West County Health Centers

Caring for our Communities
**Your RBC Journey: Where did you start, and where are you now?**

**Oe**

*Office Environment*

1. Develop and Foster a Trauma and Resilience-Informed Environment

- **Focused awareness of trauma** as it impacts patients, staff and community:
  - Training of staff around TIC, de-escalation, and safety;
  - Dedicated space for PCIT;
  - Educational materials;
  - Age-appropriate therapy tools.

**Cr**

*Community Relationships*

2. Build Relationships with Communities to Support Families

- Inviting **collaboration** and joining each others’ spaces:
  - Toddler group partnership with local library;
  - Key stakeholders partnering with WCHC;
  - Patient Council engagement.

**Fe**

*Family Engagement*

3. Engage with Families in Their Own Care

- **Expanded BH services/staffing** to support families;
  - Engagement with school district;
  - CPSP intake to include trauma assessment/screening.
Your RBC Journey: Where did you start, and where are you now?

**As**

Assess Health
4. Assess Whole Family Health and Resilience

- Expanded screening and assessment of trauma and MH for families/children:
  - Training;
  - Increased access to BH resources internally.

**Ad**

Address Health
5. Address Whole Family Health and Resilience

- Expanded resources for families:
  - Community resource guide created;
  - Piloted screening for ACEs throughout health center with active feedback loop with parents, caregivers, patient council.

**Co**

Coordinate
6. Coordinate Services and Supports for Families

- Partnership with internal and external services/providers:
  - Shared groups, warm handoffs, increased referrals;
  - Participation through planning and presentation at local parenting fair.
WCHC’s Leadership Team has been key in supporting the work of the RBC since its inception. Strong messaging, prioritization, and integration of TIC into the agency’s culture have been vital to its success.

Through our trauma and resilience informed care journey, WCHC has had lived experience in addressing the impact of local disasters upon our patients, staff and community, furthering a resilience-based approach to our work.

Our site visit to Montefiore was transformative as it shifted our approach to becoming trauma informed. Specifically, the idea that becoming trauma informed cannot be separated from unconscious bias and/or cultural awareness training.
Impact on our patients, staff, or organization

- **WCHC** has engaged with RBC and local efforts to support *recovery* and *resilience* following the catastrophic floods and fires of the past two years. Tools for self-care are offered to staff through an 8 week *Mind/Body Skills Building*. Many front line and call center staff have participated and received additional ongoing training and debriefing to deal with difficult situations. Staff report *less triggering, greater empathy*, an ability to truly “*listen*” to patients and to provide *support* to colleagues following stressful events and interactions. One call center staff reported, following an intense encounter with a suicidal patient, “*I’m good! I took a walk and used my tools and I’m ready to go!*”

- Despite staff fears that patients would be triggered by screening, patients have voiced positive support for this work and addressing trauma as it is a vital part of *WCHC* that they are glad is medical care.
Top 3 Takeaways:
What were your top three lessons learned in RBC?

1. Change is hard. Things get in the way. We need to keep being resilient. We are all in this together.

2. Patients fully understand and welcome the opportunity to explore trauma in their lives.

3. We have to be creative about how to offer resources to patients and families and furthering this work going forward.
Future: What’s Next?

**Spreading**

- Management Meeting training on TIC (3/20) and All Staff meeting training on ACEs (4/20).
- Provider training on ACE’s through ACEs Aware by July 1, 2020.
- ACEs Processes/workflows moved into existing Operations workgroups.
- Transition oversight from RBC Team to WCHC project leads.
- Work plan developed for extension of grant activities.

**Sustaining**

- Identifying creative ways, in a PPS model, to move forward and support this work.
- Medical providers trained in ACEs to support reimbursement of screening.
- Combine cultural sensitivity training with trauma training.
- Onboarding process will include TIC, ACEs principles, rationale, workflows.
- Continued engagement with community resources and partners.