

How Can Trauma Informed Care Support Staff Resiliency and Reduce Burnout?

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Disclosures

I have no financial relationships to disclose or conflicts of interest to resolve.

*“We realized that this huge missing ingredient in our care model was understanding the impact of cumulative trauma on their lives, and **really understanding how to help people cope** with this experience of cumulative trauma in the ways that are [healthier] for them.”*

Edward Machtinger, MD

Women’s HIV Program (WHP) at UCSF

<https://www.aamc.org/news-insights/what-if-we-treated-every-patient-though-they-had-lived-through-trauma>

“Being a doctor means coping with loss and disappointment on a daily basis. Many of your patients will not get better. Some will die. Too few will be cured... ***[B]ut if you stay the course ... ultimately you will emerge further down the road tougher than the rest.***”

DENNIS S. CHARNEY, MD

Dr. Charney is Anne and Joel Ehrenkranz dean of the Icahn School of Medicine at Mount Sinai and president for academic affairs of the Mount Sinai Health System.

<https://www.aamc.org/news-insights/insights/he-studied-life-changing-traumas-then-he-faced-his-own>

Organizations have an ethical mandate of a “duty to train” wherein workers are taught about the potential negative effects of the work and how to cope.

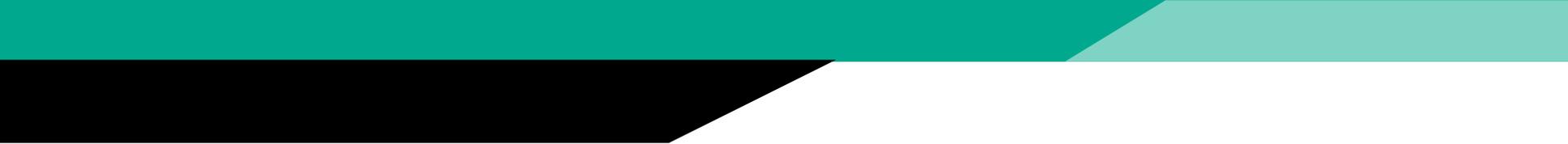
Munroe, J. F., in Compassion Fatigue, 1995

Objectives

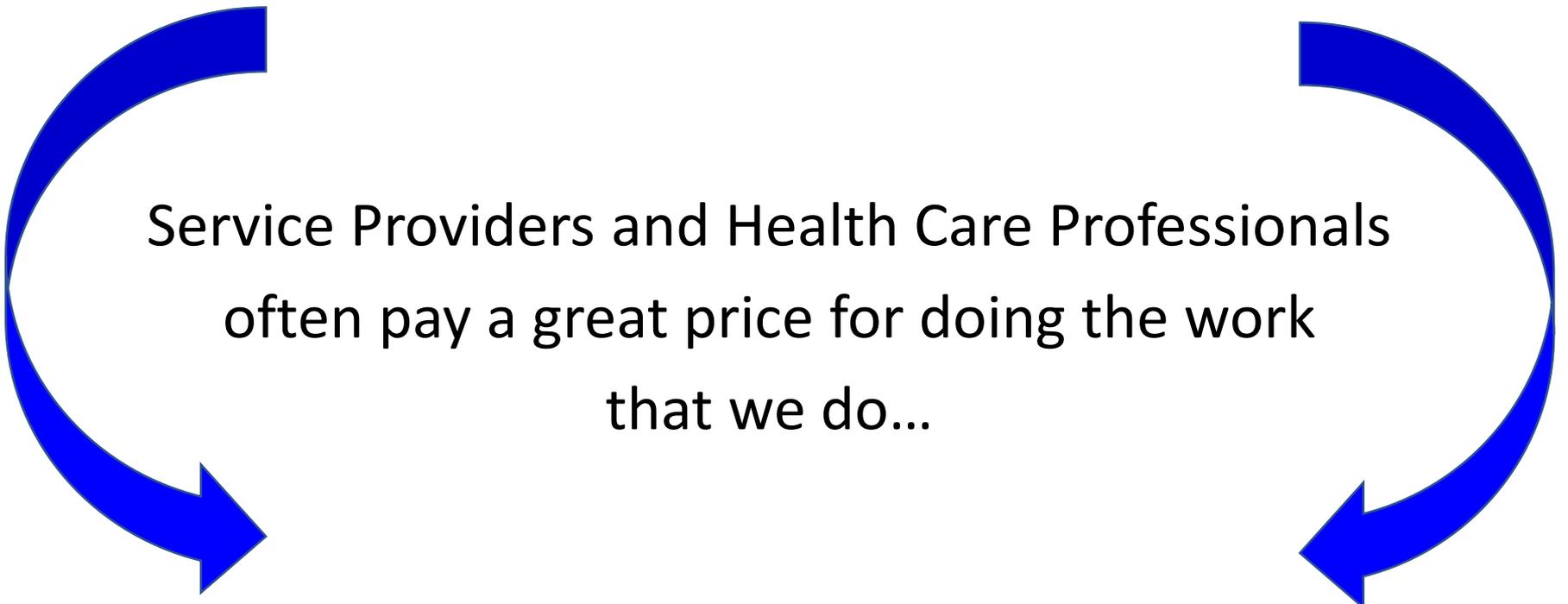
Causes of
Burnout &
Stress

What is
Resilience?

What is
Trauma
Informed
Care?



Service Providers and Health Care Professionals
often pay a great price for doing the work
that we do...



Causes of Burnout & Stress

- Long work hours
- Job strain, shift work
- Job insecurity
- Limited control
- Peer conflict
- Low social support

65%

of US employees
view their jobs
as the #1 stressor
in their lives

Source: apa.org. <http://workplacementalhealth.org/Mental-Health-Topics/Resilience-A-Strong-Workforce-Needs-It>

STRESS:

Its Impact on
the Workforce

Poor work
attitudes/turnover

Increase in depression
and/or anxiety

Increase in negative
physical effects

Withdrawal and poor
performance/burnout

Alcohol and substance
misuse

Demanding
workloads
accounted for
\$48 billion
in U.S. healthcare
expenditures

Source: [apa.org. http://workplacementalhealth.org/Mental-Health-Topics/Resilience-A-Strong-Workforce-Needs-It](http://workplacementalhealth.org/Mental-Health-Topics/Resilience-A-Strong-Workforce-Needs-It)

Why?

Impact of Burnout, Compassion Fatigue & Vicarious Trauma

Lost Productivity

Decreased morale, cohesion, communication, collaboration and quality of services

Poor Organizational Health

Erosion of concentration, focus, decision-making, motivation and performance

Staff Turnover

Time, resources needed to hire and train, drains remaining staff

What's the Difference?

Burnout

- Defined as a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed.

Compassion Fatigue

- Defined as a gradual lessening of compassion over time. Condition is common among workers who work directly with victims of disasters, trauma, or illness, especially in the health care industry.

Vicarious/ Secondary Trauma

- “The transformation that occurs within the trauma worker as a result of empathetic engagement with the client's trauma experiences.”

How can Health Care Professionals be exposed to trauma?

- **Direct** – An event that includes exposure to actual or threatened death, serious injury or sexual violence
- **Indirect** – Experiencing first-hand repeated or extreme exposure to details
- Single Event or Mass Violence

Cognition

- Impaired Readiness to Learn
- Difficulty Problem-Solving
- Language Delays
- Problems with Concentration
- Poor Academic Achievement

Brain Development

- Smaller Brain Size
- Less Efficient Processing
- Impaired Stress Response
- Change in Gene Expression

Physical Health

- Sleep Disorders
- Eating Disorders
- Poor Immune System Functioning
- Cardiovascular Disease
- Shorter Life Span

Behavior

- Poor Self-Regulation
- Social Withdrawal
- Aggression
- Poor Impulse-Control
- Risk-Taking/Illegal Activity
- Sexual Acting Out
- Adolescent Pregnancy
- Drug & Alcohol Misuse

Emotions

- Difficulty Controlling Emotions
- Trouble Recognizing Emotions
- Limited Coping Skills
- Increased Sensitivity to Stress
- Shame & Guilt
- Excessive Worry, Hopelessness
- Feelings of Helplessness/Lack of Self-Efficacy

Mental Health

- Depression
- Anxiety
- Negative Self-Image/Low Self-Esteem
- Posttraumatic Stress Disorder (PTSD)
- Suicidality

Relationships

- Attachment Problems/Disorders
- Poor Understanding of Social Interactions
- Difficulty Forming Relationships with Peers
- Problems in Romantic Relationships
- Intergenerational Cycles of Abuse & Neglect



Know and be aware of your risk factors





- Young age
- Trauma history
- Pre-existing psychological disorder
- Isolation, inadequate support system
- Loss in last 12 months

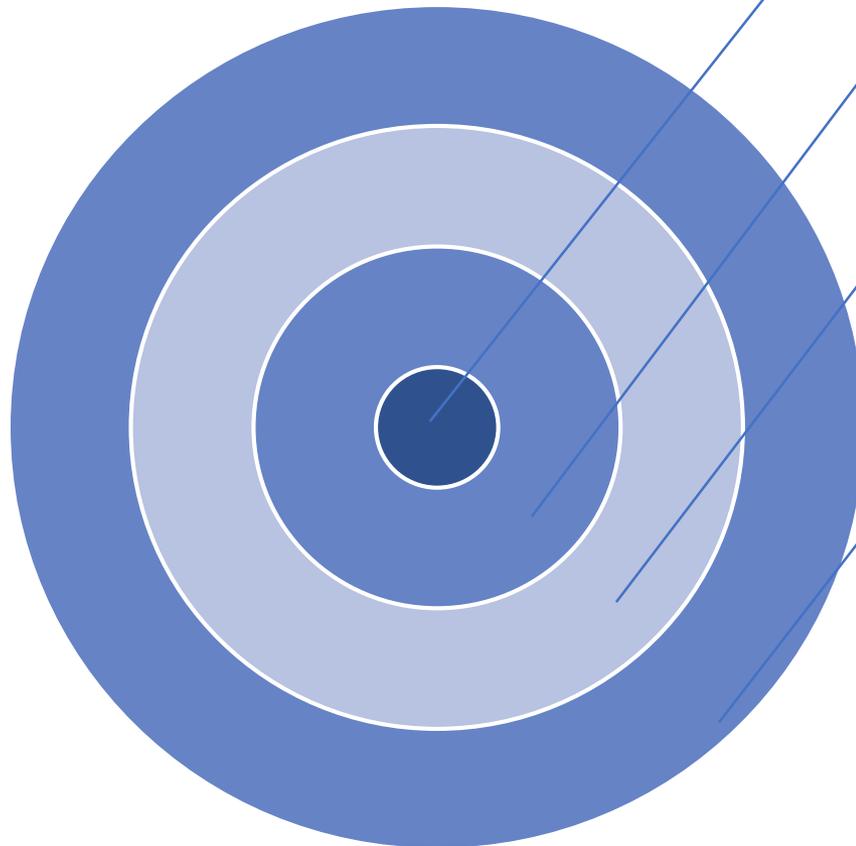
Bonach & Heckert, 2012; Slattery & Goodman, 2009; Bell, Kulkarni, et al, 2003; Cornille & Meyers, 1999



- High percentage of trauma survivors in caseload
- Lack of quality supervision
- Worker/organization mismatch
- Little experience
- Lack of professional support system
- Inadequate orientation and training for role

Bonach & Heckert, 2012; Slattery & Goodman, 2009; Bell, Kulkarni, et al, 2003; Cornille & Meyers, 1999

Physician Outcomes



One doctor dies by suicide in the US every day

APA findings 2018 annual meeting

Higher rate than military. More than 2x of the general population

Often have **untreated** or **undertreated** depression or other mental health illnesses

Suicide Cost in NYS

Total suicide cost in NYS:

\$1,806,769,000

(Combined Medical & Work loss
(2010))

\$1,167,918

average cost per suicide death





The process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress such as family/relations difficulties, serious health problems, workplace and financial stressors.

American Psychological Association brochure, "The Road to Resilience"

Resilience...is **not a trait** that people either have or do not have. It involves thoughts, behaviors and actions that can be learned, supported and developed in anyone.



Research has shown that resilience is ordinary, not extraordinary.



RESILIENCE

Tools to respond to the challenges of life

Take care of yourself

- Ask for help or space before you need it.
- Daily physical activity, healthy eating, sufficient sleep, mindfulness and taking time to recover from exhaustion.
- Find meaning and purpose: volunteer, faith, religion, service projects.

Set and Keep Boundaries

- Boundaries are the limits we set within our relationships that allow for safe and appropriate connections.
- Be assertive in your approach and communication and learn to say “no.”

Gratitude and Journaling

- Spend time regularly thinking about what you are grateful.
- Express that gratitude to colleagues, friends, and family.
- Process of writing and reflection creates self-awareness, encourages learning and improve adaptability.

Social Support

- A strong social network provides support.
- Nurture relationships with your family, friends and colleagues.
- Seek mentorship.
- Spend time with a close friend who won't drain you of energy.

Source: <https://www.psychiatry.org/news-room/apa-blogs/apa-blog/2019/03/celebrating-women-s-history-month-and-resilience>

Mayo Clinic's Resilience Tips

- **Get connected.** Building strong, positive relationships with loved ones and friends can provide you with needed support and acceptance in both good times and bad. Establish other important connections by volunteering or joining a faith or spiritual community.
- **Make every day meaningful.** Do something that gives you a sense of accomplishment and purpose every day. Set goals to help you look toward the future with meaning.
- **Learn from experience.** Think of how you've coped with hardships in the past. Consider the skills and strategies that helped you through rough times. You might even write about past experiences in a journal to help you identify positive and negative behavior patterns — and guide your future behavior.
- **Remain hopeful.** You can't change the past, but you can always look toward the future. Accepting and even anticipating change makes it easier to adapt and view new challenges with less anxiety.
- **Take care of yourself.** Tend to your own needs and feelings. Participate in activities and hobbies you enjoy. Include physical activity in your daily routine. Get plenty of sleep. Eat a healthy diet. Practice stress management and relaxation techniques, such as yoga, meditation, guided imagery, deep breathing or prayer.
- **Be proactive.** Don't ignore your problems. Instead, figure out what needs to be done, make a plan, and take action. Although it can take time to recover from a major setback, traumatic event or loss, know that your situation can improve if you work at it.

Trauma Informed Care



*It's about asking what's happened to a person,
NOT what's wrong with them.*

- The adoption of principles and practices that promote a culture of safety, empowerment, resilience and healing.
- Based on what we know about the prevalence and impact of trauma, it is necessary to ensure widespread adoption of trauma-informed care.
- Trauma Informed Care is a strengths-based framework, which recognizes the complex nature and effects of trauma and promotes resilience and healing.

EMPATHY

The ability to understand & share the feelings of others

RESILIENCE

Tools to respond to the challenges of life

SAMHSA'S 6 PRINCIPLES

of a

TRAUMA-INFORMED APPROACH



SAFETY

Prevents violence across the lifespan and creates safe physical environments.

TRUSTWORTHINESS

Fosters positive relationships among residents, City Hall, police, schools and others.

EMPOWERMENT

Ensures opportunities for growth are available for all.

COLLABORATION

Promotes involvement of residents and partnership among agencies.

PEER SUPPORT

Engages residents to work together on issues of common concern.

HISTORY, GENDER, CULTURE

Values and supports history, culture and diversity.



RESILIENCE

Tools to respond to the challenges of life

Resilience is associated with:

- Greater job satisfaction
- Work happiness
- Organizational commitment
- Employee engagement

Resilience Contributes to:

- Improved self-esteem
- Sense of control over life events
- Sense of purpose
- Improved employee interpersonal relationships

Employers:

- Reap the rewards of increased productivity
- Reduce turnover
- Reduce burnout

Source: <http://workplacementalhealth.org/Mental-Health-Topics/Resilience-A-Strong-Workforce-Needs-It>

Organizational Benefits of Being Trauma Informed

“Increasingly, institutions are recognizing that **Trauma Informed Care is essential** to providing quality care...Without it, providers risk retraumatizing patients, making them feel vulnerable in a place where they should feel comfortable getting the care they need.”

Malika Fair, MD, MPH
Practicing Emergency Physician
AAMC’s Senior Director of Health Equity

<https://www.aamc.org/news-insights/what-if-we-treated-every-patient-though-they-had-lived-through-trauma>

Lessons Learned

“

Trying to implement trauma-specific clinical practices without first implementing trauma-informed organizational culture change is like throwing seeds on dry land”

Dr. Sandra L. Bloom, Creator of the Sanctuary Model

”

10 Key Ingredients

Organizational practices reorient the culture of a health care setting to address the potential for trauma in patients *and* staff:



- 1 Lead and communicate about being trauma-informed
- 2 Engage patients in organizational planning
- 3 Train both clinical and non-clinical staff
- 4 Create a safe physical and emotional environment
- 5 Prevent secondary traumatic stress in staff
- 6 Build a trauma-informed workforce

Clinical practices address the impact of trauma on individual patients:



- 7 Involve patients in the treatment process
- 8 Screen for trauma
- 9 Train staff in trauma-specific treatments
- 10 Engage referral sources and partner organizations



For more details, read the brief, *Key Ingredients for Successful Trauma-Informed Care Implementation*. Visit www.TraumaInformedCare.chcs.org.

TraumaInformedCare.chcs.org



Trauma-Informed Care
Implementation Resource Center

HOW CAN PROVIDERS BECOME TRAUMA-INFORMED?

Trauma-informed care acknowledges that understanding a patient's life experiences is key to potentially improving engagement and outcomes while lowering unnecessary utilization.

In order to be successful, trauma-informed care must be adopted at the **organizational and clinical levels**.



**CCN Regional
Trauma Informed
Care Network**

- Finalizing a quick user Trauma Informed Care Implementation Toolkit to help mobilize the TIC adoption in our 9 county service area

**Trauma Informed
Care Learning
Symposium 2020**

- Workshops and trainings to support the implementation of Trauma Informed Care
- In Process

Changing Course

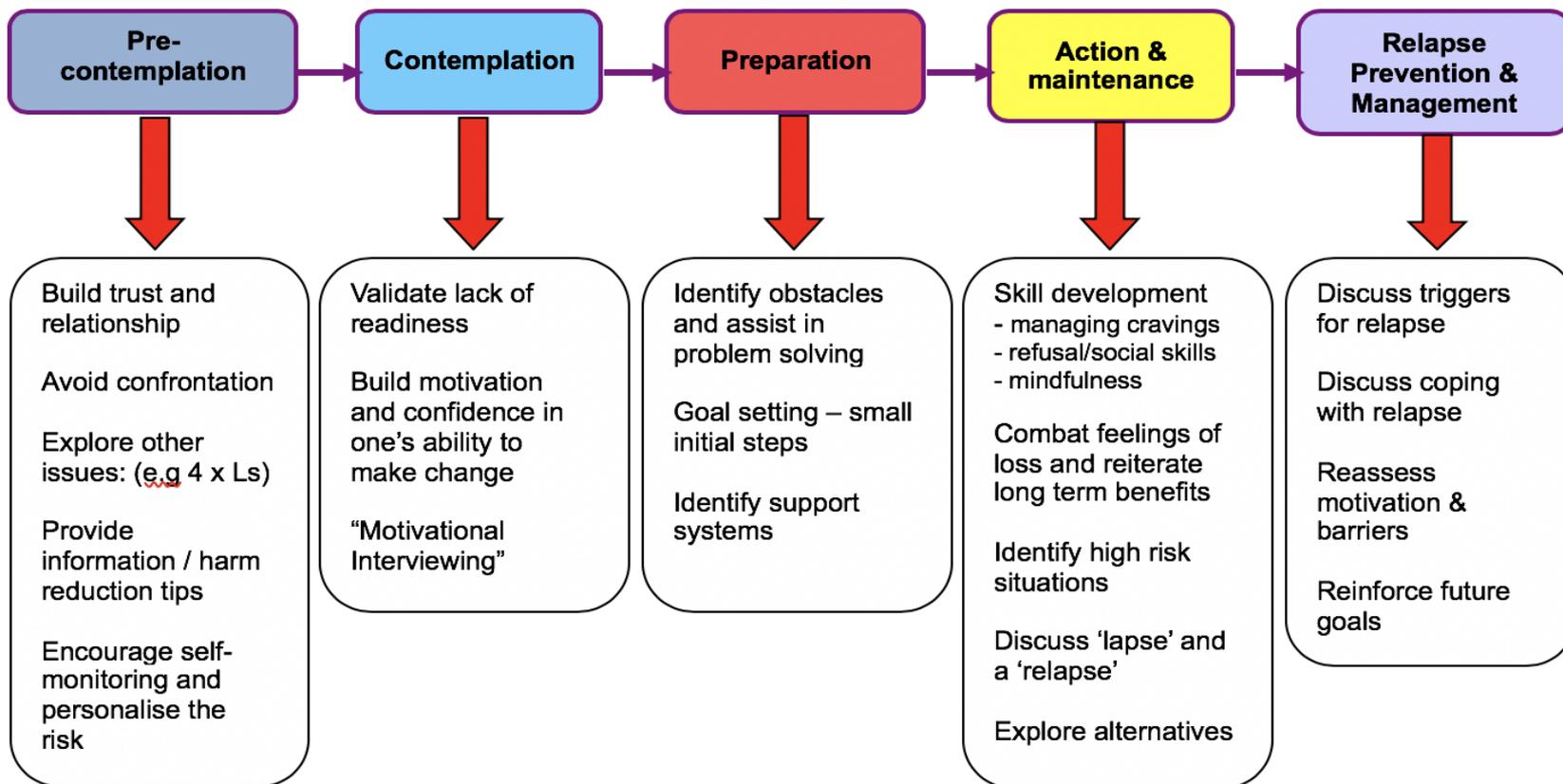
Medical Model

- Professional in Charge
- Focus on illness & dysfunction
- Focus on disability & lack of competence
- Focus on controlling or reducing symptoms
- Tends to be reductionistic
- Goal is cure & eliminating symptoms of illness

Wellness/Recovery Model

- Client centered
- Focus on wellness & function
- Focus on ability & competence
- Focus on aspects of health & wellbeing
- Tends to be holistic
- Goal is “doing” daily activity regardless of symptoms

MATCHING AOD INTERVENTIONS TO THE STAGES OF CHANGE



Developed by Insight Centre for AOD Training and Workforce Development
www.insight.qld.edu.au Vers 1.0 2018

The Art of Letting Go: Reducing Burn-out and Motivational Interviewing

May 9, 2016 | Mary Beth



3ai Integration BH in Primary Care

Patient Centered



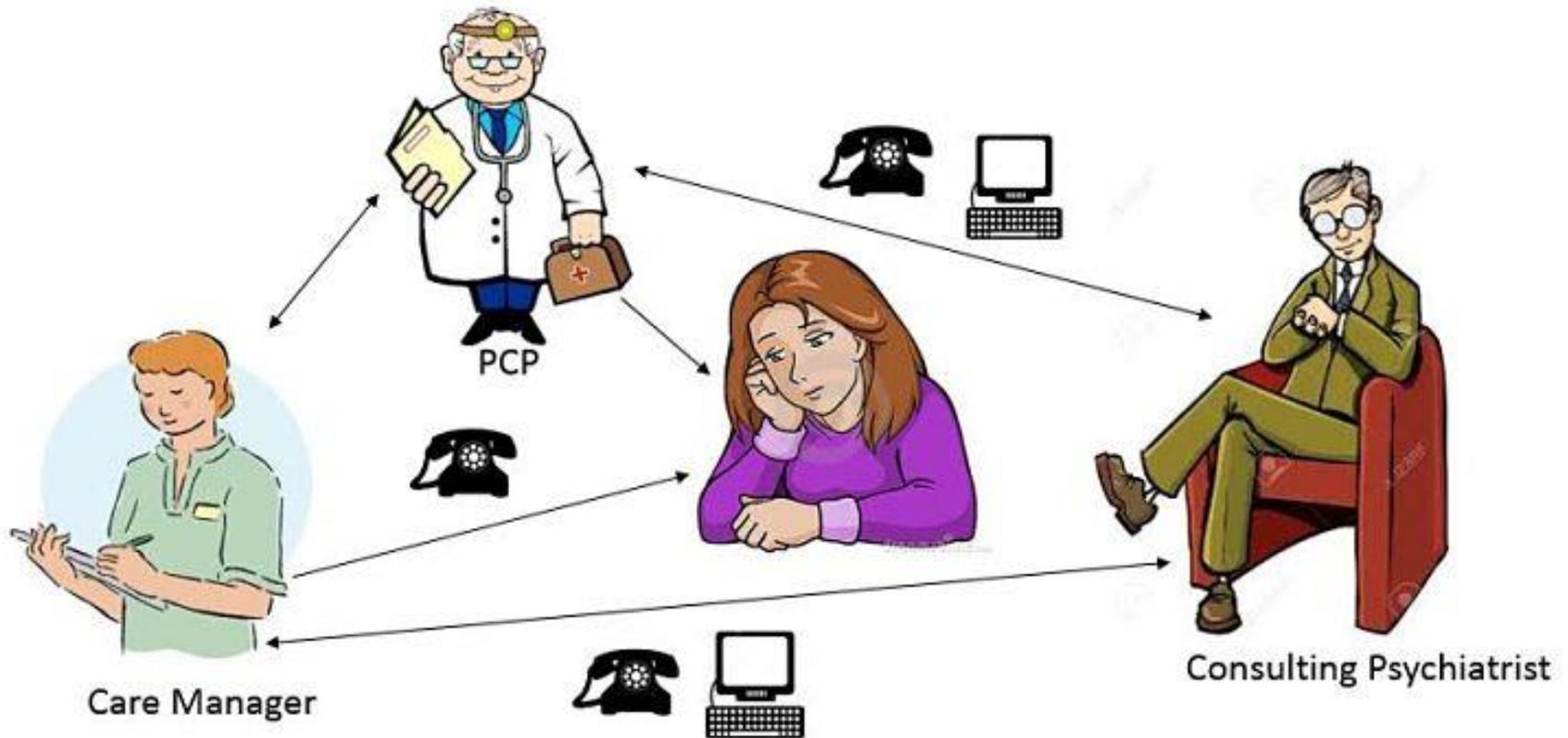
TEAM Based



Holistic



The Collaborative Care Team



“With busy schedules and back-to-back appointments, it can certainly be difficult for nurses and providers to give every single patient the time that they would like to give them.

So, for the social worker to be able to come right into the exam room and offer an extra helping hand for the provider, this not only leads to a strengthened patient-provider relationship, it also takes the weight of worry off the providers’ shoulders.”

LMSW – embedded in primary care

Teamwork Video

- <https://www.youtube.com/watch?v=4Rd9zQborxl>





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