Tools for a Trauma-Responsive Child Welfare System

Goals for Today

- Update on Children’s Commission collaborative efforts
- Update from DFPS trauma-informed initiatives
- Learn about trauma-informed services under STAR Health
Why Trauma-Informed Care?

• Studies show the impact of trauma can be severe
• Helping families heal should be our goal

Statewide Collaborative on Trauma-Informed Care

• Launched by Children’s Commission in July 2017
• Collaboration among 100+ stakeholders
• Final product of phase one is “Building a Trauma-Informed Child Welfare System: A Blueprint”
Purpose of the Blueprint

• Develop a roadmap to transform the Texas child welfare system into one that is trauma-informed and trauma-responsive
• Provide structure for implementation
• Invite innovation and improvement in both public and private sectors
• Available at: www.TraumaInformedTexas.com

Blueprint Guiding Principles
SCTIC Implementation Task Force

• The Task Force created three workgroups:
  – Policy & Practice
  – Training
  – Information Sharing, Data, & Funding

Update on DFPS Trauma-Informed Initiatives

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DFPS Trauma Informed Care (TIC) Accomplishments

- 2009 – TIC Training for caseworkers and caregivers
- 2010 – TIC Training for Residential Providers
- 2012 – Annual training required for caregivers; DFPS Public two-hour training live on public site and CLOE Learning Station
- 2015 – Residential Care Contract increase to 8 hours of TIC training prior to being the only caregiver responsible for a child in care
- 2016 – Child and Adolescent Needs and Strengths (CANS) Assessment Implementation

DFPS TIC Accomplishments, cont.

- 2017 – TIC Program Specialist Position
- 2017 – Building Resiliency in the Face of Trauma (BRIFT): TBRI-Based Secondary Trauma training for CPS Staff
- 2017-2019 – Statewide Collaborative on Trauma-informed Care
- 2019 – DFPS Public two-hour training on public website updated
- 2019 – TIC Program Specialist position assigned to the new CPS Behavioral Health Services Division
Required TIC Training for DFPS Staff

- Initial training for new staff based on National Childhood Traumatic Stress Network (NCTSN) curriculum: Child Welfare Trauma Toolkit 2.0
  - Provided by Centene (Superior Health) and CLOE
- TIC Refresher training, annual requirement
  - Update in process
- Secondary Trauma Training: Building Resiliency in the Face of Trauma (BRIFT) – required for certification
  - A TBRI-Based curriculum

Required TIC Training for Residential Providers

- Minimum of 8 hours including curriculum elements:
  - Adverse Childhood Experiences, Secondary Trauma prevention and management, Practical applications for caregivers
- Trauma Informed Care Refresher training, 2 hours annual
- Providers have choices, including:
  - National Child Traumatic Stress Network, Foster Care EDU (Superior Health), Trust-Based Relational Intervention, Sanctuary Model
DFPS Ongoing Work

• Promoting trauma-informed lens agency wide
  – Support for the field through trauma-informed SMEs
  – Behavioral Health Services Division
  – Trauma- and Equity Informed Lens workshops
• Review of policy and practice from trauma-informed perspective
• Routine evaluation of required and optional trainings
• Collaboration with system-wide partners

DFPS Partnerships and Workgroups

• SCTIC Task Force
• HHS/ Behavioral Health Strategic Plan
  – Office of Mental Health Coordination
  – Local Mental Health Authorities / Wraparound Services
  – Cross-Systems Trauma-Informed Care Initiative
• STAR Health, managed by Superior Health Plan
  – CANS Assessments
  – Medical and Behavioral Health Services
  – Trauma-focused Evidence Based Treatments
Trauma Screening and Assessment

3 IN 30
A COMPLETE APPROACH TO BETTER CARE FOR CHILDREN

1-Day Initial Medical Exam
In 3 business days, children entering DFPS care must see a doctor to be checked for injuries or illnesses and get any treatments they need.

CANS Assessment
In 30 days, children (ages 3-17) must get a CANS assessment. This review helps us understand how trauma is affecting a child, and how the child is doing. CANS tells us which services may help the child, such as counseling. It also shows strengths we can build on, like good relationships.

Texas Health Steps Medical Check-Up
In 30 days, each child must see a doctor for a complete check-up with lab work. This makes sure:
• We address medical issues early.
• Kids grow and develop as expected.
• Caregivers know how to help the child grow and develop.

Trauma-informed Services – STAR Health
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STAR Health Medicaid Program for Foster Care

• All children and youth in foster care are enrolled in STAR Health upon removal.
• STAR Health is the benefit for the child or youth, it is not for the biological family/parent. This program is managed by Superior HealthPlan.
• It is possible for a caregiver or individual to be under Superior Health Plan separate from STAR Health. This also includes instances when a child moves into extended care after STAR Health (age 21-26), or following an adoption a child may receive STAR, CHIP or STAR Kids through Superior or another managed care organization.

STAR Health Medicaid Program for Foster Care, cont.

• STAR Health has enhanced benefits compared to other Medicaid programs.
  – STAR Health was specifically designed to have a more robust benefit package to meet the needs of children and youth in foster care. One example of this is the benefit of residential treatment centers (RTCs) which is available in STAR Health, but not in other Medicaid programs.
• For STAR Health the required assessment Child and Adolescents Strengths and Needs (CANS 2.0) has been configured to include trauma-specific evaluation questions that identify both past trauma and current trauma symptoms.
Trauma Informed Care Clinical Framework

• It is recognized that children and youth in foster care experience higher incidents of trauma than the general population and the sooner trauma is treated, the better the outcomes can be. This can also result in an increased possibility of avoiding complications from the trauma.

Trauma Informed Care Clinical Framework, cont.

• Adverse Childhood Experiences (ACEs) is a 10-question tool to evaluate traumatic experiences that occur in childhood.
  – Typical general population score is 1-3, typical score in foster care is 4+
  – ACE research demonstrates a clear correlation between childhood trauma and long-term health issues impacting both behavioral and physical health
  – The higher the score, the more likely there will be complicated health issues
  – Includes higher rates of chronic physical health issues such as diabetes, high blood pressure, and heart disease
Evidenced Based Models of TIC

- Evidenced based TIC modalities (All score as 1 on a scale of 1-5 with 1 being the best rating). All are covered benefits of STAR Health:
  - Parent Child Interaction Therapy (PCIT) –Validated for children age 2-7
  - Trauma Focused-Cognitive Behavioral Therapy (TFCBT) –Validated for use with children and adolescents
  - Prolonged Exposure (PE) – Validated for adolescents (PE-A) and adults
  - Eye Movement Desensitization and Reprocessing (EMDR) –Validated for adults
  - Cognitive Processing Therapy (CPT) –Primarily focused on adults

Does Trauma Informed Care Replace All Other Treatment?

- TIC should be the foundation of treatment for an individual who has been traumatized and additional treatment modalities are often still appropriate and effective. It serves as a clinical framework rather than a specific practice.
Does Trauma Informed Care Replace All Other Treatment?, cont.

Example 1
• A youth is experiencing hallucinations as a result of the trauma they have experienced. The diagnosis may be PTSD rather than Depression with psychosis. However, it would still be appropriate to use anti-psychotic medication to help manage the psychotic symptoms while trauma informed therapy is being provided.

Example 2
• A youth is demonstrating oppositional and destructive behavior as a result of past trauma. Trauma informed care would be the most appropriate course of action to treat the root issue, and behavioral modification could still be used to address the specific behaviors as part of the overall treatment.
Training Resources

• STAR Health has a dedicated team of trainers who can train on a wide variety of topics, including TIC
• Trauma Focused – Cognitive Behavioral Therapy (TF-CBT) training offered to therapists around the state
• ACE training offered to Pediatricians/PCPs along with TIC training to help their practice become trauma informed
• STAR Health Training Point of contact is Mary Armstrong. E-mail is marmstrong@centene.com
• Nathan Hoover’s E-mail is nathan.hoover@superiorhealthplan.com

Questions?
Contact Us

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Thank You