

DHS participates in Breakthrough Series Collaborative to improve trauma-informed assessments and planning

A team from the Department of Human Services (DHS) spent 10 months participating in a national collaborative to study, refine and promote trauma-informed practices related to common assessments. The participation underscores the recognition at DHS that trauma impacts the physical and mental health of those served by DHS professionals and that there is a need to better understand it. It also makes use of assessments to discuss traumatic events in a manner that is comfortable for all.

The intent in participating in the collaborative, broadly speaking, fell into two categories: Exploring ways to support professionals in the field as they work to discuss traumatic experiences – domestic violence or repeated foster care placements, as examples --- and exploring how better to use the information gathered in common assessments to inform effective action plans for consumers.

Called the Breakthrough Series Collaborative (BSC), the group was formed and led by partners in the [National Child Traumatic Stress Network](#), which was established by Congress in 2000 to improve the standard of care for children who have experienced trauma and to increase access to services. BSC leadership included faculty from the [Family Informed Trauma Treatment Center](#) at the University of Maryland and the Center for Child Trauma Assessment and Service Planning. From February 2015 to December 2015, eight teams of professionals worked together in their examination of assessment-related issues, meeting either in person or via conference call.

DHS's team included Robin Orlando, integrated engagement practice and assessment manager, and Joseph Martin, systems integration specialist, of the department's Integrated Programs unit; Lynn Bottoms, family interviewer with the Office of Data Analysis, Research and Evaluation (DARE); Roslynn Zielinski, supervisor, and Ashley Diulus, mental health service coordinator, of Human Service Administration Organization (HSAO); and Stephanie Robinson, Youth Support Partner (YSP) Unit coordinator. The Systems Integration unit is overseen by Pat Valentine, Executive Deputy Director of Integrated Programs.

For Allegheny County, work as part of the collaborative primarily revolved around use of the Child and Adolescent Needs and Strengths (CANS) tool and the Family Support and Advocacy Tool (FAST) to improve:

- Knowledge and competence in trauma assessment
- Screening, assessment and planning processes
- Engagement and partnerships with youth and families
- Collaboration among providers in various human service streams

Joseph said that looking at the tools' ability to harness details of trauma for solutions included finding ways to help professionals broach the subject of trauma. "How do we have a conversation with someone about sensitive topics or painful topics in a way that is appropriate for our role and 'safe' for that person's emotions? And how do we do that in a way that will ultimately benefit that person with appropriate supports because we understand better where that person is coming from?" he said.

In the Breakthrough Collaborative, many tests of strategies were carried out. With the Allegheny County team, for example, HSAO supervisors were asked to inquire of front-line workers after an assessment

that revealed trauma, “What about this was surprising to you? And if you could change anything about what is happening here, what would it be?”

The purpose was to help workers reflect on the information gathered and how it might be relevant to their planning process, and to see where issues might appear that supervisors may have to address, such as any emotional impact on the worker.

DHS tracked work at HSAO several times during participation in the collaboration to see if the rate of assessment use increased. Also tracked were family and individual reactions to assessments to see if they believed the assessments helped in their understanding of needs and strengths and in developing a plan. Both assessment use and families’ reported satisfaction increased, Joe said. Getting families and youth more involved in the assessment and planning process, in fact, was also a key goal of participating in the collaborative.

As the collaborative moved forward, DHS developed a Think Tank that brought in more representation, and thus viewpoints, from various DHS offices and providers. The Think Tank continues to examine needs, challenges, resources and more to ensure that trauma-informed care is integrated in daily practice.

Currently, the DHS Systems Integration team is distributing a tip sheet for those who use common assessments on how they might broach trauma-related conversations; working to ensure that those being trained and certified in giving assessments understand why they are used and are important; and developing a repository of resources and information that ultimately will be posted on the DHS website.