits/Value of Achieving Desired Vision

Short Term Benefits (2021-2022)

- Neutralize or minimize COVID-19 as a major health concern for the community
- Work with patients to help them achieve their own goals of normalcy and stability in the context of the global pandemic
- Staff happiness, growth, and retention

Long Term Benefits (Organization Vision)

- Continuing model of preventative and trauma informed care to decrease healthcare related stress
- Decrease healthcare needs as a time/resource factor for our patients
- Empowerment, Voice, and Choice- recognizes, encourages and builds on the strengths of everyone.
- Collaboration- an emphasis on leveling power differences and valuing all
- Peer Support- Being able to count on others in an open and caring way.



Challenges or Consequences if We Don't Move Forward with This Work

- Risk of inflicting harm onto the community we AIM to uplift.
- Spread of misinformation and distrust of our medical community.
- Prolonging the impact of COVID 19 on our community.
- Mental Health impact- Stress,

Our Ask for Specific Support / What We Need from Our Team to Make it Happen

- For the community to retain in its own culture hope and trust within itself and in support services.
- Acknowledge the difficulties, challenges, and changes that the healthcare system has had to make to ensure the safety of our community and our staff, while we do our best to maintain our standards of trauma informed care.
- The resilience, courage, and resolution of our community inspires us and helps us be our best.

**SFMCOIP- South of Market
Health Center
(SMHC)/Bayview Child Health
Center (BCHC)**

**Simone Ippoliti, NP BCHC- Site
Clinic Director BCHC - Zeke
Montejano SMHC Director of
Clinic Operations - Ali
Rodriguez, NP – BCMHC &
SMHC Provider**

**Asia Ward, MA - Mark Rha,
RN BCHC Nurse Manager -
Keshia Groves, FNP BCHC
provider**

bchc@smhcsf.org



Thank you for your time!



Restructure, Recruitment, Recalibrate & Reconnection

UCSF Benioff Children's Hospital
Oakland - FQHC Primary Care

Lourdes Juarez, Cherri Harris,
Leticia Gomez, Gena Lewis,
Matt Ong

November 4, 2021





Imagine...

- Time to connect
- Having a space
- Learning how to connect



The Challenge: Why It's Not Happening Now

- Covid
- Lack of motivation
- Burnout

Starting over again...

- RBN team barriers:
 - Turnover
 - Short staff and a new leader role
 - Recruitment and time
 - Paternity leave
- Staff/clinic morale



RBN Year 2 Plan:

Hope, Healing & Health



WELLNESS TO OURSELVES, EACH OTHER, AND THE CLINIC?

- Improve staff morale
- Stronger foundation among our staff and clinic
- Improve staff communication



What is meaningful or important for us?

- Breathing
- Coming together
- To be kind and opened
- Self-worth
- Sharing feelings
- Enjoying primary care in shared language
- Space to connect
- That everyone is looking for respect in a work environment that feels like family
- Teamwork
- Knowing that we have different events in our lives and trying to manage day to day
- Self-reflection
- Being together with everyone – acupuncture
- Learning how to be together
- Learning to respect each other
- Being connected with colleagues
- Hearing what brings others to work help me be connected
- Networking
- Coming together and asking things that can make us vulnerable and honest
- Understanding how others are resilient and how they view the clinic culture
- Having faith
- Engagement
- Connecting in a group at the end
- Meditate, staying positive
- The time to brainstorm about ways to improve interaction in meetings and clinics



If We Don't Move Forward with This Work

- Job dissatisfaction/turnover/burnout
- Staff resistance
- Patient satisfaction survey

What We **Need** to Make it Happen

- **Engagement**

- Weekly acupuncture for staff during lunch time
- Provide art & craft activity once or twice a month
- Incorporate zoom breakout room (or in person) for mindfulness activities in regular staff meetings
- Allow small social group gatherings
- Bi-annual retreats: FQHC and subgroup

- **Work Time**

- Offer OA protected time or overtime to participate in RBN:
 - 2 hours per month and 2 hours quarterly

- **Positive Messages**

- Employee recognition via newsletter, personal or professional achievements
- Posting of positive phrases: emails, clinic pods, lounge area

- **Financial Support**

- Incentives: gift cards, UCSF BCH logo wear/gadgets, meals
- Supplies: acupuncture, art & craft, print & design





Thank you.

Lourdes Juarez, Cherri Harris, Leticia Gomez,
Gena Lewis, Matt Ong

