
 **Envisioning Trauma-Informed Early Head Start / Head Start Programs - 2023 and Beyond -**


Elaine E Liberato Jenkins, Program Coordinator
John Engel, Associate Director
Traumatic Stress Institute of Klingberg Family Centers



 **Introductions**


- ❖ **Participants:** Type your first, last name, role/title, program name in chat box.
- ❖ **Presenters:** Names and roles




 **Participant Outcomes**

Increased understanding of:

- ❖ What it means to be a trauma-informed organization
- ❖ The benefits of a whole-system change process
- ❖ Stages of whole-system TIC implementation
- ❖ Implementation tools and measures to evaluate progress
- ❖ Features and benefits of TSI's Whole-System Change Model




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Whole-System Change Model to Trauma-Informed Care

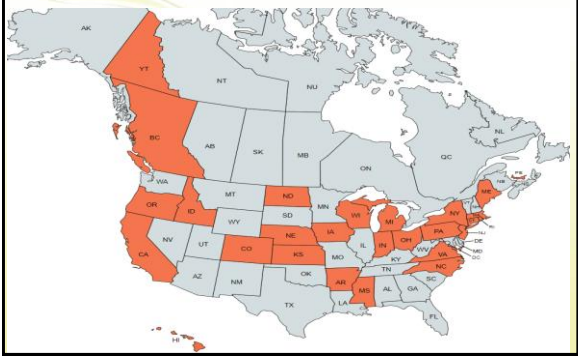
Transform your system, transform your care

"The Whole-System Change Model helps us meet children, families, and staff where they are – supporting their individual needs, building trustworthy relationships, and strengthening resiliency."

Suyapa Santos
Early Head Start/Head Start Parent Involvement Coordinator,
St. Anne's Family Services, Region IX Head Start Association



92 TSI Client Agencies in 24 US States and 3 Canadian Provinces




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POLL

In the current environment, what are the most common barriers your agency faces in meeting the needs of children and families?



- ❖ How to strengthen child and parent relationships.
- ❖ Lack of effective communication and feedback with staff (e.g., top-down instead of two-way)
- ❖ Creating partnerships with families
- ❖ Staff burnout across program services
- ❖ Other (type into chat)



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Current Reality

- ❖ Call from OHS on Trauma-Informed Practices
- ❖ The "know-how" to implement TIC in the workplace
- ❖ Supervision and its impact on forming healthy relationships
- ❖ Reflective supervision through a TIC framework

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Current Barriers



- ❖ Decrease in family engagement and participation
- ❖ The "Great Resignation"
- ❖ Fast shift of family structure and dynamics
- ❖ Implementation of staff wellness initiatives




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TRENDS and Movement Toward Trauma-Informed Services


- ❖ Head Start programs **long standing** service to children and families
- ❖ Head Start programs **unique designs** to family and parent engagement
- ❖ Head Start programs **focus on school readiness.**
- ❖ Head Start programs **rise to the call** for quality teaching and learning
- ❖ Head Start programs **delivery of instructional learning** formats
- ❖ Head Start programs **implementation** of parent curriculum.
- ❖ Head Start programs are **steps ahead**

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What we know--Best Practice

- ❖ Treatment, including attuned, caring relationships can change the brain and reverse damage done in early trauma exposure
- ❖ Punishment and reward systems do not heal trauma
- ❖ People are hurt in relationships and people heal in relationships
- ❖ TI practices must be grounded in the understanding that healing depends on healthy relationships
- ❖ Fostering a culture of TIC within organizations increases safety, trust and support for healing



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Early Head Start/ Head Start Experiences with TIC




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TIC Research Using the ARTIC

- ❖ Teachers' understanding of challenging behaviors from a trauma informed framework decreased children expulsion rates in Head Start programs
- ❖ Knowledge, Skills, and Self-reflection: Linking Trauma Training Content to Trauma-Informed Attitudes and Stress in Preschool Teachers and Staff
- ❖ [Risking Connection in Research and Professional Literature](#)




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**Most Used Definition:
SAMHSA Definition of Trauma-Informed Care**

A program, organization, or system that is trauma-informed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs of and symptoms of trauma in clients, families, staff, and others involved with the systems; and **responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively **resist re-traumatization**. (p. 9)


SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach (July 2014)



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Trauma-Informed versus Trauma-Specific

Trauma-specific services are clinical interventions, whereas trauma-informed care addresses organizational culture and practice.





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**SAMHSA
10 Implementation Domains**

1. Governance and leadership	6. Screening, assessment and treatment services
2. Policy	7. Training and workforce development
3. Physical environment	8. Progress monitoring and quality assurance
4. Engagement and involvement	9. Financing
5. Cross sector collaboration	10. Program evaluation

SAMHSA, July 2014



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Characteristics of Trauma-Informed Organizations

- ❖ Focuses on whole system transformation to TIC
- ❖ Builds leadership buy-in and commitment
- ❖ Uses training of trainers model for sustainability
- ❖ Is rooted in principles of implementation science
- ❖ Utilizes data to inform TIC programming

Kingberg

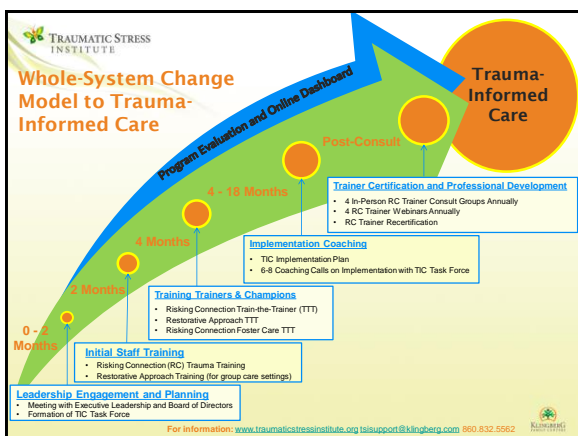
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Poll

Where on the trauma-informed journey is your agency?


- ❖ Just starting
- ❖ Leadership is onboard for TIC culture change
- ❖ Searching for best-fit TIC training model
- ❖ Searching for TIC program evaluation tool to support data-driven programming


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 **WSCM Estimated Pricing**
Includes ALL services & materials for 18-24 month initiative

- ✓ \$48,675 for agencies with 100 staff
- ✓ \$71,720 for agencies with 200 staff
- ✓ \$114,730 for agencies with 300 staff





 **Payment Options**

- ❖ 10% due at contract, followed by 3 installments
- ❖ Option to pay full fee at contract signing

Future Costs:


- ❖ Professional development fees after initial contract are \$175 per trainer per year (includes CEU costs)
- ❖ Trainer recertification fee of \$265 per trainer every two years
- ❖ Future trainer costs subject to modest increases



 **How to work with the Traumatic Stress Institute**
- 3 Easy Steps -

1. [Request an initial consult call and download free resources](#)
2. Receive a detailed cost proposal from TSI
3. Purchase Whole-System Change Model with ARP funds

[Head Start Trauma-Informed Care](#)



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Questions?




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For more information contact:

Klingberg Family Centers
370 Linwood St.
New Britain, CT. 06052

Webinar Facilitators
Elaine E Liberato Jenkins,
Elaine.L.Jenkins@klingberg.com
John Engel
John.engel@klingberg.com


www.traumaticstressinstitute.org
www.klingberg.org





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Thank You!





 **References**

A. Loomis, T. Curby, & K. Zinsser, [Beyond the behavior: Teachers' trauma-informed attitudes relate to lower expulsion risk among uninhibited preschoolers](#) *Children and Youth Services Review* 4 January 2023

A. Loomis and F. Felt, [Knowledge, Skills, and Self-reflection: Linking Trauma Training Content to Trauma-Informed Attitudes and Stress in Preschool Teachers and Staff](#), *School Mental Health*, 29 September 2020

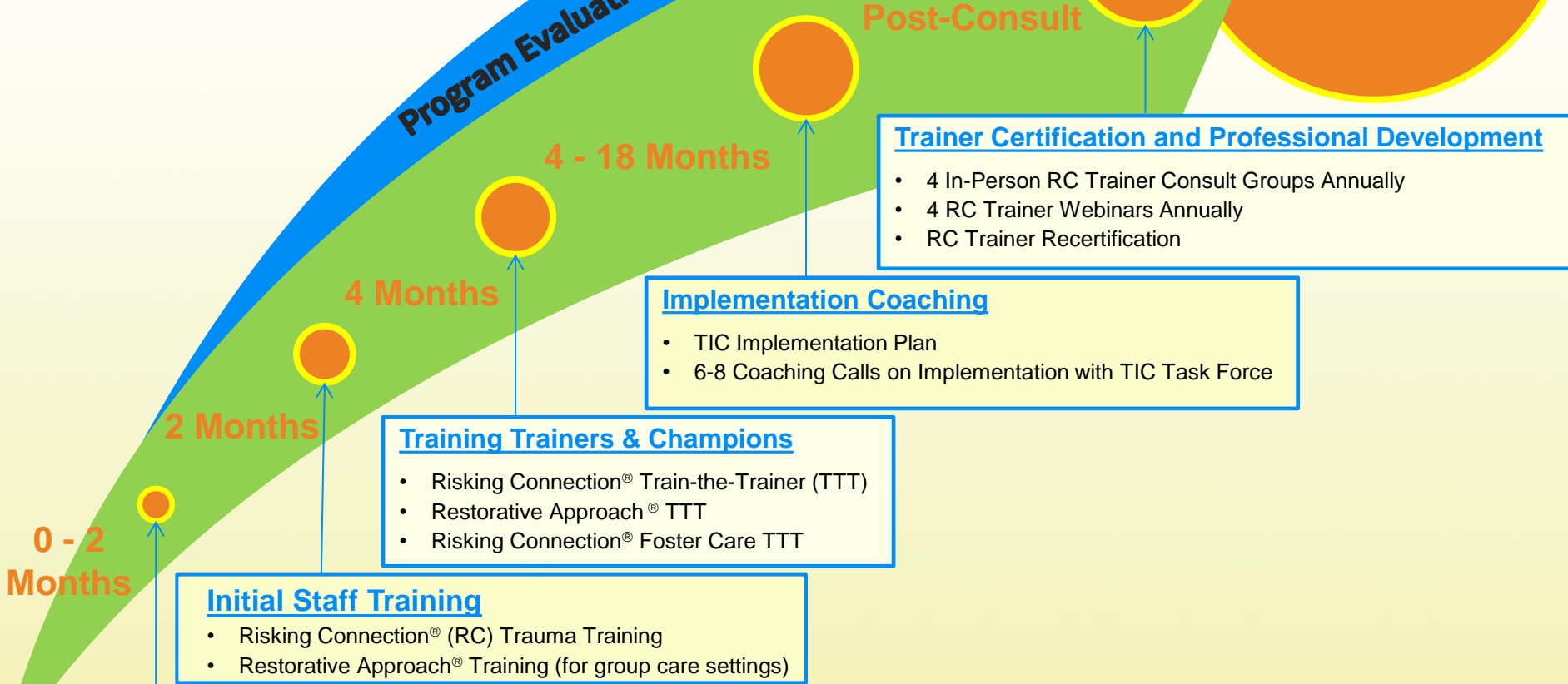
[Risking Connection in Research and Professional Literature](#)



Whole-System Change Model to Trauma- Informed Care

Program Evaluation and Online Dashboard

**Trauma-
Informed
Care**



- Leadership Engagement and Planning**
- Meeting with Executive Leadership and Board of Directors
 - Formation of TIC Task Force

- Initial Staff Training**
- Risking Connection® (RC) Trauma Training
 - Restorative Approach® Training (for group care settings)

- Training Trainers & Champions**
- Risking Connection® Train-the-Trainer (TTT)
 - Restorative Approach® TTT
 - Risking Connection® Foster Care TTT

- Implementation Coaching**
- TIC Implementation Plan
 - 6-8 Coaching Calls on Implementation with TIC Task Force

- Trainer Certification and Professional Development**
- 4 In-Person RC Trainer Consult Groups Annually
 - 4 RC Trainer Webinars Annually
 - RC Trainer Recertification

Evaluating Trauma-Informed Care Training and Consulting Services

As the call for trauma-informed care (TIC) services surges including TIC legislative mandates, organizations are learning that TIC refers to system-level change, ideally using vetted models or TIC frameworks, as opposed to trauma-specific interventions to change individuals or families.

Organizations are increasingly looking for help on how to advance TIC in their setting and, now particularly, there are many training and consultation options. So, it is vitally important for organizations to know the kinds of questions to ask vendors to find a good match for their needs.

Key Questions to Ask:

- Are the services short-term or one-time offerings or do they include vetted TIC models or frameworks to address the need for whole system change?
- Are the services part of a coherent and comprehensive TIC change model or are they offered in an a la carte manner?
- Do the services or TIC change model have a track record? Are they widely used nationally and/or internationally?
- Is there literature in peer-reviewed journals to support use of the services or TIC change model?
- Do the services or TIC change model include a trauma training curriculum that reflects current knowledge in the trauma and TIC field?
- How do the services support sustainability of TIC within the organization? For example, do they use a training-of-trainers system? Is there a certification process for TIC trainers, TIC champions, or the entire organization?
- Do the services include work with senior leadership at the organization and the Board of Directors?
- Are the trainers and consultants familiar with your specific population and setting? How will they adapt what they offer to your population?
- Do the services or TIC change model provide ongoing support and coaching for the change process?
- Does the TIC change model build in support from peer organizations going through the same TIC change process?
- Do the services or TIC change model include program evaluation to measure outcomes of the TIC change process?
- What is the price? To what extent will what you pay result in long term sustainable change?