Beyond Trauma Training: Effective Implementation of Trauma Informed Practices Across the Intercepts

2022 CJAB Conference





Lancaster County, Pennsylvania
COURT of COMMON PLEAS



Lancaster County Reentry Coalition



Lancaster County Prison

Presenters

- Mary L. Dorman, Health Promotion Specialist, Penn Medicine Lancaster General Health
- Carrie Kurtz, Reentry Coordinator, Lancaster County Reentry Coalition
- Melanie G. Snyder, Trauma Informed Specialist, Penn Medicine Lancaster General Health
- Cheryl Steberger, Warden, Lancaster County Prison
- Leilany Tran, Social Worker, Lancaster City Bureau of Police
- Mark Wilson, Chief, Lancaster County Adult Probation and Parole

PART 1: OVERVIEW / BACKGROUND

Why a trauma-informed criminal justice system?

- Several decades of research on connections between trauma and addiction, mental health issues, risk-taking behavior and criminal justice system involvement
 - Adverse Childhood Experiences (ACEs) research
 - Other forms of trauma in adulthood
- Trauma is pervasive and can have long-lasting adverse effects
- Trauma rates are very high across all demographics, but especially high among people living in poverty, those with addictions and/or mental health diagnoses, and justiceinvolved populations
- The criminal justice system also traumatizes / re-traumatizes
- BUT: "ACEs are not destiny" additional body of research on resilience/healing
 - OPPORTUNITY for all of us to be part of solutions

Why a trauma-informed criminal justice system?

"Based on available statistics, it is safe to assume that everyone who comes into contact with the justice system has a history of trauma, so criminal justice professionals should take "universal precautions."

SAMHSA GAINS Center

Why a trauma-informed criminal justice system?

Per SAMHSA, trauma-informed responses in CJ system can help to:

- de-escalate behavior
- avoid re-traumatization
- reduce # of people with behavioral health challenges in the CJ system
- and promote recovery

Our approach

- Sign MOU's with organizations committed to becoming trauma-informed
- Provide foundational trauma training to all organization staff
- Conduct "Putting It Into Practice" sessions
- Conduct Trauma-Informed Organizational Assessment
- Identify policies / procedures / physical environment changes to make
- Establish metrics for outcomes measurement
- Implement changes
- Assess results
- Rinse & repeat
- Penn Med/LGH provides FREE training, technical assistance, resources, and support throughout the process

Lancaster County's 5 Year Journey (so far) Toward a Trauma Informed Criminal Justice System

- March, 2017: Initial 4-hour SAMHSA trauma training for all Probation/Parole & Prison staff
- ► 2017-2021: additional trauma-related trainings:
 - CIT: added 2-hour trauma module
 - 4-hour "Understanding Trauma, Resilience & Trauma Informed Care"
 - Safeguarding Children of Arrested Parents (IACP)
 - LCP Leadership Team Training
 - Mental Health First Aid
 - D&A trainings
 - Handle with Care
- ▶ 2017 2021: Initial policy/procedure work at LCP and Adult Probation/Parole

Lancaster County's 5 Year Journey (so far) Toward a Trauma Informed Criminal Justice System

- 2021: SAMHSA certification of 20 CJ professionals to teach SAMHSA's Trauma Informed Criminal Justice & Trauma Informed Courts curricula
- 2021: President Judge David Ashworth goal to make Court trauma informed
- ► 2021: TI Organizational Assessment: Adult Probation & Parole
- 2021: Sequential Intercept model work & Process mapping focused on evidencebased, trauma informed approaches at each intercept
- All part of broader, cross-sector initiative: Trauma Informed Lancaster County
 - * Education
 - * Behavioral Health
 - * Faith Community
 - * First responders
 - * and others

- * Healthcare
- * Housing
- * Business
- * Social Services

Where to from here?

2022 & beyond:

- Trauma training for entire court staff
- Trauma training for entire Lancaster City Police Bureau
- Training will be followed by:
 - Putting It Into Practice sessions
 - Trauma Informed Organizational Assessment for each agency
 - Policy/procedure change
 - Outcomes measurement
- Continue to offer advanced & refresher trauma trainings
- Continue to offer related trainings (ex: CIT, HWC, MHFA, etc)
- Continue to build capacity to ensure sustainability: sector champions

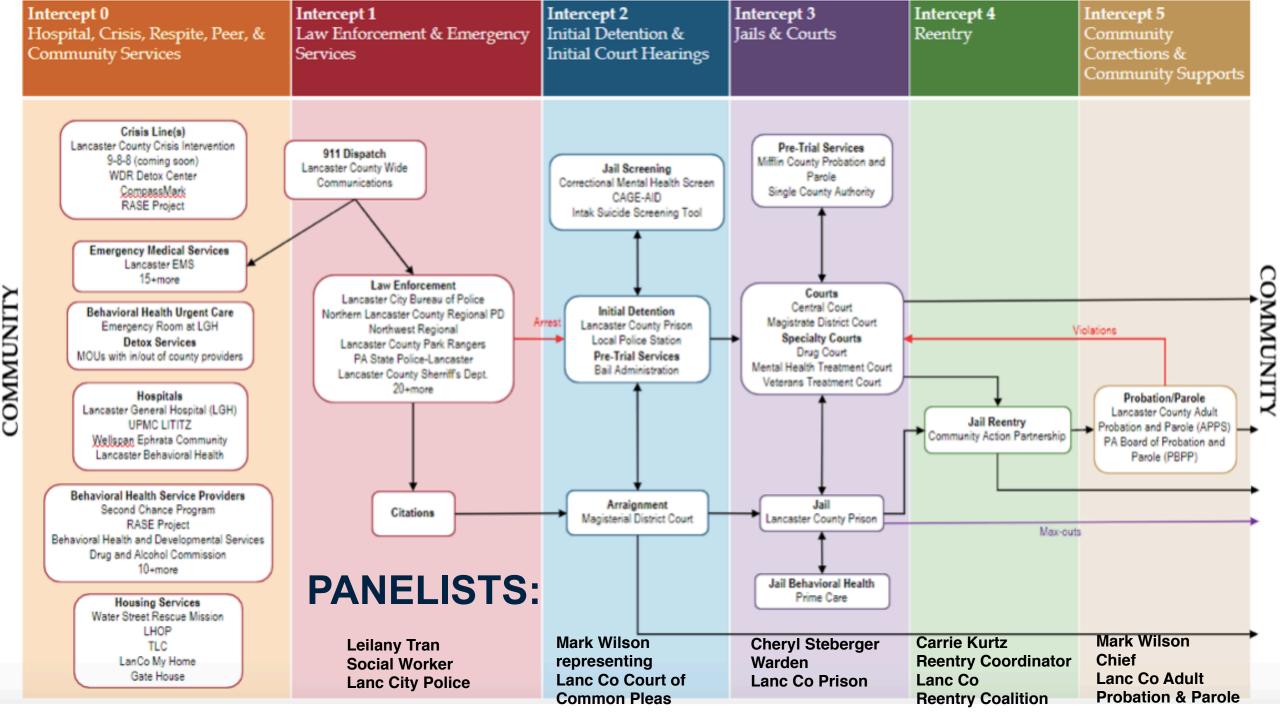
Some general "lessons learned"

- Address resistance
 - Acknowledge staff vicarious & other trauma, emphasize staff self-care
 - Explain the neuroscience
 - Not about "doing something new" but doing what you already do in new ways
- Ensure instructor team diversity, credibility, relatability
- Curriculum (don't reinvent wheel; common language/concepts across orgs)
- Address training challenges: 2 instructors, trigger warnings, self-care, crisis resources
- Offer CEU's
- Emphasize practical application at individual, interpersonal & organizational levels
- ► Identify current practices, policies that may trigger / re-traumatize clients and/or staff
- Emphasize strengths-based approach, resilience, healing

Some general "lessons learned"

- Identify backbone org w/ resources to coordinate, provide tech assistance
- Trauma-informed leadership is crucial
- Involve people with lived experience in meaningful roles
- Walk the talk: TI approach to "delivery" of the material, follow-up meetings, etc.
- Sustainability/capacity building: identify champions & train as trainers/peer coaches
- ► Take a "long view": this is an evolutionary culture/paradigm shift
- Identify, acknowledge & celebrate what's already being done that meets TI principles
- Must go beyond training to assessment, policy change, measurement, repeat
- Clearly connect TIC with DEI initiatives

PART 2: PANEL DISCUSSION



PANEL DISCUSSION

How have you put Trauma Informed Care into practice in your agency, including:

- * Why you thought becoming Trauma Informed was important for your agency
- * How you got started & what you've done so far
- * What has (and hasn't) worked
- * How you have measured/plan to measure "success"
- * How you've addressed resistance/skepticism
- * What you're most proud of
- * What you'd do differently if starting today
- * What advice you'd offer to other CJ agencies exploring becoming trauma-informed

Intercept 1: Law Enforcement Lancaster City Police - Trauma Informed Work

- MOU with Penn Medicine/Lancaster General Health to become trauma informed
- Trauma Informed Care training for all officers, to be followed by TI Organizational Assessment, then policy/procedure change and measurement
- Peer support for officers
- CISM debriefings
- Yearly training on identifying calls & how to respond
- Handle With Care

Intercepts 2/3: Courts Lancaster County Courts - Trauma Informed Work

- MOU with Penn Medicine/Lancaster General Health to become trauma informed
- ► Trauma training (SAMHSA curriculum) for all court staff in 2021-2022:

 - * Juvenile Probation (49 staff). * Bail Administration (8 staff)
 - * Court Administration (16 staff).
 * Court Reporter (14 staff)
 - * Law Library (3 staff)
 - * Court of Common Pleas Judges (15 judges)
 - * Magisterial District Judges (19 MDJ's plus 100 staff)
- Trauma trainings will be followed by:
 - "Putting It Into Practice" sessions for each dept (practical implementation of TIC)
 - Trauma Informed Organizational Assessment for each dept
 - Dept policy/procedure changes with metrics to assess impact

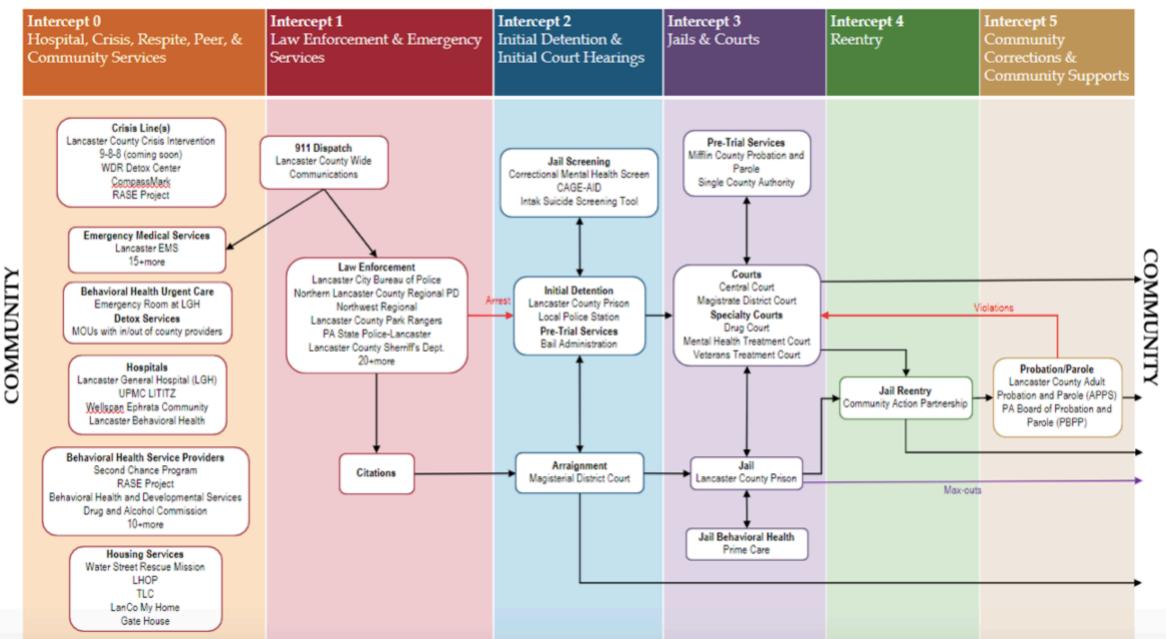
Intercepts 2/3/4: Initial Detention / Jail / Reentry prep (pre-release) Lancaster County Prison

- MOU with Penn Medicine/Lancaster General Health to become trauma informed
- ► Initial training: March 2017
- Initial focus areas:
 - Staff well-being
 - MISA
 - Use of force policy
- Prison Leadership workshop: Mar. 2020: "a trauma informed corrections environment"
- Individualized trauma-informed practices for those with serious mental illness

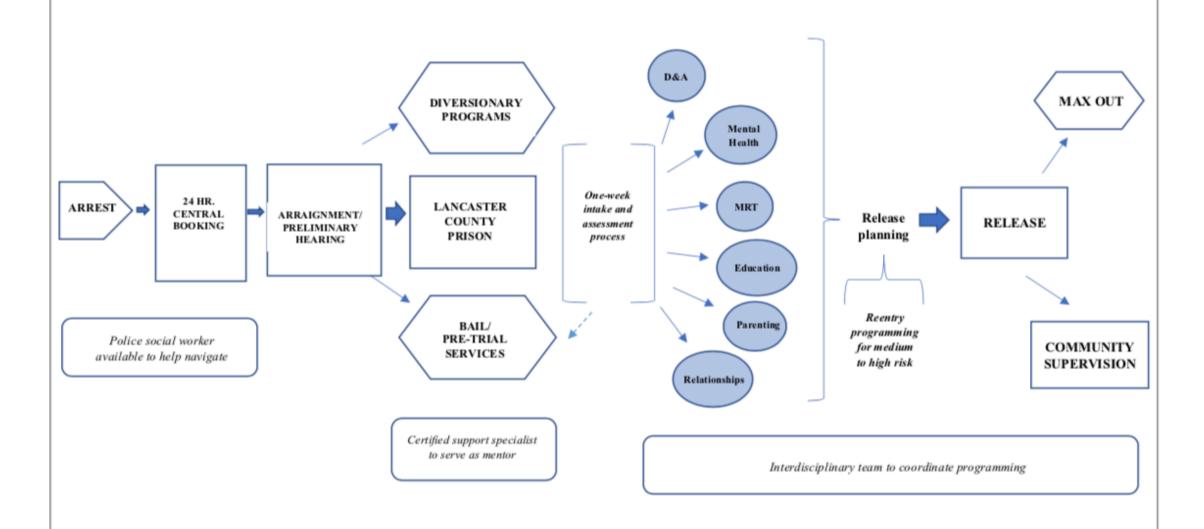
Intercepts 4/5: Reentry & Community Supports Lancaster County Reentry Coalition

- MOU with Penn Medicine/Lancaster General Health to become trauma informed
- Vision: Offer trauma training to key LCRC partners who work directly with reentrants, so all are serving from the same foundation of language/terminology & knowledge of key concepts

Sequential Intercept Model Map for Lancaster County



LANCASTER COUNTY REENTRY PROCESS MAPPING



LANCASTER COUNTY REENTRY PROCESS MAPPING

ARREST

24 hr. centralized booking

Comprehensive assessment and information completed

- Emergency contact
- Mental health status

ARRAIGNMENT/

PRELIMINARY

HEARING

Centralized

arraignment time

Pre-trial assessment

given

Counsel must be

present at

arraignment

- Drug and alcohol
- Family and supports
- Where will belongings be held?
- Synopsis of arrest
- Drugs using
- Housing situation
- Care of children

Entered into shared database connected through ORI

Connections to resources and programs

Police social worker available to help navigate process and connect with resources

PROGRAMS

For individuals for whom treatment (D&A, MH) is more appropriate than incarceration

UPON COMMITMENT TO LCP

One week staggered intake and assessment process:

- Release of information that covers all agencies
- Completion of reentry check list
- Intake (medical information; risk assessment; prior services; PO; documentation, etc.)
- Information tracked in electronic database that compiles comprehensive information from various sources
- Information shared with family
- Interdisciplinary team to coordinate services
- Identify those medium to high risk

BAIL/PRE-TRIAL SERVICES

Conduct pre-trial assessments at arraignment Connect with support specialists as mentors

WHILE INCARCERATED

Adequate space, staff and programming to address needs of individuals

Block counselors work with individuals to increase awareness of services and encourage participation

Focus on individuals who are medium- to high-risk

Participation in evidencebased programming (D&A, MH, parenting, genderresponsive healthy relationships, MRT education, etc.)

Bring in outside agencies to offer programs, as well as trained volunteers to work with individuals

Interdisciplinary team works with individual on goals and completion of reentry checklist/plan.

UPON RELEASE

Reentry case manager assigned to coordinate reentry plan

Ensure people are released with:

- Family reunification
- Employment
- Documentation
- Active insurance
- Medication (30 days, prescription and copay)
- Appointments scheduled (in-take completed prior to release)
- Connections to outside agencies
- Clothing/toiletries
- Housing
- Transportation and directions
- Support system (case managers/CRSs)

IN THE COMMUNITY (MAX OUTS)

Outtake process (begin at least 30 days before release)

> Offered same resources as supervised individuals

ON SUPERVISION

Continue interdisciplinary team meetings

If identified as medium- to highrisk, placed on medium- to highrisk supervision

- MOU with Penn Medicine/Lancaster General Health to become trauma informed
- Initial training: March 2017
- Initial focus areas:
 - Peer support
 - EBP implementation
 - In-office detention policy
 - Offender searches
 - Communication w/ families
- Trauma Informed Organizational Assessment: completed in 2021
 - Celebrate successes
 - Identify additional policy/procedure changes & metrics
- APPS Agency Chaplain
- APPS Vision/Mission/Core Values Statement

- APPS Agency Chaplains
- Standard Operating Guidelines established 2/2020



SERVING THOSE WHO SERVE

Objectives

Our Chaplains will work to strengthen the morale of the department and work to build relationships both inside and outside the Adult Probation and Parole Services (APPS) community. The Chaplain will report to, and work with the Leadership Team to be a support wholly to the department. The Chaplain will work with local faith based organizations and other community organizations to maintain good relationships with the department.

APPS Agency Chaplains

Routine duties within the department

- Regular communication with officers and staff
 - A. On or off duty
 - B. Office visits when officers and staff are present
 - C. Regular phone calls or text messages
- 2. Visit hospitalized department members and members of their family(s).
- 3. Participate in training as suggested by the operations officer(s).
- Be available for helping or counseling officers and staff of the department in times of stress or difficulty.
- 5. Assist, when requested by any division of the department, in programs.
- Attend department functions when appropriate and/or requested.
- Conduct, participate, and attend religious services such as weddings, funerals, or memorial services, as requested and within the Canonical restrictions of the respective faith background.
- Be on-call on a twenty-four(24) hour a day basis other than scheduled vacations.



SERVING THOSE WHO SERVE

APPS Vision/Mission/Diversity/Core Values

Vision Statement

Empowering Change. Evolving Through Evidence-Based Practices. Serving Our Community.

Mission Statement

The mission of Adult Probation and Parole Services is to encourage positive behavioral change, uphold community safety, and reduce recidivism.

Diversity Statement

We are committed to building an inclusive culture that encourages, supports, and celebrates the diverse voices of our employees and clients.

At Adult Probation and Parole Services, we are moving forward. We D.R.I.V.E.

- Diversity recognize that each individual is unique.
- Respect accept people for who they are.
- ▶ Inclusivity promote an environment of belonging and empowerment.
- Values treat all people with dignity and respect.
- ► Equity create an environment of fairness and impartiality.

APPS Vision/Mission/Diversity/Core Values

Core Values

- We treat all people with dignity and respect.
- We believe in the fair and impartial administration of justice.
- We believe people can make positive changes.
- We embrace individual autonomy.
- We believe in a balance of rehabilitation and enforcement tailored to each individual.
- We recognize our staff as a valuable resource.
- We hold ourselves accountable to the highest level of professional and ethical standards.
- We strive to be trauma-informed and recognize the impact of trauma on individuals and communities.

AUDIENCE QUESTIONS

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