

# Trauma Informed Care: Understanding the Needs of Survivors Across Healthcare Settings

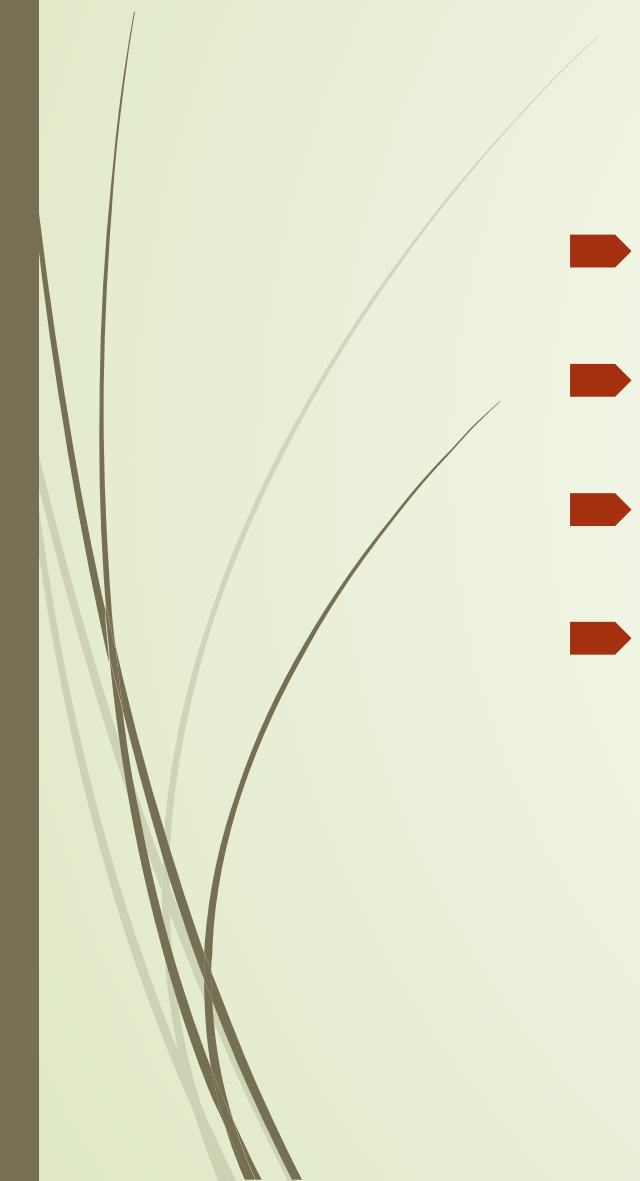
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# What trauma informed care is not!

- People are not fragile
  - Limited to direct service
  - Only related to triggers
  - Simply related to program changes
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# Safety First

- Be aware of protocol
- Be mindful of complicit responses
- Be mindful of bulldozing in early transactions
- Flexible but consistent
- Role clarity



# Safety First



- Sensory awareness and acknowledgement
  - Collaborating within chaos to create rapport
- Creating a safe space for both you and the client/patient
- Object Relations (Bodenheimer, 2016)
- Check ins with the patient
- Understanding the foundational aspects of creating safety.
  - Nothing gets accomplished without safety
  - Affective shifts have to feel safe for any actual present dialogue or help



# Safety First

- ▶ How trauma survivors experience initial stages
  - ▶ Startle Responses
  - ▶ Resiliency and acknowledged strength
  - ▶ The vulnerability of asking for help
  - ▶ The vulnerability of identifying a problem
  - ▶ The abyss of not knowing
  - ▶ Have I been here before?
  - ▶ Loss of control

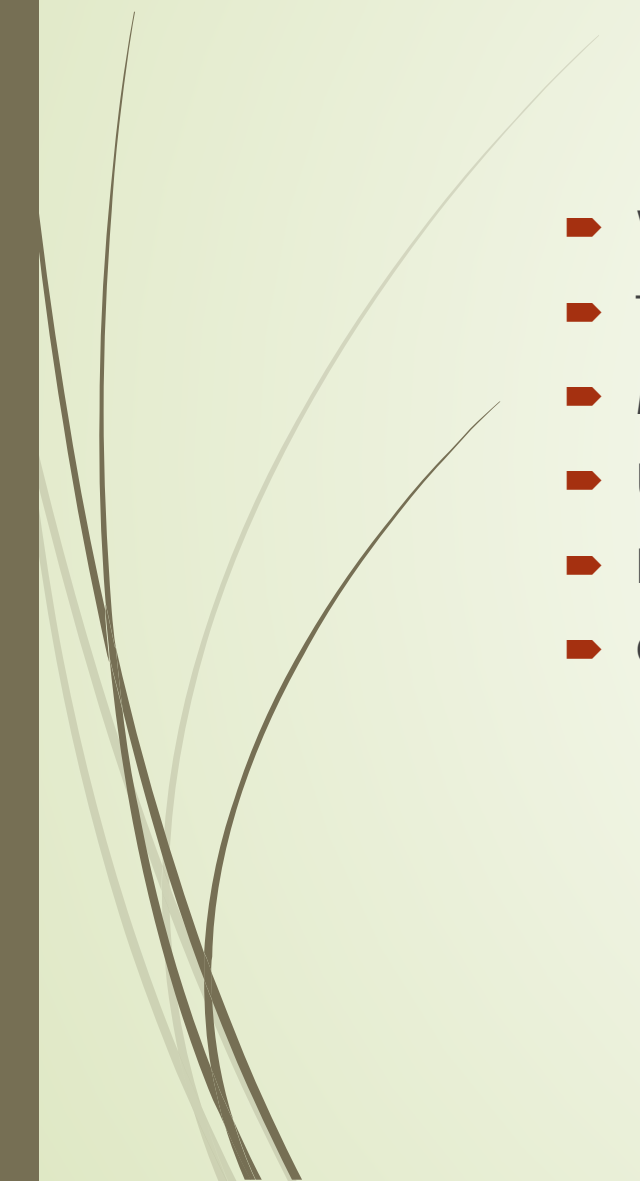


# Making Space

- Role of the provider in healing transactions
  - What is a healing transactio?
- DW Winnicott
- Mark Epstein-" I need more from you"
- Reducing mutual escalation
- Flexibility in protocol (Again)



# Making Space

- What would the Rogers' do?
  - Timing and patience
  - Meeting someone where they are at
  - Understanding without pathologizing
  - Honoring the space
  - Can you make this safe, sacred, and strong?
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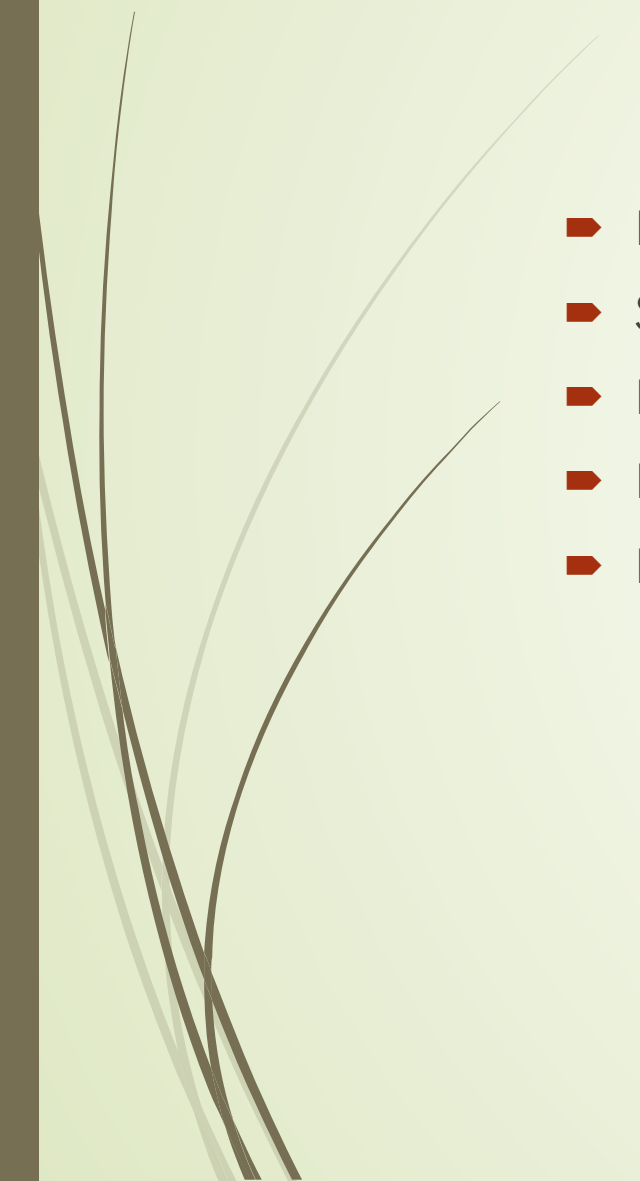
# Making Space

- Basic Human kindness
- Discussing concerns
- Discussing potential frustration
- Repairs in the service process
- Assessing the relationship as a way of assessing the trauma response
- Digging wells and digging gardens



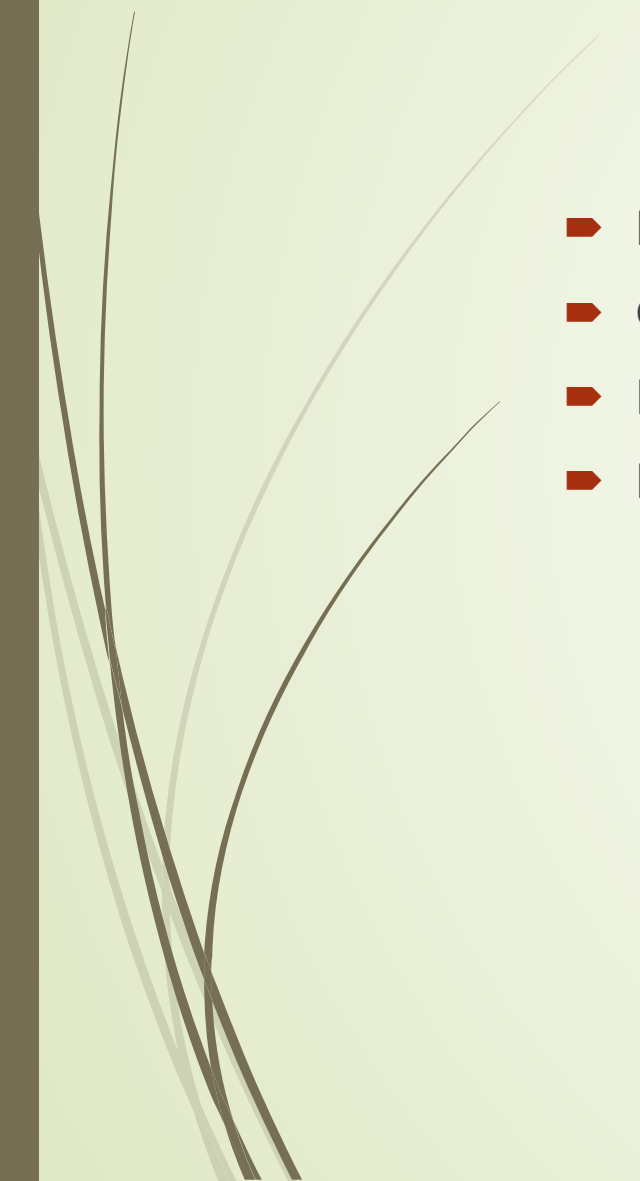


# Who are you?

- Provider self awareness
  - Self care and self compassion as clinical tools
  - Effective Supervision
  - Blind spots
  - Externalizing patterns
- 



# Who are you?

- Effective supervision
  - Clinical flexibility
  - Role consistency
  - Blind spots
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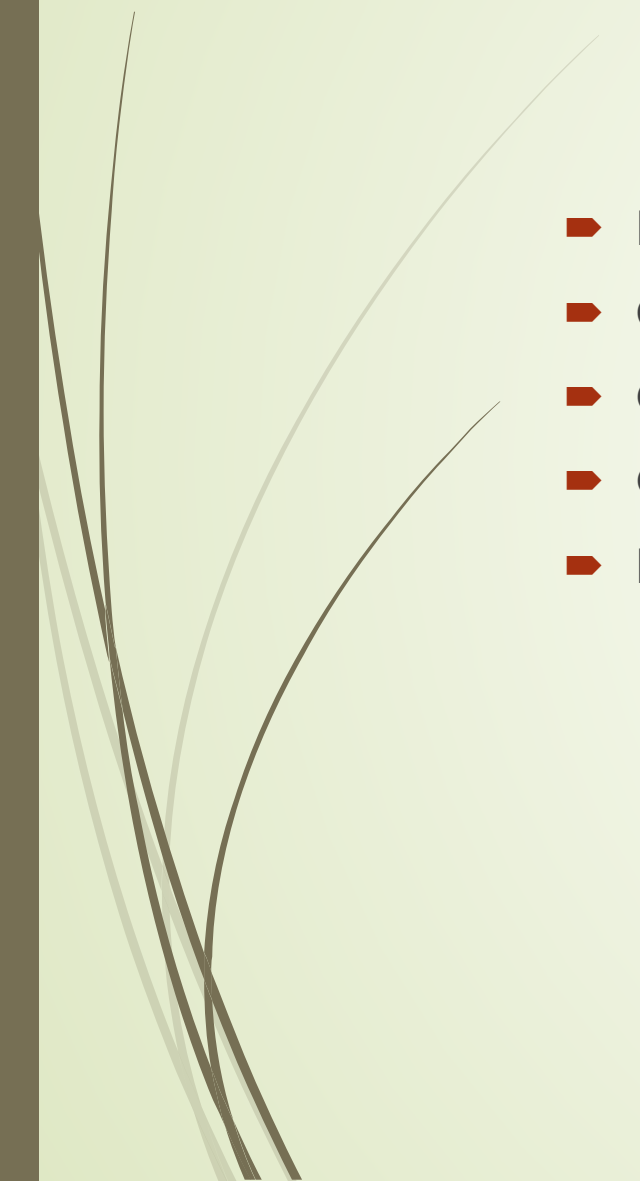


# Who are you?

- Over relating concerns
- Self disclosure
- Ego and presumption
  - Understanding the attunement of a trauma survivor




# Who are you?

- Relationship as the healer
  - Creating safety with presence
  - Owning your Impact
  - Getting there without triggering
  - Finding your voice
- 



# In closing

- Trauma is a diverse and human concern, but does not imply anything good or bad.
- Trauma informed culture
- Reduce pressure and “ending”
- Understand loss as it rolls in
- Respect and Regard are fluid

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