

Harborview Ethics Forum

Trauma Informed Care

Alexandra Hernandez, MD, MCR

We acknowledge that we reside on the ancestral lands of the Coast Salish peoples who have stewarded this land for generations.

We pay our respect to the Elders and their descendants, past, present, and future, and honor with gratitude the land, plants, and animals.



We will be recording today! Video will be available on our website if the speaker has given permission.



Trauma Informed Care

Objectives

1. Create a shared definition of trauma and trauma informed care
2. Define the six principles of trauma informed care
3. Apply trauma informed care principles to the care of clinical patients

Harborview Ethics Forum



SPEAKER DISCLOSURES



Nothing to disclose

Harborview Ethics Forum



PLANNER DISCLOSURES



Nothing to disclose

Harborview Ethics Forum

Want to claim CME/CEU credits?



Fill out a survey after today's session to receive the CME/CEU forms:

<https://redcap.link/HMC4.10.24>



***Note: please hold off on submitting your CME claim form until the end of our ethics forum series September 30, 2024.**

The CEU form can be submitted to your licensing board anytime and is for your tracking purposes only.

TWO GREAT LEARNING OPPORTUNITIES IN CLINICAL ETHICS

Advanced Training in Healthcare Ethics

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Ethical Theory; Clinical & Organizational Ethics Consultation; Methods in Ethics

Consultation

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W

Summer Seminar

July 29 – 31, 2024
online

Register now on
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MARK YOUR CALENDARS

36th Annual

Summer Seminar in Healthcare Ethics

Save the Date

Bioethics Grand Rounds

“The Ethics of Human Brain Organoids and Human-Animal Neural Chimeras Among U.S. Bioethicists and Public”
--- 4/23/24 at 12pm



Harborview Ethics Forums

- Reproductive Ethics | 5/8/24 at 12pm



Trauma Informed Care

Today's speaker:

Dr. Alexandra Hernandez, MD, MCR

Alex Hernandez is currently a University of Washington PGY-4 General Surgery Resident. Originally from Los Angeles, CA, she completed her bachelor's degree at University of Washington and medical doctorate at Oregon Health and Science University (OHSU). She was introduced to trauma informed care (TIC) as a medical student through work on a TIC in structural competency coursework and in designing a course for surgical interns. As a resident she has been involved in the American College of Surgeon's Trauma Informed Care curriculum since her first year in residency. She plans to pursue a fellowship in Trauma and Surgical Critical Care after residency.



TRAUMA INFORMED CARE

University of Washington Bioethics Grand Rounds

Alexandra Hernandez, MD MCR

4/10/24

ACS – Trauma Informed Care




- Improving the Social Determinants of Health to Attenuate Violence (iSAVE)
- Piloted at trauma centers nationally and adapted to different practice settings and hospitals


Curriculum Goals and Objectives




• Define trauma, impact of ACEs and manifestations of trauma




• Identify and define the 3 E's of trauma, 4 R's and 6 P's of Trauma Informed Care



• Identify characteristics of Trauma Informed Care (TIC)




• Identify how to render appropriate support



• Define vicarious trauma and identify resources to support providers



• Understand the impact of Social Determinants of Health




• Understand the concept of the Beloved Community


Today's Goals and Objectives



- Define trauma, impact of ACEs and manifestations of trauma



- Identify and define the 3 E's of trauma, 4 R's and 6 P's of Trauma Informed Care



- Identify the characteristics of Trauma Informed Care (TIC)



- Identify how to render appropriate support

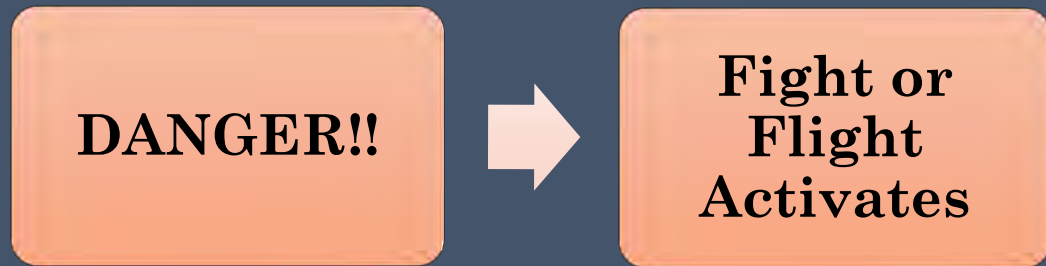


- Define vicarious trauma and discuss systems of provider support

Defining Trauma

Trauma results from an experience that is physically or emotionally harmful or life threatening that results in long lasting adverse effects on a person's wellbeing

What is a normal reaction to a frightening situation?



Trauma Impacts Reasoning

- Experiencing ongoing trauma can alter your brain's ability to do the following:
 - Know what you are feeling and manage your emotions
 - Manage stress
 - Process information
 - Solve problems
 - Actively and flexibly work towards goals
 - Develop and maintain healthy relationships



Toxic Stress

- Results from prolonged and strong activation of the body's stress response without the balance of a supportive relationship to buffer that response
- Negatively impacts:
 - Learning
 - Behavior
 - Brain development
 - Metabolic systems
- Can lead to the development of stress-related physical and mental illness
- Historical Trauma: Cumulative emotional and psychological wounding over a life span or generation
- Complex trauma: aggregate of multiple, repeated severe traumas

Shonkoff, J.P., et.al., 2012

The Trauma Informed Care Framework

Setting the space

If trauma causes:

- Lack of predictability
- Loss of control
- Lack of perceived safety
- Negative worldview of self and others

Our role is to create an environment in the health setting that contrasts these potential negative cognitions.

- Acknowledge that many of our patients are also coming in with greater history of trauma than the general population
 - Current trauma
 - Medical Trauma

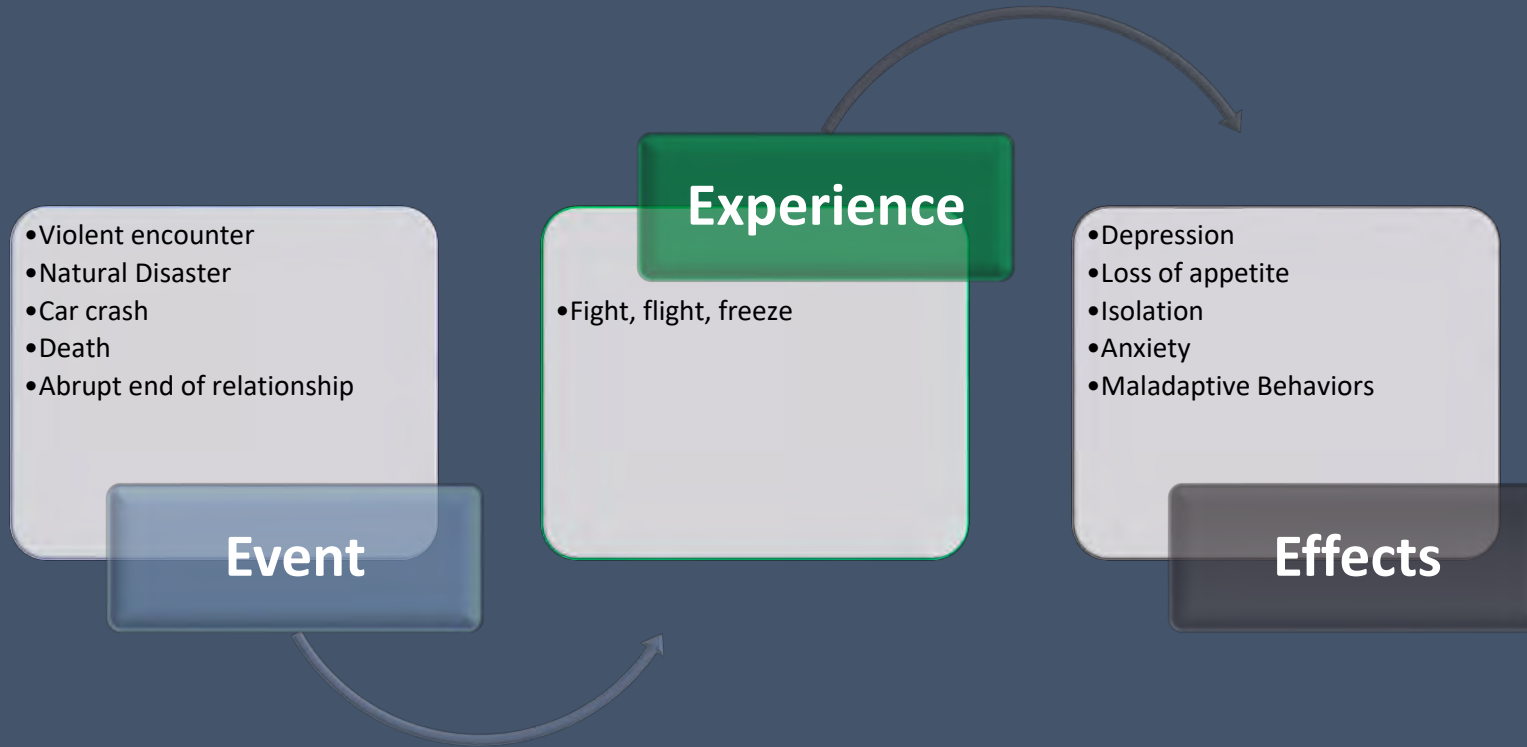
Traumatizing Experiences in the Hospital Setting

Sudden, painful, or life-threatening illness or injury	Invasive or frightening treatments, environment, and isolation
Ongoing experience of pain	Hospital environment
Exposure to others' painful experiences	Separation from caregivers
Painful and repeated rehabilitation or surgery	Permanent disfigurement or functional impairment

- Trauma reactions depend on the perception of threat
- Children and adults perceive threat differently
- Medical treatment for the trauma can also be perceived as traumatic

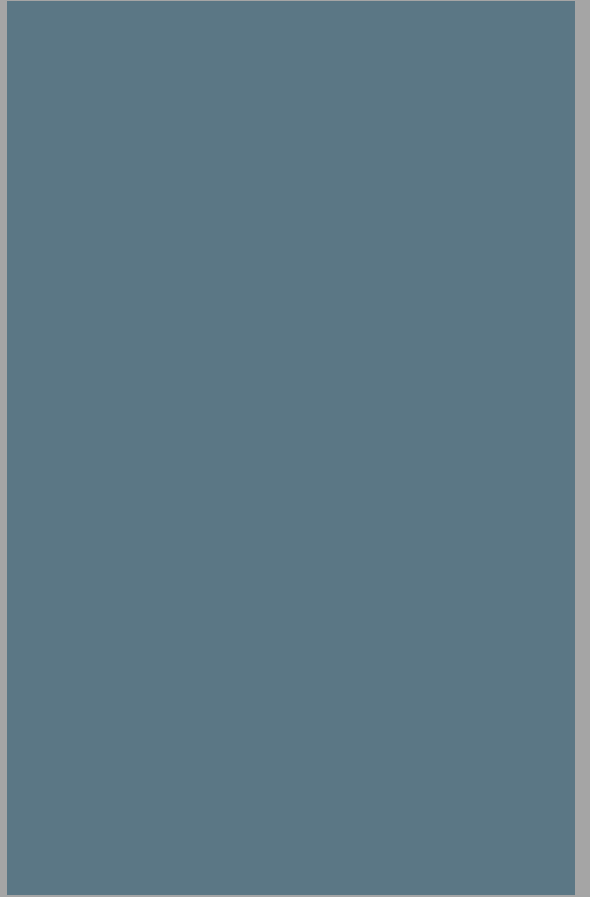
SAMHSA* Model for Trauma Informed Care

Identify the Three “Es” of Trauma



An **Experience** can have lasting **Effects**

The Four “Rs” of Trauma Informed Care



ECC
S A
OF

R
C
S

Six Principles of Trauma Informed Care



Safety

Ensure a safe environment both physically and emotionally for patients



Trustworthiness and transparency

Create a space for human connection through up front communication



Peer support

Integrate credible messengers

Six Principles of Trauma Informed Care



Collaboration and Mutuality

Create a model for respect and equitable care



Empowerment and choice

Ensure survivors play a critical role in medical decision making and healing



Awareness

Address cultural, historical and gender biases

Challenging Behaviors

Behaviors that are challenging to understand may make sense in the context of trauma



Reconceptualizing this Behavior

- There are often healthy, normal needs driving these behaviors:
 - The need to cope and manage symptoms
 - The need to feel in control
 - The need to feel safe
 - The need to understand and find meaning in events

What happens when it doesn't go well?

Service Recovery (LAST)

- L- Listen
- A- Acknowledge
- S- Solve
- T- Thank

Reflective Listening

Validate concerns and
offer explanation

Identify systematic
changes

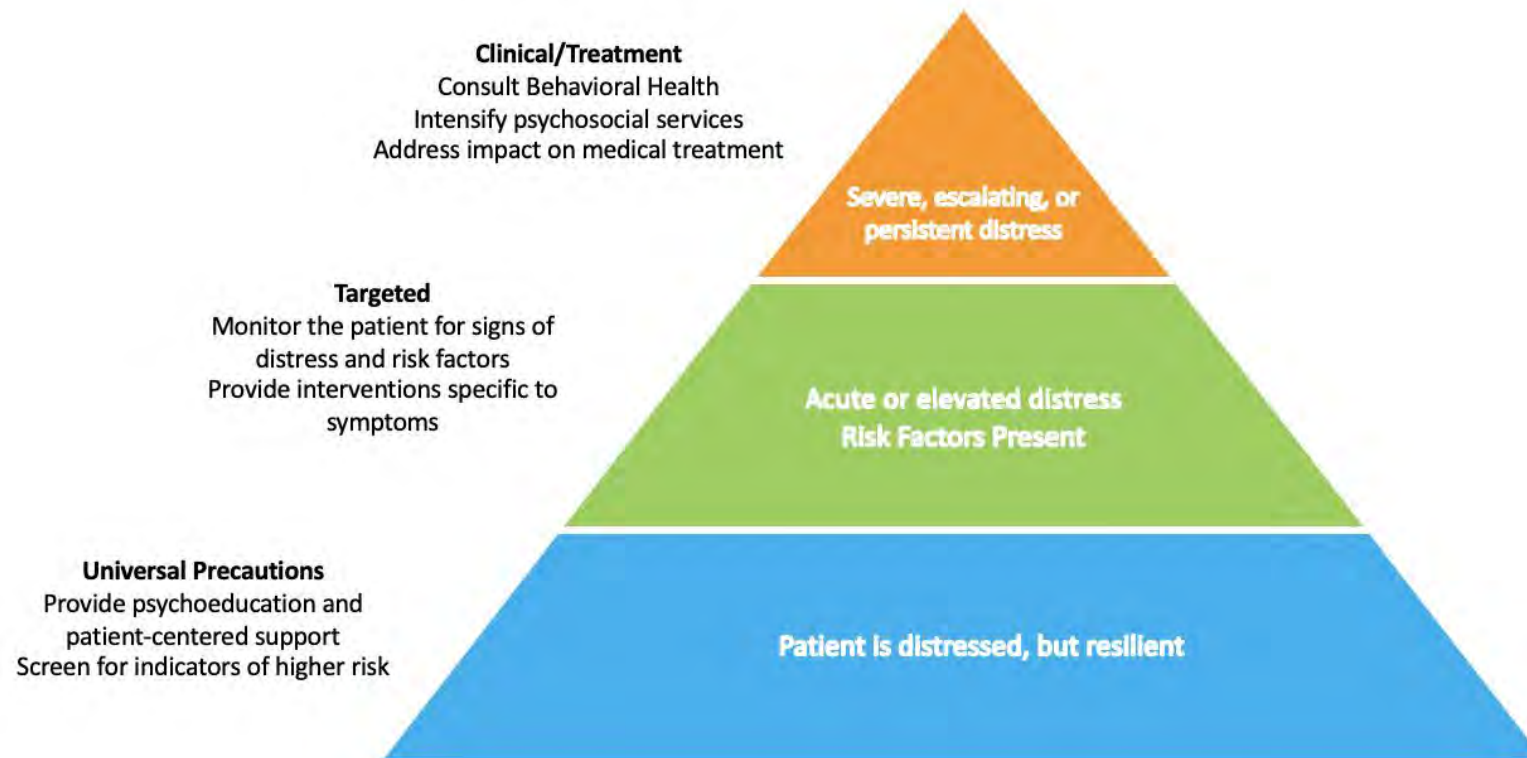
Reflective Listening

Be Present	Pay attention, look at the person, don't multi-task or be in a hurry
Verbally Reflect	Summarize what you heard or saw in a non-judgmental tone of voice
Pay attention to non-verbals	Offer a guess what they might be feeling based on their body language
Consider history and context	All behaviors have a cause and a function
Recognize and normalize	Recognize and normalize emotions that anyone would have

Patient-centered Documentation

- Consider how documentation follows a patient
- Just the facts
- Avoiding phrases such as “refusal of care”, “hostile”, “frequent flyer”
- If a patient chooses to not follow a care plan, ask why. Traditional medical terms assume that a patient is being uncooperative or difficult or has “failed to comply”
- Documentation can affect how other providers perceive a patient, impact acceptance to rehabilitation facilities and can perpetuate stereotypes and exacerbate inequities

Trauma Informed Care is a System Approach



Universal Trauma-Informed Care

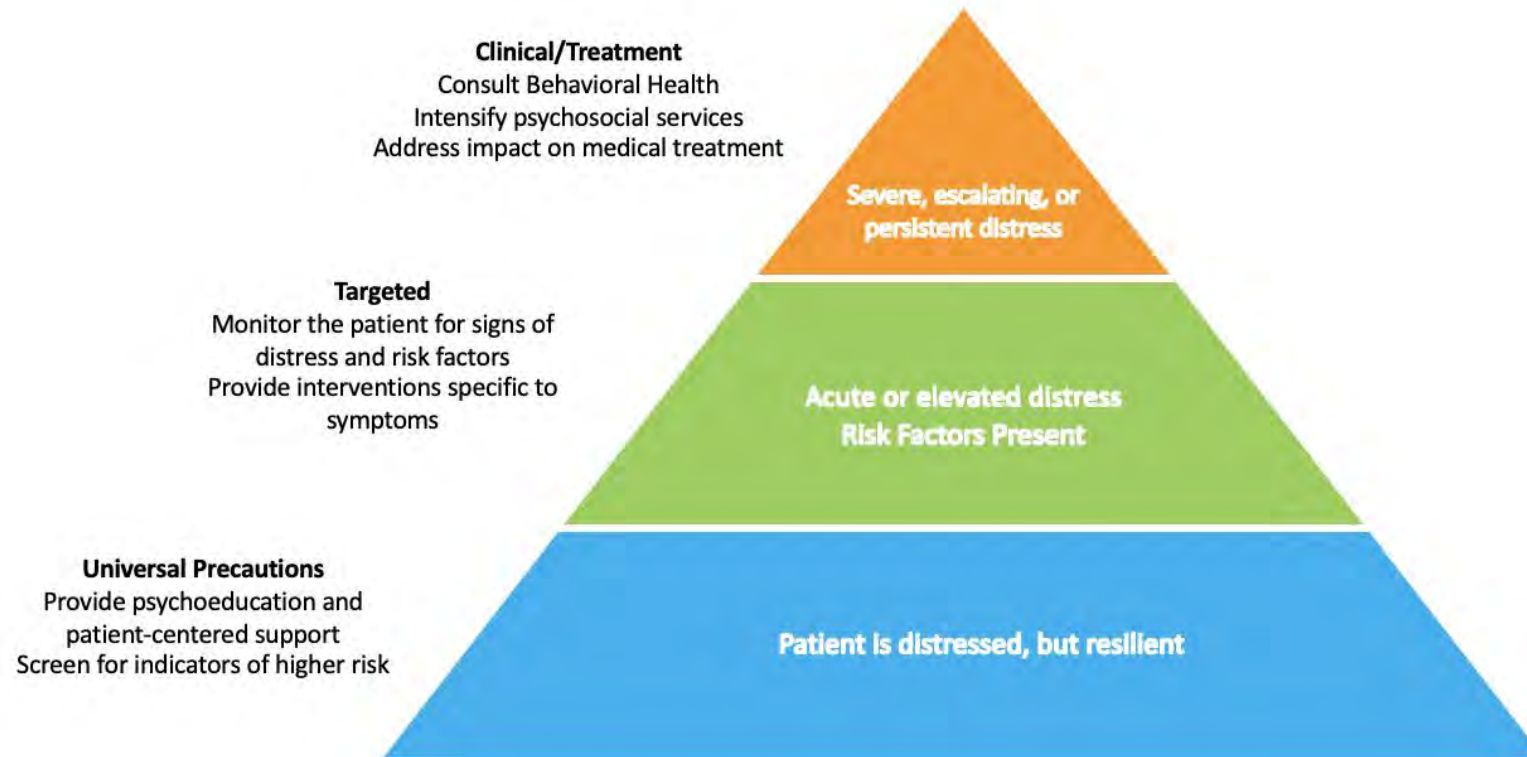
WHO: Experiencing some challenges, but overall resilient and have good coping strategies, resources and support

GOAL: to modify and change the experience of patients

KEY INTERVENTIONS:

- Actively assessing and treating pain/discomfort/distress
- Providing accurate and consistent information.
- Provide choices, where appropriate.
- Listen and clarify misconceptions.
- Universal screening for PTSD and Depression
- *Resources available at Health Care Toolbox: <https://www.healthcaretoolbox.org/>*

Addressing Traumatic Stress in the Healthcare Setting



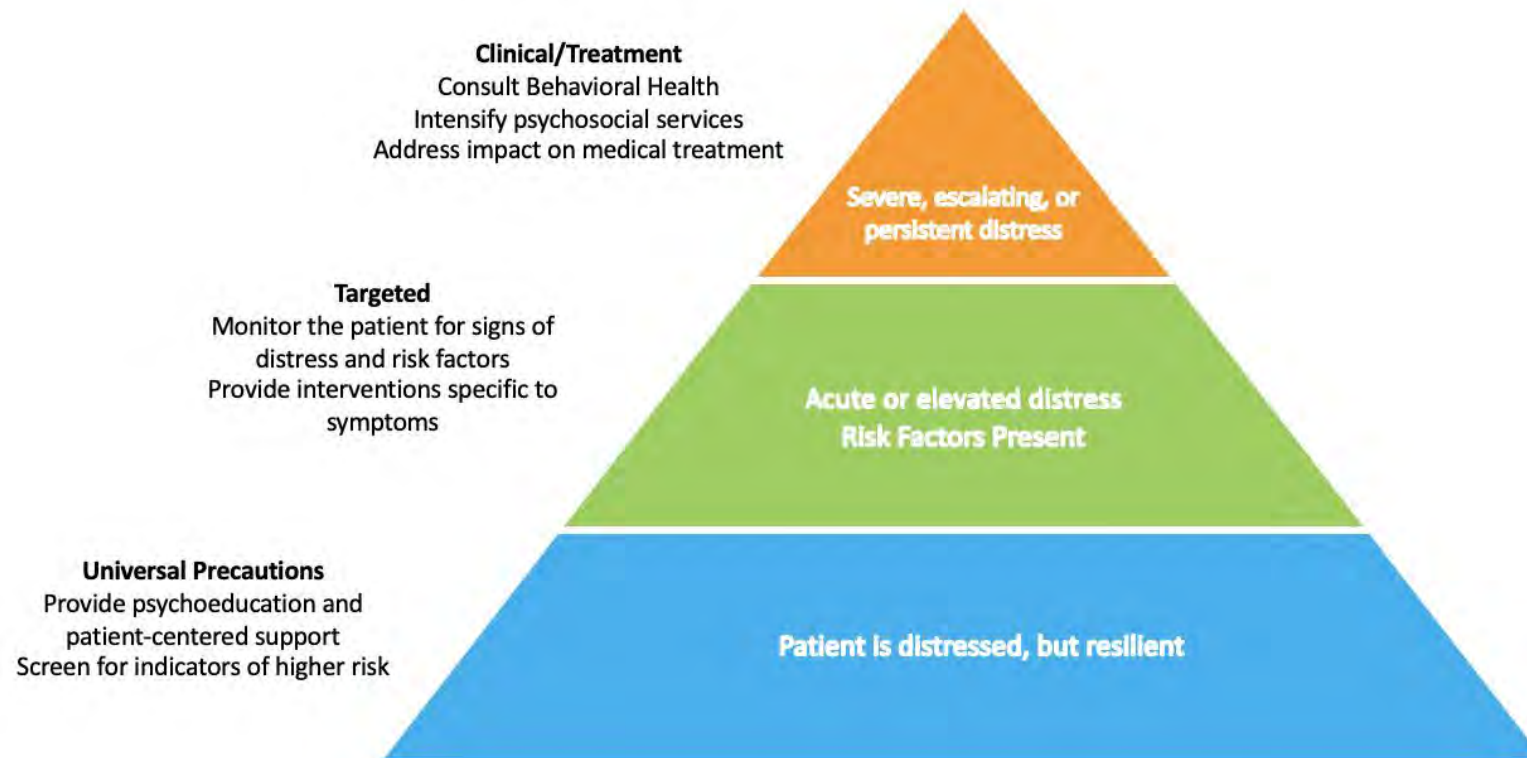
Targeted Trauma-Informed Care

WHO: Patients with acute stress reactions, exacerbated distress during medical procedures, and/or risk factors indicating potential for long-term difficulties

GOAL: To assess and prevent, or reduce the development of traumatic stress symptoms

INTERVENTIONS:

- Address immediate emotional distress and promote adaptive coping
- In your intake assess for risk factors & signs of acute distress
- **Consult your mental health team as appropriate**
- **Engage the hospital violence prevention program**



Clinical Trauma-Informed Care

WHO: Experiencing persistent and/or escalating distress or other emotional challenges that are impacting their ability to engage in care.

GOALS: Identify and treat significant signs of traumatic stress

INTERVENTIONS:

- **Involve inpatient mental health teams**
- **Assess the need for outpatient referrals for ongoing care**

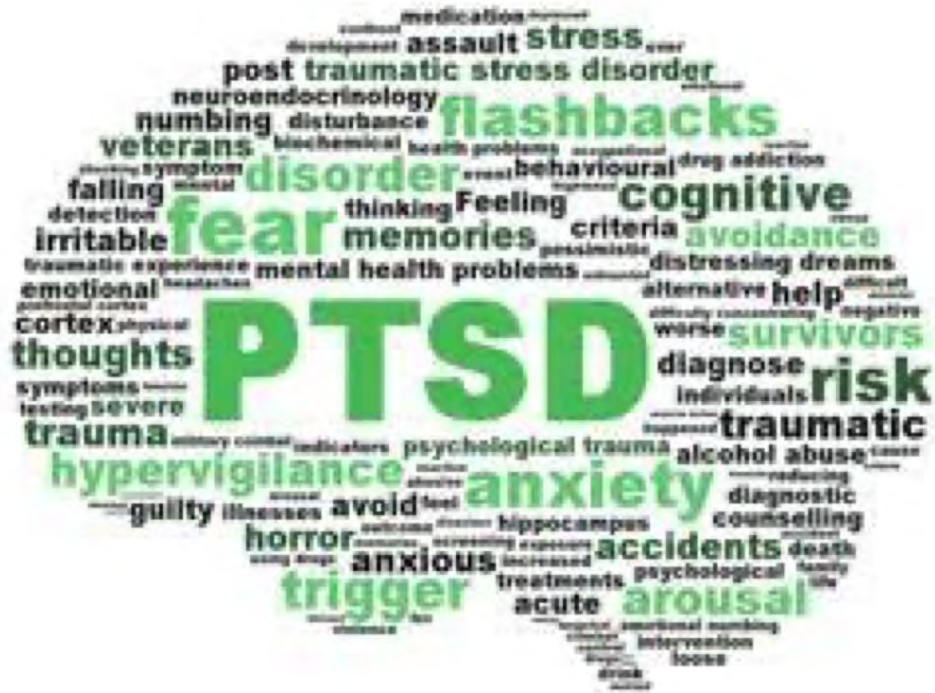
Becoming Trauma Informed

Trauma Informed Care is the ***proactive*** framework that is grounded in an understanding *of* and responsiveness *to* the impact of trauma.



Vicarious Trauma

Vicarious Trauma



Resources

The Trauma Stewardship Institute's MAP FOR MANAGING ONE'S LIFE

DAY

When I wake up, I will protect my morning. I won't reach for: News, social media, work/school updates, anyone who needs me for anything. This helps me avoid being flooded by cortisol first thing.

Pema Chödrön says, "Death is certain, your time of death is uncertain. How do you want to spend your time?" Ask myself once a day, am I spending my time - in life - how I want to be? If so, how can I further support myself? If not, what concrete changes can I make?

6 days a week (unless medically advised against it), I'm getting my heart rate up and breaking a sweat. Thinking to myself: "Anything that has accumulated in my nervous system over the past 24 hours, may it be completely released so I can show up for this next 24 hours..."

Look outside, be outside. When I'm in a meeting, during a class, to work, to play, when I have a few mins for a break. If even for a moment or two, feel the unassailable power nature has on my health - on all levels.

BLOOD PRESSURE + SYMPATHETIC NERVOUS SYSTEM ACTIVITY
↑ IMMUNE SYSTEM + ELEVATED MOOD

Decision fatigue & cognitive overload can be debilitating. Simplify my surroundings & my routines. Be mindful of hydration + glucose levels. Track when my mental acuity is high and maximize those times.

Too much going on!

My brain feels broken!

For optimal coping, I must tend to my nervous system. Given it's continuously anticipating & reacting to my surroundings, I need conditions in place that prevent me from becoming saturated and, ultimately, rupturing.
 Tactic #1 - Limit exposure to anything unnecessary that adversely affects my nervous system.
 Tactic #2 - Metabolize, efficiently, anything that starts to accumulate in my nervous system.
 Note to self: While I have my own nervous system, it may be helpful, to consider the nervous system of my home, of where my loved ones spend time, of my community, etc. and how those nervous systems, too, can become saturated, and rupture, over time.

How's my consumption? Need help with any of my addictions? Substances/screen time/caffeine/constantly criticizing/adrenaline/being over scheduled/shopping, etc?
 Be mindful of my attempt to distance myself from my feelings.
 self ← distance → feelings
 With news and social media, be deliberate and mindful if/when, both what I'm taking in and what I'm putting out.
 Reminder: the degree to which I'm dedicated to social and environmental justice does not equal time spent digitally dialed in.

Understand that every day I may be influenced by moments small & large, mundane and significant, that continuously arise, like waves. These waves, and how I experience them, may have deep undercurrents from what has come before me via intergenerational oppression, intergenerational trauma, and epigenetics. Sometimes it may make sense, or not, but [even if it's not my strong suit], acting with self-respect and compassion, towards myself, is essential. Historical, forces beyond what meet the eye can impact me in ways I may not understand or be conscious of and I will remember Jack Kornfield saying, "if your compassion does not include yourself, it is incomplete."

What's going well? What am I grateful for? What am I psyched about? Who can I thank? Repeat a-L-L day.

When navigating a pandemic and systematic oppression and structural supremacy and the climate crisis and democracies in peril and my job/school and caretaking and my life in general...

< REACTIVITY > INTENTIONALITY
 In the spirit of striving to Do No Harm, I will pause and think before I speak/post/tweet/reply/engage. Despite the negativity bias headwinds throughout society today, I will practice extending grace and humility, over & over + remember the merit of approaching life with a beginner's mind.
 Sleep = critical. What is my bedtime tonight? How can I sequence my evening so I can shut it down by then & not get into sleep-deficit. Set a reminder to: Give all my electronics and screens their own bed time, an hour before mine.

When and where possible, be around animals and take a moment to notice the reduction in stress hormones and how regenerating even a moment or two can be.

Have I done anything edifying for myself today? Actually connected with someone I care about? Taken a moment to laugh or find levity in a nourishing way? Be transported by art?

Engage in mindfulness to assist my nervous system in staying regulated and countless other health and mental health benefits. Tai chi, qi gong, yoga, meditation. All portable and accessible and even a few minutes here or there can provide the right scaffolding.

My day begins

And if it's been one of those days, I'll remember Jeff Li's mantra: "Forgive yourself every night, recommit every morning."

Our systems & structures have a moral mandate & an ethical obligation to create sustainable environments within which we work, learn, and engage. When they do, let us pause, notice + give thanks. When that's not the case, we can decide if/when/how to engage. While these choices may be fraught and complex, I hope refuge can be found in Howard Thurman's offering: "Don't ask yourself what the world needs. Ask yourself what makes you come alive and then go do that, because what the world needs, is people who have come alive."

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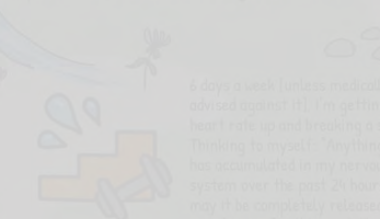
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Available for free download: <https://traumastewardship.com/purchase/>

Faculty and Staff Resources

- Critical Incident Stress Debrief
- Ethics Consult or Moral Distress Consult
- EAP—eap.wa.gov
- Spiritual Care--Available for 24/7 crisis 206-744-3155
- Employee Mental Health Support Program (EMHS)
 - Roosevelt Clinic
- GME Office
 - Counseling offered for residents
 - QR code for Wellness web page



Moral Injury



Decision Fatigue and Cognitive Overload

Let go of non-essential decisions

Reduce interruptions

Allow sufficient recovery time

Be mindful of false urgency

Be intentional of what you ask of yourself and others

Maximize times when your mental acuity is high

Physician's Hierarchy of Needs

Title

Level

Key factors at level

Heal Patients and
Contribute

5



I have time, autonomy and resources to heal patients
I have time to think and contribute

Appreciation

4



I am noticed and appreciated
I am connected
My compensation reflects appreciation

Respect

3



There is a basic level of mutual respect and inclusion
My family time is respected
I am not hassled by IT, the EHR, or bureaucracy
Objects and processes work
Cultural violations are addressed

Safety

2



I'm physically safe
My patients are safe
My job is secure & future predictable

Basics

1



I'm hydrated, have access to food, and time to eat
I've had enough sleep
I have access to bathrooms
I have no depression or anxiety
I am free of substance use
I do not have suicidal thoughts
I have time and space to breast feed

Start here



Leadership support,
commitment and
infrastructure for wellness

Redesign inefficient work
flow, realistic staffing and
scheduling

Safety net systems for crisis
intervention, life-need
support mechanisms



Systematic Trauma Informed Care (TIC)

Trauma Centers are comprehensively trauma informed when:

- Staff have a safe working environment to practice TIC
- Personnel enact TIC
- TIC is integrated into hospital policy and physical layout
- TIC is woven into the practice of ALL providers, including clerks, Security, Administrators



Next Steps at Harborview Medical Center

- We have completed:
 - UW General Surgery resident training
 - One nursing training session
- **Next:**
 - **Tailoring training to different providers and work groups**
 - **Quarterly training sessions**
 - **Trauma Informed Operating Rooms?**



Thank You

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