







Organizational-Level Response and Planning for Staff Compassion Fatigue/Vicarious Trauma

Moderator:

Jessamyn Tracy

Featured Hosts:

Janet E. Fine Lisa A. Tieszen

August 23, 2017

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Technical Overview

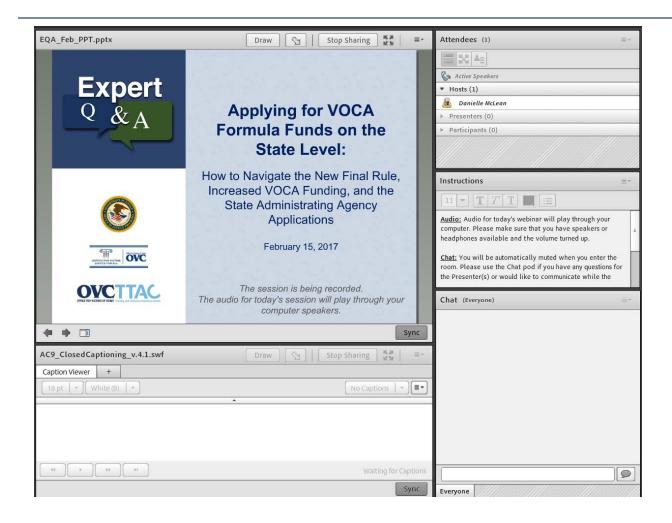
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- Today's session will be recorded and made available on the OVC TTAC Expert Q&A Past Sessions tab.
- Please type your questions in the Chat box, and we will address as many as possible during this session.







Overview of Adobe Connect









Featured Hosts



Janet E. Fine, M.S.



Lisa A. Tieszen, M.A., LICSW







Poll (check the box)

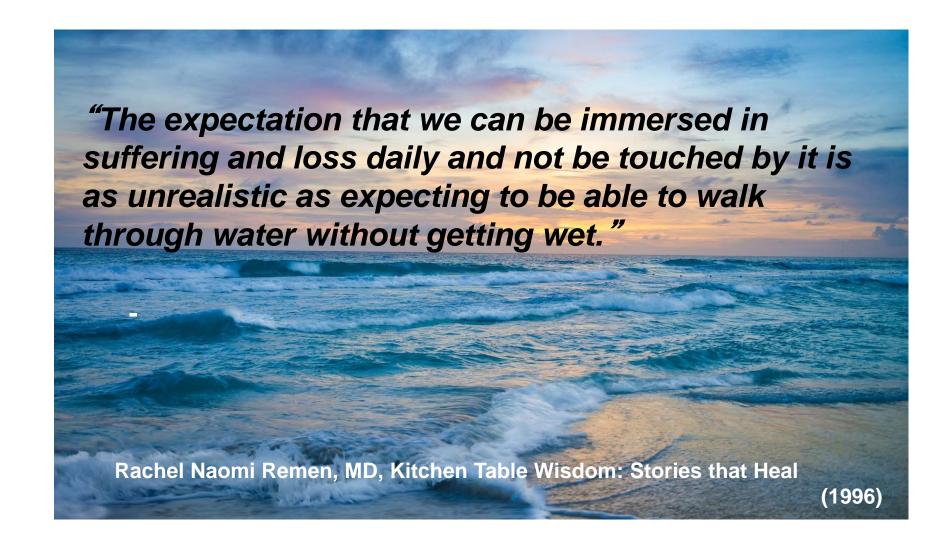
What is your role in your organization?

















Poll (respond in the Chat pod)

What have you noticed in yourself or your colleagues about the impact of exposure to work-related trauma?









"People come on, they're very enthusiastic, and then they do this work for a little while and are like, 'Oh man, I can't handle this.' They're good people, who are smart and well-meaning and good at what they do with victims and survivors, but they get shaken. I think naming it [vicarious trauma] would be really helpful."

- VTT Survey







Terminology

- Vicarious Trauma
- Compassion Fatigue
- Secondary Traumatic Stress
- Critical Incident Stress
- Indirect Trauma
- Empathic Strain
- Burnout
- Others?

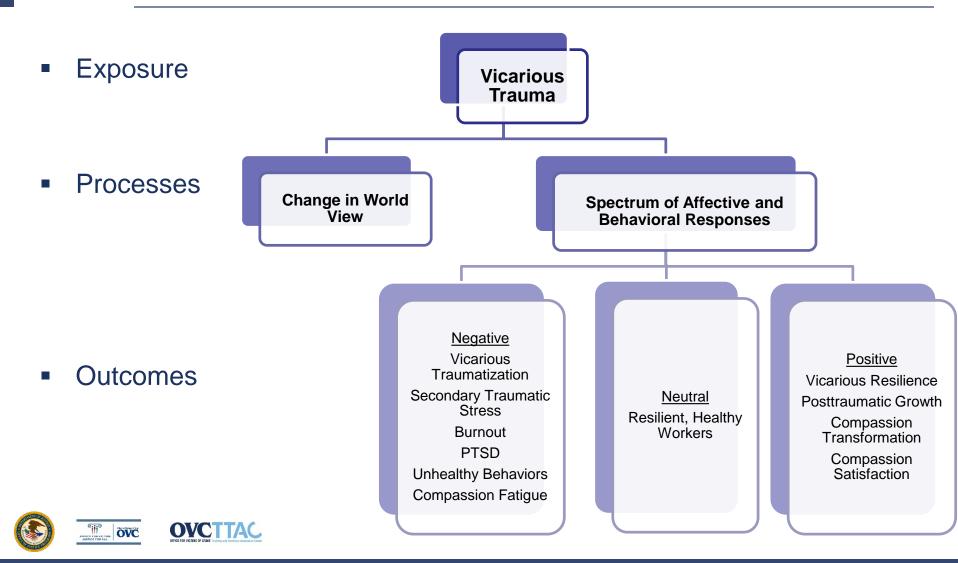








A conceptual model of vicarious trauma and its spectrum of impacts on workers



Poll (select all that apply)

What obstacles do organizations face in responding to vicarious trauma?









Becoming a Vicarious Trauma-Informed Organization

"A vicarious trauma-informed organization recognizes the potential negative consequences of the work and assumes the responsibility for proactively addressing the impact of vicarious trauma through policies, procedures, practices, and programs."

(VTT, 2016)







How Do We Get Started?

- Obtain leadership buy-in/support
- Identify lead individual or team for VT effort
- Administer VT-ORG
- Share & discuss findings
- Develop & implement action plan
- Explore VTT, identify resources/tools
- Monitor progress
- Re-assess







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

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

Poor
Organizational
Health
Erosion of
concentration,
focus,
decisionmaking,
motivation, and
performance







How can we assist agency leaders in building a vicarious trauma-informed organization?

What are the key steps that leaders can take to address VT organizationally?







Guidelines for a Vicarious Trauma-Informed Organization

Making the Business Case

WHAT IS A VICARIOUS TRAUMA-INFORMED ORGANIZATION?

Vicarious trauma (VT), the exposure to the trauma experiences of others, is an occupational challenge for the fields of victim services, emergency medical services, fire services, law enforcement, and others. Working with victims of violence and trauma changes the worldview of responders and puts individuals and organizations at risk for a range of negative consequences (Bell, Kulkarni, and Dalton, 2003; McCann and Pearlman, 1990; Newell and MacNeil, 2010; Vicarious Trauma Institute, 2015; Pearlman and Saakvitne, 1995; Knight, 2013). A vicarious trauma-informed organization recognizes these challenges and proactively addresses the impact of vicarious trauma through policies, procedures, practices, and programs.

For more information on vicarious trauma and its effects, visit https://vtt.ovc.ojp.gov/.

The Organizational Impact of Vicarious Trauma

The impact of VT on organizations can be linked to three primary business concerns: productivity, staff turnover, and organizational health.

Productivity

Exposure to VT can erode your staff's ability to do their jobs effectively (Newell and MacNeil, 2010; Knight, 2013)—in particular, their ability to make decisions. Across the disciplines mentioned above, exposure to VT can increase employees' stress levels and cause or heighten depression which, when sustained over time, lessens your employees' complex decisionmaking abilities. Both motivation and performance suffer, often resulting in mistakes in judgment, poor response time, and an inability to connect with and relate to others when it is needed most. Increased stress levels also have physical effects on individuals. These may include increased

fatigue, irritability, lack of self-care, and negative attitudes toward their work, colleagues, and clients (Stebnicki, 2012). Given the level of empathy and resilience needed for trauma-focused work, VT can severely impede your staff's ability to consistently deliver high-quality services.

Staff Turnover

Turnover is one of the most visible effects of VT on organizations (Bell, Kulkarni, and Dalton, 2003; Middleton and Potter, 2015). The loss of employees on any regular basis has significant side effects, including the expenses related to both the time and resources needed to find and train replacements for those who leave. The issue of staff retention is most challenging when the individuals who leave are the organization's most experienced employees—those who are adept at handling the toughest and most complex cases and who often lead and mentor others.

Organizational Health

While the individual costs of VT can profoundly affect staff members' productivity and their delivery of services to those in need, the organizational costs are also significant. Those who experience the negative effects of VT can adversely impact team cohesion, communication, collaboration, and coordinated responses (Knight, 2013). The impact of unaddressed VT can corrode the internal workings of your organization by lowering morale, increasing absenteeism and tardiness, undermining authority, and reducing the quality and timeliness of client care and employees' administrative responsibilities (Newell and MacNeil, 2010; Knight, 2013; Stamm, 1997).

Conclusion

It is clear from the research that a concerted focus on addressing the impact of VT is key to promoting staff well-being and retention, organizational effectiveness, and quality service delivery. Becoming a vicarious trauma-informed organization is, therefore, a sound business practice.







Talking Points: How the Agency Is Addressing Vicarious Trauma

Message:

We are implementing agency-wide strategies to strengthen our response to vicarious trauma (VT) because it is an occupational challenge that can have a negative impact on us and the community we serve.

What: Describe Vicarious Trauma

- . VT is the exposure to the trauma experiences of others.
- . By implementing training, we will increase awareness about VT and its impact.
- . We must acknowledge the cumulative stress of responding to calls, victims, and community members every day and over time.
- . By addressing VT, we are reaffirming our commitment to professionalism, the health of our employees, and the safety of our community.

Why: Address VT as an Agency

- . Acute and/or chronic exposure to violence experienced by others can negatively affect us.
- . Employing strategies to address VT will improve morale and increase our collaborative efforts, internally and externally.
- . Taking steps to address VT will improve our overall response to those we serve, thereby building and sustaining relationships and community trust.
- · Addressing VT will enhance our employees' physical and emotional health, well-being, and organizational effectiveness.

How: Steps We Will Take

- Use the Vicarious Trauma—Organizational Readiness Guide (VT-DRG) to assess our current response to VT and our need for additional policies and programs to address VT.
- . Use the Vicarious Trauma Toolkit to access research and resources gathered specifically for our discipline.
- Review and update our policies and procedures to address gaps identified in our agency-wide assessment using the VT-ORG.
- . Create a work environment and culture where it is safe to discuss VT and seek support when needed.
- · Conduct an agency-wide training regarding the realities of VT, signs and symptoms, and effective individual and organizational strategies

Organization/Ag	ency Specific Details	
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For more information about vicarious trauma, visit https://vtt.ovc.ojp.gov/.

This product was produced by Northeastern University's Institute on Urban Health Research and Practice, in collaboration with the International Association of Chiefs of Police, and supported by grant number 2013-VF-GX-W011, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, Rindings, and concisions or recommendations expressed in this product are those of the contributors and do not necessarily represent the official position or polices of the U.S. Department of Justice.







Poll (respond in the Chat pod)

Are there other examples of how you have gained the support of agency leadership?









Elements of a Healthy, Vicarious Trauma-Informed Organization

- Leadership & Mission
- Management & Supervision
- Employee Empowerment & Work Environment
- Training & Professional Development
- Staff Health & Wellness

Vicarious Trauma-Organizational Readiness Guide (VT-ORG), Created by the Vicarious Trauma Toolkit Project, 2016









How Do We Get Started?

- Obtain leadership buy-in/support
- Identify lead individual or team for VT effort
- Administer VT-ORG
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- Monitor progress
- Re-assess







Vicarious Trauma Organizational Readiness Guide (VT-ORG)









Vicarious Trauma—Organizational Readiness Guide for Victim Services

The Vicarious Trauma Organizational Readiness Guide (VT-ORG) for Victim Services will help you to recognize and appreciate your organization's strengths regarding vicarious trauma-informed policies, procedures, practices, and programs already in place. You will likely also discover gaps that deserve attention; the VT-ORG will assist you in navigating the Vicarious Trauma Toolkit to locate relevant resources and tools to address these gaps.

Start by using the VT-ORG to determine how your organization can become a vicarious trauma-informed organization by improving its overall response to work-related trauma exposure.

How To Use the VT-ORG

You can implement the VT-ORG in ways that are unique to your organization's size, structure, and needs, such as—

- distributing the VT-ORG agency-wide to staff at all levels;
- administering the VT-ORG first to only one division, to gather feedback before launching it organization-wide;
- having management use the VT-ORG to determine where to start:
- using the VT-ORG as a conversation-starter at a staff meeting or other forum;
- convening a roundtable discussion with representatives from varying levels of the organization;
- creating an advisory group with staff representation from varying levels of the organization; or
- developing your own process for using the VT-ORG.

Then What?

After completing the VT-ORG—

- **share** the findings of your assessment of strengths in the five areas of organizational health;
- discuss gaps in your capacity to be a vicarious trauma-informed organization;
- identify the change agents who can best address gaps
 (e.g., senior leadership, human resources, union representatives, peer leaders);
- **prioritize** and map out next steps;
- **explore** the <u>Compendium of Resources</u> and locate tools to meet your needs;
- collaborate to put the plan into action; and
- evaluate efforts to become more vicarious trauma-informed.

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Purpose of the Vicarious Trauma Toolkit (VTT)



https://www.ovc.gov/





Image source: https://ovc.ncjrs.gov/vision21/

THE VICARIOUS TRAUMA TOOLKIT

Image source: https://vtt.ovc.ojp.gov







What's in the Toolkit?

https://vtt.ovc.ojp.gov



Contents—

- Policies, procedures, practices, and programs
- Websites, podcasts, and videos
- Research literature
- Newly developed tools







Leadership & Mission









How can supervisors—

- Best support staff?
- Balance employees' needs with clients' needs?
- Utilize performance evaluations to address vicarious trauma?







Management & Supervision









Guidelines for a Vicarious Trauma-Informed Organization

Supervision

WHAT IS A VICARIOUS TRAUMA-INFORMED ORGANIZATION?

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For more information on vicarious trauma and its effects, visit https://vtt.ovc.ojp.gov/.

(NOTE: Although these guidelines were created by a victim services organization, they contain insights and practices that first responder organizations can modify for their own use.)

Regardless of their role, all workers in a victim services organization are exposed to trauma and are at risk for the negative effects of VT. Supervision has been shown to be effective at decreasing the negative effects of exposure to the trauma experiences of others on staff and helping to mitigate turnover, burnout, and low morale. (Bell, Kulkarni, and Dalton, 2003; Middleton and Potter, 2015). In a vicarious traumainformed organization, supervisors have the requisite knowledge and skills to help their staff and volunteers address VT.

Recommendations for Vicarious Trauma-Informed Supervision

Create a Safe Space for Addressing Vicarious Trauma

 Design a workplace that is safe, fosters collaboration, demonstrates respect for diversity, and acknowledges the importance of addressing VT on a regular basis.

- Affirm the importance of staff and volunteers and the work they do for the organization to advance its mission (Canfield, 2005).
- Provide regularly scheduled supervision that is evaluated by both the supervisor and the employee or volunteer.
- Acknowledge staff differences (e.g., in culture, race, identity, gender, survivor status, work experience) and discuss how they inform one's work and experience of VT.
- Openly discuss exposure to trauma and the resources available to help employees and volunteers address VT.
- Ensure that any discussion of the trauma history of a staff member or volunteer is solely to identify its potential impact on their work and their risk for vicarious traumatization.

Manage Workload and Expectations

- Monitor staff and volunteer workloads and jointly set realistic expectations for meeting clients' needs including, but not limited to, extra time for non-English speaking clients, time for writing notes, formal and informal meetings, stress-reducing and self-care activities, and time off (Schauben and Frazier, 1995).
- Attend to the "whole person," understanding the employee's client caseload, other life stressors, and symptoms of vicarious traumatization (Cerney, 1995; Trippany, Kress, and Wilcoxon, 2004).
- Offer staff and volunteers opportunities to have a wide range of cases and other work responsibilities (e.g., varied types of cases, policy advocacy, training, outreach).
- Offer opportunities for professional development through participation at conferences, trainings, and community meetings that also strengthen collaborations.
- Represent the organization on committees and task forces that address systemic issues.
- Discuss macro issues that impact both the supervisor and employee or volunteer (e.g., lack of critical resources for clients, lack of adequate staffing).
- Remind staff and volunteers of the important contributions they make for clients despite limited resources.







As staff focus on empowering clients, how can a VT-informed organization empower staff?

What does it mean to have a healthy work environment?







Employee Empowerment & Work Environment









Guidelines for a Vicarious Trauma-Informed Organization

Peer Support

WHAT IS A VICARIOUS TRAUMA-INFORMED ORGANIZATION?

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What Is Peer Support?

Peer support is a broad term that describes varied structures for worker-to-worker (rather than supervisor-to-worker) engagement so employees do not feel isolated and to help them address the impact of their exposure to trauma. Related terms include peer consultation, peer coaching, and peer debriefing, among others. Whether the peer support occurs between individuals or in groups, it provides colleagues with meaningful support and feedback, and helps leaders manage the consequences of VT among their staff and volunteers. It fosters a culture of caring, mutual support, professional selfawareness, and positive and constructive feedback (Pearlman and Saakvitne, 1995; Choi, 2011; McCann et al., 2013). Effective organizational leaders recognize, respect, and promote the value of peer support and create structured opportunities that are responsive to staff's needs. Peer support is most effective as an addition to regular, formal supervision, not a replacement for it. A few examples follow:

Peer-to-peer support: While informal support often occurs between colleagues, this is a more formal, regularly scheduled option that is typically one-to-one, has a specific purpose, and is promoted and supported by the organization's leadership.

Peer supervision: A peer or other designated facilitator can serve as a group leader or take on informal supervisory responsibilities. When agencies provide relevant training for peer leaders, they can build their facilitation and debriefing skills, which ultimately benefits their colleagues as well. Peer supervision groups meet on a regular basis, are well supported by the organization's leadership, and enable staff and volunteers to identify, discuss, and address the effects of VT.

Peer support and peer supervision address vicarious trauma by—

- engendering mutual respect among participants, a key component of employee empowerment and effective work environments (Ortlepp and Friedman, 2002);
- increasing knowledge, empathy, and effective communication and feedback skills;
- creating opportunities to discuss the positive and negative effects of the work outside of formal supervision (Trippany, Kress, and Wilcoxon, 2004);
- establishing a pathway for raising issues with supervisors in safe and productive ways (Bell, Kulkarni, and Dalton, 2003);
- identifying gaps in staff knowledge and addressing them through education and building professional confidence;
- enabling participants to learn additional coping strategies from their colleagues that address the complexities and emotional effects of their work (McCann et al., 2013);
- developing leadership skills and serving as role models for one another (Trippany, Kress, and Wilcoxon, 2004; Catherall, 1995).

Recommendations for Developing a Peer Support/Peer Supervision Program

Consider the type of peer support or peer supervision model that is best for your organization and staff: informal one-to-one peer support, formally structured peer-to-peer group debriefing, an alternative form of each, or a combination of the two. Instituting peer support and peer supervision presents both opportunities and challenges for







How can we raise awareness and train staff about VT during the hiring process and beyond?







Training & Professional Development









Introduction to Vicarious Trauma for Victim Services

This product was produced by the Northeastern University Institute on Urban Health Research and Practice, in collaboration with the Center for Violence Prevention and Recovery at the Beth Israel Deaconess Medical Center, and supported by grant number 2013-VF-GX-K011, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this product are those of the contributors and do not necessarily represent the official position or policies of the U.S. Department of Justice.







What type of activities are helpful in the workplace?

Should wellness be part of staff benefits?

Can agencies address the needs of employees' families and loved ones?



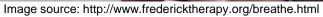


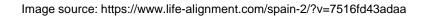


Staff Health & Wellness















Guidelines for a Vicarious Trauma-Informed Organization

Family Support

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The Role of Family Support in Addressing Vicarious Trauma

Employees who experience VT, exposure to the trauma experiences of others, may display a reduction in work performance and productivity, increased absenteeism, and low morale—some or all of which may impact the quality of care that individuals and organizations provide to those they serve (Bell, Kulkarni, and Dalton, 2003; McCann and Pearlman, 1990; Newell and MacNeil, 2010; Vicarious Trauma Institute, 2015; Pearlman and Saakvitne, 1995; Knight, 2013). Families are an important source of care and support that can help to ameliorate the effects of VT among responders; however, they too are susceptible to its negative effects. Organizational policies and procedures pertaining to family support provide a framework for your agency to become a vicarious trauma-informed organization.

Recommendations for Addressing the Needs of Employees' Families

First, it is important to recognize that there are many ways in which individual employees define family. Definitions may include immediate and extended family members who live together; spouses or partners, whether legally married or not; and single, heterosexual, and same-sex parent households, among others. Responding to the needs of employees and their families requires an understanding and appreciation of the diversity of families and their experiences.

At the core of an organization's response to families is raising the family's awareness about VT and its potential impact on the family of the victim services provider and first responder. The handout entitled "Guidance for Families & Other Loved Ones" will help organizations reach out to families with critical information about VT. You can customize it for your agency and add your designated contact person.

Beyond this initial step, the following recommendations for specific areas of focus may help you support employees' and volunteers' families.

Leadership and Mission

- Demonstrate your understanding of VT and its impact on employees and their families, and the role of the organization in supporting them, through both verbal and written communications.
- Make developing and implementing programs that foster social support for employees' families a priority (Regehr et al., 2005).

Management and Supervision

- Ensure that supervision is supportive, respectful, and effective and includes open discussion of VT, its potential impact on both employees and families, and strategies for addressing it.
- Provide family members with clear explanations of the employees' roles, responsibilities, and other employment expectations (e.g., on call, overtime).







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Interested in Training and Technical Assistance on the VT Toolkit?

- Conference workshops
- Customized training
- Technical assistance and consultation

There is no cost for the assistance.

Email <u>TTAC@ovcttac.org</u> to request an application or to get more information.







Next Month

Topic: Victim-Centered Approaches to Family

Violence

Featured Host: Maureen Lowell

Date: September 27, 2017, at 2:00 p.m. e.t.







Thank You!

To learn about upcoming Expert Q&A sessions, please visit the OVC TTAC Expert Q&A page at www.ovcttac.gov/ExpertQA.

If your question was not addressed in this session, you can email your question to our hosts:

Janet Fine: j.fine@northeastern.edu

Lisa Tieszen: lisa@oriconsulting.com

Explore the Vicarious Trauma Toolkit: https://vtt.ovc.ojp.gov





