

Rationale for Policy and Procedure Audit Tool Questions

1. Is there a clear purpose for this policy (transparent, predictable, empowering)?

Line staff or consumers often feel outside of the sphere of influence when it comes to system-level policy. We know that anything done within a system that reduces the feeling of humanity has the potential impact of increasing stress and trauma for staff, and the system as whole. Often times, there are justifiable reasons why policy is created without critical examination, however we encourage that there be a review of all policies with a focus on the original intent of the policy. Additionally, keep in mind that if the agency's mission and vision include a trauma informed statement, all policy should directly or loosely align to that larger vision.

(1-unclear; 3-somewhat clear; 6-clear purpose)

2. Was this policy created with a cross section of input from stakeholders (staff, consumer, community, leadership, county, state)?

It is important to note that multiple levels of impact and multiple levels of need can drive policy. It is because of this complexity that it is difficult to have input from all levels of the system in the creation of policy. However, subjugation can occur when those that are responsible for creating policy are not transparent about the process. Although the creation of policy may be the responsibility of a few, examining the impact of the policy through stakeholder involvement (even after creation of policy) is an important driver towards a more trauma informed process.

(1-no stakeholder input; 3-some; 6-many stakeholders had input/creation)

3. Are there potential positive (equitable, trauma-reducing) impacts of this policy on staff, consumers, and/or the community at large?

It is often far easier to identify those policies that harm groups of individuals and systems than to identify policies that are creating positive, safe, and equitable environments.

“Trauma reducing” can mean any impact that reduces stress, harm, increases transparency, or keeps staff and others safe. In addition, anything “trauma reducing” seeks to eliminate or decrease the perpetuation of harm, bias, or structural racism that exists in systems. There may be danger in not identifying trauma-informed policies, those that reduce the impact of trauma, in that not identifying trauma reducing policy leads to difficulty in a) replication b) assessment of efficacy, and c) alignment to a larger mission/vision for an agency. We encourage systems to examine how and why policies are trauma reducing at both the individual level and the systems level.

(1-few positive; 3-moderate; 6-many positive impacts)

4. Are there potential adverse (trauma-inducing) impacts of this policy on staff, consumers, and/or community?

One of the four elements of creating a trauma-informed system is resisting re-traumatization (SAMSHA, 2000). Often this is thought of in the context of practice

delivery, appropriateness of environment, and cultural responsiveness in care. However, we also know that policy drives and sustains many of the aforementioned variables. It is therefore necessary when creating a trauma informed system to adequately examine the potential harm of a policy on both 1) those it is intended to impact and 2) those it indirectly impacts. We think of this in terms of traumatic activation on two equal levels. The first level is a direct reminder of trauma in the form of loss of voice and choice, lack of safety, overt or covert fear, and boundary violations. In the second level, since we see lack of social and racial equity as traumatic, any policy that does not consider the propagation of systemic racism and inequity, as a pitfall is not a trauma informed policy. (1-extreme; 3-moderate; 6-few [if any])

5. Are there ways to modify or improve upon this policy to reduce harm or increase benefit?

When organizations embark on the task of becoming trauma informed, they often must battle long-standing narratives and organizational histories that have led to systems stress. Part of uncoupling from the tangle of trauma at the systems level involves examining how to re-imagine the work we do in a new light. Creating trauma-informed policy involves critical self-reflection, including making changes where needed. Determining how and when a policy can be modified is an important first step in shifting a trauma-organized system culture. Modifying existing policy that is re-traumatizing can serve as a tangible sign on the part of those within the organization that the needs of those who are most directly impacted are being considered at all levels of the system. (1-no ways to modify; 3-some ways to modify; 6-definite ability to modify/change)

6. Was this policy rolled out to staff and those potentially impacted with accessibility in mind (multiple languages, visual representations)?

Reviewing and creating policy can be a daunting task, even for those immersed in the language and process daily. Because policy is often created with litigious factors in mind, it is often thick with “systems” language, not accessible by a cross-section of stakeholders. Additionally, only certain policies (i.e., those that most directly impact consumers) are translated into multiple languages. We believe the process of becoming a trauma informed system involves providing multiple ways that policy can be understood, both linguistically and conceptually. Providing policies in multiple languages (or having the ability to do so) and creating visual heuristics of policy is a step towards this process. For more information of visual policy, contact Trauma Transformed through traumatransformed.org (1-inaccessible, single language, jargon; 3-somewhat accessible, jargon; 6-very accessible in all formats)

Note: The questions in the policy audit tool were adapted from resources available at *Racial Equity Tools* (racialequitytools.org) and the *Racial Equity Toolkit* at racialequityalliance.org