



**CHCMHS007**

**Work effectively in trauma**

**informed care**

Assessment Part Two

## **Acknowledgements**

*Community Mental Health Australia (CMHA) acknowledges the traditional custodians of this land.*

CMHA acknowledges and greatly appreciates the funding provided by the National Mental Health Commission (NMHC) for the Mental Health Peer Work Qualification Development project.

CMHA acknowledges the work of co-authors Michelle Everett (Adults Surviving Child Abuse, ASCA), Deborah Wells, Mary O’Hagan and Indigo Daya.

CMHA acknowledges the work of Simone Montgomery (Learning and Development Manager, Mental Health Coordination Council), Chris Keyes



(Project Manager, Mental Health Coordination Council) and lead content developer Gillian Bonser (Paradigm Consulting Network) and the invaluable contribution of the reference group members who have worked on this project.

Additional materials editing and contextualisation have been included by **Rowe Training and Consulting** for the exclusive use of students in CHCMHS007 WA1/Assessment Tool (2019) Assessors Guide

## Assessment Overview

Assessment	Description
<p><b>Assessment Part</b></p> <p><b>Two Task 2</b></p> <p>Story of practice</p>	<p>Workplace Task where you use your experience of people you have supported in your role as a peer worker to create a story of practice and answer a series of short questions. These cover how experience of trauma was identified, how you considered culture, safety, triggers and evaluation of practice.</p>
<p><b>Assessment Part</b></p> <p><b>Two Task 3</b></p> <p>Research project</p>	<p>You are asked to carry out research to find the current policies, standards and guidelines related to trauma and trauma-informed care in the Northern Territory and Nationally and explain the implications for this on your peer/carer worker role.</p>
<p><b>Supplementary</b></p> <p><b>Evidence</b></p>	<p>Supervisor report</p> <p>The assessor will have an interview with the workplace supervisor to discuss the candidate's workplace performance.</p>

**Rationale for Workplace Simulation: Respecting the Rights and Privacy of Children and Young People**

This unit has been assessed using a combination of theory tasks, workplace tasks and workplace simulation. To honour the rights of the child/young person to privacy some aspects of the workplace task are designed as a simulation. This decision reflects two key foundations of the National Framework

for Protecting Australia's Children 2009 – 2020, NT Children's Charter of Rights, UN Convention on the Rights of the Child and National OOHHC Standards.

The rights of the child are also reflected in the ECA Code of Ethics:

I. In relation to children, I will:

1. Act in the best interests of all children.

2. Respect the rights of children as enshrined in the United Nations Convention on the Rights of the Child (1989) and commit to advocating for these rights.

II. In relation to families, I will:

10. Maintain confidentiality and respect the right of the family to privacy.

Addressing trauma issues is a sensitive task which requires working with the child or young person over a long period of time. In this instance a simulated workplace task can provide sufficient evidence of the learner's skills and knowledge to meet the performance evidence requirements.

## **Assessment task 2: Story of practice**

**Instructions:** You are asked to use your experience of people you have supported in your role as a residential or out of home care carer/ worker to create a story of practice and answer a

series of short questions. These cover how you have worked from a trauma informed care practice, Utilised self-care strategies and Contributed to the continuous improvement of trauma informed care in services.

### Story of practice

- a) Describe a young person you have worked with from a culture different from your own, who has experienced trauma and key principles of TIC you have applied to planning their care demonstrating your cultural competence.

The 9 years young girl who belongs to an indigenous culture was suffering from the complex trauma of prolonged childhood negligence. The person felt isolated during his childhood which can conduct a lifelong psychological complexity of the person. Therefore, the person could not adapt to the environment of his professional life. The person also suffered from low self-esteem and maintaining relationships. Culturally-sensitive trauma-informed care is applied to the person as it involves acknowledgement and respect and integrates a person's cultural values and his/her. It is important to understand the cultural variations and try to reduce the traumatic stress of the person. Additionally, it is essential to recognise the role of beliefs during the recovery process. As a citizen of Australia, I am aware that people have different needs which are determined by their cultural backgrounds. Australian people provide high value in generating relationships and friendships. A relaxed and casual way of greeting someone as an Australian individual helps to connect easily with other cultures.

Core principles of TIC: The core principles of Trauma Informed Care are developing safety and trust, providing an opportunity for choice, impactful collaboration, and empowerment as well as showing respect for diversity to every individual patient.

Application of TIC principles in patient care: It is important to maintain both physical and emotional safety within patient care. However, the privacy of the patient needs to be respected

and maintained by a trauma care worker. As a trauma care worker, I maintained the choice of my patient and accept his control by following the principles of TIC. Communicating with peers about the problem of my patient was also a part of TIC principles. It is important to generate task clarity and maintain consistency for a trauma care worker. I also prioritised my empowerment and focused on improving my skills building

✓ Great

As this is to be completed from your experience of a child you have in your care, you will have to use the same example all the way through the assessment.

b) Explain how you have responded to any disclosures of past and/or current trauma using principles of TIC.

The young child stated that she was suffering from a complex trauma as she experienced isolation and homesickness. She identified me, who gave support to her and arranged a way of reducing her stress. She discussed the traumatic event with me as peer support which is one of the key principles of TIC. Prioritising self-care is also an effective way of responding to trauma and reducing the effect of trauma (Salemeet *al.*, 2023). However, she could not get rid of that trauma as she dreamed of those events very often. I stated to the young child that she needs to

give priority to her feelings and tried to reduce her excessive sleeping and the tendency of isolating himself. It is important to remember that it is common to have a strong reaction to deplorable incidents. Henceforth, I helped him to keep her patience to handle her stress and reduce stress.

c) Explain how you promoted safe environments, control, choice and autonomy.

I promoted a safe environment by maintaining the key responsibilities that have been mentioned in the TIC principles. The key responsibility of these principles is to protect the worker by ensuring their health and safety of the patients. Additionally, the principles promote how to improve safety outcomes and reduce compliance costs. The other object of the principles is to develop efficiency for major regulatory agencies. I supported a young child who has experienced stress with trauma issues. I discussed her issues with the higher management and tried to reduce her stress issues. I encouraged the autonomy of the young girl by supporting a growth mindset, building trust, generating effective communication, providing support to others and assessing them to set goals.

✓ Good

d) Describe their strength and resilience. Coping strategies and adaptations.

**Strengths and resilience of the process of promoting a safe environment:** The principles of TIC set out the legal environment that determines the standards for developing a healthy and safe environment (Jacob *et al.*, 2019). It assures that care workers must take initiatives to protect the health of the individuals. The act provides legal protections to affected patients and raises awareness about mental health as well as physical safety. I can establish a safe environment by implementing the principles of TIC as it helps to gauge my knowledge, opinions and confidence.

**Coping strategies and adaptation:** Seeking help from a supportive individual is a great way of coping with trauma (Jacob *et al.*, 2019). As an example, Robbie communicated with his friend Jane about the cause of his trauma. Another way of coping with trauma is to meditate and exercise. The young girl can communicate with her friend about her behaviour and take suggestions from them about controlling her behaviour.

e) Describe how you have responded to behaviour of distress related to trauma using TIC principles

**A feeling of depression:** I told the affected child to talk with me about sadness and anxiety. As a care worker, it is also important to give time to the young girls, spend a little time with her and enjoy time together. The combination of medication and therapy helped the affected individual to reduce the traumatised disorder (Poyrazet *al.*, 2021).

**A feeling of loneliness:** I motivated her and recognised her strengths and told her to remove her feeling of loneliness. I was also trying to manage her behaviour and the manners that will help her to connect with other people. It is important to assure the child that she is unique and is safe to reduce the distress (Poyrazet *al.*, 2021).

**Poor concentration:** I also told her that yoga and meditation were the two great ways to manage her problems and reduce her behavioural issues (Canh, 2021). It also removes the sleeping difficulties of the young girl.

f) Describe the strategies you used to support and assist them on their recovery journey.

**Provide support by active listening:**

Active listening is important to understand the affected individuals. It involves focusing on the shared words by the affected individual (Di Giuseppe *et al.*, 2020). I listened to her words and tried to understand her inner thoughts.

**Supporting the need for private space:** It is common to develop the fear of safety after a traumatic incident. The child can feel anxious and stressed. So it is essential to be mindful of the affected individual's personal space (Di Giuseppe *et al.*, 2020). I also gave a private space to her in the middle of each session that helped her

**Assisting to select effective support options:** I can collaborate to assist the affected individual to choose a support option that can fulfil their needs. I inform the girl about the available support such as Face-to-face trauma counselling by the specialised team and telephonic counselling by the counsellors that can motivate and encourage them.

g) What did you do to minimise the risk of re-traumatisation for the child or young person?

I observed the symptoms of re-traumatisation of the young person then I communicated with him about the symptoms. The person was suffering from nightmares, anxiousness, difficulty concentrating, trouble sleeping and fatigue.

**Clinical evaluation:** Clinical evaluation aims to understand the person's psychological demands. I helped the person to start a conversation about a similar topic and establish a routine to offer safety.

**Recognizes the potential triggers:** I also helped the person to identify the triggers that made them feel unsafe and prioritise the consent of the person. It is important to avoid generating assumptions and make space to give relaxation to the affected person.

**Create transparency:** I tried to be transparent with the affected person and ask for permission before touching the person along with explaining every action before generating it. I had a collection of trauma helpline numbers that helped the affected person recover easily

h) How did you manage and apply self-care strategies any risk of vicarious trauma?

**Understanding the signs of vicarious trauma:** I experienced a feeling of anger when I connected with the trauma survivor. The young girl misbehaved with another person, including me, which also developed a stress factor in my mind. Additionally, I felt like I was becoming overly involved with the affected person. I lost my hope, cynicism and pessimism during the treatment of the affected individual. Avoid listening any story of a traumatic incident is also a

symptom of vicarious trauma. I also faced difficulties in managing my professional boundaries and I tried help more than my actual responsibility of managing an affected person.

**Strategies to reduce risk of trauma:** I felt that I am suffering from dangerous trauma hence I was trying to follow a few coping strategies to diminish the risks. I was taking care of myself emotionally by increasing my activities in relaxation as well as self-care. Looking after mental and physical well-being is important to reduce stress and imagined trauma. Additionally, maintaining a healthy professional and personal life balance is also important to manage the effects of vicarious trauma. I took support from peers and opportunities to cross-examine my symptoms and communicate with them about how I can reduce my stress.

i) How do you know that your practices were effective in supporting this child or young person?

**Reviewing the improvement of the affected individual:** I discovered that the affected individual was happily living his present situation and regaining his sense of safety. Regaining a sense of safety is a significant symptom that denotes the recovery of a person from trauma as it establishes physical as well as emotional stability. The person gained self-confidence and wanted to make his life decisions more confidently.

**Reviewing practices:** It is important to review the practices by seeking feedback from other colleagues and the affected individuals. I also reviewed the documentation of the individual and observed how much progress has been generated.

j) Describe how you reflected and contributed to continuous improvement of trauma informed care practices in your service. (Include any identified opportunities for improvement, Barriers to implementing improvements and reports/referrals to Supervisors, participation in policy development, participation in service self-assessment or quality improvement planning e.g. inviting and responding to client/young people's feedback.

I got support from my colleagues and peers that helped me to come out from the vicarious trauma and enhanced my progress in working with the affected individual. My personal strategy such as active listening skills helped me to improve my communication abilities. However, lack of time management created obstacles to managing the balance between my personal and professional lives that generated stress for me. Additionally, a lack of critical thinking skills also generated the risk of repeated mistakes and poor decisions. However, I participated in the development of organisational policy and planning for quality development. My effective communication skills and active listening abilities ensure an effective response to my client's feedback.

### **Assessment task 3: Research Project**

Research and list the current information practices policies, standards and guidelines related to trauma and trauma-informed care in your service and the Northern Territory and Nationally.

Include information

- Specific legislative requirements (List Acts/Laws and Regulations or Standards, Policy Frameworks, Codes of Practice, Discrimination/Inclusion Acts/Policies, Human Rights (Charter of Rights, Mandatory Reporting and Informed Consent)
- About gender differences in the application of trauma informed care,
- Common beliefs and attitudes towards people who experience interpersonal violence and how this impact on their access to services.
- Prevalence of trauma in the general population and with service users
- Impacts of traumatic events that occur when accessing or receiving services (including compulsory treatment, seclusion and restraint)
- Referral options and resources available to support self-advocacy ( support children/young people to speak and act and make decisions for themselves) Records Management of child or young persons information files and sharing of files between services.

In the second column in your own words, explain how this might affect your practice as a Residential or Out of home Care Carer/Worker.

<b>Legislation, Standards and Guidelines</b>	<b>Implications (how are they applied) for Residential/ Out of Home Care Carer/Worker</b>
<p>The 2007s Mental Health Act is responsible for providing care treatment for individuals who are suffering from mental illness along with traumatic disorders.</p> <p>The 6 core principles of trauma-informed care include the development of a safe environment, trustworthiness, transparency, providing peer support, effective collaboration and fostering mutuality, supporting empowerment, managing cultural issues and giving priority to the voice and choice.</p> <p>Trauma-informed care needs to identify the violence, make an initial response, generate safety, and risk assessment and provide support along with counselling to the affected individual.</p>	<p>I will ensure that I follow all the regulations of the national guidelines for trauma-informed care that involves safety, collaboration, empowerment, choice as well as trustworthiness. I will assist the young girl until she completely recovers from her trauma.</p> <p>I also will anchorage my co-workers to maintain the guidelines of the trauma-informed care policy.</p>

<b>Gender Differences In applications of Trauma Informed Care</b>	<b>Implications for Residential/ Out of Home Care Carer/Worker</b>

Gender discrimination is one of the major factors in the application of trauma-informed care. Females who experience trauma are more likely to suffer additional harm but they stay away from taking medication. Traumatized female individuals are generally at higher risk of several clinical disorders including depression, PTSD, self-harm and other personality disorders than men. Approximately 1 in 3 young males has experienced a mental health disorder at the age of 16-24. Additionally, 46.6% of females suffered from any kind of mental health disorder in Australia in 2021.

Gender-specific policies recognize the fact that practice adopted towards different genders should be as per the difference in gender. As gender plays an important role in the mental health and how the issue can be addressed.

I will follow the policies of Trauma Informed Care and treat every person as an equal. I will avoid making assumptions and never restrict the care I will provide to the young girl based on gender.

Rather I need to understand the role of gender and how each gender either it is Male, Female, transgender or other respond to mental health.

When addressing to different gender I need to understand the difference in perception, experience and need of different gender, in order to provide a successful mental health support.

<p><b>Common beliefs and attitudes towards people who experience interpersonal violence and how this impact on their access to services.</b></p>	<p><b>Implications for Residential/ Out of Home Care Carer/Worker</b></p>
<p>Interpersonal violence is rare or it doesn't affect many people or people don't need a treatment for such things.</p> <p>Violent behaviours can act as a category of aggressive behaviour. People pretend in a way that they are quite different from normal people. Interpersonal violence is responsible for generating depression, anxiety, chronic</p>	<p>The affected individuals need to be motivated and it is important to show proper respect to them. As they have isolated them it's important to understand their behaviour and provide them proper space. Additionally, it is important to increase awareness about mental illnesses that come from interpersonal violence which can be increased by the wrong behaviour of</p>

<p>mental disorder, suicidality and post-traumatic stress disorder. The affected individuals try to isolate themselves from society and become aware of them to get access to any services.</p>	<p>people toward them. The increased awareness can help the young individual by reducing the chances of re-traumatisation.</p> <p>It's important to understand the individual has PTSD or Complex PTSD to be able to provide a proper plan for support.</p> <p>In such situation it gets important to provide safety and awareness to the individual. Try to soothe the physiological responses and provide care via listening to the individual words. Connecting them to family and friends and empowering them via a collaborative effort.</p>
<p><b>Prevalence of trauma in the general population and with service users</b></p>	<p><b>Implications for Residential/ Out of Home Care Carer/Worker</b></p>
<p>As per many surveys, around 70% of the general people have been exposed to any kind of traumatic incident. Psychological trauma is increasing across society. Additionally, almost 34% to 54% of service users seek help to get rid of trauma and mental health distress. Mental health distress can arise due to</p>	<p>I will try to serve as many people as possible and spread the importance of leading a healthy lifestyle among them. The increased awareness can prevent other children from suffering any kind of mental illness like the young girl. Individual are emotionally attached to such incidences and it could be hard for me to</p>

<p>childhood sexual and/or physical abuse.</p>	<p>function as a care worker with them without a proper plan to keep myself in check. As responding or working with such individual can affect my own state of mental wellbeing in long term, it's important for me to keep my emotions in check and practice the TIC principles.</p>
<p><b>Impacts of traumatic events that occur when accessing or receiving services (including compulsory treatment, seclusion and restraint)</b></p>	<p><b>Implications for Residential/ Out of Home Care Carer/Worker</b></p>
<p>Initial reactions to traumatic services involve can create sadness, exhaustion, anxiety, numbness, confusion and physical arousal. While children reactions involve vulnerability, neglect, shame and mostly fear.</p>	<p>I will motivate and encourage the young girl as most of the responses are quite natural as the factors impact most of the survivors. With children such situations are often more complex as if they feel pressurized or vulnerable in any way they might start hiding things out of fear. To avoid this I prefer to building a strong friendly and playful connection first before getting to the root cause of the things.</p>

<b>Referral options and resources available to support self-advocacy (support children/young people to speak and act and make decisions for themselves. Records Management between services.</b>	<b>Implications for Residential/ Out of Home Care Carer/Worker</b>
<p>The major self-advocacy resources include SARU or Self-Advocacy Resource Unit, Voices Together and People with Disability. Voices Together provide music therapy and many other therapies to the affected people.</p>	<p>I will motivate the affected young girl and encourage their self-awareness. I also allow the individual to solve their problem on their own and reward them for solving the problem.</p>

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## **Assessment Outcomes**

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Assessor Comments/Feedback to student:

Grading for this Assessment Task:

Assessors Name:

Assessors Signature:

Date:

## **Resubmission Assessment Outcomes**

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Grading for this Assessment Task:

Assessors Name:

Assessors Signature:

Date: