# WISDOM FROM HOUSING













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# **EXECUTIVE SUMMARY**



# **EXECUTIVE SUMMARY**

#### Trauma-informed approach in Caredig

In 2019, Caredig began a journey to become more trauma-informed in the way they deliver services and provide support for tenants, service users and staff. A trauma-informed approach is one which recognises the impact of trauma<sup>1</sup> in all areas of an individual's life. Increasingly, trauma-informed is being seen as less of a list of ways to do things differently, but instead it is a way of being. In a service delivery context, it centres safety, reliability, trustworthiness, choice and agency. We were asked to investigate staff and tenant experiences of this approach.

#### **Conversations with staff and tenants**

This report is based upon conversations with 31 tenants and 40 staff members in the summer of 2021. Tenants were asked to talk about their experiences of Caredig. Staff were asked what changes, in relation to the introduction of a trauma-informed approach, they felt had occurred within Caredig over the previous two years.

#### Staff find trauma-informed approach helpful

There was strong evidence that staff found a trauma-informed ap-proach helpful in their interactions with tenants. An understanding of the impact of trauma helped them to offer more targeted support, resulting in more successful interventions and help people build their confidence.

#### Staff have concerns about process of change;

However, staff had mixed feelings about the process of change itself. Although a trauma-informed approach was seen as offering helpful strategies to improve team working and staff management, some staff felt unsupported in meeting the new demands of trauma-informed work.

#### **Tenants expressed satisfaction with support**

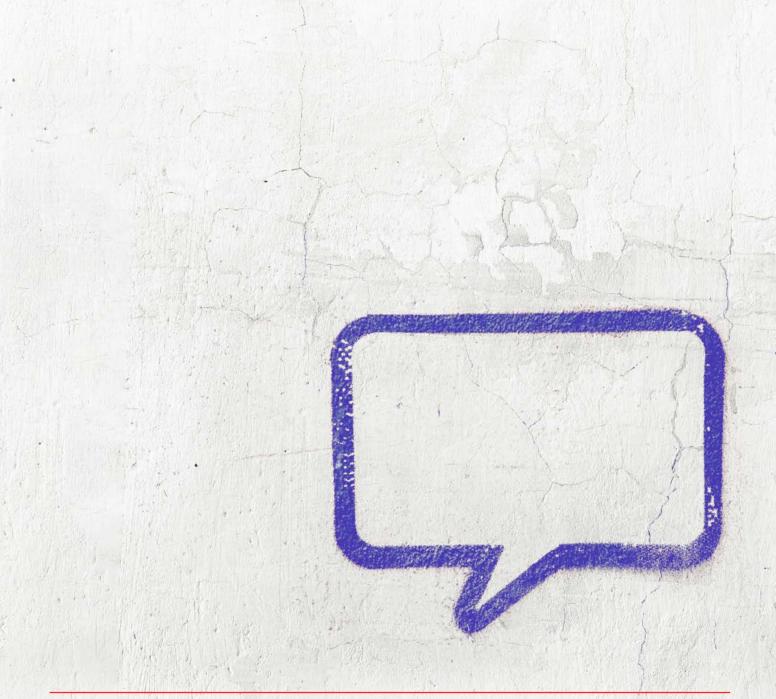
Tenants did not specifically reflect upon the process of change in terms of introduction of trauma-informed ways of working. However, overall there were high levels of satisfaction with their relationships with staff and most felt both happy and listened to as tenants of Caredig.

<sup>&</sup>lt;sup>1</sup> SAMHSA describes individual trauma as resulting from "an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being."

# **EXECUTIVE SUMMARY**

#### Recommendations: Staff training; Strategic decisions; Resource planning

The report makes three recommendations. First, there needs to be a focus on appropriate ongoing training. While the initial training which some staff had been offered was well regarded, staff felt that they needed more support to enable them to implement this successfully in their specific roles within Caredig. Second, a trauma-informed appraisal of staffing practices would be beneficial. While a trauma-informed approach had clearly influenced attitudes to staff management, workers reported that strategic decisions were not always consistent with minimising distress to either staff or tenants. The principles of a trauma-informed understanding should therefore be integrated into resource planning. Third, recognising that working with trauma and distress places considerable emotional demands upon staff, staff needs should planned for and resourced appropriately, to enable staff to maintain their own emotional health and to avoid disengagement and burnout.





### **FOREWORD**



System change is never easy, especially when that change is in the context of complex, human relationships. There are so many things to change that there can be a sense of paralysis – it is too big we might say, to change.

Only by forming partnerships can we begin to tackle these big challenges. On this basis, the New System Alliance was created, aimed to bring organisations and people together who recognise that we are working in broken, traumatising systems. The aim is to create a space where we can move to a person-led, transitional and strengths-based way of being – and we can't do any of that without being trauma informed.

This led to the first New System Alliance partnership work in Wales, a deep listening exercise with Caredig Housing Association, to establish how system change – specifically with a trauma informed focus – can feel to people on the ground.

This is that work.



### **HOW DO WE CHANGE?**



For mental health and social change Dros iechyd meddwl a newid cymdeithasol

Platfform is the Welsh lead organisation for the New System Alliance, a group of organisations and individuals who have gathered together to help drive system change. We have all recognised in our separate countries and sectors, that our services are increasingly trapping people into re-traumatising, dependency creating vicious circles. This is a concern that is shared across Wales and the UK, by hundreds and thousands of people across public services.

The question of how we change is the big one.

In Wales, there have been movements across the mental health and housing sectors to build real, meaningful change. One of the key changes in the way we work has been a growing understanding of, and commitment to, understanding the impact of trauma on us and the people that we work with.

Trauma-informed practice is difficult to define, because it is a way of being, that is unique to context and place. Whilst there has been a groundswell of support for challenging the way we work in housing and mental health, the recognition that this involves a move to being and not finding the latest model or way of working, is much harder to embed.

Particularly across the housing sector, there has been a real push for changing practice using traumainformed ideas. One of the organisations that is developing their work in this way is Caredig, and so when we were looking for partners to explore system change, they were high up on our list.

As an Alliance, we supported Caredig in conducting this service evaluation, with the intention of developing a 'blueprint' of how implementing trauma-informed thinking can work.

The intention here is not to say that this is the only way. It is to say that this is a way, and to outline the good things that have been done, whilst highlighting areas of challenge and further development. As we stated above, trauma-informed approaches are unique to place and context – and it will always be different based on complexity and relationships found there. This is a key point that anyone interested in system change needs to commit to. This is a journey, not a process – there is no such thing as a perfect organisation. Instead, we must build in reflective ways of working to ensure we are continually checking in and learning.

This report recognises the good, and shines a light on how we can keep learning to be even better.

We hope it helps other organisations in their journey.

Ewan Hilton
Chief Executive. Platfform

# A BLUEPRINT FOR CHANGE



We were thrilled to be approached by New System Alliance through their partner in Wales, Platfform, to be part of this exciting deep listening Wisdoms work. This provided us with an opportunity to further develop our approach to working in this area. This work was conducted across the whole organisation providing us with a clear and independent view of how we could continue.

In October 2021 we changed our name to Caredig which means Kind in Welsh. Being Kind is what we are all about. This kindness is shown in how we do what we do;

- People and relationships are at the heart of everything
- We create homes where people feel safe and secure
- We help to build thriving communities where people can flourish

We are an ambitious and well-established independent housing association that prides itself on having people as equals, creating homes and helping to build thriving communities. We manage over 2,800 high-quality affordable homes and provide services including extra care, supported housing, domiciliary care, mental health and substance misuse services.

Over the last three years, we have been on a journey to put the human first rather than seeing them as part of a system. In 2019 we committed to working within a Psychologically Informed Environment (PIE) framework and using this to guide our thinking.

It soon became clear to us how important taking a Trauma and Adverse Childhood Experience (TrACE)<sup>2</sup> informed approach is in how we support people, both those who access our services and the people that work for us. We started to look at the systems and processes that we have in place and the impact that these can have on how we work together and how they may exacerbate trauma or re-traumatise the people that use our services.

We are a diverse organisation, providing a range of services, for example, repairs and maintenance Extra Care schemes, Housing services and Care and Support services through to internally facing services like our HR and finance team. As you can imagine looking at all our services through a TrACE lens across such a diverse range of services has its challenges. It is fair to say that to date what we have done has impacted each part of our organisation in different ways.

Marcia Sinfield
Chief Executive, Caredig

<sup>&</sup>lt;sup>2</sup> trace org toolkit - Ace Aware Wales



# INTRODUCTION

#### **Background and context**

In 2019, Caredig began a journey to become more trauma-informed in the way they deliver services and provide support for tenants, service users and staff.

A trauma-informed service delivery stresses the need to recognise how prior adversity affects us. It offers an understanding of why people who have experienced trauma might respond in certain ways. For instance, with aggression, anger or disengagement. It also offers a strategic, organisational approach which plans for the impacts of trauma, rather than treating it as unexpected.

#### How the report was conducted

In order to evaluate the success of the change to a trauma-informed way to working, we spoke to 40 staff members from different departments. In addition, staff evaluators spoke to a further 31 tenants. Briefly, the evaluation consisted of conversations with staff members and tenants. Staff members spoke via telephone or video conferencing. These discussions were recorded and transcribed. The transcripts have been analysed and presented in the Findings section. Tenants spoke with staff members trained in the evaluation methodology, with their comments recorded in writing, following the conversation. These notes have been analysed and presented in the Findings section (for the full methodology, see Appendix 1).

#### Caredig/Family: a note on the organisation name

Caredig changed their name in October 2021, after the conversations took place but before this report was finalised. The previous name was Family Housing. Some quotes from staff and tenants refer to this previous name, either in full or as 'Family', where this occurs this has been changed to Caredig to ensure consistency The name Family Housing also appears on the tenants' notes sheets.



# METHODOLOGY



# **METHODOLOGY**

#### **Conversations with Staff**

- We recruited 40 individuals from a larger list of Caredig staff members who had expressed a willingness to take part.
- All staff conversations took place in June and July 2021. Conversations were recorded with participants' consent, and professionally transcribed.
- Conversations lasted about 20-30 minutes on average, although a few were much shorter (around 5 minutes) and some were longer (up to 40 minutes).
- Staff were asked a single question: 'As you may know, two years ago Caredig began a journey to become more trauma-informed in the way they deliver services and provide support for tenants, service users and staff. What changes, in relation to this, have you experienced or seen within Caredig over the past two years?"
- Staff were encouraged to talk as much or as little as they felt able to, in order to answer the question.

  A natural, conversational style was adopted between evaluator and staff.
- Caredig did not have access to the full transcripts or audio recordings and we made sure that staff
  knew that we were not part of Caredig. This was so that we could be confident that staff knew that
  they could talk about Caredig without concern over anonymity.
- To conduct the analysis, we used a 'thematic analysis' approach (Braun and Clarke, 2006). This
  means that we went through the transcripts line by line to understand the main points being made by
  different people we spoke to. We found that some experiences and ideas came up many times, and
  so seemed to be especially important to staff. These are the points discussed in the Findings section.

#### **Conversations with Tenants**

- Tenants had in-person conversations with Caredig staff members who volunteered to take part. They
  were recruited by these staff members. However, tenants did not have these evaluation conversations
  with staff who supported them in their normal role.
- Prior to the conversations, staff participated in a two-hour long training session.
- Tenant conversations were not recorded. Following the conversation, the staff member filled in a sheet with notes describing the conversation and noting anything important that the tenant had said (see Appendix 2 for a blank copy).

As with the staff conversations, to conduct the analysis of tenants' notes, we used the 'thematic analysis' approach (Braun and Clarke, 2006).





This section of the report presents the findings from audio recorded conversations with 40 staff. The following themes emerged. First, staff valued trauma-informed approaches, feeling that they improved their ability to work successfully with tenants. Second, staff felt that training was largely helpful, but could be more extensive and incorporate support over a longer period. Third, staff, particularly those with some management responsibility, saw being trauma-informed as offering them tools to improve working relationships. Fourth, while staff recognised that the organisation was in the middle of a journey toward a better way of working, they reflected upon training and development needs. Many felt that the organisation had improved overall, but some did question the extent and consistency of the organisation's approach to addressing trauma.

#### Valuing being trauma-informed

How did staff understand being trauma informed?

All staff were invited to respond to a single question regarding any changes the staff member had experienced or seen since the move to being trauma-informed had started (see Appendix 1 for the full question). Consequently, most staff conversations included some reflection on the staff member's own understanding of the term 'trauma-informed approach' and their confidence in this understanding. Staff identified trauma-informed approaches as having three defining characteristics. First, they involved listening to people, often for extended periods of time. Second, they required a willingness to believe in an individual's potential, and to offer help to enable them to achieve their goals. Third, they encouraged staff to take a step back and consider the client's situation from an objective, longer term standpoint. This can give people space to reflect on circumstances, often outside of their control or power to change, and so can be difficult for staff to reflect on.

It should also be noted that around half of staff who took part in this evaluation did not feel confident in their understanding of the term, although in practice, when these staff members began to reflect upon organisational changes it became apparent that they frequently did have a good practical understanding of trauma-informed practices. No staff member offered a definition which indicated an erroneous understanding – although whether that is because we are not as clear as organisations about our understanding of being trauma-informed, as we could be. However, the term itself was sometimes seen as jargon, and caused confusion, even among staff with a good working understanding of trauma-informed practice.

"I suppose the question really for me would be - what does it mean really by a trauma-led approach? ... I'm not really sure. I don't know whether it means... No, I don't know, I don't know. I don't wanna do guessing work really. [Laughs]... you know, this whole - that we're, we're now trauma-led or whatever, that's all news to me. You know, there's been, like, maybe one email that came around about it, and it wasn't that clear to be honest."

Staff member 09

Some staff suggested that this approach was not, in fact, especially new, and that they had been working in this way for some time. However, they valued the organisational commitment to trauma-informed approaches, the standardisation of techniques across the organisation (which often led to their existing work being valued), and access to training to develop their existing skills. One worker explained that their team had long recognised the importance of being sensitive and responsive to clients' needs. However, for them, an organisation-wide approach was valuable, both because it enabled the value of the intervention to become clear, and because it offered access to wider support to help staff develop these skills further.

"And a lot of the time there we would build trust, we will get to know our clients and they would then, eventually, nine times out of 10, disclose some kind of past trauma and then we would work with them around that. So it's not new, okay, but having a title for it and having appropriate tools that we can use is new, yeah... Our head of services, he's introduced a lot of tools that are quite handy, that we can just use... to help facilitate conversations with our clients."

Staff member 15

At the core of trauma-informed approaches is a recognition of the importance of believing in individuals and their ability to effect change on their own lives. Yet for individuals to benefit from this approach, it needed to operate within a wider context of a supportive, enabling relationship. This was expressed powerfully by one manager, who likened the approach they used with tenants and which they encouraged their staff to use, to that used by a rugby coach. Their approach rested upon a deeper premise within trauma-informed approaches. That a result of trauma is a lack of self-belief and self-worth, and that, consequently, affording individuals control within a high-support environment where they are, therefore, likely to experience success, is critical. He centred communicating to tenants that he saw them as experts in their own needs, and so looked to them for guidance on how to resolve the issues which were most pressing to them.

"I see myself now more as more like a facilitator.... "I'll get that for you, to enable you to do the best you can."... I'm with Clive Woodward, cos that was one of the things that came out of that great England team... He asked them, "What do you need? What do you believe you need to be the best you can be?" They told him. He got it for them. And it's no different, you know, it's what do you do, what have we got to do to get the best out of that person?... It's identifying what, and that's trauma-informed approaches do, to... give you those tools."

Staff member 13

Staff members often gave examples of the success of this approach in terms of specific tenants. Behaviour previously seen as difficult and aggressive often became intelligible once seen through a lens informed by an understanding of trauma. Training on trauma-informed approaches was valued by staff because it enabled understanding of tenant experiences, producing a reframing of behaviour which would previously have seen as threatening or violent as evidence of vulnerability and need.

"I always use one of my tenants in particular as a great example... having a conversation with her was extremely difficult, it was always shouting and shouting, and we used to perceive her as being aggressive, you know, she's being aggressive, she's being challenging, volatile. And then I started learning more about trauma approach and going on the training, and I thought, well actually why, why is she doing this? You know, we're sitting there listening so we need to find out why."

Staff member 21

Staff saw trauma-informed approaches as centring reflectivity. Encouraging them to understand tenants more holistically, within a wider social context, helped them to understand individuals within their social context. This offered a broader perspective which proved critical to facilitating the development of practices and habits to enable sustainable change.

"To me it's all incorporated... it's about taking a step back where [before] maybe you wouldn't have done. And saying, no, we need to look at this... having that appreciation in terms of what people may have been through. Taking on a psychologically informed approach comes to me as a hand-in-hand thing. It incorporates a lot more, you know?"

Staff member 21

"I think so. I think knowledge, isn't it, is everything? The more you know and obviously the way you approach how you speak to people and deal with staff... it all sort of comes into play, doesn't it?"

Staff member 02



#### Staff experience of offering trauma informed approaches

Trauma informed approaches were identified by staff as offering clear benefits for tenants. Listening, and interacting respectfully, in a safe environment, meant that problems could be better understood and addressed at an individual level. This was felt to be a substantial improvement on previous ways of working, offering meaningful, sustainable solutions.

Key to trauma informed approaches is time: listening to people and validating their experiences. This was seen by staff as transformative. It was represented as a direct counter to the atomising, destabilising, and invalidating longer term impacts of trauma. Spending time listening to people not only was seen as a way to avoid reinscribing trauma in service interactions, but as addressing the existing trauma experienced by tenants. Staff pointed out that, for some tenants, service interactions could be a rare opportunity to be heard and valued their role in facilitating this experience. Being able to listen to tenants' problems and resolve them was deeply satisfying for most staff.

"I mean for somebody to say, this is the first time I've felt heard and listened to, I feel like it's the first time I've properly been asked. And things like that, for somebody that's been using the service for so many years is quite amazing in my eyes."

Staff member 21

A key take home for staff from training was the universality of trauma: that trauma should be expected in the course of tenancy support rather than treated as an exceptional or unusual need. Staff saw this organisational level recognition as enabling them to operate more effectively in their service interactions. For some, this enabled them to use skills that they had developed over many years, while others relished the opportunity to develop new skills and use new tools to address longstanding tenant problems. Using trauma-informed approaches was, then, strongly linked to staff sense of value and efficiency within the workplace.

"Nearly everyone that we work with in the care and support... will have had... trauma. That's what they've been through, is trauma. And so many people in life have, you know... That's who we're working with... we take a bit more on board. [Before], we weren't supposed to go near that stuff. There was a lot of fear around it, I think. No, that's for the psychotherapists and things, you know the psychologists and everything. Now, everybody's getting training on it and everybody's got an appreciation of the impact that a trauma has, and how it can affect your adult life... It gives that understanding deep down, [which] can change the way that you work and the simplest of things that you do."

#### Staff member 21

"We're much more conscious of the deeper trauma that people have faced, which is showing itself in many different ways. But actually what's happening on the face of it is nowhere near some of the difficulties that may be underlying. So I find that staff are much more conscious, and the way that we lead as well is understand and trying to encourage that behaviour, to really think about those deeper issues that have kind of built up over many years, and to really consider what the deeper issue is, other than what the issue is... exposing itself at that point in time."

Staff member 18

The experience of a professional relationship in which they were valued and respected, and where they were offered support to make meaningful and achievable choices was seen as especially important to addressing wider traumatisation. Staff saw training in trauma-informed approaches as crucial both to understanding the potential impact of trauma, and in developing productive practices which allowed them to move a situation forward.

"I think years ago we would be a bit more sort of, right this is how we're doing it, and that's it. Whereas now we will actually, physically if they wanna go out and pick things, we take them out. So they have more choice in what support they have, how we provide it to them and how we deliver it as well really. I think they think more about their past experiences and we try and draw out. I know we have one person who actually could change their life. When she came to us and she said if she'd stayed in hospital she don't know if she'd ever have come out really. Because of just giving her that time and listening and talking to her and just being there sometimes, just sitting and just being there, just in the same room as her, had helped."

Staff member 25

Recognising the importance of trauma in producing apparently hostile or avoidant tenant behaviour was transformative for some staff. A trauma-informed framework to understand tenant behaviour offered a means to better identify and understand tenant problems as a symptom of trauma. This not only reduced the risk of confrontation, but created opportunities for engagement.

"I think for us as staff it kinda gets us thinking a bit more of how is this now gonna make them feel... I think it probably makes us... a bit more, I think, understanding. I think you've gotta understand a bit more of, you know... although we can tell them to do these things, but we've gotta understand as well how it makes them feel."

Staff member 20

"It makes you sit back and think, my goodness, there is so much trauma out there and you don't know what's going on. You know a person comes in screaming and shouting, is rude, or whatever, and you just don't know what's going on behind that. And I think it's a case of trying to deal with it in the right way, without upsetting that person even further. You're trying to diffuse the situation, I guess. So I suppose there's a bit of an art to it."

Staff member 22

Giving staff the tools to address repeated and persistent, often seemingly unresolvable, antagonistic interactions rooted in unmet psychological needs was satisfying for staff, because it enabled them to move beyond the 'presenting problem' and address tenants' deeper needs.

"[Before] we were focusing on trying to resolve each complaint. Whereas actually there was a fundamental issue. People were lonely, they weren't very well, they felt that we hadn't treated them well once and there was a lack of trust... We've had somebody recently and he was taking up an awful lot of everybody's time, including my own. [But] there was one person in the organisation that he trusted. So we've got him to go and have that open conversation. And then following on from that, the tenant's allowed us to go into his home and inspect all the work. So it's about... yeah. It's not one size fits all and it's not always responding to the symptom. It's getting underneath that, so you're not responding to the problem, but looking at the range of symptoms and trying to address those really."

Staff member 24

Those in roles other than tenancy support, such as repairs and maintenance and finance, still regarded an awareness of trauma-informed practices as being important to their role and saw them as useful to giving tenants a better service.

"On a day-to-day basis, people give us their repairs. I deal with it and that's the end of the conversation. But [when] people don't act as I consider 'normal'...[then] you think, "Oh, something's not right here with this tenant"... [when] the anger then stems up. It can be abusive. But after reading about it, you can see why these people are the way they are... it just triggers that there may be something wrong here, they may need help... why are they reacting this way? So how we go forward with dealing with it and communicating to people, with each other... we have got contact with housing departments... we do refer to them."

Staff member 27

The wide applicability of the trauma-informed approach was also valued as an approach which helped all tenants, not only those who were especially likely to have experienced trauma. This approach also enabled a wider range of needs to be uncovered beyond urgent psychological support, offering scope for early intervention. Staff saw trauma-informed approaches as offering them the tools to understand and address the needs of tenants who might appear to have relatively few needs. Consequently, people who, in the past, might have been overlooked and seen as a low priority for help were more likely to have their trauma-related needs recognised. One worker gave the example of a hypothetical client who might have good family support to meet their emotional and practical needs, yet still have outstanding practical, financial needs.

"Because we're... tailoring it to that person. Some people go, 'No we're good, we're fine, we've got family.'... [but they lack] ... the financial means themselves to clear a property... [so we are], saying, "I'm here from Caredig to sort this side out for you." And I believe that psychologically informed, that somebody in a crisis so, we tailor our services directly to that person at that time... and their needs."

Staff member 28

Embedding a trauma-informed approach throughout the organisation was also seen as a protective factor against future difficulties, creating resilience. It enabled relationships to be established with new tenants based upon both an awareness of potential trauma and a commitment to avoiding future trauma. This in turn was seen as leading to tenants themselves being proactive in both accepting support and identifying their own need for help.

"In our pre-tenancy support, so, we try to ask the questions in a way of... open questions, so that people open up to us if there is any support needs, whether financial or otherwise. So, we've seen an uptake in people asking for and engaging, I don't like the word engaging, but engaging with the support beforehand. So, we've had positive start-ups with our new tenancies as well and that's going well."

Staff member 28

A key benefit of a trauma-informed approach is its focus on the needs of the individual, rather than the system. Staff saw the tools associated with the approach as enabling them both to identify what changes tenants wanted to see, and how they wanted these to be delivered. Staff felt that this more nuanced understanding meant that they could treat different applicants as individuals, and thus offer them an appropriate and effective help over a generic approach. In answering this question, workers tended to offer specific examples where a trauma-informed approach had meant that they were able to offer a useful, targeted intervention. One worker gave an example of working with tenants with mental ill health, in which a broader recognition of the importance of an individualised, trauma-informed approach enabled her to offer sustainable interventions. Staff valued not only the immediate and practical value of better understanding of their tenants but also valued the approach as extremely useful in enabling a meaningful, reciprocal and respect-based relationship to develop. This in turn improved 'buy-in' from tenants, and so engagement.

"So enduring mental health... it's about finding out what they're interested in and setting up activities around what they're interested in and then bringing the community in. 'Cos not everybody is ready to go out and join a group in the community, even if there is support to do it. So it's more about focusing on somebody's strengths, interests and then building groups around that."

Staff member 24

"And it's about these people coming to us and being aware of that. So from the first minute that we go out to assess these people, assessing them in a trauma-informed way, and then that sets off the relationship then, straightaway and then carrying that through then all... to their support."

Staff member 01

#### How helpful was the training?

At the time of the conversation, around half the staff had had training on trauma informed approaches. Training, amid a wider organisational orientation toward trauma-informed approaches, had an important role in giving staff confidence to instigate and manage difficult, information-gathering, conversations productively. This was seen as a key area in which the organisation had changed from one where they felt that they were not encouraged to build relationships with clients to one where their ability to do so was seen as an asset.

"The difference in the work that we're able to do with our tenants, our clients, has been huge... the quality of the conversation... being confident enough to have those conversations with people... Historically I think with Caredig I would come across a lot of blocks, you know... it very much depended on who my manager was at the time. But we were told... we're not counsellors, we're not psychologists, all we're doing is signpost, referring and listen, yeah... [Now] I feel like there's a bit more flexibility and we're allowed to have those deeper conversations with people now."

Staff member 15

Staff valued the focus upon individual differences which is centred as part of a broader trauma-informed approach. They valued training which gave them additional strategies to address the specific difficulties faced by different tenants, and which moved away from a generic approach. Knowing how to use a range of approaches and having access to support and resources to offer different approaches was valued by staff. With these skills they could ensure that tenants received a service which was capable of both meeting their specific, individual needs, and which recognised their specific challenges.

"Once you learn to use the skills that we are being provided with, and the support that we're being provided with to learn this, it does help you to take that little step back and think, "Mm, it could be a multitude of reasons behind this." 'Cos your initial reaction is, "Why can't people just do as they're bloody told. You know, I've told you 17 times."

Staff member 13

"Understanding that process and the fact that we put policies in place and we put new procedures in place... actually they don't fit... understanding that there could be different response to different reasons."

Staff member 10



However, staff did also raise concerns around the viability and sustainability of offering trauma-informed approaches in the current organisational context, feeling that the training they had received on trauma-informed approaches sometimes left them with more questions than they had started with. This related to two overlapping issues. First, trauma-informed approaches were viewed as an additional task to perform in a context of wider stress upon their time and resources. Second, they worried about their competence to offer trauma-informed interventions after relatively truncated training, and especially where they felt themselves to be operating outside a context of broader departmental support.

"I suppose some areas I feel that... I don't want to ask questions, 'cos I don't feel like I want to be personal with them... how far I should go and ask them personal questions, you know? And, at the end of the day, I may upset them in whatever I say... with mental health issues or what they're experiencing, or questioning why are they angry, you know. And that is a fine line to deal with a conversation."

Staff member 27

Workers specifically raised concerns over adequacy of the training: whether it was sufficient in duration and depth to address the needs of the client group. Some workers, especially those for whom trauma-informed approaches were integral to their roles, felt that training needed to be of greater depth and duration, to cover a wider range of scenarios, and to involve more follow-up support. These workers stressed their broad enthusiasm for the approach as a whole but felt that they needed much more support to deliver it effectively.

"We've had very little training to be honest. A lot of the skills I'm using at the moment are from past training and past experiences in other places that I've done. The training that we have had is very... is great but it's delivered in a way which hasn't been very easy to implement. So it needs to be more relevant to our day to day working practices to be honest and we are all on board with it... Personally speaking I'm 100 percent on board with PIE and want it to succeed and want it to work. But I'm feeling at the moment that we are given this training, it's ticked off, "Alright you now know how to do motivational interviewing." Well no, I don't...I came out very confused. That doesn't make me an expert to get people to open up about past experiences. I don't feel I have the tools to then if someone does trust me enough to start opening up, I'd like more tools to be able to support them with that. And I feel it can be a little bit dangerous in a way if you haven't got the full knowledge or the full skills and full tools to be able to do that. But I mean everybody in the project is 100 percent behind it. [But] at the moment training in motivational interviewing is being delivered via Zoom that's not adequate. How can you role play? You need to practice. You just can't be told "This is how you do it, this is the theory behind it, this is why you're doing it," and then not get to have a go at it. If your first experience of trying to do something like motivational interviewing is on your actual tenants, that's not really... you shouldn't be practicing on your tenants, you should have a bit of experience and a bit of practice before."

Staff member 35

#### Staff wellbeing and trauma-informed approaches

Staff identified a close relationship between trauma-informed approaches and the broader ethos of Caredig. They saw the commitment to trauma-informed approaches as evidence of a wider commitment to the wellbeing of tenants and staff more broadly.

"I think it's just important for the higher up to know that actually what they're doing is working and it is worth investing time into it."

Staff member 01

"Well as an organization, from an operational point of view, the managers are more from that side of it, managers are more inclined to listen and are a bit more sensitive from an internal point of view."

Staff member 04

For managers in particular, a commitment to the core values of a trauma-informed approach was seen as helpful in enabling them to support their staff more effectively. This was both a valued end in itself and led to better services for tenants.

"I think becoming more trauma-informed helps you understand not only your service users, but the people who deliver the service."

Staff member 04

"I recently had a staff member off with depression and I was regularly meeting with her and she was going, "I'm letting people down, I'm letting people down."... I was like, I said, "If a tenant came to you and said that they were feeling depressed, would you tell them that they're being pathetic and they need to get a grip?" And she was quite startled, "No, of course I wouldn't, I'd say, 'I wanna help you and how are we gonna get through this?"" And I was like, "Well that's exactly how I feel about you."

Staff member 01

At the same time, managers acknowledged that staff were often more reluctant to use trauma-informed approaches to understand their colleagues and build working relationships. They saw this as an area where encouragement and learning were especially needed.

"The PIE approach isn't just for the tenants. You apply that to each other as well... 'Cos when they're working with somebody, and they see somebody not performing, automatically think they're lazy. No, they don't think, "Oh is there something going on?" You know, what I get told then as a team leader, is, "Oh this person's not doing this, this person's not doing that." Whereas if that was a tenant they'd be saying, "Oh, have you seen something wrong?" You know, "Cos this person's behaving oddly, or maybe we should need to look at that." So, that's probably gonna take a little bit longer. But if we can get that right as well."

Staff member 13

Staff also saw the commitment to trauma-informed values as improving relationships between colleagues, based on the consequent improved understanding of behaviour along with a greater tolerance for difficulties faced by each other.

"I've not only seen the behaviour shift from engagement with residents, but actually internally between all staff I would say. Because you don't know, my co-worker could be experiencing some things that, whatever happens behind closed doors, you just don't know. And a trauma-informed approach, it doesn't just fit one person, actually, it's everybody. And I think that's what it's done. I think the place has always been a very people orientated place, but I think the ability now to really understand what could be happening... has really, I think it's helped."

Staff member 18

Staff also pointed out that this approach helped them in inter-departmental interactions, and hence in terms of building cohesion within the organisation. It was seen as increasing a sense of common purpose and so reducing the potential for insularity and the development of silos, as well as encouraging responsibility for developing and maintaining relationships with other teams.

"Maybe it's not to do with that, but it seems to have coincided nicely and I think it helps people in the way that they communicate when you communicate with each other as well... There's a lot of people that can go through severe trauma in life. So yeah, having a basic understanding is only a good thing. Because it does help you take a step back if... when the time arises when you need to or just maybe giving something more thought. You end up doing these things subconsciously then, because you've got that understanding. It gives you a level of empathy as well."

Staff member 21

However, those involved in direct work with tenants raised concerns about the availability and consistency of support available to them to do an increasingly demanding and difficult job. They pointed out that, as a result of the new ways of working, they were now at elevated risk of secondary trauma and (in some cases) re-traumatisation. Some managers were praised as extremely skilled and proactive at supporting staff. However, some staff felt that they lacked reliable access to opportunities to debrief and receive access to other help to ensure that their own health and wellbeing remained protected. This inconsistency across the organisation in terms of the degree to which staff felt supported suggested that this was a result of personal managerial skills rather than system wide protocols.

"We've got feelings too. But yeah, I don't think there's enough support for some of the staff, or debriefing when a trauma has happened. My own manager is fantastic. But I think some of the higher management, I don't know that they realise what we deal with on a day-to-day basis... Depending on what you've been through yourself, you know. And sometimes, yeah, it can be quite upsetting when you come off a phone call, or you have to be professional and deal with the person and their issues. But then afterwards, you know, it can be, yeah [laughter]. I've not cried that often, but yeah, you kind of become a little bit tough, but then it does hit you at some point. It's upsetting dealing with someone who's upset anyway. But if you've got your own trauma then it affects you doubly really."

Staff member 16

Not only did staff feel that workplace support was not consistently offered, but they also, in some cases, felt that organisational practices undermined a wider trauma-informed approach. For instance, concern was raised about a few examples of moving staff around departments or teams at short notice. This disrupted their relationships with tenants, and hence the development of the trust-based bonds fundamental to trauma informed practice. One staff member discussed a decision to move her to a new team at short notice, which she felt undermined relationships she had built up with tenants.

"You know they are not taking in account our relationships with our tenants. It's like we can be moved from this project to that project or from that team to that team... And it was all overlooked, not even taken into consideration... When they list the points of PIE, number two is relationships with your tenants. Well, where was that? ... I thought, where was PIE, you know? So, it's not just us who needs to be working better... I was thinking none of that's been acknowledged in this situation."

Staff member 35

A related issue was high staff turnover. Staff connected this to a broader lack of financial and organisational value associated with frontline work. They pointed out that high staff turnover in itself undermined the core values of trauma-informed work, and questioned whether, without addressing this, the organisation could meaningfully become trauma-informed.

"The problem you've got sometimes as well, especially at the lower-graded jobs, the very front-line people. Care is a very hard job that people don't get huge amounts of money for, and often you can see the turnover of staff, because suddenly they have to become a carer for somebody within their family, and it's their job that has to be given up so they can go and do something for their family. So, you can have turnover of staff. Or it could be that somebody's moving [job] for 10 pence an hour more, but it makes a difference to that individual person."

Staff member 36



#### Staff experiences of system change

Most staff saw the organisation as in a state of ongoing change. The organisation was often presented as being on a journey from a period of uncertainty and difficulty toward a more inclusive, empowered future. While current obstacles and difficulties were acknowledged, they tended to be understood in terms of investment in future growth.

"I feel quite proud that we've embarked on it, but, you know, I know there's still a lot to be done."

Staff member 24

"It's been a massive transformation and yes, it's been tough, like I say. But I do feel now we're on the road to excellent stuff, to be honest."

Staff Member 25

"Are we there, you know, where we want to be? I don't think so, I don't think we'll ever probably get there but certainly there's always room for improvement. So I think as I say, it's a continuous journey, isn't it? But the most important thing is that as an organisation, is that when we see these behaviours that are not according to our values, we have the confidence to pull people up."

Staff Member 30

Managers were especially likely to identify a substantial, cultural shift in the ways of working, and to see this as having produced bottom-up change. They tended to reflect upon the new options available to both staff and tenants.

"The whole of the way we're working now has changed... There's all sorts of tools and everything that you can use and guidance that you get given that the staff can use, you know. Absolutely brilliant, yeah. So I mean for me the change in Caredig... and I've had so many staff that have worked a long time in Caredig, who are just like, superb changes. All, I think, yeah, absolutely loving it. And the journey that we're going on is a good one, the road is a good one, it's a positive one."

Staff Member 21

Change was acknowledged to be disruptive, even where it was seen as productive in the long term. Team leaders sometimes observed that some members of their team, especially those who were older or who had been working for longer, struggled to adapt to the change. It should be noted that older, longstanding workers acknowledged this perception but did not tend to see themselves as change resistant.

"It's been difficult. You know some of the staff that have worked like in my team especially, some of them have been there for almost as long as I've been alive, and so change can be really difficult. You know we're all change resistant; we don't like change. So implementing something new was really scary for the staff at first."

Staff member 01

"It's always more difficult to embed a new concept, or what is seen as a new concept, in older staff, and perhaps older people that we look after as well, and that's probably where it gets trickiest to manage. But speaking as somebody that's slightly older herself and heading towards retirement, I try very, very hard to remain current and not get stuck in my ways, 'cos it's very easy to do as you get older."

Staff member 08

Staff praised structural changes, such as reductions in paperwork. These they saw as critical to freeing up more time to interact with tenants. This was seen as a system-wide change reflecting a difference in working which centred tenant needs and focused upon positive, productive engagement.

"I think the framework how we write policies particularly in supported housing, 'cos that's where we've done the work. I'm just trying to get the rest of the organisation to consider that when we're writing policies it's different, your policies should... now are going to be sort of principles, much less, 'you must', much less, 'if you don't, you're going to be subject to disciplinary action'."

Staff member 24

"Oh we're a lot more gentle with tenants now, whereas before we would be quite harsh with them and just follow procedures and we would stick to that religiously... we try and interact with tenants more because previously it was just like, send the letter and follow the procedure, there was no nice bits in between them but now a lot of that going on and trying to help them in other ways not just sending letters constantly because they ignore us anyway. So, we try other things and it's a lot more nicer."

Staff member 33

For some staff, the new ways of working were exciting. They spoke about the positive impacts of these changes upon their work, seeing themselves as treated as individuals. They saw the organisation as a whole as better at listening and more open and understanding.

"Definitely the culture within Caredig has sort of changed towards being more open and understanding. Treating people as individuals. Yeah, yeah. So I have seen a difference and I believe the training has totally opened the doors to that change in culture across the organisation."

Staff member 02

However, other staff, particularly those less senior, saw the organisation as remaining hierarchical and disinterested in frontline experience. These staff saw consultations in terms of a missed opportunity to engage with staff at all levels.

"I think sometimes it can feel a little bit like, even though things have got better and there are these groups and things where we take points forward, it can feel sometimes like they've already made the decision and they're just covering their backs, they're not actually listening... The people making the big decisions are the people sat in offices not really seeing how things are."

#### Staff Member 09

"None of the changes that have been made have, sort of, been made aware. Like a lot of the time, I'll be honest, I feel like changes are made or already decided, and then it's just, sort of, rolled out and then we're just told of it after the fact... when it come to us, it seemed like it was pretty much settled. And regardless of what we said really, I don't think it would have changed it. I feel like sometimes that's the case... I feel like sometimes the changes are already done, and by the time the people who the changes affect, hear about it, it's more of a, like, "We have to let you know before we roll it out." But it's not actually a full, sort of, "Sit down, let's have a chat about it," sort of thing beforehand."

Staff Member 14

Where staff felt that their frontline experience was discounted, decision-making in the organisation was then felt to ignore the substantial expertise of those delivering the services.

"It's quite like, I dunno, we need to get the basics right first and everybody, not just some of us. And a lot of the people in management and stuff wouldn't know what to do with a tenant if they came in, kicking off or [laughter]... whatever... they wouldn't have a clue. Unless there's some sort of, you know, if there's an award or a photo opportunity... a new building or something like that, they'll all rock up. But other than that, if a tenant has had a bad experience or... they just, they wouldn't have a clue. But they don't... I feel they don't really care."

#### Staff Member 17

"So they try, they do the consultations, but not all voices are heard, you know. And those that are heard, great, because they see the changes that have occurred, and those that weren't heard or it doesn't quite fit in with the masterplan, nothing comes of it. They make the decisions but they don't always come down at ground level and actually see the impact, with the people who are there day in day out, that it's actually had when they've made changes."

Staff member 35

Some workers did express a deeper scepticism about the commitment to a trauma-informed approach, questioning both whether the system changes could bring about the impact claimed, and whether senior managers would be willing to provide the support workers needed to facilitate this new way of working. These workers portrayed senior managers as repeatedly introducing new solutions, to which staff were expected to adapt. They felt that this requirement to repeatedly learn new ways of working was both disorientating and time consuming, and so prevented them from doing their job competently and reliably.

"As a staff member, it definitely feels like sometimes - you know, they'll come to us for consultation... but they very clearly already made a decision. And I think that's quite - it's infuriating. You just wanna be listened to a bit more sometimes, because they make big decisions, and then sometimes they'll go back on them because they think they've made the wrong decision. And you feel like, well, if you listened to the people that are at the front... but the people who are on the front line doing the job aren't the ones making the big decisions."

Staff member 09

"'Cos it's the classic thing of, any managerial levels or higher, it's all reports and this and that, It's all for the company and the effect of the company or the tenants... The longer you're in that role the more disconnected you are from actually living the life of doing that role, like the frontline dealing with tenants."

Staff member 14





This section of the report presents the findings from conversations with 31 tenants. Conversations with tenants were conducted by Caredig tenancy support workers, who took notes on the conversations (quoted below). These conversations offer an insight into the current success of trauma-informed approaches from a tenant perspective. Overall, tenants reported high levels of wellbeing, safety and trust. Consistent with the desired results of a trauma-informed approach, this arose from both good relationships with staff, and a broader sense of belonging and acceptance within the organisation.

#### **Relationships with staff**

Tenants talked about their personal relationships with staff members, and how these impacted on how empowered and accepted they felt. They outlined the ways in which staff build relationships with them, and how this led to a sense of being supported and feeling listened to. Staff ability to build relationships was particularly valued. Tenants often felt that staff had worked hard to make them feel welcomed and supported. These relationships were often built over an extended period of time, and through social rituals.

"I like going for coffee on a Friday with staff. It's nice to have a one-to-one chat where I talk about any issues and they help me."

Tenant 16

Others talked about how staff behaviour and attitudes had helped to create a positive atmosphere. The relationships with staff members were clearly valued by the tenants. Tenants' relationships with staff reflected on how the tenants felt about the organisation as a whole.

"The staff have always been amenable, punctual and have been amazing during the pandemic. Since the start, always making sure I'm ok. I give 100% positive feedback to Caredig and the staff. I've had an amazing journey. I keep telling my sister, you know, [name], and she agrees."

Tenant 12

"Honesty is a two-way street here and the staff help me with any issues. It's got a good atmosphere here. I like living with the other guys. Staff listen to me and are better than the mental health team."

Tenant 14

Tenants regarded the support as instrumental in creating an environment where they could develop independence and become empowered to make meaningful and sustainable changes in their lives.

[Tenant's name] talked about how positive her life was now compared to in the past. [Name] told me about how she went out regularly on the bus and loved going to [Place] shopping.

Tenant 08

Getting her independence back by leading a healthy life and doing things out of her comfort zone that she never thought of doing in the past. She gave examples on how she has come a long way since moving into the shared room rather than the bedsit.

Tenant 31

Tenants felt accepted in their interactions with staff. Reflecting a trauma-informed approach, staff were seen as receptive, kind and non-judgemental. As a result, tenants felt able to speak honestly and raise issues, meaning that they felt supported and safe.

He stated that he is not afraid of getting judged when he does ask for help.

Tenant 01

Maintaining good relationships with other tenants and staff has been important and knowing that she can have those open and honest conversation with others when she is feeling low or anxious.

Tenant 31

Tenants reported that they felt listened to as individuals, and valued for who they were. They saw their relationships with staff as individual and mutual, and built upon reciprocal regard.

"Feeling like you're listening to me and not just treating me the same way as other tenants. Tailoring your approach to suit my needs."

Tenant 03

"Communication. Being listened to. Staff responding to needs."

Tenant 07

"If I have any concerns, I get listened to. My support plans are about what I want. Everyone needs one. Staff are very helpful. It's been a difficult year."

Tenant 16

The importance of these relationships to tenants meant that when they were disrupted – by staff moving teams or leaving the organisation – they struggled. Getting to know new staff members took time, although tenants accepted that some staff turnover was inevitable.

"[Staff name] is still a really good friend and we see each other or call each other every day. I'm managing because I'm here. Only challenge I find is when staff move, although I do understand it. It's just difficult getting to know someone new."

Tenant 28

#### Feeling 'at home'

Tenants felt a sense of belonging, safety and security, with Caredig seen as an organisation which worked with them to create an environment where they were valued and important. Underpinning this was an attentiveness to maintaining quality across different parts of the organisation. On the whole, tenants saw repairs as swiftly dealt with, accommodation of a good standard, complaints as dealt with in a timely manner, and staff as responsive and receptive (see above). The organisation was seen as willing to listen to them, suggesting that, from a tenant perspective, the trauma-informed approach was a success.

"The staff are great. I love it here."

Tenant 14

"Everyone is lovely here. It feels like home."

Tenant 24

"Good support, I like the staff. Space, I like peace and quiet and keeping myself to myself. It's easy to do here. I prefer living here."

Tenant 13

For tenants, evidence of the importance the organisation placed upon them having a decent living space was clear from the rapid response to issues reported, and the ease of reporting repairs. Quality of repair work was seen as high.

"Quick response to situations."

Tenant 10

"I had my flat painted and a new radiator fitted. Then the door got stuck, so I had it planed, and the window broke. They fixed it straight away. My flat looks lovely now and the guys were really nice."

Tenant 12

"A quick response and right first time repair. Easy to get through to report the problem and [the] carpenter repaired everything and even checked and repaired other windows whilst he was here."

Tenant 25

Tenants also noted that standards of communication were high. This contributed to a sense that the organisation wanted them to be active and empowered tenants, and strengthened their personal connection with the organisation.

"Being able to get through to speak to someone and knowing what's going to happen – and what has happened with my request."

Tenant 02

"Communication. Person to person, not an APP or automated text."

Tenant 05

The importance of communication was clear from the few cases where this failed. Where communication was felt to be lacking, tenants felt ignored and dismissed.

"Getting through to someone to speak to is very difficult. I don't get feedback afterwards either which is very frustrating and makes me angry. I don't think you're doing enough to deal with ASB from my neighbours... I've asked you to let me know in advance when someone will be calling but you don't, which is very stressful for me. I feel like I have to fight for everything."

Tenant 03





### RECOMMENDATIONS

Based on this report, there are three broad areas for further action.

- First, staff training needs to be ongoing, and incorporate agile support for changing, post-COVID, work.
   This would be "reflective practice".
- Second, understanding of trauma needs to be embedded firmly in all layers of working.
- Third, staff need greater support to successfully work in a trauma-informed manner. Ongoing staff training and development is also needed – but also making space for this way of working.

Staff who had attended training mostly felt that it was well delivered and informative. Additionally, some staff we spoke to had not received training while at Caredig but had a good understanding of trauma-informed approaches from other sources. Staff who had not received training expressed a strong desire to do so, although it should be noted that most of these individuals also had a good working knowledge of trauma-informed approaches. However, staff also identified a need for ongoing support to help them apply the knowledge gained through training to their practice in different roles within Caredig. This might include additional skills consolidation through formal training, as well as peer support and mentoring. Caredig's commitment to this approach is timely, and the organisation might also consider how staff expertise might facilitate knowledge exchange with other similar organisations.

Although staff generally felt that being trauma-informed offered an understanding which enabled them to improve working relationships, they also felt that policy and organisational responses were not always trauma informed. There were two main areas where this was especially apparent. First, staff felt that they often did not have time, and in some cases support structures, to enable trauma-informed approaches. Paperwork and other bureaucratic requirements were sometimes seen as an issue. Staff also felt that management did not always consider the importance of trust or psychological safety. For instance, they noted that they were sometimes moved between teams at short notice. Additionally, staff noted that working conditions, particularly low pay and stress, were leading to high staff turnover in some teams. To an extent, these problems also reflected a wider sense from some staff members that their frontline experience was not systematically listened to by management. To better develop trauma-informed approaches which operate throughout the organisation, Caredig should consider ways to incorporate feedback from workers at the frontline throughout all of their planning and practice.

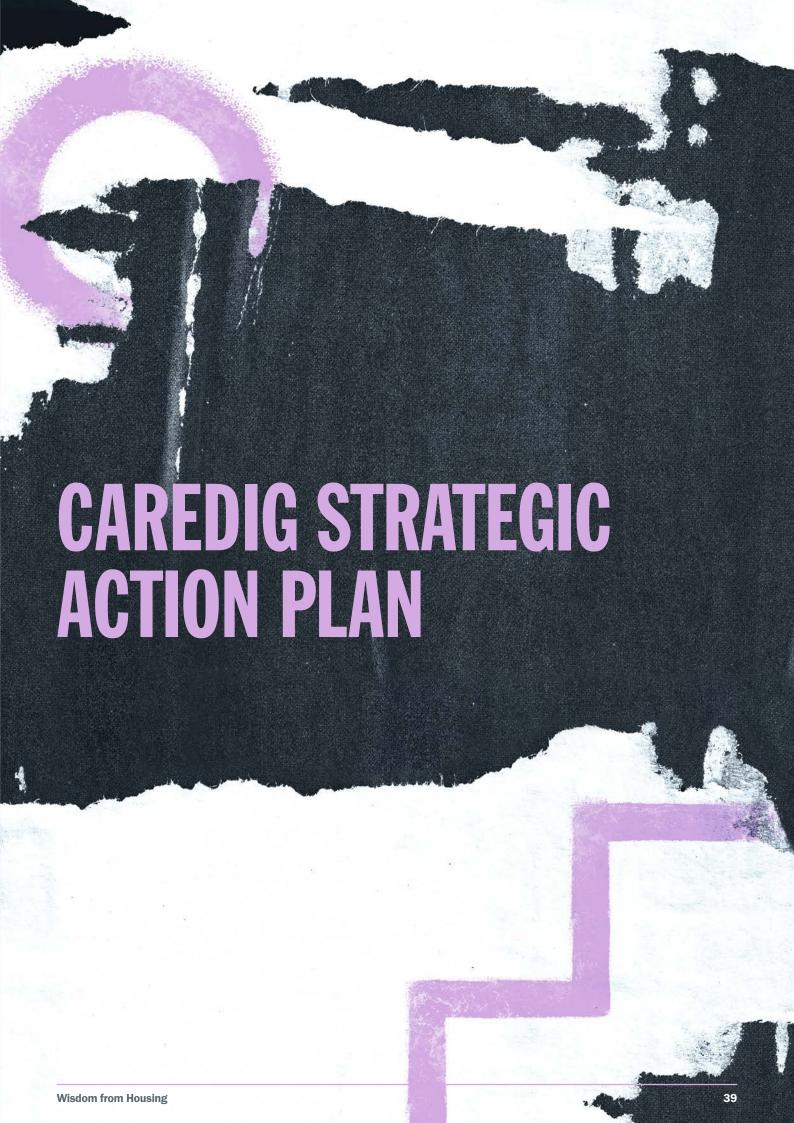
Staff throughout the organisation were enthusiastic about trauma-informed approaches, seeing them as offering considerable potential to improve the service experiences of tenants. However, they also pointed out that these approaches were taxing for them, and they did not always feel competent to support tenants who had experienced trauma. There was a worry that trauma-informed approaches can risk exposing staff to greater levels of anger and aggression. This is a concern that needs to be actively challenged by the organisation, as working in a trauma-informed way has consistently proven to reduce anger and aggression.

### RECOMMENDATIONS

Despite finding working in a trauma-informed way rewarding, staff did feel concerned at a sense that they were taking on responsibility for addressing complex trauma with very limited training. This was especially the case for staff in non-tenancy support roles, such as administrative and maintenance staff. This suggests that clear guidelines need to be established and communicated around expectations for staff supporting tenants. This should include referral guidelines. Again, a clear challenge needs to be given by the organisation that being trauma-informed is not the same as therapy. Further, a clear understanding about what being trauma-informed means is helpful to refresh and remind people who are on this journey.

Burnout and overwhelm are perceived as risks for staff involved in intensive and extended support, and Caredig should have a defined and disseminated strategy for ensuring that the wellbeing of all staff is protected. Again, this should come alongside a clear statement and shared understanding that being trauma informed as an organisation will not increase this trauma. This should also include specific, accessible, provision where staff themselves experience re-traumatisation or secondary trauma because of the work they are doing.



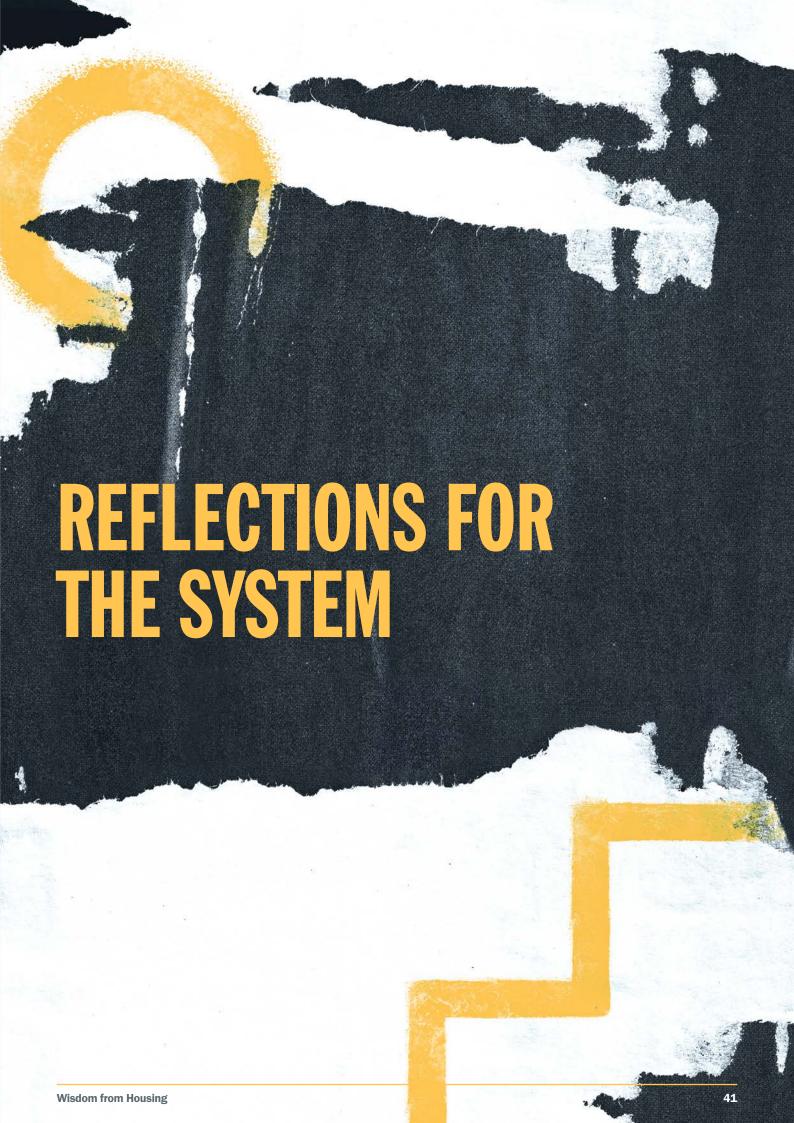


## **CAREDIG STRATEGIC ACTION PLAN**

Caredig welcomes the findings of this evaluation and has found it hugely valuable. Caredig has a clear set of strategic and operational plans to take forward their work across the organisation. Set out below are the strategic plans.

- 1. Develop a framework linked to our new vision (currently in development). The framework to include:
  - A set of principles framing how we design and deliver services that do not re-traumatise staff or service users.
  - A clear set of organisational language around TrACE and PIE<sup>3</sup> so that people have a shared understanding of what it means to them and their service.
- 2. Ensure the framework will support change and implementing new ways of working. This will include the principles (above) that we apply to any change and how practically we make sure these changes are consulted on and communicated effectively.
- 3. Ensure our outcomes take account of TrACE, based on what staff, service users/tenants view as important for the organisation to achieve.
- 4. In light of our work on developing a new vision, framework and principles we will continue to update our policies, procedures and guidance to ensure they are person-centred and trauma-informed.
- 5. To refine our current guidance to explicitly support staff wellbeing including those who experience vicarious trauma.

<sup>&</sup>lt;sup>3</sup> Psychologically Informed Environments | Intervention Tool (homelessnessimpact.org)



### REFLECTIONS FOR THE SYSTEM

As a result of working with Caredig, we identified a series of questions that we have suggested for their work, which has informed their strategic response. We believe these could be helpful questions for how to progress change within other social landlords – and beyond.

We are not claiming to have a new approach here – these questions are just prompts to help people consider their next steps when implementing trauma-informed approaches. We would recommend looking at the work by Dr Karen Treisman<sup>4</sup>, to see wider principles and how they might work.

These questions are not exhaustive, but are designed to prompt organisational reflection, and to encourage a culture of challenge, learning – and to build a safe space for that to occur.

#### Questions to prompt action to help staff deliver trauma-informed approaches:

- Is there a different way of assessing risk that is more trauma-informed, in use by your organisation?
- Are colleagues encouraged to talk about burnout and mental health in one-to-ones?
- Is clinical supervision available for staff members who have worked with challenging situations?
- Are there clear supporting frameworks and policies in place to provide 'elastic tolerance' in situations, whilst also maintaining that there are consequences for specific actions?
- Are staff encouraged to share frustrations and do they have a safe physical and digital spaces to unwind?
- Has any hybrid or remote working move taken into the account the need for informal team building and relationship building?

<sup>&</sup>lt;sup>4</sup> A Treasure Box for Creating Trauma-Informed Organizations: A Ready-to-Use Resource for Trauma, Adversity, and Culturally Informed, Infused and Responsive Systems

### REFLECTIONS FOR THE SYSTEM

#### Questions to prompt the embedding of trauma-informed approaches strategically:

- Is there a standing item or reporting for your organisation's Board, about trauma-informed progress within each department?
- Is there a standing agenda item at Management Team meetings which encourages people to share progress in the shift towards a new way of working?
- Is there a way to review, without blame, any 'failure' to work in a trauma-informed way and to learn how to do things differently?
- Are there management approaches set up to have difficult conversations and to seek challenge and feedback at all levels?
- Are there anonymous feedback channels allowing concerns across the organisation to be heard, even if it isn't easy to hear?
- Is there a strategic vision for moving towards a trauma-informed organisation, and does each department know how they are contributing to that?
- Are any new services that are bid for, new properties built (etc) reviewed to ensure they contribute towards a trauma-informed approach?
- Are there relationships in place between commissioners, funders, and others, along with your own organisation, to contribute to wider system change?
- Are people celebrated when they are seen to work in a trauma-informed way?

#### Questions to prompt ongoing staff development and training

- Is there a set induction that ensures new staff in every part of the organisation have a baseline understanding and commitment to trauma-informed practice within your organisation?
- Is there a way to regularly review training needs within the organisation around trauma-informed work?
- Is reflective practice built in at all stages and levels of the organisation to ensure people can consider their own lack of knowledge?
- Is there an internal 'trauma-informed champions' group (or similar) to take forward work across the organisation?
- Does the organisation have 'learning loops' or feedback loops set up, so that tenants and other staff can feedback, live, on where development areas are needed?
- Does each department or area of practice have their own trauma-informed vision about how their work contributes to the organisation as a whole?



### **CONCLUSION**

In 2019, Caredig began the process of embedding a trauma-informed approach at the heart of their service provision. Given the prevalence of trauma among those who have experienced homelessness and/or housing precarity, this decision can be seen as an appropriate, and yet innovative, approach which has already positively impacted the lives of Caredig's tenants. Most staff were enthusiastic about the new approach, and conversations with tenants suggested high levels of satisfaction with their accommodation and support. Concerns were focused upon aspects of implementation: ensuring ongoing training and development opportunities, embedding trauma-informed approaches into resource and staffing decisions, and providing support for staff engaged in trauma-informed delivery to protect their wellbeing. Overall, however, based on feedback from both staff and tenants, Caredig's decision to introduce trauma-informed ways of working appears to be very successful, demonstrating the feasibility of this approach in a tenancy support context.

There are recommendations that clear myth-busting takes place, and this is done in a context where we are not doing trauma-informed things, but we are working towards being trauma-informed. This, alongside a firmly established idea as to what this means, is fundamental in driving forward system change in this way.

We hope that this is useful for other organisations when considering their journey to change towards a trauma-informed way of working, to consider some of the barriers and how to overcome, as well as demonstrating the importance of having critical friends and space for reflection.



# **APPENDIX 1: BLANK TENANTS' FILE NOTES SHEET**

### Caredig tenants' conversations project

Use this sheet a	fter the	conversation	with the	tenant to	make	notes f	rom the	conversation
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Remember - don't take notes during the conversation itself!

What is important to the person (what did they talk about the most)?
Positives, examples of what is working?
Any barriers or challenges mentioned regarding their support from Caredig?
'Golden quotes'

### **REFERENCES**

Centre for Homelessness Impact (2021). Psychologically Informed Environments.

ACE Aware Wales (2021). Trauma and ACE (TrACE) Informed Organisations Toolkit

Treisman, K. (2021). A Treasure Box for Creating Trauma-Informed Organizations: A Ready-to-Use Resource for Trauma, Adversity, and Culturally Informed, Infused and Responsive Systems.

Braun, V., and Clarke, V. (2006). Using thematic analysis in psychology. Qualitative Research in Psychology, 3, 2, 77–101.

## **HENLEY-ENGLAND RESEARCH CONSULTANTS**

Henley-England Research Consultants is headed by Dr Josie Henley. The consultancy specialises in research in psychology and wellbeing.

Josie has worked extensively in healthcare and third sector settings in a research and frontline capacity. They have interests in health and wellbeing, including workplace wellbeing for health and care professionals and quality of life for people with dementia. Previous projects of note include UK WHELM (Work, Health and Emotional Lives of Midwives in the United Kingdom), a UK-wide workplace wellbeing survey.



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