

Evidence-based Practices for Identifying and Assessing Trauma

If you're new to using a trauma-informed approach in your work, you may feel underprepared to help someone who has experienced trauma. Screening for trauma is like screening for other healthcare conditions. Some traumatic events require immediate attention. If the health plan member or patient is experiencing life-threatening situations, such as violence or suicidal or homicidal ideation, you'll want to quickly connect them with the right resources while sharing in the decision-making with them. Most people you'll encounter may share past trauma experiences and typically will not need immediate assistance. You can offer your empathy and time to talk about the impact of trauma and helpful resources.

Adapted from the National Council for Behavioral Health's *Fostering Resilience and Recovery: A Change Package for Advancing Trauma-Informed Primary Care*, the following concepts can help you screen for trauma and help create healthier outcomes for children and youth in foster care and their families and caregivers.

Staff Training, Motivational Interviewing and Shared Decision Making

Once you establish policies and clinical pathways for identifying and responding to trauma, staff need to be trained on how to connect with members or patients who have experienced trauma. One evidence-based approach to inquire about trauma is motivational interviewing (MI). This method has four processes – engaging, focusing, evoking and planning – and helps create a dialogue on how to change behaviors. Another evidence-based approach is shared decision making (SD). SD empowers members and patients to choose tests, treatments and care plans based on clinical evidence while balancing their values and preferences.

Patient Education

You can start to educate your members and patients about trauma and how it connects to their physical health. You should also tell them exactly what will happen during their visit and why you're asking the questions that you're asking. Building rapport with your members and patient helps them feel safe and have an empowered voice and choice in their care.

Four Approaches to Trauma Inquiry

Because everyone reacts to trauma differently, it's necessary to use a careful and customized trauma-informed approach for every member or patient. Edward Machtiger and his colleagues at the University of California San Francisco developed four approaches to trauma inquiry. The appropriate approach depends on the available resources, expertise, and member or patient population of each provider or practice.

- **Option 1: Assume a History of Trauma Without Asking.** Due to the high prevalence of trauma, you can safely assume a member or patient has a trauma background. Offer referrals to onsite resources or community-based organizations that focus on trauma histories and consequences.
- **Option 2: Screen for the Impacts of Past Trauma, Not for the Trauma Itself.** You can screen for trauma symptoms such as anxiety, depression, chronic pain and substance abuse issues. To see improved outcomes, combine treatment for these conditions with trauma-informed referrals to onsite or community-based services.
- **Option 3: Inquire About Past Trauma Using Open-ended Questions.** Use open-ended questions, such as the techniques used with Motivational Interviewing, that generally talk about the connection between past traumas and health so that members and patients feel comfortable sharing any traumatic events they feel are relevant to their health.

- **Option 4: Use a Structured Tool to Explore Past Traumatic Experiences.** There are number of validated tools available to assess for past trauma. Consider critically which pathway to use – the why, when, how and by whom it will be administered, and the results shared. Above all, ensure the member or patient has an opportunity to discuss their results with their provider in private and shared-decision making is utilized to outline next steps.

Identify Members’ or Patients’ Resilient Factors

Trauma not only involves the event and its impacts but also how people survive. Assess members or patients for resilience factors and existing strengths – the positive supports and coping mechanisms they have available. You can use tools like the [Devereux Resilience Scale](#) and the [Connor-Davidson Resiliency Scale](#) (CD-RISC).

What You Can Do – Small Adaptations and Healing Interventions

When working with members or patients, services should address the individual’s cultural background and needs. Also ask how you can make them feel more comfortable. Small changes can include no fragrances in the exam room, lowering the lights or phone calls to discuss exam results instead of sending written results.

Healing is possible for trauma survivors, and trauma-specific interventions can help speed up that process. Healing interventions for trauma you can offer or suggest include therapy, yoga and eye movement desensitization and reprocessing (EMDR). Because the member or patient may be still processing what’s happened to them, some children and their families may not be ready to use trauma-specific methods. Offer other options such as drop-in support groups, exercise and or experiencing nature.

Resources

Change Concept 4: Identify and Respond to Trauma Among Patients. Retrieved from National Council website: <https://www.thenationalcouncil.org/fostering-resilience-and-recovery-a-change-package/change-concept-4-identify-and-respond-to-trauma-among-patients/>

Decision Support as a Clinical Skill Toolkit | Center for Shared Decision Making | Health Care Professionals | Dartmouth-Hitchcock. Retrieved from https://med.dartmouth-hitchcock.org/csdm_toolkits/clinical_skill_toolkit.html

Machtinger, E. L., Davis, K. B., Kimberg, L. S., Khanna, N., Cuca, Y. P., Dawson-Rose, C., Shumway, M., Campbell, J., Lewis-O’Connor, A., Blake, M., Blanch, A., and McCaw, B. (2019). From treatment to healing inquiry and response to recent and past trauma in adult health care. *Women’s Health Issues*, 29(2), 97-102. Retrieved from [https://www.whijournal.com/article/S1049-3867\(18\)30550-4/fulltext](https://www.whijournal.com/article/S1049-3867(18)30550-4/fulltext)

National Council of Behavioral Health (2019). Trauma-Informed Primary Care Script Templates. Retrieved from <https://www.nationalcouncildocs.net/wp-content/uploads/2019/08/Script-Templates-for-Trauma-Informed-Primary-Care.pdf>

PTSD Screening Instruments - PTSD: National Center for PTSD [General Information]. Retrieved from <https://www.ptsd.va.gov/professional/assessment/screens/index.asp>

Welcome to the Motivational Interviewing Website! | Motivational Interviewing Network of Trainers (MINT). Retrieved from <https://motivationalinterviewing.org/>