Dignifi & South Gloucestershire Council's Trauma-informed Practice Development Guide

Contents

Introduction

Understanding the widespread impact of trauma is crucial for organisations in the current climate. Cross-sector challenges that organisations are facing because of reduced budgets mean that there is a need to find smarter and more efficient ways of working and supporting the workforce to manage the complexity of their work.

This Practice Development Guide develops a roadmap for South Glos Council's journey towards becoming a trauma-informed organisation. Since January 2022, Dignifi has collaborated closely with Council managers and leaders to assess the current position and plan the way forward. While progress has had its challenges, we have worked to meet milestones and build on the momentum gained in the foundation year of the partnership.

The work Dignifi has completed over the two years has been building on the regional BNSSG strategy, developing awareness, and implementing activities that will support the development organisational changes in the medium to long term. Our activities commenced in January 2022, initially spending time understanding South Glos, the culture and morale within the Department for People and perhaps most importantly, the impact of Covid-19 and budget reductions on staff and service delivery over the past 4 years.

There were 4 main stages to our work.

1. Design and Diagnose – Understanding current levels of knowledge, policy and practice and understanding issues around recruitment, retention, and sickness.
2. Implementation – Informed by the Design and Diagnose, we would design and deliver a range of activities to ensure we built on the knowledge already prevalent within teams.
3. Embedding – Development of tools, systems and processes that will support future developments.
4. Evaluation – Working alongside our external evaluation partner at ARCs to ensure effective data capture for evaluation purpose.

Each year of the partnership has been underpinned by a workplan to establish a solid trauma-informed foundation. Key activities included:

- Awareness training sessions for staff
- Compassionate Leadership sessions for managers and leaders
- Developing trauma-informed policies and principles
- Developing a trauma-informed Commissioning Guide
- Developing an e-learning training offer to improve accessibility for staff
- Embedding principles into existing workstreams and business areas
- Multiple presentations and engagement with workstreams across the Department for People.

In addition to a range of activities being carried out we have also developed this Personalised Development Guide that when used alongside Dignifi's Organisational Change Handbook, will support South Glos to take this work forward.

Part 1 - Understanding the Regional Context

South Glos's trauma-informed journey builds on 6 years of evolution in the Bristol, North Somerset, and South Gloucestershire (BNSSG) region. The BNSSG Trauma-informed Practice Framework[1] aligns with Dignifi's model, providing regional consistency for organisational trauma-informed change.

Over the past five years, a Trauma-informed Practice Framework has been developed across BNSSG. The framework has been driven by Public Health and Wellbeing and has specifically focussed on building and embedding trauma-informed principles into practice whilst ensuring consistency across the wider geographical area. The BNSSG Trauma-informed Practice Framework offers guidelines to support the embedding of that structure across-sectors in the region. BNSSG's six principles form a key part of the roadmap in South Glos's journey and underpin all the activities that Dignifi were asked to undertake in their partnership.

The principles for trauma-informed practice, as detailed in diagram below draw on a range of inputs from staff and clinicians nationally and locally. Through merging recommendations on Adversity and Trauma-informed literature (SAMHSA, 2014a, Chart by the Institute on Trauma and Trauma-informed Care (ITTIC), 2015) the model has become nationally recognised as being key for the development of any trauma-informed service delivery model. These principles guide the development of trauma-informed practice, both in South Glos and across neighbouring local authorities.

---

[1] BNSSG Trauma-informed practice Framework available here: https://bnssghealthiertogether.org.uk/wp-content/uploads/2024/02/BNSSG-Trauma-Informed-Practice-Framework-2024.pdf (last accessed May 2024)

The practical application of the principles

Across South Glos there has been a focus on raising awareness of these principles whilst thinking about how they can be practically applied to policy and practice. To provide context we have detailed the principles as they should be applied into practice in the definitions below.

- **Safety –** Physical, emotional, and psychological safety are pre-requisites for trauma-informed practice to happen, and a crucial factor for helping people to admit they are struggling and seek support. For some people, safety may not be a familiar state, past experiences of trauma can hinder feelings of safety and impact on engagement with services. The consideration of safety and developing psychological safety should be a primary factor in developing any trauma-informed service.

- **Trustworthiness & Transparency –** People who have experienced trauma and adversity will understandably struggle to trust other people including those who represent services. Building trust takes time, consistency, doing what you say you will do, when you say you will do it. There also needs to be congruence in what we are asking staff to do and how we model that in systems, processes, and operational procedures. The consideration of trust and transparency will serve to create a culture of trust in teams, which will in turn support people to begin to trust in services.

- **Choice & Clarity –** Experiences of trauma and adversity can cause feelings of powerlessness. Supporting people to be included in the decisions that are being made about their lives is key to future development. This can also apply to the workforce when considering the levels of autonomy teams are given and how much choice they have in the way services are shaped, adapted and delivered. Communication and ensuring there is congruence in 'what we say and what we do' alongside consistency and clear boundaries will support in developing psychological safety in teams and in the relationships teams develop with those who use their services.

- **Collaboration –** People need to be involved in decisions that affect their lives. It is important for organisations to do things 'with' people instead of doing things 'to' them. Rebalancing power dynamics will enhance meaningful engagement, support the development of trust and self-efficacy. This also extends to approaches in staff teams where there is a wealth of lived experience. Collaborating with staff and offering autonomy and input into the way services are designed and developed will ensure that BNSSG are valuing the expertise held within their teams and valuing the lived experience in the communities that they serve.

- **Empowerment –** This involves focusing on individuals' and communities' strengths and supporting them to (re)claim the power to take control over their lives. Supporting people to feel more in control of their bodies and the symptoms of trauma as they move into recovery. The ability to have a voice applies to everyone, so that people accessing services, family members, carers, staff and other people involved with the system feel heard and understood. Through this empowerment we can offer people support to recovery and take control and reduce longer term need for service input. (SAMHSA, 2014a).

- **Inclusivity –** BNSSG councils are working to address inequalities, oppression, and exclusion, recognising the experiences of discrimination that individuals from marginalised groups can face (for example: gender, age, ability, sexuality, ethnicity, culture, class) and how these experiences intersect, overlap and layer up for the person experiencing them. To progress this area of work, understanding experiences of people who have experienced oppression whilst developing a workforce that is culturally curious and competent in understanding societal bias and inequalities is a priority. Understanding the impact of these experiences on individuals and groups and collaborating to develop meaningful changes to the way services are delivered will allow us to ensure that the services designed are accessible and supportive to the people who are using them and/or in need of them.

BNSSG's 5R's Relational Model

BNSSG are moving towards the practical implementation of a relational approach, recognising the far-reaching benefits of this across departments, from leadership through to staff delivering services on the ground. Trauma is often caused by the behaviour of another individual, developing and modelling healthy relationships are therefore key in developing services that are trauma informed.

By centring the model around relationships, not only does the culture shift to one of shared humanity, compassion, and recovery, but staff are also able to begin to repair some of the harm that has been caused in the context of relationships for people using services. Relational practice aligns well with trauma-informed practice as it can act as a conduit for recovery and creates opportunities for learning in every interaction – seeing 'every interaction as an intervention'.
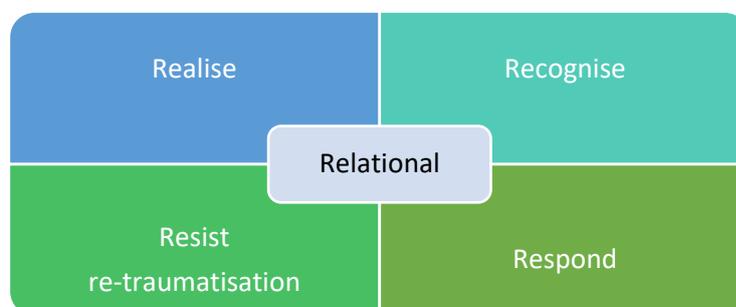
With **relationships** as the foundation, the model then moves through four phases. First, we need to be curious about someone's experiences of trauma so we can **realise** the impact. Secondly, staff should be skilled to **recognise** that trauma may influence how people interact with the world, understanding the symptoms, emotional dysregulation, and the adaptations to behaviour. **Responding** differently to dysregulation and distress can ensure that we can **resist re-traumatisation** and get people the right support at the right point in their recovery journey.

Further information on the BNSSG Strategy can be found in the BNSSG Knowledge and Skills Framework. [BNSSG Trauma-informed Practice Framework 2024 (bnssghealthiertogether.org.uk)](bnssghealthiertogether.org.uk)

Moving Beyond Adverse Childhood Experiences

Alongside the regional context, South Glos has considered the local demographic and challenges in the both the community and the workforce for marginalised groups. Taking a wider trauma lens involves coming to understand how trauma has been experienced by individuals in communities, especially where significant trauma occurs in that community and has wide reaching impacts to the workforce, who often live and work in the area. The failure of organisations to respond in a trauma-informed way to changes that occur in their communities can exacerbate issues and diminish the trust that people have in services and hinder meaningful engagement. This can act as a barrier to people getting the help that they need, create further mistrust and issues remaining unaddressed will lead to further repetitive cycles of trauma.

Moving beyond Adverse Childhood Experiences recognises that many communities South Glos serves are rapidly growing in diversity, their experiences of trauma may also be rooted in their culture, in their experiences of school and in their social networks. Being curious about the impact of trauma, discrimination and intersectionality in the communities South Glos serves will begin the journey towards breaking the 'chain of pain' that runs through families and communities. Staff need to be supported to develop confidence and autonomy in having these curious conversations. Developing leadership teams that are curious about the challenges the workforce face and supporting staff to be curious about the experiences that people are recovering from is the first step, but staff need to feel psychologically safe in exploring difficult topics if they are to deliver work that is meaningful.

Understanding that the roots of someone's experiences is key to meaningful engagement. Experiences of social disadvantage, poverty, discrimination and living in communities where violence is prevalent are issues that would not be measured with screening for ACEs, although the impacts can be similar. When those experiences are coupled with ACEs, they can layer up into the harms being experienced by children across South Glos and more widely, across the country. South Glos hopes to support the workforce to understand these issues, so they are better equipped to support the communities they serve.
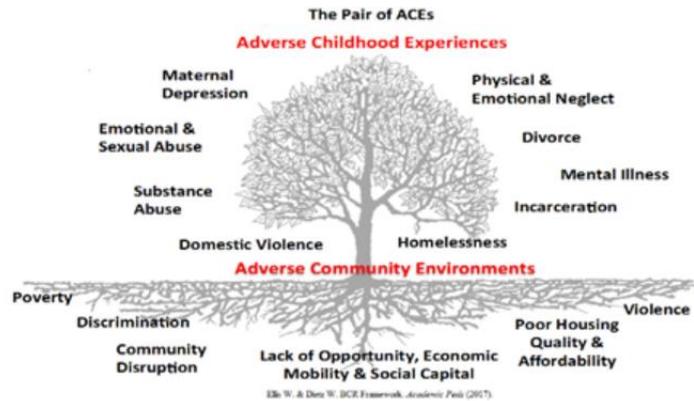
Ellis W & Dietz W (2017) A New Framework for Addressing Childhood and Community Experiences: The Building of community Resilience (BCR) Model, *Academic Paediatrics 17 (7) pp. 86-93*.

The Local Picture

Experiences of poverty and social disadvantage are growing in South Gloucestershire[2].

South Gloucestershire is an increasingly diverse area with a population of 290,424 as of the 2021 Census[3]. Around 8.8% of the population belongs to ethnic minority groups up from 2.5% in the 2011 Census 10 years previously.

Of the 263 neighbourhoods, 63 were among the 20% most income-deprived in England. Around 1 in 10 people report difficulty managing financially, rising to almost 1 in 5 in the most deprived areas. Over a fifth (21.8%) of children under 16 live in low-income families, above the national average. The Office for National Statistics found that around a third (35%) of adults reported it was difficult ('very' or 'somewhat') to afford their rent or mortgage payments, and this proportion was higher among groups including; those receiving support from charities (57%), living in a household with one adult and at least one child (47%), receiving some form of benefits or financial support (45%), 'Asian or Asian British' adults (53%), 'Black, African, Caribbean or Black British' adults (47%), renters (43%) and disabled adults (41%). The Census 2021 shows that, depending upon ethnicity, people from minority ethnic groups are between 1.5 times and 3.5 times more likely than average to be unemployed. We also know that depending upon ethnicity, people from minority ethnic groups are significantly over-represented in lower paid work in South Gloucestershire.[4]

In the autumn of 2022 research conducted by South Glos Council found a significant increase in the number of people experiencing poverty:

---

[2] Tackling Inequalities Plan 2024-2028; South Gloucestershire Council
https://beta.southglos.gov.uk/static/5aed2bddea503ee043a106435d6253af/Tackling-inequalities-action-plan-24-28-web.pdf (Last accessed June 2024)
[3] Office for National Statistics (2021)
[4] ONS (2021)

- Families with children, younger adults <45, women, those from Black, Asian and Minority Ethnic groups, those who are renting privately, those who have been unemployed or experienced long-term sickness have noted greater difficulty or have had to make more changes.
- Minority ethnic respondents are also suffering disproportionately, with 20% experiencing difficulty or great difficulty, compared to 13% of the population overall.
- People with disabilities feel much worse off than a year ago, 33% feel this compared to 21% of non-disabled respondents.
- More than 2 in 3 respondents (69%) felt worse off than they were a year ago, and nearly 1 in 4 (23%) respondents reported their situation had deteriorated significantly over the past year.
- Citizen's Advice South Gloucestershire have seen a 10-fold increase in foodbank referrals – up from 6 clients a month on average pre-covid to now over 60 a month.

The proportion of South Gloucestershire pupils who are eligible for Free School Meals (FSM) has nearly doubled over the last 6 years and that pupils with disabilities and pupils from most minority ethnic groups are disproportionately impacted in terms of attainment and these pupils may also have higher rates of persistent absence and/or are subject to higher rates of fixed-term or permanent exclusions from school.[5]

Health indicators show a mixed picture. Life expectancy has been increasing overall, standing at 81.6 years for males and 84.4 years for females in 2018-20, higher than national averages. However, there are significant inequalities, with those in deprived areas having lower life expectancy. Local data is showing there are significant and, in some cases, widening inequalities between people living in the most and least deprived areas in South Gloucestershire as well as among and between protected characteristic and vulnerable groups.[6]

Overall, South Gloucestershire performs well on many quality-of-life indicators but faces challenges in areas such as deprivation, crime, and inequalities. It is difficult for marginalised groups to reach their full potential when socioeconomic disparities are widening rapidly, and when certain communities are facing an increasing number of challenges in accessing opportunities and resources. When socioeconomic challenges and systemic inequalities intersect with ACEs, they can exacerbate negative consequences for people's well-being and development across their life course. This changing local picture has wide reached impacts to the workforce, who often live and work in the area.

South Glos Council have signed the pledge and are committed to ensuring that they end the 'chain of pain' that runs through families and communities. .

---

[5] Joint Strategic Needs Assessment accessed via the Population Health Intelligence Portal
https://beta.southglos.gov.uk/health-and-social-care/health-services/jsna/ (Last accessed June 2024)
[6] Tackling Inequalities Plan 2024-2028: South Gloucestershire Council
https://beta.southglos.gov.uk/static/5aed2bddea503ee043a106435d6253af/Tackling-inequalities-action-plan-24-28-web.pdf (Last accessed June 2024)

Part 2. Learning from the Foundation Year and Year 1

Background

Since January 2022, Dignifi has worked closely with the Trauma-informed Practice Specialist as well as managers and leaders across Department for People to design and deliver against a workplan for each year of the programme. These workplans have guided activities across the Department for People to establish a solid trauma-informed foundation. Key activities included:

- Awareness training sessions for staff
- Compassionate Leadership sessions for managers and leaders
- Developing trauma-informed policies and principles
- Developing a trauma-informed Commissioning Guide
- Developing an e-learning training offer to improve accessibility for staff
- Embedding principles into existing workstreams and business areas
- Multiple presentations and engagement with workstreams across the Department for People.

Our work has been a collaborative effort, shaped by input from partners, stakeholders, Department for People leadership and HR. This ensured we understood core challenges and could tailor an appropriate approach. South Glos Council has demonstrated its long-term commitment by extending the programme beyond the Department for People to being council wide and signing the regional BNSSG trauma-informed pledge.

This guide reflects on insights gained so far and provides advice for expanding trauma-informed practices into more Council services and partner organisations going forward. Throughout this Practice Guide references will be made to Dignifi's Organisational Change Handbook which should be read alongside this guide for further expansion on key concepts.

For full information on our foundation year, please see Dignifi's End of Year Consultation Report.

Quality Assurance and Monitoring progress

Embedding trauma-informed practice requires a continuous process of evaluation, learning and improvement. As part of the partnership between Dignifi and SGC we have adopted collaborative, self -learning approaches to measure and monitor the impact of the work on the workforce. By collecting and analysing a diverse range of data, both quantitative and qualitive, we can capture the multifaceted effects of trauma-responsive practice and make recommendations for localised workstreams based on emerging need.

Some of these insights are summarised here and form the basis for our approach in Part 4 of this Practice Development Guide.

Organisational self-assessment

As part of the initial meetings in our foundation year (2021/22) at South Glos, each team within the Department for People were asked to self-assess their current knowledge, understanding and delivery of activities that were trauma informed. They were also asked about their aspirations in each area. This is a usual part of Dignifi's consultation during the design and diagnose stage as we like to 'work with' organisations to develop this at their pace and at the right point in their organisational journey. Often when we carry out this exercise it offers a good indication of where the organisations are and where they would like to get to.

For more information on the self-assessment headings please consult Dignifi's Organisational Change Handbook.
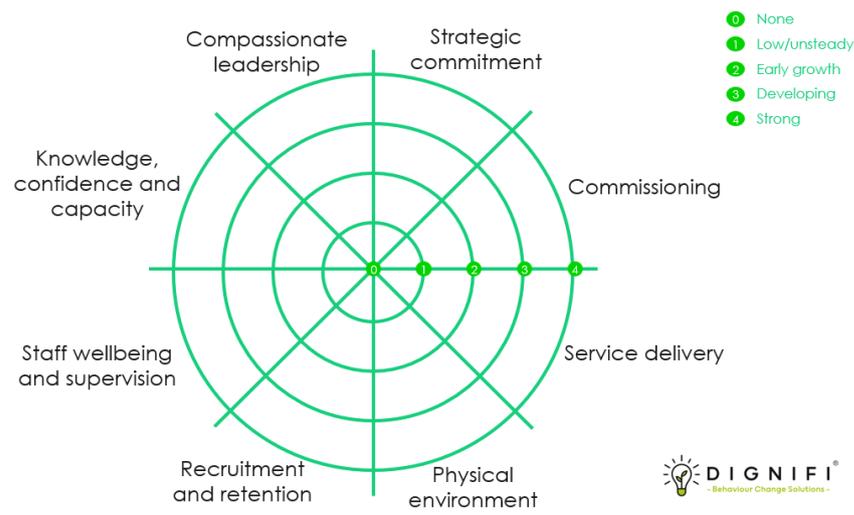
The information provided in the responses to the initial self-assessment task formed the basis for the foundation year's Case for Change, which was agreed and signed off by SGC's Trauma-informed Steering Group. This Case for Change provided a simple focus for prioritising activity and allocating resources for the Foundation year. It was agreed at a steering group in the Autumn of 2022 that this approach needed to be continued into Year 1.

The case for change: Developing Trauma Informed approaches in South Gloucestershire Council
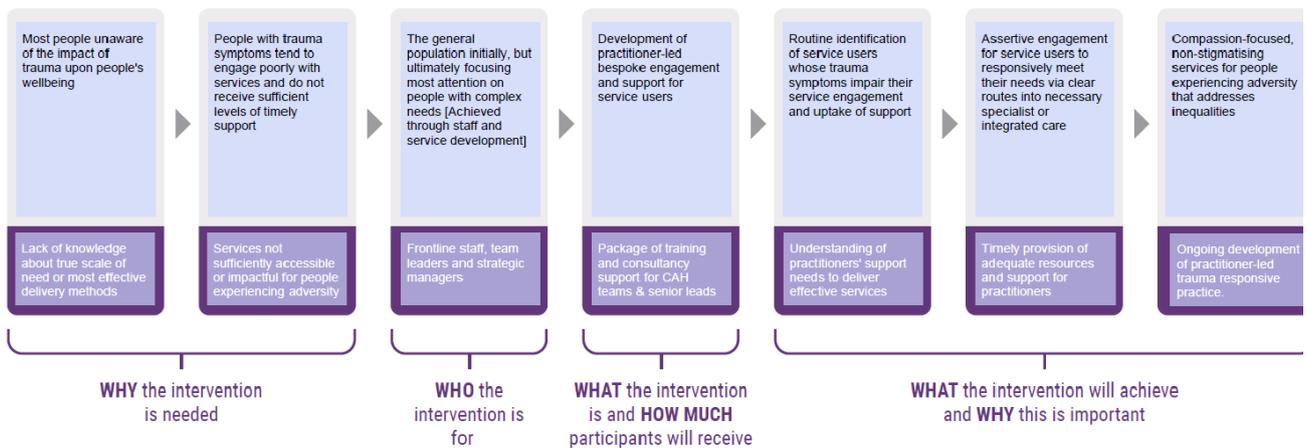
The self-assessment exercise was repeated in Year 1 with members of the trauma-informed working group as representatives of the Dept for People. The findings from these assessments have been fed into summary of findings below.

Training evaluation and feedback

Through Dignifi's in-depth training programme, sessions were delivered to both council staff and their partners. An external company, ARCS, was used to collect and analyse the data. This was for two reasons, to ensure anonymity for participants, and to guarantee that feedback was impartial. Participants were asked a series of questions regarding their knowledge of trauma informed practice prior to the training and then post training evaluations were also completed. The post-training evaluation is focussed on asking participants not only about the quality of the training, but also any barriers and challenges to implementing the training into their department. Themes from delegates have been used to feed into Part 4 of this Practice Development Guide.

Summary of Findings: Positive Developments

Training and Awareness Raising

An extensive training and awareness raising programme was mobilised, where around **872** staff members received trauma-informed training during the foundation year and Year 1 across various sessions and formats. Sessions included:

- ✓ **Compassionate Leadership Training:** 211 out of 250 offered places attended
- ✓ Online **Trauma Awareness and Recovery** training for external Ambassadors and Dept for People staff: 581out of 1050 offered places attended

- ✓ **Bespoke face to face** training delivered to specific departments like Children's Services, Adult Services and Housing: 80 people attended out of 350 offered places across 7 sessions
- ✓ **E-learning** training offer being finalised for both people-facing staff and non- people facing staff.

Policy and Practice Development:

- ✓ Review of social care practice models (3 conversations and Signs of Safety) to make recommendations for alignment with trauma-informed approaches
- ✓ Trauma-informed commissioning guide designed and developed.
- ✓ Alignment with the Mental Health Award for schools
- ✓ Input provided into the refresh of the BNSSG's Trauma-Informed Practice Framework.

Partnership and Collaboration:
- ✓ Worked closely with HR to design and develop a Compassionate Leadership training offer. This is now being developed into an e-learning session.
- ✓ South Glos Council has now signed the BNSSG pledge and are committed to ensuring that that they widen trauma-informed approaches beyond the Dept for People across all aspects of council business.
- ✓ Established a Trauma-Informed Practice Network with over 700 professionals signed up across local authority area.
- ✓ Dignifi contributed to UWE's external evaluation of the foundation year which provided useful insights which have fed into this localised Practice Development Guide.

Responsiveness to change:

- ✓ Quickly designed and delivered briefings in response to Homes for Ukraine developments
- ✓ Ongoing advice and support as issues have arisen around staff well-being and vicarious trauma
- ✓ Pre and post consultation with Managers for face-to-face team training sessions
- ✓ Design and delivery at sessions in response to events when they happen (e.g. sudden death in service).

Summary of Evaluation Findings: Areas for improvement

Despite progress made in the foundation year and a ground swell of momentum, the transition into Year 1 was met with a cliff edge, as progress reached a stand-still . Changes to personnel including senior leadership, negotiations over the workplan and a significant gap in contractual arrangements meant that we were not able to achieve as much as we would have liked. This loss of momentum has emphasised the need for leadership support, long term planning and resource allocation, and a focus on workforce well-being, secondary and vicarious trauma to create sustainable and responsive trauma-informed organisational change. Dignifi are commitment to supporting South Glos to build on the work already started. This localised Practice Development Guide serves to provide a focus for

future planning to progress this work. For more detailed information on these areas, please refer to pages 26-40 of Dignifi's Organisational Change Handbook.

Some of the challenges that came out of the diagnose and design phase, the organisational self-assessment exercises and delegate training evaluations are summarised here:

Importance of Compassionate Leadership:

- Need for stronger council-wide leadership advocacy and open commitment to trauma-responsive approaches.
- Staff training attendance (trauma awareness and recovery) was lower than expected particularly in Year 1, indicating the need for better promotion, engagement and accessibility, potentially including more face-to-face sessions.
- Shifting from a top-down, procedure-driven culture to one aligned with trauma-informed principles.
- Creating psychologically safe environments where staff feel empowered to voice concerns, disclose struggles and access support.

Need for Supportive Teamworking:

- High turnover of staff can make long-term culture change harder as momentum can get lost.
- Fostering psychological safety can increase creativity, performance, and productivity among staff.
- Issues with staff attrition, difficulty recruiting, and low morale impacting performance.
- Moving to a "no-blame" culture and open communication are essential for trauma-informed practice.

Addressing Workforce Well-being:

- Post-pandemic pressures and budget reductions have exacerbated well-being issues.
- High levels of moral injury, burnout, and compassion fatigue were observed across teams.
- There is a need to continue to widen the lens on trauma and adversity, considering issues like race, inequality, cost-of-living pressures, and moral injury experienced by staff.
- Disclosures about trauma experiences, lack of work-life balance, and feeling unable to provide adequate support were common.
- Providing appropriate support and resources for staff well-being is vital for sustainable practice. Human Resources involvement is critical for this.

Collaborative Partnerships

- Collaborative efforts, like the commissioning guide, support trauma-informed practice across services but more needs to be done to embed principles in practice.

- Close collaboration with HR is recommended to align trauma-responsive practices with staff well-being support and initiatives across the council.
- Close collaboration with Learning and Development Team to ensure that mandatory training offer such as Safeguarding and Equality and Diversity training is updated to reflect trauma prevalence and impact evidence base.
- Ambassador network needs development if it is to maintain interest and motivation for system wide culture change.
- Addressing workforce challenges across SGC and with partner agencies is a prerequisite for improving service delivery to communities.

Challenges in Implementing Trauma-Informed Service Delivery:

- Lack of long-term financing and inadequate resourcing makes implementation difficult.
- Competing demands and workload pressures hindered staff's ability to adopt new practices.
- Overreliance on target-driven approaches conflicting with trauma-informed practice.
- Lack of alignment between corporate policies/procedures and trauma-responsive service delivery.

While significant challenges remain, Dignifi commends South Glos Council's efforts in raising awareness, delivering training, developing policies, and fostering collaboration, as positive steps in their trauma-informed practice journey. The challenges outlined above map onto the workstreams for future developments that we will explore in Part 4 of South Glos' Practice Development Guide.

Part 3 - The Dignifi™ Organisational Change Model

The Dignifi ™ Organisational Change Model provides a blueprint for South Glos Council (SGC), that is a culmination of all our experiences of training staff across sectors and doing direct work with people. As a lived experience organisation, we shape everything we do incorporating the voices of not only the people who use services, but those who deliver them. The Dignifi ™ Organisational Change Model considers the national principles for trauma-informed practice whilst also thinking about the workstreams of development that are required at every level of SGC. Acting under each of these pillars will ensure that SGC continues to evolve services for the communities it serves.

Using Dignifi's Safety, Connection and Purpose model, the three pillars in the table below indicate a phased approach to prioritising action in that safety needs to be achieved before people can feel included, and inclusion is required for people to have real autonomy and choice. SCG's suggested key performance indicators are outlined in Part 4 of this guide.

	Safety and Trust[7]	Inclusive Collaboration[8]	Empowered Choice[9]
Compassionate Leadership	Strategic commitment to policy change and action	Empathic and relational inclusion	Devolving control for innovation and co-creation
Supportive Teamworking	Creating psychologically safe teams	Maintaining thriving teams	Developing knowledge and skills to foster creative autonomy
Prioritised Wellbeing	Safe environments to promote compassion	Meaningful Inclusion: psychological safety for people from minoritized groups	Ongoing reflective practice and communicating needs
Collaborative Partnerships	Safe environments to genuinely engage people in recovery from experiences of trauma	Working with partners to progress the development of the model	Trauma-responsive commissioning processes in place
Responsive Service Delivery	Shame sensitive practice embedded and understood	Inclusion of people with lived experience to refine/design and deliver services	Services designed to meaningfully engage people and respond to need - doing 'with and not to'.
QUALITY ASSURANCE, MONITORING AND EVALUATION			

---

[7] This 'Safety' stage maps onto BNSSG's principles of Safety, Trustworthiness and Transparency. It also maps onto the Scottish Government's key principles of Safety and Trust from their Trauma-informed practice toolkit (https://www.gov.scot/publications/trauma-informed-practice-toolkit-scotland/pages/1/)

[8] This 'Connection' stage maps onto BNSSG's principles of Collaboration and Inclusivity. It also maps onto the Scottish Government's key principles of Collaboration.

[9] This 'Purpose' stage maps onto BNSSG's principles of Empowerment, Choice and Clarity. It also corresponds to the Scottish Government's key principles of Choice and Empowerment.

Part 4 – Progress, Future Developments and Measuring Change

Measuring change

The development of trauma-responsive practice and the implementation of change management processes can be in themselves 'traumatising' when they are not approached in the correct way. Moving to this way of working involves both recognising and responding to the people who use services in a way that is person centred and responsive. Measuring the improvements made to individuals and whole workforces can be difficult, however this doesn't mean we shouldn't do it. By recognising the impact that we are having we can add to the growing evidence base around what works and share best practice nationally and further afield. Regularly collecting and analysing metrics can provide insights into the effectiveness of efforts to create and maintain psychological safety within a team or an organisation. It's important to use a combination of quantitative and qualitative data to gain a comprehensive understanding of organisational culture and the experiences of team members.

Where do I start?

The Dignifi Organisational Change Model sets out the different steps that need to be taken under each Workstream to ensure the long-term development of trauma-informed practice. As part of the next steps for South Glos it is important to explore the current position, building on the progress made in the foundational year. The guiding underlying principles can be applied to every area of business, however, doing this takes time and thought to ensure that it 'lands' correctly for each department. There are several issues for consideration which can be explored further on pages 24-25 of Dignifi's Organisational Change Handbook. Regardless of the sector, the principles remain the same for individuals working in Council services and commissioned partners – and those who are using services. We can only develop trauma-informed practice by ensuring we have a skilled and regulated workforce.

The Dignifi Organisational Change Handbook can be used alongside this document to support the development of trauma-informed practice across departments. It offers a wealth of information, toolkits and resources that will assist South Glos in developing and embedding trauma-informed practice. To support the ongoing development of trauma-informed practice we have mapped the South Glos's journey against our organisational change model, highlighting progress against each of the areas, whilst collaboratively considering next steps and metrics for measuring future change. It is important to note that trauma-informed practice is a journey and the actions outlined may take some time to complete, nonetheless, working through these actions and sequencing them will ensure that you continue to develop a bedrock for this work to be built upon.

Developing Implementation Working Groups

Evidence from research conducted in the United States[10] highlights the pivotal role dedicated working groups play in successfully embedding trauma-responsive approaches within organisations. The formation of such groups is a critical component in driving systemic change towards trauma responsivity.

Working groups should comprise staff members spanning various roles, departments and hierarchical levels across the organisation. Ensuring equal partnership through the inclusion of staff with lived experience is paramount. These individuals must be involved as co-producers of any outputs generated by the working group.

South Glos has had a Working Group committed to consulting and developing the trauma-informed programme since 2021. Led by the Trauma-informed Practice Specialist, this group of managers from across the Dept for People, and HR has been instrumental in providing a sounding board, communication and insights from across different teams so that the workplan adapts to the changing needs of the workforce.

South Glos are entering a new phase in their journey towards trauma-responsivity. Trauma-informed practice is no longer a new concept for staff. This new phase needs to reflect this increase in awareness and focus on implementation so that staff *feel* differently about the working culture they are part of. Due to the complexity of the task, South Glos may want to establish a working group for each workstream of Dignifi's model of organisational change. In this instance, the primary function of Implementation Working Groups would be to oversee the organisation-wide rollout of each workstream.

For further information on Working Group considerations please see page 24 of Dignifi's Organisational Change Handbook.

---

[10] Treisman, K (2018). Becoming a more culturally, adversity, and trauma-informed, infused, and responsive organisation. Available at: https://media.churchillfellowship.org/documents/Treisman_K_Report_2018_Final.pdf (last accessed May 2024)

Workstream 1 - Compassionate Leadership[11]

Compassionate Leadership and its benefits have begun to emerge post-pandemic. The research, although mainly focussed on the NHS and health services, identifies real cross system benefits to working in this way, whilst offering strategies to promote culture change. Research indicates that Compassionate Leadership increases staff engagement and satisfaction, resulting in better outcomes for organisations, including improved financial performance[12]. Developing a management team that leads with compassion is the first step in creating psychological safety for employees, we have therefore focussed on the development of this with South Glos this year.

Dignifi Model breaks Compassionate Leadership into three key dimensions:
- ✓ Strategic commitment to policy change and action.
- ✓ Empathic and relational inclusion
- ✓ Devolution of control for creativity and co-creation.

Strategic commitment to policy change and action

Measuring an organisation's **strategic commitment to policy change and action** in trauma-informed practice involves assessing its dedication, implementation and impact on policies that support trauma-informed approaches. Toolkit 1 of Dignifi's Organisational Handbook will support this work. The table below offers some proposed metrics to develop practice in this area:

Metric	Actions	Objective
Policy Adoption and Implementation	Support managers and leaders to incorporate trauma-informed practice into policy and practice via workshops and forums	Track the number of trauma-informed policies developed and implemented within the organisation.
Resource Allocation	Ensure the work continues and there is continued investment into the activities as described	Ensure there is investment in the development of this work across departments
Feedback Mechanisms	As the model evolves, create mechanisms to obtain feedback on the impacts	Establish mechanisms for gathering feedback on the effectiveness of trauma-informed policies.
Policy Impact on Client Outcomes	Work on developing a model that describes and identifies impact on people who use services.	Design new ways of measuring client outcomes as a result of trauma-informed policies.
Collaboration with Stakeholders	Consider the appropriateness of pilots with education and commissioned delivery organisations	Collaborate with organisations, particularly those that adopt relational and trauma-informed practice.

---

[11] Each of the following five headings are the five workstreams. The detail is summarised in this document, but for more information, please refer to Dignifi's Organisational Change Handbook.

[12] Moser, K, Dawson, JF and West, MA (2018). Antecedents of team innovation in health care teams. Creativity and Innovation Management. 28 (01), pp. 72-81

Monitoring and Evaluation Metrics	Develop key performance indicators (KPIs) specifically related to trauma-informed policy outcomes.	Develop a process/person to monitor the implementation on KPIs
Staff Feedback on Policy Implementation	Review Dignifi training feedback with regards to organisational challenges of embedding this work.	Efforts should be made to obtain feedback from staff members on the practicality and effectiveness of trauma-informed policies as they are rolled out.
Case Reviews and Continuous Improvement	Create/Develop a structure for case reviews for those delivering services to people	Conduct regular case reviews to assess how trauma-informed policies are applied in real-world situations.
Training Participation Rates	Develop an ongoing training programme that builds on basic awareness and recovery and ensures everyone is trained.	Measure the percentage of staff trained on trauma-informed practice and ensure the whole workforce is trained to the required degree.

Empathic and relational inclusion

The second concept within Compassionate Leadership is **empathic and relational inclusion.** Measuring empathetic inclusion in organisational change can be complex but important for fostering a supportive and inclusive environment. Potential approaches include:

Metric	Actions	Objective
Inclusion and empathy	Develop a change model that will articulate the journey of staff through the organisation and creates milestones to measure against.	Gauge employees' feelings of inclusion and empathy during change processes.
Empathetic inclusion.	Develop pilots of new ways of working. Recommendations would include: Housing and Adults – building on work already completed.	Measure collaboration, communication effectiveness and team morale before, during, and after the change process.
	Create a range of measurement tools as part of any pilots carried out.	Explore specific aspects of the change process and gather insights into how empathy is being practised and perceived.
	Work with HR to look at policy alignment.	Evaluate organisational policies and practices to assess their alignment with empathetic inclusion principles.
	Using Compassionate Leadership model, create assessment of leadership behaviours	Assess leadership behaviours and styles to ensure they promote empathy and inclusivity.
Employee Well-being Indicators	Work with EAP team to develop a more meaningful wellbeing offer for staff.	Monitor indicators of employee well-being, such as absenteeism, turnover rates, and employee satisfaction scores.
	Work on marketing materials that highlight the offer available for staff suffering with identified issues (moral injury, compassion	Reinforce the importance of well-being, promoting use of the well-being services, making changes as required so the service is accessible.

Metric	Actions	Objective
	fatigue, burn out, secondary trauma)	

Devolving control for innovation and co-creation

Psychological safety and empowered choice go hand in hand. The development of 'no blame' cultures will create psychological safety and create environments where they are not afraid of getting things wrong, or where changes to performance are met with compassion, understanding and support rather than blame.

Metric	Actions	Objective
Decision-Making Authority Distribution	Develop an operational model for teams to pilot changing processes that they feel hinder their ability to deliver their role in a trauma-informed way	Support teams to adopt more autonomy, moving away from autocratic ways of working.
Employee Surveys on Decision-Making	Create and distribute a survey that assesses autonomy and barriers to developing creativity in teams	Evaluate or assess through surveys, how empowered employees feel to contribute creatively to the organisation.
Employee Retention and Satisfaction	Identify trends where there is high levels of attrition in teams	Assess employee satisfaction and retention rates.
Employee Training and Development	Work with learning and development to create more learning and development resources ad opportunities that would support development in this area	Assess how the organisation supports employees in developing creative skills.

Workstream 2 - Supportive Teamworking

Dignifi asks organisations to think about developing supportive teamworking by thinking about the following three domains:
- ✓ Developing psychologically safe teams,
- ✓ Maintaining thriving teams and through that...
- ✓ Supporting staff to develop knowledge and skills to foster creative autonomy

Cultivating psychological safety for staff will both support their wellbeing and improve the quality of services provided to the communities and families they serve. To create this safety, BCC needs to acknowledge that regardless of role, each staff member brings their experiences (including any lived experience of trauma) into the work that they do. Trauma cannot be compartmentalised. Functional IQ is at its highest in a state of calm and at its lowest in a fear response. Managers can have a powerful impact on performance, engagement, and retention in creating trauma-responsive practice and cultivating supportive teams.

Creating psychologically safe teams

Creating **psychological safety** is essential for fostering an environment where team members feel comfortable taking risks, expressing their opinions, and being their authentic selves. Measuring psychological safety involves assessing the trust, openness, and support within a team or organisation. Toolkit 2 of Dignifi's Organisational Handbook will support this work. Key metrics to consider include:

Metric	Actions	Objective
Employee Surveys on Psychological Safety	When carrying out well-being and satisfaction surveys, include questions about staff's comfort level in sharing ideas, expressing opinions, and taking risks.	Measure the levels of psychological safety in the organisation.
Trust and Collaboration Metrics to be developed	Develop a metrics to measure trust and collaboration in teams	Measure trust levels within teams through surveys or interviews.
Feedback and Recognition for Vulnerability	Create a working culture where vulnerability is celebrated and encouraged.	Assess the frequency and quality of feedback provided to individuals who demonstrate vulnerability.
Turnover Rates	Create methods to monitor turnover and assess data obtained to identify trends	Monitor employee turnover rates.
Inclusion and Diversity Metrics	Develop an equality and diversity matrix collaboratively with staff.	Assess the organisation's commitment to inclusion and diversity.
Team Satisfaction and Morale	Create a matrix to assess belonging and feelings of support and value in the organisation.	Assess whether team members feel valued, supported, and psychologically safe.

Employee Assistance Program (EAP) uptake and Utilisation	Track the utilisation of EAP services and obtain feedback on the effectiveness and how it can be developed	Collaboratively develop an EAP programme with teams affected by issues outlined.
Learning and Development Opportunities	Offer a range of training courses for staff to explore the concepts in more depth.	Assess whether employees are equipped with the tools to create a psychologically safe environment.
Exit Interview Insights	Create a process for quarterly exit interview reviews to identify trends	Analyse insights from exit interviews regarding the perceived psychological safety in the organisation.
Conflict Resolution Effectiveness	Review current processes for grievances and complaints	Assess whether resolution processes contribute to or detract from psychological safety.

Creating systems to monitor and collect this data will allow you to create an ongoing feedback loop providing insights into the effectiveness of efforts to create and maintain psychological safety within a team or organisation . It's important to use a combination of quantitative and qualitative data to gain a comprehensive understanding of the organisational culture and the experiences of its members.

Maintaining thriving teams

Maintaining thriving teams requires a holistic approach that considers various aspects of team dynamics, well-being, and performance. Key metrics to help assess and measure the health and thriving nature of teams include:

Metric	Actions	Objective
Employee Engagement Surveys	Review current employee satisfaction survey to ensure it covers trauma-informed practice	Conduct regular surveys to measure overall employee engagement and satisfaction.
Team Performance Metrics	Create trauma-informed performance management process	Assess the achievement of team milestones, project completion rates, and quality of work.
Work-Life Balance Metrics	Develop a matrix to ensure staff are preventing burnout, managing workload and to ensure they have a good work and home life balance – identifying when workload is preventing this.	Assess whether teams are maintaining a healthy balance between work and personal life.
Team Diversity and Inclusion Metrics	Create spaces where staff from marginalised groups can share their voice and create feedback loop to ensure actions are taken to incorporate feedback into systems	Assess and monitor psychological safety and inclusivity in teams.
Team Health Checks	Create a team health check matrix	Conduct regular health checks or retrospectives within teams.

Recognition and Appreciation Metrics	Measure the impact of Compassionate Leadership training already delivered and think about next steps collaboratively	Assess the impact of positive Reinforcement on team morale.
Team Member Wellbeing	Assess indicators of team member well-being, such as stress levels and reported burnout.	Manage and prevent burnout and reduce likelihood of stress related absences

Developing knowledge and skills to foster creative autonomy.

When aiming to **foster creative autonomy** and the development of knowledge and skills within an organisation, it's essential to measure progress and effectiveness. Key metrics for consideration include:

Metric	Actions	Objective
Training and Development Participation Rates	Ensure there is a suite of training that allows staff to develop knowledge and skills in relation to trauma-informed practice, where possible ensuring consistency and also ensuring training is tailored to team and departmental need.	Assess the popularity and effectiveness of training programs.
Cross-Functional Collaboration Metrics	Create more effective cross-team and cross-department working.	Evaluate the frequency and effectiveness of collaboration between different departments or teams.
Employee Feedback on Autonomy	Create survey on autonomy for teams that have experienced high levels of secondary and vicarious trauma.	Assess whether employees feel empowered to express and implement their ideas.
Recognition and Rewards for Creative Autonomy	Create a recognition and rewards scheme that is aimed at boosting morale	Assess the impact on motivation and engagement.
Learning Path Completion Rates	Assess and monitor the impact of training packages for staff	Assess the effectiveness of educational initiatives in developing relevant knowledge and skills.
Employee-Initiated Projects	Develop a model for utilising the skills of staff within the organisation.	Assess the impact of employees' self-directed initiatives on the organisation.

Workstream 3 - Prioritised Wellbeing

Wellbeing is a crucial for South Glos in developing a trauma-informed workforce. Developing resilience and reducing the impact of secondary trauma, staff absence/sickness and staff turnover are all key components of developing this model further. Relationship-based practice goes hand in hand with staff wellbeing. How staff relate to the organisation and develop a sense of belonging will not only impact their mental health, it will also impact their performance, productivity and staff retention rates. Building better relationships - which is the cornerstone of any trauma-informed practice model can only be done when staff are regulated and have a healthy window of tolerance[13] that allows them to safely and confidently manage the challenges and complexity that comes as a part of their day-to-day tasks without this indirectly affecting service delivery.

Dignifi asks South Glos Council to think about Prioritised Wellbeing by thinking about the following three domains:
- ✓ Creating safe environments to promote compassion
- ✓ Creating psychological safety for marginalised groups
- ✓ On-going reflective practice and communicating needs.

The following actions will support with developing workforce well-being models that are useful and meaningful.

Creating Safe Environments to Promote Compassion

Creating **safe environments to promote compassion** involves fostering a culture of empathy, understanding, and support within an organisation . Toolkit 3 of Dignifi's Organisational Handbook will support this work. Metrics to consider for measuring the effectiveness of initiatives aimed at creating safe environments for compassion include:

Metric	Actions	Objective
Compassion Climate Surveys	Create and conduct regular surveys to measure employees' perception of the organisation's compassion climate.	Support the development of a compassionate culture and gauge effectiveness of actions being taken.
Incident Reporting Rates	Track the number of reported incidents related to workplace conflicts or issues.	Measure the impact of developing more compassion in teams
Peer Recognition and Feedback	Create peer recognition models and positive feedback loops	Measure the frequency and effectiveness of peer recognition and positive feedback.

---

[13] Window of tolerance refers to a comfort zone where individuals can function effectively, manage stress, and maintain regulation without becoming overwhelmed. For more information on Window of Tolerance please see Dignifi's Trauma Awareness and Recovery Manual.

Emotional Well-being Surveys	Review current survey for trauma-informed practice measures and implement surveys to assess employees' emotional well-being and stress levels.	To ensure we are managing the emotional and mental well-being of the workforce before people reach burnout or health becomes effected more broadly.
Leadership Empathy Index	Creation of 360-degree feedback surveys	Assess the empathy levels of organisational leaders through surveys or 360-degree feedback.
Training Participation Rates	Track the percentage of employees participating in training programs related to compassion and emotional intelligence.	Measure the impact of training models and how they are developing practice with people who use services.
Turnover Rates	Quarterly reviews of exit interviews	Monitor employee turnover rates for reduction
Inclusive Language Usage	Develop working groups that are staff led to agree use of language that is trauma-informed and acceptable	Assess the organisation's commitment to creating a safe and respectful environment.
Conflict Resolution Effectiveness	Review current grievance and complaints policies and how they are approached in practice	Assess whether resolution processes contribute to or detract from a compassionate and safe environment for all..
Client or Customer Feedback	Build questions around compassion into customer feedback surveys	Assess the impact of a compassionate workplace on external relationships.

Meaningful Collaboration: Creating Psychological Safety in the Workplace for Marginalised Groups

Creating **psychological safety in the workplace for marginalised groups** is crucial for fostering meaningful collaboration and ensuring that all employees feel valued and included. Page's 33-35 of Dignifi's Organisational Change Handbook will support with this work. Here are some metrics to consider when assessing and promoting psychological safety for marginalised groups:

Metric	Actions	Objective
Representation Metrics	Ensure these metrics are developed collaboratively and shared with the workforce sensitively.	Assess the diversity at different organisational levels to ensure equitable opportunities.
Employee Surveys on Inclusion and Psychological Safety	Create and conduct regular surveys specifically focused on the experiences of marginalised groups.	Ensure marginalised groups feel supported and included within their roles.
Incident Reporting and Resolution	Review the current process for reporting incidents of discrimination.	Assess the effectiveness of the resolution process in addressing these incidents.

Microaggression Awareness and Training	Create a new training course that is focussed on addressing bias, intersectionality and microaggressions.	Measure the effectiveness of training through pre- and post-assessment metrics.
Inclusive Language Usage	Agree language and terms and ensure this is disseminated widely for consistency	Assess whether language supports psychological safety and inclusivity.
Intersectionality Metrics	Identify areas where individuals may face compounded challenges and tailor support accordingly.	Ensure that there is progress towards supporting marginalised groups to thrive at work
Network and Relationship Building	Assess whether individuals from marginalised groups have access to mentorship and networking opportunities.	Create opportunities for people from marginalised groups to learn, grow and thrive, promoting equity in BCC
Employee Turnover Rates	Quarterly reviews of exit review data.	Assess turnover rates among marginalised groups, looking for trends across departments.
Cross-Cultural Competency Training	Design and delivery cultural curiosity and competence training.	Assess the impact of training on individuals' ability to collaborate across diverse backgrounds.
Inclusive Recruitment Metrics	Collaboratively develop recruitment processes with people from marginalised groups.	Assess the diversity of new recruits to ensure a welcoming and inclusive workplace.

Ongoing Reflective Practice and Communicating Needs

Ongoing reflective practice and effective communication of needs are crucial components of personal and professional development. Suggested metrics to assess and enhance these practices include:

Metric	Actions	Objective
Self-Assessment Surveys	Devise self-assessment surveys for staff that encourages reflection on how well-being affects performance.	Implement regular self-assessment surveys to gauge the individual's perception of their strengths, weaknesses, and areas for improvement.
Reflective Journal Entries	Provide spaces for reflective practice and encourage journaling through that process	Assess the depth of reflection on experiences, challenges, and learning opportunities to create a more reflective compassionate workforce.
Goal Progress Tracking	Review of appraisal processes to incorporate trauma-informed practice.	Set personal and professional goals and track progress over time.
Time Allocation for Reflection	Ensure reflective practice is seen as a priority and preventative measure, rather than a reaction to situations	Measure the amount of time allocated for reflective activities each week.

Workstream 4 – Collaborative Partnerships

Strong partnerships bring together people from a range of backgrounds and sectors to produce meaningful outcomes for people. SGC has a good network of commissioned services and partners that they collaborate with to make lives better for people in the area. Building on this will support SGC to take trauma-informed practice to the next level.

Dignifi asks South Glos to think about collaborative partnerships by thinking about the following three domains:
- ✓ Safe environments to recovery
- ✓ Working with partners to make progress
- ✓ Trauma-informed commissioning

Safe Environments to Genuinely Engage People in Recovery from Experiences of Trauma

Creating **safe environments for individuals recovering from experiences of trauma** is essential for purposeful engagement. Here are some metrics to consider when assessing the effectiveness of efforts to provide a safe and supportive environment for trauma recovery:

Metric	Actions	Objective
Trust in Support Systems	Develop a trust matrix that gives communities and people who use services a voice in shaping the future of systems.	Assess the level of trust individuals have in support systems, including therapists, counsellors, and support staff.
Quality of Therapeutic Relationships	Develop a relational trauma-informed behaviours checklist that is pertinent to the role/work being delivered.	Assess the quality of therapeutic relationships through feedback from individuals and staff.
Empowerment and Choice Metrics	See previous action. This assessment should assess levels of psychological safety, quality of relationships and sense of direction/purpose and ability to move on.	Measure the extent to which individuals feel empowered and have a sense of control over their treatment decisions.
Trauma-informed Training Participation	Continue to offer training to partners and commissioned services, taking everyone on the journey with you.	Track participation rates in trauma-informed training for staff.
Safety Planning Effectiveness	Ensuring robust safety planning, whilst avoiding excluding people for safety reasons.	Assess the prevalence of trauma-informed practice in safety planning processes in place and adapt accordingly.
Use of Coping Strategies	There are a range of tools that can be used to measure the impact of interventions on coping strategies and trauma symptoms. See page 55 – 58 of	Monitor the use of healthy coping strategies among individuals in recovery.

	the Dignifi Handbook for more details.	
Feedback on Physical Environment	Create a questionnaire that offers feedback on environment.	Gather feedback on the physical environment's impact on individuals' sense of safety.
Trauma Symptom Reduction	There are a range of tools that can be used to measure the reduction of trauma symptoms over time. See page 58 of the Dignifi Handbook for more details.	Track changes in trauma symptoms over time.
Crisis Response Effectiveness	Conduct a review of response to recent critical incidents so professionals and leaders on the ground are better equipped to manage future situations.	Evaluate the effectiveness of crisis response protocols in place and amend those protocols to reduce re-traumatisation for staff and communities.

Working with Partners to Progress the Development of trauma-informed approaches

When measuring **partnership working** on trauma-informed practice, it's essential to assess the effectiveness of collaboration, communication and the impact on individuals affected by trauma. Potential metrics include:

Metric	Actions	Objective
Cross-Organisation Training Participation	Continue to offer cross-sector training	Measure the participation rates of staff from partner organisations in trauma-informed training.
Consistency in Language and Approach	Create a trauma-informed working group that will agree terms of reference	Evaluate the consistency in the use of trauma-informed language and approaches across partner organisations.
Joint Policy and Procedure Development	Continue to adopt joint policy and procedure development	Measure the development and adoption of joint policies and procedures related to trauma-informed practices.
Joint Outcome Measures	Develop joint outcome measures that align with trauma-informed practice goals.	Review effectiveness of joint outcome measures with trauma-informed practice goals.
Crisis Response Collaboration	Collaborate with grass roots and community organisations to develop critical response procedure.	Assess the effectiveness of collaborative crisis response protocols.
Community Feedback	Conduct regular community feedback meetings biannually to ensure there is a regular multi-agency presence and voice for communities to feed into the work of the council and access opportunities.	Gather feedback from the community about the partnership's impact on trauma-informed services.

Client Outcomes	Develop agreed measurement tools for trauma-informed practice.	Measure individual outcomes related to trauma recovery and well-being.
Integration of Lived Experience	Develop a lived experience strategy that supports the development of people services.	Assess the degree to which survivor perspectives are integrated into the development and evaluation of trauma-informed practices.
Cost-Effectiveness of Collaboration	Cost benefit analysis evaluations that cover the multitude of activities across the South Glos will support the development of this work further and highlight the benefits of future investment.	Evaluate the cost-effectiveness of collaborative efforts in implementing trauma-informed practices.

Trauma Responsive Commissioning Processes

Trauma-informed commissioning processes involve the integration of trauma-sensitive practices into the planning, design, and evaluation of services. Toolkits 4&5 of Dignifi's Organisational Handbook will support this work. Metrics to consider when assessing the effectiveness of trauma-informed commissioning processes include:

Metric	Actions	Objective
Inclusion of Trauma-informed Principles in Commissioning Documents	Embed the trauma-informed toolkit into practice in commissioning teams.	Evaluate the extent to which trauma-informed principles are included in commissioning documents and guidelines.
Participation Rates in Trauma-informed Training	Ensure there is regular training and a working group within commissioning to oversee the future of this work.	Measure the participation rates of commissioning staff and service providers in trauma-informed training.
Provider Compliance with Trauma-informed Standards	Work with suppliers to complete self-assessment on trauma-informed practice. See Toolkit 6 on page 53 of Dignifi's Org Change Handbook.	Assess the compliance of service providers with trauma-informed standards outlined in commissioning documents.
Trauma-informed Language in Commissioning Communications	Embed the trauma-informed toolkit into practice in commissioning teams. See Toolkit 4 of Dignifi's Org Change Handbook	Evaluate the use of trauma-informed language in commissioning communications and materials.
Community Collaboration Metrics	Create processes to capture inputs from people who use commissioned services.	Assess the level of collaboration with community organisations, advocates, and survivors in the commissioning process.
Trauma-informed Policies and Procedures	Embed the trauma-informed toolkit into practice in commissioning teams.	Assess the development and integration of trauma-informed policies and procedures within commissioned services.
Accessibility for Marginalised Populations	Develop a way to ensure that delivery organisations will meet the needs of marginalised	Evaluate the accessibility of commissioned services for

	groups, ensuring full accessibility.	marginalised populations, including those with intersecting vulnerabilities.

Workstream 5 - Responsive Service Delivery

People using services are often in difficult and traumatic situations and developing sensitivity to this can only come when other workstreams have been developed. How we relate to others is about having time and space to undertake difficult and considered work. South glos should endeavour to create psychological safety for staff and service users alike, treating people with dignity and respect in all interactions.

Dignifi asks South Glos Council to think about responsive service delivery by thinking about the following three domains:
- ✓ Shame sensitive and relational practice
- ✓ Inclusion of people with lived experience to refine/design and deliver services.
- ✓ Services designed to meaningfully engage people and respond to need - doing 'with and not to'

Shame sensitive practice and BNSSG's 5R's knowledge and skills framework is embedded

Shame-sensitive practice involves creating environments and approaches that are attuned to individuals' experiences of shame, aiming to minimise shame triggers and foster a sense of safety and understanding. Toolkit 5 of Dignifi's Organisational Handbook will support this work. Here are some metrics to consider when assessing the effectiveness of shame-sensitive practices:

Metric	Actions	Objective
Client Feedback on Shame Sensitivity	Gather qualitative feedback on whether individuals feel their experiences of shame are acknowledged and respected.	Measuring the prevalence of shame sensitive practice.
Incident Reporting Related to Shame Triggers	Ensure that shame is identified as a trigger for incidents of disengagement and/or negative behaviour.	Evaluate the effectiveness of response mechanisms and preventive measures.
Use of Trauma-informed Language	Evaluate the use of trauma-informed and shame-sensitive language in written materials and verbal communication.	To ensure the development of trauma-informed practice.
Staff Training and Education Participation	Follow up questionnaires for staff who have attended training to be carried out.	Assess the impact of training on staff's ability to recognise and respond to shame triggers.
Accessibility Metrics	Review environments, policy and practice to remove or reduce any shame inducing activities or approaches	Evaluate whether the organisation has removed barriers that may exacerbate feelings of shame.

Client Empowerment Metrics	Develop metrics to assess the level of client empowerment within the practice.	Assess the level of client empowerment and shame sensitivity within the practice.
Frequency of Trauma-informed Supervision	Review/develop supervision to create space for case discussions and the prevalence of shame on engagement.	Assess the impact of supervision on staff's ability to navigate shame-sensitive situations.
Cultural Competency Metrics	Ensure when considering shame, this is linked to race, equality and diversity.	Assess whether practices are sensitive to diverse cultural perspectives.
Referral and Transition Success Rates	Pilot a project or area of practice to test a shame sensitive approach and its impacts.	Evaluate whether individuals experience a seamless and shame-sensitive transition between services.
Data on Stigma Reduction	Review the current messages around trauma-informed practice through the lens of shame sensitivity to ensure messaging is not shame inducing.	Evaluate whether shame-sensitive practices contribute to reducing societal and self-stigma.

Inclusion of people with lived experience to refine/design and deliver services.

Incorporating lived experience into service design is crucial for creating programs that truly meet the needs of individuals. Here are metrics to consider when evaluating the inclusion of lived experience in service design:

Metric	Actions	Objective
Representation in Design Teams	Develop team processes around user voice and make this a priority next step as policy and procedure is refined to meet need.	Evaluate whether diverse perspectives are actively involved in decision-making processes.
Diversity of Lived Experience Voices	Ensure there is a wide representation of voices across opportunities for lived experience consultation activities	Longer term - assess the diversity of lived experiences represented in the design process.
Incorporation of User Feedback	Develop methods to track where information goes so people not only have a voice, but they can see that their voice has been heard in the development of changes.	Evaluate the extent to which user feedback, especially from those with lived experience, is incorporated into service design iterations.
Impact on Client Outcomes	Through the development of pilot projects, collect data to assess the impact of client involvement on their longer-term outcomes.	Evaluate whether services designed with lived experience input lead to improved outcomes.

Incorporation of Trauma-informed Practices	Develop a strategy that considers the journey of developing services with people	Ensure that services are sensitive to the potential impact of trauma.
Evaluation of Pilot Programs	Create a set of KPIs specifically related to trauma-informed practice in the department where it is applied to test effectiveness.	Assess the success of pilot programs designed with input from lived experience.

Services designed to meaningfully engage people and respond to need - doing 'with and not to'

When designing **services that meaningfully respond to needs**, it's essential to establish metrics that measure the effectiveness and impact of these services. Metrics to consider include:

Metric	Actions	Objective
Feedback Mechanisms	Implement real-time feedback mechanisms (e.g., suggestion boxes, online feedback forms) to allow clients to provide input on their ongoing needs and service experiences.	Obtaining ongoing feedback.
Service Accessibility Metrics	Develop Accessibility matrix that considers trauma and symptoms of trauma	Assess the accessibility of services to different demographics and groups.
Incorporation of Client Preferences	Develop a model for building feedback from service users into the model.	Assess whether services are tailored to individual preferences and needs.
Surge Capacity	Giving managers autonomy to manage need and capacity in teams as challenges arise.	Assess the ability to respond to increased needs without compromising service quality.
Outcome Measures	Create an outcome matrix for your service to assess impact	Evaluate the impact of the services on desired outcomes related to the identified needs.
Repeat Engagement Rates	Create systems for monitoring repeat engagement.	Assess whether individuals return to the services for ongoing support or have their needs met in a single interaction.

Summary

The journey towards becoming a trauma-responsive organisation is one that we anticipate will take at least a decade for South Glos Council given its size and complexity. We are committed to supporting you on that journey. This model of working recognises that trauma and adversity can be experienced in many different forms and often layers up. It is intrinsic in our systems and none of us are exempt from this.

Removing the stigma that is associated with experiences of trauma will create spaces where people can open up about their feelings and access the right support and it will give SGC's staff the recognition and support they need to carry out what can be very difficult roles. Dignifi will continue to work with you to pioneer innovative and new ways of supporting staff and delivering services.

Embedding trauma-responsive practice requires continuous evaluation, learning, and improvement. At Dignifi, we are committed to adopting robust quality assurance processes that allow us to measure and monitor the impacts of this approach on the workforce, service users, and the wider community. By collecting and analysing a diverse range of data, both quantitative and qualitative, we can capture the multifaceted effects of trauma-responsive practice.

References

- Ellis W & Dietz W (2017) A New Framework for Addressing Childhood and Community Experiences: The Building of community Resilience (BCR) Model, *Academic Paediatrics 17 (7) pp. 86-93.*
- Felitti VJ, Anda RF, Nordenberg D, Williamson DF, Spitz AM, Edwards V, Koss MP, Marks JS. Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. Am J Prev Med. 1998 May;14(4):245-58.
- Figley, C.R (2020). Compassion fatigue: Psychotherapist's Chronic Lack of Self-care. Journal of Clinical Psychology, 58 (11), 1433-1441
- Gabor Mate (2022) The Myth of Normal: Trauma, illness and healing in a toxic culture. London, Vermillion.
- Lamb D, Gnanapragasam S, Greenberg N, *et al. Occup Environ Med* 2021;78:801–808.
- NHS England (2018) Employee Engagement, Sickness Absence and Agency Spend in NHS Trusts. The King's Fund
- Moser, K, Dawson, JF and West, MA (2018). Antecedents of team innovation in health care teams. Creativity and Innovation Management. 28 (01), pp. 72-81
- Quality of Life Report (2023) South Gloucestershire Council: http://www.ourareaourfuture.org.uk/wp-content/uploads/sites/21/2024/02/Quality-of-Life-Report-2023-Final-Draft.pdf (Last accessed June 2024)
- South Gloucestershire Council Takling Inequalities Plan 2024 - 2028 https://beta.southglos.gov.uk/static/5aed2bddea503ee043a106435d6253af/Tackling-inequalities-action-plan-24-28-web.pdf (Last Accessed June 2024)
- Substance Abuse and Mental Health Services Administration (2014). SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration
- Treisman, K (2018). Becoming a more culturally, adversity, and trauma-informed, infused, and responsive organisation. Available at: https://media.churchillfellowship.org/documents/Treisman_K_Report_2018_Final.pdf (last accessed May 2024)
- West et al. (2017) Caring to Change. How Compassionate Leadership Can Stimulate Innovation in Health Care. The King's Fund
- West, M., Lyubovnikova, J., Eckert, R. and Denis, J.-L. (2014) Collective leadership for cultures of high-quality health care", Journal of Organizational Effectiveness: People and Performance, Vol. 1 No. 3, pp. 240-260

Resources to Support Ongoing Development

- The Dignifi Organisational Change Handbook (insert link)
- BNNSG Trauma-informed practice Framework: https://bnssghealthiertogether.org.uk/wp-content/uploads/2024/02/BNSSG-Trauma-Informed-Practice-Framework-2024.pdf
- For more information on South Glos's Trauma-informed Ambassador network please contact trauma-informed@southglos.gov.uk