A Project Review of EITP Workstream 4: Trauma Informed Practice Workforce Development Project

Part B - Evaluation of EITP Trauma Informed Practice Project Workforce Development Programmes

Final report
September 2020

ACEs

Adverse
Childhood
Experiences

Be the Change

Contents

Introduction and approach to evaluation

Origins of the EITP Trauma Informed Practice Project

In 2017, the Department of Health in Northern Ireland announced that £1.5 million would be invested through the cross departmental Early Intervention Transformation Programme (EITP) to build professional workforce capacity to understand how adverse childhood experiences (ACEs) can affect child development and to build on the skills of staff working with individuals who have been affected by childhood adversity through a trauma informed approach.

On 2 April 2018, the Safeguarding Board for Northern Ireland (SBNI) formally launched the EITP Trauma Informed Practice (TIP) Project. This workforce development project has been funded through the cross departmental EITP and is housed in the Safeguarding Board for Northern Ireland (SBNI). The project aims to ensure that SBNI member organisations:

- Have an awareness of the adverse childhood experiences which may cause trauma in a child's life;
- Are aware of the potential impact of these adversities on the development of a child;
- Are able to identify what creates resilience to cope with adversity; and
- Are able to develop policies and practices to embed trauma informed practice in their work.

In delivering this project, SBNI and other delivery partners have worked closely with professionals across five sectors to build the capacity of the workforce in their understanding of ACEs and trauma sensitive approaches to practice skills development.

These sectors are community and voluntary; education; health; justice, and social care. The Trauma Informed Practice Project team supports the implementation of the project across the five sectors referenced above. The project team is comprised of a Project Lead, Project Manager and four Implementation Managers working across health, social care, education and the justice sectors. ASCERT were also commissioned to support the delivery of training and awareness raising across the community and voluntary sector in Northern Ireland. The project team also worked across sport, arts, housing, local government councils and faith communities in Northern Ireland.

The EITP Trauma Informed Practice Steering Group is responsible to the SBNI Board for the overall direction and financial management of the project and it advises and supports the project team in the delivery of the project. The Steering Group continues to undertake a number of roles including to:

- Specify quality assurance and any other constraints with the Project Lead;
- Support the provision of the resources required to deliver the project and ensure delivery to a required standard;
- Ensure appropriate communication relating to the project takes place with relevant stakeholders;
- Provide guidance and direction to the project, keeping it within the agreed constraints;
- Ensure compliance with the EITP Programme Management requirements - where appropriate, approve change requests; and
- Approve End Project Report and Lessons Learnt Report.

Project enablement support

Prior to commissioning this evaluation, the SBNI contracted the National Children's Bureau (NCB) to provide project enablement services for the EITP TIP initiative. The purpose of this earlier work was to secure the buy-in and commitment of a range of stakeholders across the sectors prior to the roll out of the full suite of workforce development training and support programmes. The project enablement assistance involved undertaking a series of activities and included, amongst others:

- *A Training Needs Analysis (TNA)* to help determine the current levels of knowledge and expertise about ACEs and trauma informed practice in Northern Ireland. The Training Needs Analysis study was informed by a literature search which included the Evidence Review of Trauma Informed Practice in Northern Ireland, completed by Queen's University Belfast in 2018, and by discussions with SBNI. It identified three key components of cross system trauma informed practice implementation: workforce development (including training and staff safety and well-being); trauma focused services (appropriate screening and assessment and evidence based treatment); and organisational change (including a range of factors, for example, the need for enhanced collaboration). The study showed that, while the vast majority of participants surveyed indicated that they knew about the types of ACEs that a child may experience and their effects, there were aspects of ACEs where the level of knowledge was much lower, such as cultural differences in how ACEs are understood. Despite the relatively high levels of awareness of ACEs among respondents, the study showed a high level of interest among respondents in receiving more training across all aspects of ACEs and TIP; and

- *An assessment of system change readiness in Northern Ireland.* This drew on the experiences and learning from the Be the Change leadership programme participants - senior leaders from across Government departments and other organisations. The report provided an insight into the level of system change readiness in Northern Ireland to systemically embed trauma informed practice within leadership, culturally and at a service level. At a system level, the assessment of system change readiness found, amongst other things, strong organisational interest in developing a trauma informed culture, and that workforce and service development would be the elements of system change readiness in most need of development[1] . In addition, a sector specific training needs analysis and stakeholder engagement events enabled the EITP Trauma Informed Practice Project Team to determine the learning and development needs across the sectors. From this, the project team designed a Level 1 ACE Awareness programme and Level 2 Developing Trauma Sensitive Approaches to Practice Training based on the knowledge across the workforce. The project team also co-designed elements of the training for organisations who benefited from sector specific content, for example, within policing and the education sector[2].

Evaluation of the TIP training and support

Whilst the TIP project commenced in April 2018 and many of the project enablement activities took place shortly thereafter, this evaluation covers the period November 2018 to March 2020 and includes within its scope all of the training and support developed and delivered by SBNI and partner organisations up to that point. Further information on the development of the TIP project and the full range of project deliverables from April 2018 can be found in Part A of this Project Evaluation*.

NCB was commissioned to undertake this evaluation given their knowledge of the sector and their extensive experience in using Outcomes Based Accountability as a framework for understanding impact. The TIP project consisted of a number of elements of workforce development and training for identified professionals and volunteers across these sectors, including the following:

- **Level 1 – ACE Awareness:** This half-day workshop aimed to raise awareness of the potential impact of ACEs on individuals and communities. The objectives of this training were to develop an awareness of ACEs and their potential impact for children and adults across the lifespan; an awareness of the use of an ACE/trauma sensitive lens; an awareness of the importance of preventing and mitigating ACEs, and an ability to identify appropriate pathways to support wellbeing for staff, volunteers and service users. The Level 1 sessions were comprised of a standard awareness raising programme and associated resources that were delivered across the sectors. A number of bespoke programmes were also co-designed with member organisations to reflect the workforce needs and existing knowledge across the sectors. The bespoke programmes included education, PSNI (Police Service of Northern Ireland) and General Practice.

* This report will be published on SBNI's website in August 2020. A soft copy of the report will be available at the following in due course: https://www.safeguardingni.org/resources-professionals

- **Level 2 – Developing Trauma Sensitive Approaches to Practice Training:** This half-day workshop built on the learning from the awareness session and sought to further develop skills that promote a trauma sensitive response. In particular, it aimed to: enhance participant skills and confidence to use a trauma sensitive lens in order to support and develop resilience for those the participant works with; identify the impact of vicarious trauma; and identify ways in which to support the health and wellbeing of all staff[3].

- **Level 3 – Train-the-Trainer (T4T) Programme of Professional Development:** This two-day workshop supported participants with the skills, knowledge and confidence to enable them to deliver Level 1, Level 2 or Level 1&2 training within and beyond their own organisations.

- **Be the Change Leadership Programme:** This programme was delivered over the course of seven days in partnership with the HSC (Health and Social Care) Leadership Centre and a range of other organisations including Big Motive, PSI Consulting and Queen's University Belfast. The programme was specifically aimed at senior leaders and executives across the five sectors targeted by the TIP project and others beyond this. The core content of the programme comprised three modules:
  - Module 1: Leading from within;
  - Module 2: Leading through organisation design; and
  - Module 3: Leading within systems through collective leadership.

In addition, a range of other activities were undertaken to support learning within and between organisations (e.g. live work). The Programme's overall aim was to develop an implementation pathway for the trauma informed practice agenda within organisations and across the system in Northern Ireland and to nurture and develop their own trauma informed leadership.

The programme also provided an opportunity to acknowledge the significant work that had already taken place within these organisations, with the content of this programme supporting them to build upon that work as they move forward in their journey. A shorter two-day programme was delivered to representatives across the community and voluntary sector. The training covered many of the areas included in the full seven-day course, although, the content was compressed within a shorter timescale. The two-day programme did not include certain aspects, e.g. live project work.

- **Solihull understanding trauma online course:** Building on the Solihull Understanding Your Child programme, the SBNI commissioned a two-year licence of the Solihull Understanding Trauma online course for professionals in Northern Ireland. This course was developed by Solihull Approach UK/Heart of England (NHS) and targeted participants working with children, families and adults. The aim of this course was to deepen understanding of the effects of trauma, the recovery process and how society can support recovery from trauma. The course integrated this with the Solihull Approach model.

Alongside the face-to-face and online training and support, SBNI commissioned or developed a suite of other resources to support the delivery of the TIP project. These resources included, amongst others, a series of training support tools and videos based on real life case studies and participation of service users to aid understanding of childhood adversity and trauma sensitive approaches.

In addition, and to support increased levels of collaboration and efforts to disseminate knowledge of the project and best practices, a range of activities were undertaken including:

- *Knowledge transfer sessions* to a range of stakeholders to support and build organisation's capacity to deliver training and support to their own staff;

- *A Regional NI ACE conference* delivered in 2019 and 2020 to share strategic developments of the NI ACE Reference group which included the implementation and embedding of the TIP project and associated support. The conference also provided an opportunity to disseminate knowledge of the project and support sharing of good practice across sectors. This year the conference provided organisations engaged in the Be the Change Leadership Programme with opportunities to share information on their live project work; and

- *Presentations and briefings* to raise awareness of the project and keep stakeholders (e.g. EITP Project Board) informed of the significant developments across the sectors with partner organisations through the implementation of the EITP TIP project.

Evaluation approach

This evaluation has utilised an OBA approach to understand the overall impact of the EITP TIP project. This approach involved gathering a range of project data to answer three fundamental questions:

- **How much did we do?** This is about quantifying the scale of activity undertaken, i.e. what are the activities that are being delivered and to whom?

- **How well did we do it?** How do we know that the activities delivered (e.g. training/online support) have been to a high quality?

- **Is anyone better off?** What has the impact been? How have those who have accessed support benefited (e.g. in terms of developing knowledge and skills).

This approach to monitoring and evaluation is consistent with that used across many public sector services, which have adapted their monitoring, evaluation and service improvement efforts to align to the OBA methodology as the underpinning framework for the NI Executive's draft Programme for Government.

This report provides a summative evaluation of the impact of the TIP project and incorporates the findings from the range of activities undertaken as part of this evaluation. These activities included:

- **An OBA workshop with the SBNI team to develop the range of quantitative measures to be used in the evaluation:** NCB facilitated a one-day workshop with the TIP project team to revisit the concepts and principles of Outcomes Based Accountability and to develop the series of measures that would be used to quantitatively assess and evaluate the delivery and impact of the project under the three OBA categories as identified above.

- **Development of OBA report cards to communicate progress:** A total of three report cards were compiled for this project throughout its duration to track the delivery and impact of the programme on those who received training and support. A range of evaluation questionnaires were developed and administered to participants who engaged in the various aspects of the TIP project[4]. These evaluation questionnaires were informed by, and mapped to, the overall aims and content of the individual training and support packages[5].

- **Qualitative interviews:** A series of eight one-to-one/group interviews with 22 interviewees across five organisations were undertaken. These organisations were chosen because of their high levels of engagement with the various aspects of the project and their desire to move their organisation to becoming a trauma informed organisation. Interviewees included representatives from a range of sectors including health, community and voluntary, education and justice in order to gain a deeper insight into the implementation, impact and sustainability of TIP.

A range of representatives at different levels within the organisations were included, e.g. senior leaders, front line practitioners, staff working within learning and development training roles, in order that the organisation's journey and experience in developing trauma informed (TI) practice could be explored in depth. Each session lasted up to two hours. Of the 22 interviewees, 19 had attended a briefing session, on-boarding event, or stakeholder event. In addition, all of the interviewees attended the Level 1 and 2 training through Module 1 of the Be the Change programme, T4T or through face-to-face delivery. A topic guide was developed to structure the discussions. Standard interview questions reflected the overall project aims and aligned to the evaluation measures in order to add value to the quantitative data.

Structure of this report

This report (Part B) is a summative evaluation of the Trauma Informed Practice (TIP) project. It comprises a summary of the impact data as contained in the three report cards and also integrates the findings from the qualitative interviews, the CVS (Community and Voluntary Sector) Leadership Programme and the ACE 2020 Conference evaluation report, where appropriate. Synthesising the findings from the quantitative and qualitative data, this report concludes with implications for scaling up and sustaining TIP activity into the future. The conclusions are structured under each of the aims of the TIP project and the extent to which each were met. The implications of the research for future development of the TIP project are considered alongside a set of associated actions for taking forward.

The remainder of this report is structured under the following headings:

- How much did the TIP project do?
- How well did the TIP project do it?
- Is anyone better off as a result of the TIP project?
- Moving forward with TIP in NI.
- Conclusions

# 2   How much did the TIP project do?

Overview of TIP activity

159 sessions were delivered.

4,062 participants took part in training of which **3,626** took part in face-to-face classroom based training and **436** in online learning.
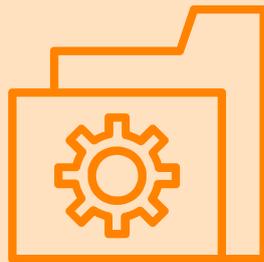
30 resources were developed to support the delivery of the project.

26 knowledge transfer sessions were undertaken.

51 project meetings and events took place[6].
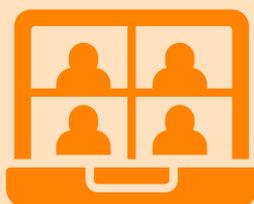
20 briefings were made to SBNI project board and departmental officials[7].

Classroom based and online training and support

Participant numbers

Overall, a total of **3,626** participants took part in the classroom based workforce development activities delivered by the EITP TIP project team and its community and voluntary sector delivery partner, ASCERT. The activity with the highest number of participants was the Level 1 ACE Awareness training with a total of **1,546** participants representing almost one-half of all participants trained.

This high proportion is largely attributed to the focus on providing this training as an entry into the more advanced Level 2 training in trauma informed principles, skills development and practices and also because this package of training was developed in April 2019 and became available prior to the rollout of other training and support.

Table 1: No. of participants trained

Activity/training	No. of participants
North West Pilot Training for PSNI Officers	350
ACE awareness information session	952
Level 1 – ACE Awareness	1,546
Level 2 – Developing Trauma Sensitive Approaches to Practice	383
Level 3 – Train-the-Trainer (T4T) Programme of Professional Development	335
Be the Change Leadership Programme	60
Total	**3,626**

In terms of online training and support, a total of **436** participants accessed the Solihull Understanding Trauma online course which was made available in late 2019. No statistics are currently available in terms of the number of participants who have accessed the Level 1 ACE Awareness and Level 2 Developing Trauma Sensitive Approaches to Practice e-learning options as these programmes were made accessible across the sectors from March 2020.

Participant profile

In terms of a profile of attendees, Table 2 below shows the sector that their respective organisation is in.

Overall, just under one-third (31%) were from the education sector, followed by the community and voluntary sector (26%), justice (18%) and HSC sector (16%). Sector representation varied considerably across the various types of training and support. The education and community & voluntary sectors accounted for the majority of those trained at Level 1 (68% combined), Level 2 (87%) and the Train-the-Trainer sessions (56%).

## Table 2: Profile of attendees by level of training and by sector

| Sector | % attendance |
	NW pilot	Awareness raising sessions	Level 1	Level 2	T4T	Be the Change	All training
Education	0%	45%	32%	24%	29%	19%	**31%**
C&VS	0%	3%	36%	63%	27%	16%	**26%**
Justice	100%	0%	18%	1%	10%	34%	**18%**
HSC	0%	36%	8%	9%	25%	25%	**16%**
Other	0%	16%	6%	3%	10%	6%	**9%**

Source: SBNI attendance records collated by NCB. Totals may not sum to 100% due to rounding

Three-quarters (75%) of those who attended classroom based training and support were frontline participants, a further 14% were service managers, whilst just over one-tenth had other roles within their organisation (e.g. senior management, funders/commissioners, administrative staff, volunteers). The profile of attendees varied according to the training level, for example:

• *The Level 1 Adverse Childhood Experiences (ACEs) Awareness training* targeted all staff within the various sectors including front end staff, receptionists, administrative staff, finance staff, service managers and therapists/service delivery staff;

• *Level 2 Developing Trauma Sensitive Approaches to Practice Training* targeted those staff who work directly with children, young people, families and/or adults who have been directly impacted by trauma relating to childhood adversity. This included, amongst others, child care providers, sure start workers, frontline police officers, teachers and pastoral care leads, therapists, social workers, key workers, and counsellors.

Figure 1: Profile of attendees by role

- Frontline practitioner — 75%
- Service manager — 14%
- Other — 11%
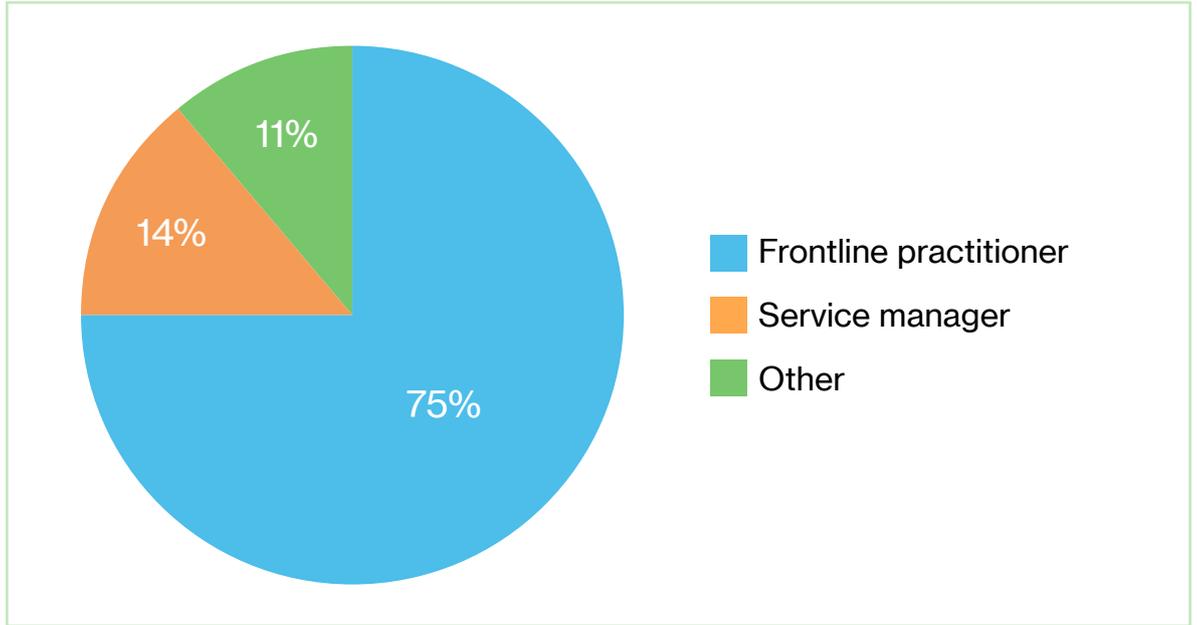
Source: SBNI attendance records collated by NCB.
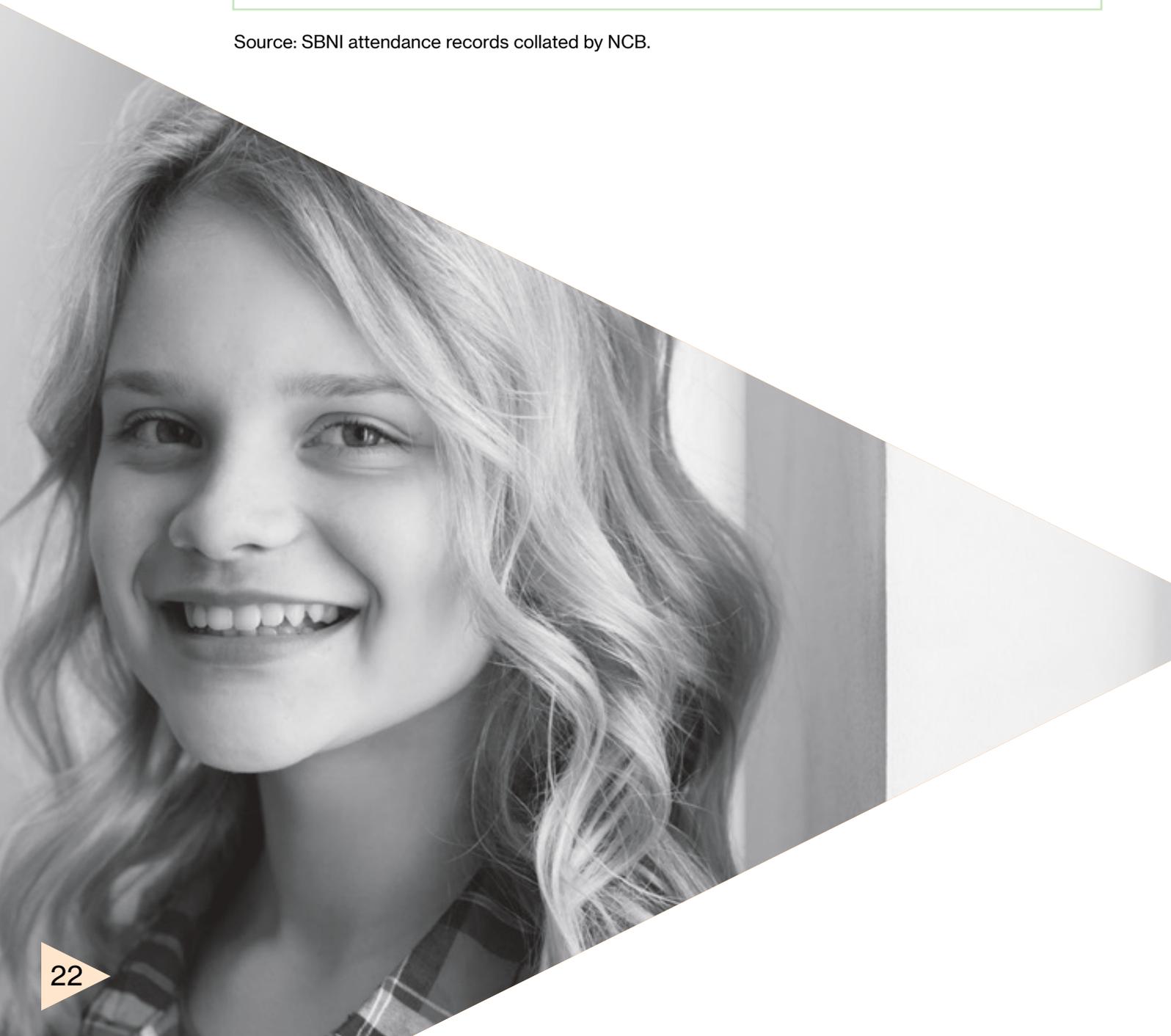
Supporting resources

A total of 30 resources were developed to support the delivery of the project. This included a wide range of materials used to support delivery of face-to-face training, supplementary learning resources, online learning resources and dissemination resources. These resources are outlined in Table 3 below.

Table 3: Resources developed

Type of resource	Resource	

Materials to support face-to-face training delivery	• Training materials for:
	  - Level 1 and 2 training programmes.
	  - A TIP Train-the-Trainer Programme of Professional Development.
	  - Be the Change Leadership Programme.
	• Bespoke and co-designed sector specific training resources for justice and education sectors.
	• Training manuals and resources for each programme of support.
	• Evaluation Forms (x5).	

Supplementary learning materials	NI ACE Animation	• Through the delivery of the TIP project awareness raising events, training programmes and knowledge transfer opportunities the NI ACE Animation has been viewed over **4,692 times** since it was developed in March 2019.

Type of resource	Resource	
Supplementary learning materials	Life Changers NI Video	• This life changers video was developed by children & young people involved in Barnardo's NI services. This video has been viewed over **341 times**. It has also been embedded within core safeguarding CYP (Children and Young People) training for Sport NI.
	ACEs Information leaflet	• **4,000** ACE Information leaflets have been distributed during awareness and knowledge exchange sessions led by the TIP project. This has included departmental briefings, GP Practice Based Learning events and ACE/Trauma related conferences.
	Trauma Lens Card	• The trauma lens card was distributed as part of the TIP project training programmes including Level 1, 2 and the Train the Trainer Programmes. This resource has also been disseminated during knowledge exchange and awareness raising events. C. **14,000** copies of trauma lens cards have been distributed since the project began.

Type of resource	Resource	
Supplementary learning materials	Help me make sense of the world brain development card	• 16,000 booklets have been disseminated within training delivery, across Sure Starts in Northern Ireland and through trauma related programmes across the sectors. These booklets were also developed in Irish with almost 11,000 shared across the Irish Medium Schools Sector. This resource is now available to access on the SBNI website and as part of the Level 2 training programme.
	Children and Young People's Stress and Resilience Leaflets	• This leaflet was developed by young people for young people. Over 40,000 leaflets have been disseminated across all education bodies including the Education Authority (EA), Catholic Council for Maintained Schools (CCMS), Comhairle na Gaelscolaíochta (CnaG) and a number of CVS organisations. This resource has been translated into six other languages and they are available to download on the SBNI website. These resources were promoted during COVID-19 as a resource for young people. The translated leaflets have also been shared with the EA Intercultural Team for dissemination.

Type of resource	Resource	
Supplementary learning materials	• Real life stories/ case studies of those affected by trauma, including: - Ryan's story - Michael's story - Sara's story	• Ryan and Michael's Story training videos were developed internally. • Sara's Story became a core training resource within the Level 2 and Train-the-Trainer Programmes. This video has been shown approximately **61 times** since it was developed in September 2019.
	Integrating Family Approaches Booklet	• The TIP project team led a collaborative between the project leads of Signs Of Safety, Building Better Futures, ACEs and Think Family initiatives to develop an approach that interweaves these models for practitioners to apply when working with children and families.

Type of resource	Resource	

Supplementary learning materials	Invictus Play based on toxic stress – Late January – March 2020	• The play was delivered to approximately 13,400 young people across Northern Ireland of which included audiences across:
		- **53** mainstream school audiences.
		- **11** Special Educational Facilities.
		  - Ulster University Faculty of Education in Coleraine – PGCE Student Teachers.
		  - Stranmillis College
		  - Include Youth – Young People and Staff.
		• The Invictus Play was also hosted by **8 organisations** for a number of professional screenings.

| Type of resource	Resource	
Supplementary learning materials	Educational Cultural Specific Training Resources	• An intercultural specific training resource was developed by the EITP TIP project in partnership with the EA Intercultural Group. This resource has been incorporated into the delivery of the Level 1 and 2 training resources within the education sector.

Type of resource	Resource
Online learning materials	• Level 1 ACEs Awareness e-learning course and Level 2 Developing Trauma Sensitive Approaches to Practice Skills Development e-learning course embedded across 18 organisations including HSC, police, probation, education, housing and the community and voluntary sector. In addition, Queens University Belfast and Ulster University have both incorporated the Level 1 and Level 2 e-learning programmes onto their interactive teaching platforms for all academic staff across social work/care, nursing and midwifery disciplines. • Solihull Understanding Trauma Online Course. As of March 2020, **436** participants from across the workforce in Northern Ireland had begun the learning modules within this course with an 85% completion rate.
Knowledge dissemination materials	• QUB (Queen's University of Belfast) Evidence Review of Trauma Informed Practice in Northern Ireland and a suite of sector specific highlight reports. • NI ACE Conference in 2019 attended by **138** representatives and NI ACE Conference in 2020 attended by **136** representatives. An ACE Conference video and evaluation report were produced following the delivery of each conference. • SBNI ACEs webpages. • QUB Evidence Review: Applying a Sequential Intercept Model in Northern Ireland (SIM) Report.

Knowledge transfer sessions

26 knowledge transfer sessions were delivered in total. Details of each of these are included in Appendix D. The purpose of these sessions was to build capacity within and across organisations to become trauma informed. They included a large range of activities from practice sharing visits, to forge collaborative links, through to sharing knowledge with stakeholders, such as universities and health and social care organisations, to support them in embedding ACEs/Trauma Informed training across their workforce or to scope opportunities to embed the key learning components of ACE/Trauma Informed Practice within current curriculums. Some specific examples of knowledge transfer sessions included:

• *World Health Organisation* – ACEs visit to Oslo: The TIP project was invited to Oslo by the World Health Organisation (WHO) partners to share trauma informed practice exemplars and explore opportunities for working consistently across the WHO network;

• *5 Nations Government ACE Forum:* The Northern Ireland ACE Reference Group continues to represent Northern Ireland at the 5 Nations Government ACE Forum in the UK. The TIP project has attended on several occasions along with partner organisations including DH (Department of Health), PHA (Public Health Agency), HSCB (Health and Social Care Board) and PSNI to share learning and seek collaboration opportunities;

• *Welsh ACE Hub Knowledge Transfer:* The TIP project developed a collaboration between the SBNI and Welsh ACE Hub to share models of practice and evaluation techniques;

- *Trauma Informed Environments Seminar:* SBNI hosted this seminar in partnership with Queens University Belfast and Trauma Informed Oregon. It focused on trauma informed care environments to promote physical and psychological safety. The resources have been used by a range of organisations to create trauma sensitive environments in prisons, schools and councils to name a few. A total of **174** people attended this learning seminar.

- *Self-Care Conference:* The conference was attended by **118** people from across all sectors but primarily those who completed the Train-the-Trainer Programme of Professional Development and the Be the Change Leadership programme. The conference emphasised the importance of embedding a culture of staff safety and wellbeing for staff leading the training programmes so that those who attend their training, some of whom may have been impacted by secondary/vicarious trauma, know where to go to get help and support.
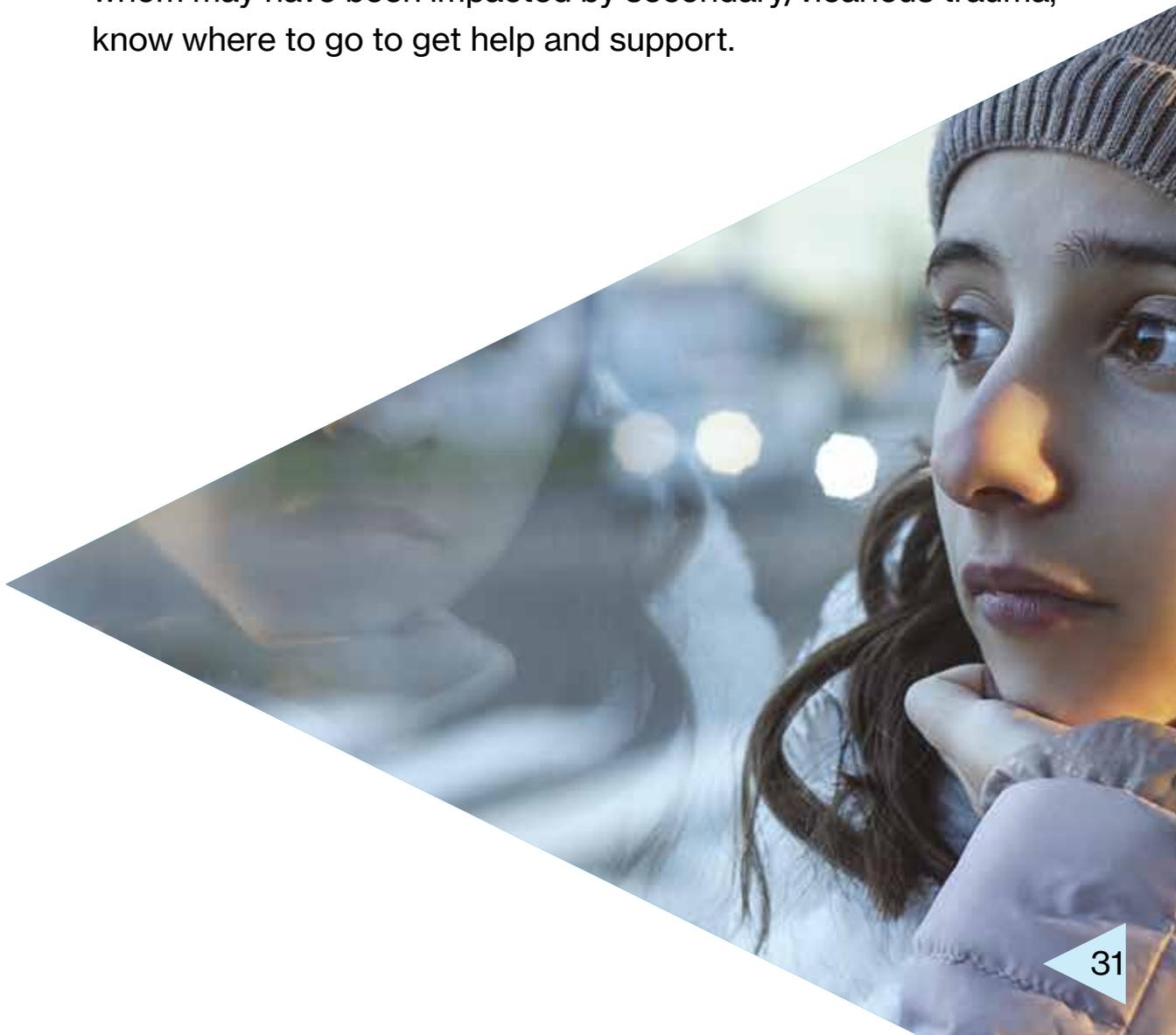
Stakeholder engagement events/meetings

A total of **51** stakeholder meetings and events took place.

Of these, 17 formal stakeholder events were delivered to stakeholders from across each of the participating sectors prior to the full roll out of the suite of training and support workshops. The sessions were jointly led by NCB and the SBNI EITP TIP project team and provided information to stakeholders on the TIP project and the range of training and support available to build knowledge and skills of ACEs/Trauma Informed principles across the workforce. The workshops were also used as an opportunity to capture further information on individual participant baseline knowledge and training gaps and organisational readiness prior to the project working with organisations to strategically consider trauma informed approaches. Further detail on the baseline training needs from each of the stakeholder events and from a regional insight has been outlined in the Part A report.

The remaining 34 stakeholder meetings and events took place in parallel with the delivery of training and support. The purpose of these was to raise the profile of the project and share information about how the project has worked/will work with organisations to embed the workforce development initiatives of the project. These meetings were important in terms of getting strategic buy-in and organisational commitment to move forward based on the identified needs of the sectors. A full list of stakeholder engagement events/meetings is contained in Appendix E.

Briefings to EITP Project Board and departmental officials

- A total of **20** briefings were made by SBNI staff. These included briefings to the EITP Programme Board, EITP Implementation Managers Forum, SBNI Board and Departmental Officials. In addition, briefings were also made to the EITP TIP project Steering Group. This group was responsible to the SBNI Board for the overall direction and financial management of the project and advised and supported the project team in the delivery of the project. The Steering Group continues to undertake a number of roles including, for example, the provision of the resources required to deliver the project and assure delivery to a required standard. The overall purpose of the briefings was to provide an update on project progress and plans for future delivery.

Summary

Overall, the programme has delivered a wide range of activities between March 2019 and April 2020. In total:

- **159** face-to-face training and support sessions were delivered.
- **3,626** individuals were trained. In addition, **436** participants benefited from online learning. Those taking part in training and support sessions came from a variety of sectors with education, community and voluntary, and justice sectors representing a combined 75% of all attendees.
- **30** resources were developed to support the delivery of the project and bolster knowledge, skills and practice development.
- **26** knowledge transfer sessions were undertaken to support organisations on their journey to become a trauma informed organisation. This included two NI ACEs conferences attended by **274** representatives across a wide range of sectors, the Trauma Informed Environments Seminar attended by **178** representatives and the Self-Care Conference attended by **116** representatives.
- **51** meetings and events took place with stakeholders to understand training needs, raise the profile of and generate buy in to the project.
- **20** briefings to the EITP Project Board and departmental officials.

3 How well did the TIP project do it?

The purpose of this section is to provide an analysis of the quality of delivery of the TIP project. This analysis used data from SBNI and partner organisations' attendance records. The remainder of this section of the report examines the following measures of project quality:

- An overview of *project scheduling performance* using data relating to planned versus actual delivery of project sessions and activities; and
- *Attendance statistics* for the range of face-to-face training and support provided to participants.

In addition, SBNI gathered additional qualitative feedback from stakeholders on the *quality of content and delivery* for the TIP Train-the-Trainer Programme of Professional Development and the Be the Change Leadership Programme. This was gathered via the administration of an end-of-training evaluation form. These evaluation forms gathered respondent views on a number of areas related to quality of delivery, e.g. quality of pre-course information, training materials and facilitation.

Project scheduling performance

The points below summarise project scheduling performance vis-à-vis the extent to which the sessions planned for delivery were undertaken.

- The average number of sessions undertaken as a percentage of those planned was high at 90%, with only one-tenth of sessions cancelled.
- Excluding the Be the Change Leadership Programme, the activity with the highest proportion of planned sessions that took place was Level 2 – Developing Trauma Sensitive Approaches to Practice Skills Development at 93%, in comparison to 88% for the Level 1 ACE Awareness training.

Table 4: Project scheduling performance

Activity/training	No. of sessions planned	No. of sessions undertaken	% of sessions undertaken
ACE awareness training and information	35	32	91%
Level 1 – ACE Awareness	82	72	88%
Level 2 – Developing Trauma Sensitive approaches to Practice Skills	30	28	93%
Train-the-Trainer Programme of Professional Development	22	20	91%
Be the Change Leadership Programme	7	7	100%
Total	**176**	**159**	**90%**

Attendance rates

The overall average attendance rate across all of the activities/ training undertaken was high at 85%. The highest attendance rate recorded was in relation to Level 2 Developing Trauma Sensitive Approaches to Practice Skills at 90%, whilst the lowest attendance rate, though still high in absolute terms, was in relation to the Train-the-Trainer Programme of Professional Development at 81%.

Table 5: Average attendance rates

Activity/training	No. of people registered	No. of people attending	Average % attendance
Awareness raising sessions	1,116	952	85%
Level 1 – ACE Awareness	1,810	1,546	85%
Level 2 – Developing Trauma Sensitive approaches to Practice Skills	425	383	90%
Level 3 – Train-the-Trainer Programme of Professional Development	416	335	81%
Be the Change Leadership Programme[8]	60	51	85%
Total	**3,827**	**3,267***	**85%**

* This excludes those police officers trained within the North West pilot as no attendance data was analysed as part of this evaluation.

In terms of online training and support, a total of 436 participants accessed the Solihull Understanding Trauma online course, of which approximately 85% had completed all 11 modules of the course.

Qualitative feedback on programme content and delivery

The remainder of this section of the report provides an account of participant views on the quality of content and delivery. It focuses on both the Train-the-Trainer Programme of Professional Development and the Be the Change Leadership Programme. No qualitative feedback was sought from participants on the Level 1 and Level 2 training as the questions included on the evaluation form were focused exclusively on capturing views on the impact of the training.

A more extensive discussion of the impacts of these, and other programmes, on participants' knowledge, skills and confidence is contained in Section 4 of this report which focuses on impact on individual participants.

Train-the-Trainer Programme of Professional Development

Those who completed this programme of professional development were invited to provide feedback on the effectiveness and impact of the programme. In particular, two aspects of the programme focused on the quality of delivery, namely:

- They had received adequate pre-programme information and notification; and
- The training was sufficiently long enough to cover the content.

Trainees were also asked to identify two of the most valuable things they had learnt. The responses to this question were analysed to understand, in more detail, participants' views on the quality of content.

Overall, the vast majority (94%) of those who completed the evaluations stated that they had received adequate pre-programme information and notification. A similar proportion (95%) stated that the training was sufficiently long enough to cover all of the content, whilst 3% stated it was too short and 2% stated it was too long.

Feedback on the quality of facilitation and training materials was very positive. In particular, the quality of the training presentations, trainer's packs and associated resource materials were noted in terms of supporting participants who attended to deliver their own training sessions.

"The structure of the folder materials will make delivery very straightforward."

"The pack given with slides etc. is a fantastic resource to have. Will make delivery of programme much easier."

"Content and handouts very useful."

"Training package excellent, especially the videos."

"Tips on how to deliver the training [was helpful]. Lovely clear presentation by Sheena and Joanne."

Be the Change Leadership Programme

The Programme engaged leaders from across a range of government departments, organisations and sectors with a variety of content and methods to support them in beginning, or in many cases, continue their journey in developing trauma informed leadership and capacity within their organisation. Table 6 below provides an overview of the Programme content.

Table 6: Overview of Programme content

Activity	Content
Onboarding	• Outline of the initiative and process • Commitment planning • ACE overview training session
Module 1: Leading from within	• Collective leadership • Emotional Intelligence • Influence and impact • Introduction of 'Live Work'
Module 2: Leading through organisation design	• Organisation design practice and change management • Service improvement and redesign • Nudge theory • Trauma informed organisational design
Module 3: Leading within systems	• Systems leadership and theory • Co-production and co-design based practice • Sustainability and spread • Shared responsibility and interdependency
NI ACE Conference: Shared Learning Event	• NI ACE conference 2020 • Group shared learning on 'Live Work' and personal development • What does the future hold?
Other supports	• 1:1 coaching and mentoring for participants • Identified 'Insight Visits' to learn from other professions, sectors or industries • Facilitators of systems transformation and Trauma Informed Practice experts sharing the latest thinking, inspiration and best practice

In addition, an integral component of the Be the Change Leadership was the live work. The thematic topic areas of the live work were chosen by the TIP project team in the planning stages of the programme. These topic areas were evidence based systemic components of cross sector implementation of trauma informed care identified within the QUB Evidence Review of Trauma Informed Care, as documented in Part A of this Project Evaluation Report.

Live work projects were able to be undertaken in one or more of the following thematic areas:

- Commissioning and service re-design/improvement;
- Physical environment;
- Governance (planning, quality assurance and evaluation); or
- Human resources (strategic policy and planning, recruitment and staff wellbeing).

Organisations were able to select up to four of the thematic areas for their live work component of the programme. A number of organisations chose to focus their live work projects across all four thematic areas as they began to explore their whole organisation's response to trauma. Many other organisations focused their efforts on developing a process/initiative based on one of the thematic live work areas as referenced above. The progress of the live work from the 32 organisations who joined the Be the Change Leadership Programme was presented at the NI ACE Conference in March 2020 through various mediums including presentations and posters[9].

In terms of the Be the Change Leadership programme, feedback[10] was elicited in relation to usefulness of the content and the quality of tutoring and materials.

In terms of the content of the programme, at least 85% stated that the content of each part of the programme was very useful or somewhat useful. This is detailed below:

- ***On-boarding:*** 85% respondents stated that they found the content of the on-boarding process very/somewhat useful[11]. A number of respondents appreciated the thinking space it provided as well as gradually easing them into the programme. A small number of participants at this point would have welcomed greater clarity around the live work and coaching elements of support. However, it is unclear whether these participants had accessed information that programme staff shared electronically via the online learning blackboard.

- ***Module 1 - Leading from within:*** 85% found the content of this module very/somewhat useful. Respondents felt the focus on Emotional Intelligence (EI) was very beneficial in terms of supporting them to recognise and improve their own response to particular events. The content on collective leadership was also viewed positively. Findings from the two-day Be the Change programme delivered to the community and voluntary sector showed 100% of those who completed an evaluation found the content useful/very useful.

- ***Module 2 – Leading through organisation design:*** 88% of those who responded found the content of Module 2 – leading through organisation design – either very useful or somewhat useful. A further 12% did not find the content of the module useful. Qualitative feedback illustrated a largely positive response to the content in terms of it being creative, engaging, interactive and innovative. A small number of respondents found it difficult to understand or see the relevance of the module to their own work context. This can ultimately reflect on the readiness of some organisations / sectors to apply their understanding of ACEs and Trauma Informed Practice within an organisational change context in their journey of becoming trauma informed.

- *Module 3 – Leading within systems:* 100% stated that the content of the module was very useful/somewhat useful. All of the open-ended comments were positive about some or all of the content presented. In particular, respondents saw great value and usefulness of the Collective Leadership session which drew on experiences from Scotland and the SEHSCT MATT (Multi Agency Triage Team) session which demonstrated the application of SIM (Sequential Intercept Model) and USD (Universal Service Delivery) approaches in practice. One respondent noted how the module helped to consolidate all of the learning of the Be the Change Leadership programme. The vast majority (93%) of those who completed an evaluation of the two-day programme for the community and voluntary sector found the content useful/very useful.

- *Coaching:* 91% of the respondents found the content very or somewhat useful. Almost all of the qualitative feedback was positive about the usefulness of the sessions in supporting them in their leadership journey. A greater focus on integrating TI practice was recommended.
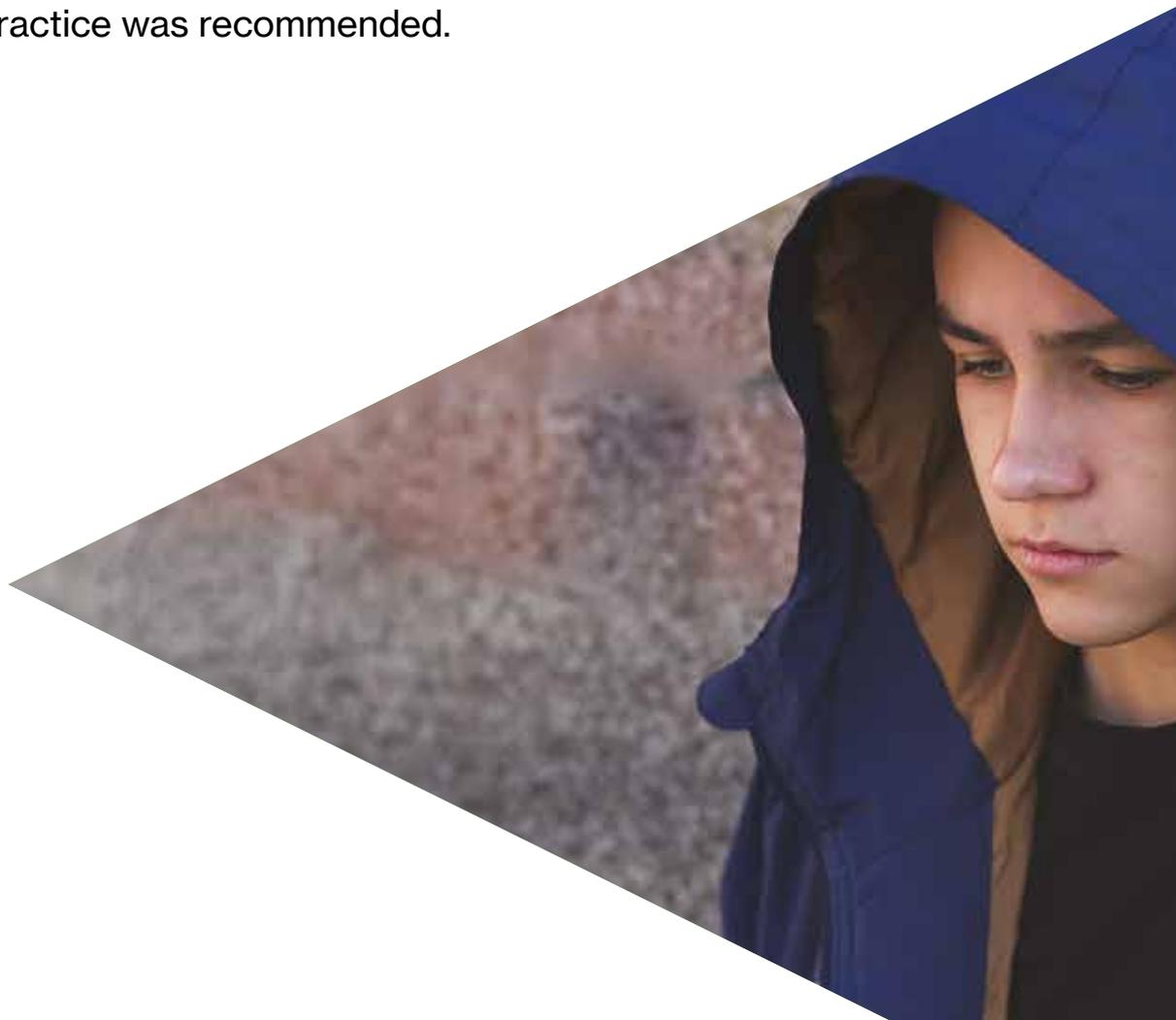
In terms of the quality of tutoring/facilitation and materials used:

- In excess of 93% of respondents were satisfied/very satisfied with the quality of tutoring/facilitation and materials used for on-boarding and modules 1 and 3.
- Satisfaction levels were slightly lower, though still high in absolute terms, for module 2 (leading through organisation design) with just over two-thirds satisfied/very satisfied with the tutoring/facilitation and over three-quarters satisfied/very satisfied with the quality of the materials used as part of its delivery. Mixed views were expressed in relation to the relevance of some aspects of the module and the quality of the content/materials used. A number of respondents reported that they felt the facilitation of the module, particularly that provided by Big Motive, was excellent and that they enjoyed it because of its contrast to their own day-to-day role. A small number of respondents felt that Big Motive had perhaps too much input to the module. Overall, the comments appeared to suggest that the input and contribution of Big Motive was valuable.

Summary

In terms of quality of delivery, the project has had a number of notable achievements, as summarised below:

- **Project scheduling performance:** the vast majority of planned activities has been delivered, with 90% of planned training and support sessions being delivered overall. Excluding the Be the Change Leadership Programme, the activity with the highest proportion of planned sessions that took place was Level 2 – Developing Trauma Sensitive Approaches to Practice Skills. The Level 1 ACEs Awareness training had the lowest proportion of planned sessions delivered at 88%, which is high in absolute terms.

- **Attendance:** Attendance at sessions was high with 85% of those who had registered for sessions attending. Attendance was highest at the Level 2 Developing Trauma Sensitive Approaches to Practice training with 90% of those registered attending.

Feedback on the quality of content and/or delivery showed that in relation to the:

- **TIP Train-the-Trainer Programme of Professional Development** – the vast majority (94%) stated that they had received adequate pre-programme information and notification and a similar proportion (95%) stated that the training was sufficiently long enough to cover all of the content. Those who completed evaluations expressed high levels of satisfaction with the content of training materials in terms of equipping them to deliver their own training.

- **Be the Change Leadership Programme** – at least 85% of those who completed an evaluation stated that the content of each part of the programme was very useful or somewhat useful. This was also the case for the two-day Be the Change Leadership programme delivered to the community and voluntary sector. In terms of the quality of tutoring/facilitation and materials used, in excess of 93% of respondents were satisfied/very satisfied with the quality of tutoring/facilitation and materials used for on-boarding and modules 1 and 3.

Is anyone better off as a result of the TIP project?

This section of the report presents the findings relating to the impact of the project. The most important question that a programme, project or service needs to answer is whether anyone is better off following delivery. This is a core question asked within an OBA framework as it moves discussions from looking at project scale and quality of delivery to examining the impact of those activities for participants, their organisation, and at a system-wide level.

Drawing on a range of findings from both the evaluations forms and interviews conducted, this section of the report examines the impact of the TIP project on a range of outcomes at an individual, organisational and system-wide level. The remainder of this section of the report is structured to capture the impact of the programme in relation to improving personal/individual outcomes (e.g. contribution of the projects' training and leadership programmes to improving the participants' knowledge and understanding of ACEs) and organisational/system-wide outcomes (e.g. contribution of the project to improving collaboration within and across organisations).

Personal/individual outcomes

This sub-section examines the extent to which the training has contributed to improving participants' knowledge and understanding of childhood adversity, trauma informed concepts/principles, and the development of skills and confidence in applying that knowledge to their practices.

In addition, this section also explores the impact of the project's training on levels of participant knowledge of staff safety and wellbeing in the workplace, particularly when working with individuals who are experiencing childhood related trauma. It also examines participant awareness of self-care strategies and support services accessible within their organisation/sector to support staff (including themselves) who may be experiencing secondary trauma as a result of the environment they are working within.

Knowledge and understanding

Figure 2 below shows the extent to which the Level 1 ACEs Awareness training has led to improvements in respondents' knowledge. It shows that in excess of 94% of those who completed an evaluation agreed/strongly agreed that the training had improved their knowledge and understanding of the various types of ACEs and how they can impact on children's later outcomes. For example, 96% of participants stated that, as a result of the training, their knowledge of the term ACEs had improved.

Figure 2: % of participants who agreed/strongly agreed that Level 1 training had improved knowledge of the...
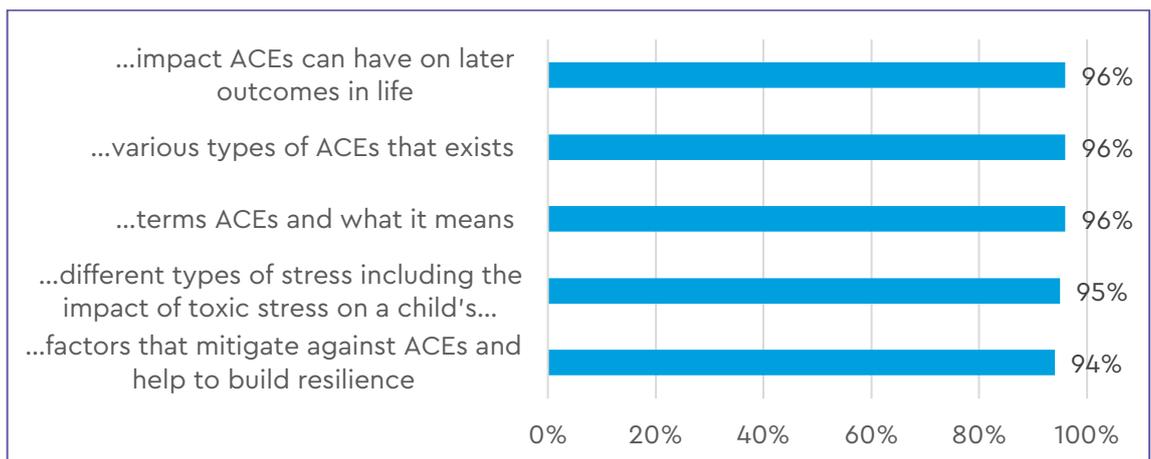

Source: Level 1 ACE Awareness evaluation questionnaire.
No. of responses: 652-654

An analysis of this data by sector of respondent showed that 100% of evaluation respondents from the education sector agreed/strongly agreed that the Level 1 training had improved knowledge of all the various aspects of ACEs as presented in Figure 2 above.

In relation to the Level 2 training, a substantial proportion of participants from across all sectors also noted an improvement in their knowledge of trauma and how it impacts on individuals. 89% or more of those who completed an evaluation stated that the training had improved knowledge of:

- the term trauma (90%);
- the various ways in which trauma can impact behaviourally (91%), physically (90%) and psychologically (89%); and
- how trauma can impact staff and services (90%).

Figure 3: Extent to which Level 2 training has improved knowledge of...

Category	Percentage
...how trauma impacts on development behaviourally	91%
...the importance of being committed to a trauma sensitive approach	91%
...term trauma	90%
...how to recognise trauma & its impacts on the dev. of the body physically	90%
...how trauma can impact staff and service users	90%
...how trauma impacts on development psychologically	89%
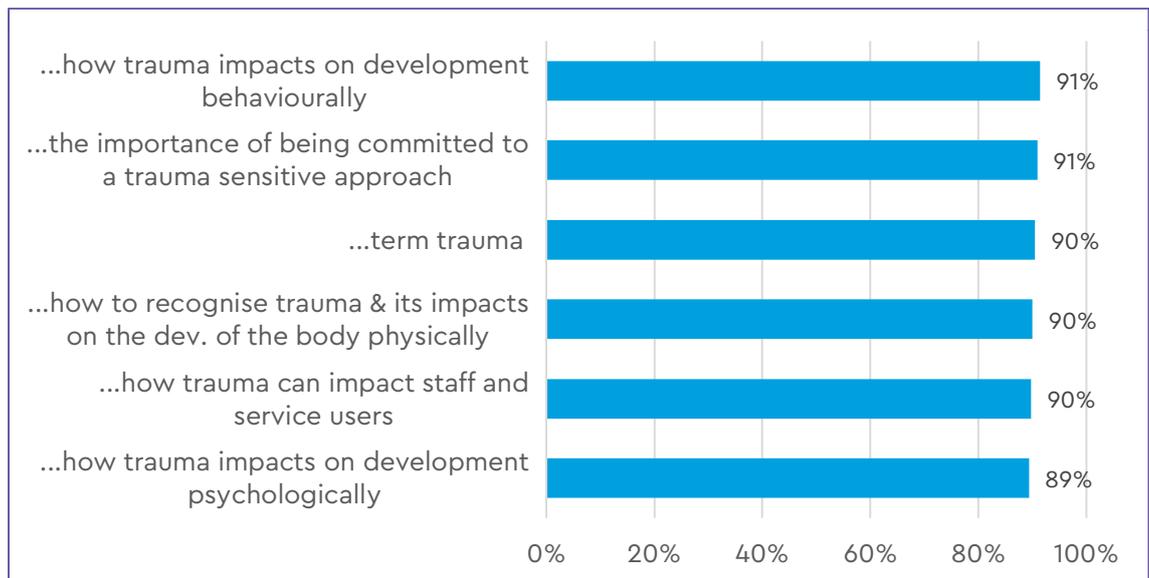
Source: Level 2 Developing Trauma Sensitive Approaches to Practice Training evaluation
No. of responses: 680-689

There were few notable differences by sector. Those who worked in the education sector were slightly less likely to agree with each of the statements – for example, 85% of those from the education sector agreed/strongly agreed that the training had improved knowledge of how trauma can impact on staff and service users. Overall, regardless of sector, at least 85% or more agreed/strongly agreed with each area of impact.

In relation to the Train-the-Trainer programme, the evaluation questionnaire illustrates that for between 92% and 94% of participants, it had helped to consolidate and enhance their understanding of ACEs/trauma informed concepts and principles, which will support them in delivering training within their own organisation. These findings are illustrated in Table 7 below.

Table 7: Impact of Train-the-Trainer on knowledge and understanding

Statement	% of respondents
My understanding of the concepts and principles underpinning a trauma sensitive approach are sufficiently developed to enable me to deliver training to others	94%
I feel I have sufficient knowledge to be able to support the development of a common language and understanding of ACEs and trauma sensitive approaches across the sector	93%
I have a strong understanding of the concepts and principles underpinning a trauma sensitive approach	92%

Source: TIP Train-the-Trainer evaluation
No. of responses: 183

A large number of evaluations identified the contribution of the Train-the-Trainer Programme to improving knowledge as amongst their top two most valuable things they had learnt whilst on the training as outlined in the comments below.

"The training helped my understanding] of toxic stress and how it manifests in the body."

"[The most valuable thing was understanding] the impact of trauma on individuals and how it can change lives... Sara's story was an excellent resource."

"[The training] really clarified and developed my knowledge of trauma and the impact on lives."

"[The training helped me gain...] more in-depth knowledge and understanding of the impact of ACEs."

The contribution of the range of training/support to knowledge and understanding was also explored with senior leaders from across the range of sectors who were interviewed as part of the EITP TIP project evaluation. The extent to which interviewees identified an improvement in this area depended largely on two factors:

- The sector within which attendees worked; and
- The role of attendees within their organisation.

Interviewees suggested that frontline practitioners with a health or social work/social care background had already accumulated a lot of the information/knowledge contained in the Level 1 training. This was largely as a result of the variety of training offering within their own organisations, therefore limited improvements were perceived to have been made by participating in TIP[12]. This, however may not be the case for those working across other HSC Trust Service Directorates, outside of children and family services, such as representatives of the Be the Change Leadership Programme from Governance, Human Resources/Organisational Development and Acute Medicine.

Outside of those with a health or social work/social care background, frontline practitioners with a behavioural support or educational welfare backgrounds were also believed to have a high level of prior knowledge of childhood adversity and trauma informed concepts. However, as shown within the formal stakeholder event training needs baseline studies, the understanding and application of these concepts in practice within their role and creating an organisational trauma informed culture of practice was somewhat limited for most. This contrasts greatly with the findings from the evaluations which showed that the vast majority (94% or greater) had reported improved knowledge and skills as a result of the Level 1 training. It should be noted, however, that the comments below were made by respondents in the context of their own organisation only and were not put forward as a point that applied more generally.

"[The] whole team attended the Level 1 awareness training... we know about these things from all of the training that we had."

Generally, for those with a justice background, the training led to improvements in staff's knowledge and understanding. For example, one organisation stated that there was a relatively low level of prior knowledge of ACEs and trauma informed principles/ concepts and that the training had provided an opportunity to help staff within their organisation to look at things in a different way and with an improved level of understanding and techniques to apply in practice. Indeed, the language used by staff has shifted from viewing children as potential contributors to their own situation to a more inquiring style of engagement. Training has shifted the dialogue towards asking questions like 'What has happened' and away from asking questions like 'What is wrong with you' when working with young people.

"The behaviour support teams and education welfare teams are very tuned into the idea that behaviour is caused by something else. There is a strong understanding of that within a lot of our services. So when the Trauma Informed Practice project was introduced, it wasn't new to us."

ACEs

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"A lot of the background on ACEs was useful. I suppose because we were designing the package for our organisation, we were aware that [our staff] might say that ACEs could be used as an excuse. [Before the training] we wouldn't have the knowledge, [e.g.] in relation to brain building. It helped [us] to look at things in a different way."

"The big thing is dealing with [vulnerable] children – they can be quite challenging to engage with normally. It's been really key to our training… the change in language and how we speak to people – 'what's happening' is used instead of 'what is wrong with you'. We all know now some of these things can be quite judgemental. A lot of these kids are doing things because they are trying to address issues in their lives and this is the only way they know to do that."

In addition to the above, a number of interviewees noted how administrative staff in their organisation often felt overlooked and that the impact of secondary or vicarious trauma experienced as a result of their interactions with service users was not always acknowledged. The training, they believed, helped to challenge the myth that support to deal with vicarious trauma was only for professional staff. In addition, it supported improved levels of understanding of vicarious trauma generally and improved awareness of where staff might go to get more support. For many organisations, staff safety and wellbeing became a pivotal part of strategic organisational planning through the Be the Change Leadership Programme live work projects. Some initiatives have been developed since their attendance on this programme and have been documented in Part A of this Project Review Report.

"There was a significant [number] of administrative staff who didn't know what support was available to them... One comment really resonated with me was they didn't think the support was for them... they thought it was for the social workers, nurses, the clinical staff who are very obviously traumatised."

> *"There was a low percentage of staff who knew what vicarious or secondary trauma was... [there was an] improvement in that shared understanding – what the terms means."*

In addition, even in organisations where knowledge of trauma informed principles/ACEs was considered to be well developed, a number of interviewees noted that the support provided through TIP had yielded a range of benefits in terms of enhancing and building upon existing knowledge. Table 8 below illustrates the range of views put forward.

Table 8: Contribution of TIP to enhancing existing knowledge and understanding

Benefit	Supporting evidence
• Improved access to the latest up-to-date research in TI/ACEs to map their current activity to best practice	*"It has been good to revisit the research and take the time to read through it. The green booklet [QUB evidence review] was excellent - absolutely brilliant... it gave me a way to map that to what we were already doing... the research was really important."*
• Enhanced link between theory and practice	*"[The training] increased their knowledge and they were able to link the theory to their day-to-day practice."*
• Underpinned existing knowledge and reinforced the TI messages of other training within the organisation resulting in improved levels of empathy and understanding	*"We had a discussion around the content [of the e-learning] and we found it absolutely significant... there is a lot of theoretical underpinning... I like the tools in the training... simple and can be used... very helpful..."*

Skills and confidence

Level 1 ACE Awareness Programmes

The Level 1 ACE Awareness training sought to raise awareness of what defines childhood adversity and provided basic skills development to enhance the participants confidence in working in a trauma informed way. Figure 4 below shows that 85% or more of those who completed an evaluation stated that the training improved both their confidence and skills across their organisation and in particular for frontline staff who work with clients experiencing trauma as a result of their childhood adversity.

For example, 93% stated that the training had illustrated the importance of working with clients to build strong and secure relationships as a way of mitigating the impact of ACEs. In addition, the vast majority of respondents (92%) stated that the training had supported their understanding of what a trauma lens was and 85% stated that it had given them greater confidence to use a trauma lens in their practice. By sector, there were no notable variations from the overall high proportions of respondents who reported improvement in their skills and confidence.

Figure 4: Extent to which Level 1 training has improved...

| Category	Percentage
...understanding of the importance of building secure relationships for individuals that will help mitigate ACEs	93%
...understanding of the importance of staff health and well-being when working with others in a trauma informed way	92%
...understanding of what a trauma lens is	92%
...ability to recognise and understand how trauma presents in others	92%
...awareness of my own levels of empathy and the importance of this to working in a trauma informed way	90%
...awareness of what a trauma informed approach is and what it entails	89%
...ability to apply a strengths based approach to my practice	88%
...confidence in using a trauma lens to respond appropriately to a child, adult of family experiencing trauma in response to childhood adversity	85%

Source: Level 1 ACE Awareness evaluation questionnaire.
No. of responses: 645-650

Level 2 Developing Trauma Sensitive Approaches to Practice Training

The Level 2 Developing Trauma Sensitive Approaches to Practice training aimed to build upon the knowledge and awareness and the skills gained in the Level 1 ACE Awareness programme, alongside deepening skills and techniques that staff could consider when applying trauma informed practice in their roles. The findings show a similar picture for Level 2 training in that between 85% and 92% of respondents from across the sectors agreed or strongly agreed that the training had given them greater understanding and insight into a range of factors that would help to build resilience in those who experience trauma and that the training had supported them in making effective use of a trauma lens in working with those experiencing trauma.

These findings are illustrated in Figure 5 below. By sector, there were no substantial differences vis-à-vis the high proportion of respondents who reported improvements in the areas below.

Figure 5: Extent to which Level 2 training has improved...

|	
... understanding of the importance of being equipped to manage behaviour and emotions to help build resilience	92%
... understanding of the importance of feeling you can overcome hardship and guide your own destiny to help build resilience	92%
... understanding of the importance of having 1 or more stable caring child-adult relationship(s) to help build resilience	92%
... understanding of the importance of being involved and connected as a means to help build resilience	92%
...confidence in identifying the internal and external factors associated with resilience	88%
... understanding of how not to re-traumatise those who we support who are experiencing trauma	86%
... the effective use of a trauma lens to respond to those experiencing trauma	85%

Source: Level 2 Developing Trauma Sensitive Approaches to Practice Skills Training
No. of responses: 687-692

Train-the-Trainer programme of professional development

The Train-the-Trainer programme primarily sought to build participants confidence and skills to be able to cascade Level 1 and Level 2 training to other members of staff from within their organisation or externally. The training builds on existing awareness of brain development, emotions and behaviours and TI skills but also supports the development of other training related skills, e.g. in making effective use of group work to allow those trained to contribute their views. The findings from the evaluation forms suggest that the vast majority of respondents (86% or greater) felt equipped with the appropriate skills to deliver their own training sessions and associated interactive group based learning exercises.

Figure 6: Impact of Train-the-Trainer on skills and confidence

I am confident I can deliver all aspects of a trauma sensitive approach to a very high standard	91%
I feel confident that I can effectively manage groups to effectively develop those I train in the future	91%
I feel confident to be able to manage the group work exercises so that everyone has an opportunity to contribute their views	92%
I feel confident that I will be able to respond appropriately to questions in relation to the key concepts and principles of a trauma sensitive approach	89%
I can anticipate the potential aspects of a trauma sensitive approach that might be difficult for others to grasp	86%

Source: TIP Train-the-Trainer evaluation
No. of responses: 182-183

A number of respondents who attended the Train the Trainer Programme and completed an evaluation form identified the contribution of the training towards improving skills and confidence as one of the most valuable things they had learnt as a result of the training. Some respondents appreciated the opportunity to receive feedback on presentation skills – an opportunity not normally afforded in other contexts. Others felt that they had gained a better understanding of how the training has given them the skills to build resilience in those they work with, particularly for those who may have been impacted by their own or others childhood experiences.

"[I have learnt] the importance of being trauma aware and how to support and scaffold resilience."

"The feedback session on presentation skills – [we] don't often get opportunity to do this."

"[One of the most valuable things was]… delivering [the] training [and the] skills to look out for [in] managing a group."

Be the Change Leadership Programme

The Be the Change Leadership Programme seeks to develop a range of leadership skills to support leaders in their organisation's journey to becoming a Trauma Informed (TI) organisation and contributing to building a trauma informed Northern Ireland through consistency of approach and language.

Overall, 85% or more of respondents agreed or strongly agreed that their personal outcomes had been achieved as a result of their participation on the programme.

For example, the overwhelming majority (97%) stated that their involvement on the programme had helped them to become an agent of change by supporting them to apply their learning to practice within their team/service, across their organisation and across the system. This has been through their role ongoing communication and disseminating of information across service teams and applying trauma informed decision making processes across their service/organisation as a result of attending the programme. Findings from the evaluation of the two-day Be the Change Programme for the community and voluntary sector were consistent in showing at least 86% or more who agreed/strongly agreed that their personal outcomes were met.

Figure 7: % of respondents who agreed/strongly agreed that each of the following personal outcomes were achieved

To become an agent of change by supporting me to apply my learning to practice within my team, across my organisation and across the system — 97%

To further develop my networks and relationships within and across the system. — 91%

To develop my leadership skills and enhance my emotional intelligence, resilience and confidence so that I can operate with a growth mind-set. — 88%

To understand and apply the tools of organisational design and systems transformation within my organisation — 85%

Source: Be the Change Leadership Programme Evaluation
No. of responses: 34

The qualitative findings from the interviews with senior leaders who participated on the Be the Change Programme similarly point to the benefits of the TIP project and associated training/ support in terms of enhancing skills and improving self-confidence including:

- Boosting confidence of individual participants to find their niche and drive forward the trauma informed agenda within their own organisation.

"I had imposter syndrome at the start. But I stuck with it and started looking at things through a TI lens. It did help me to find my place. [The support] was really beneficial. I found it very helpful on a personal level... to believe in what I was doing."

- Helping to sharpen and refine practices and reflect on how childhood adversity may potentially impact child development and later outcomes across the lifespan for that individual and their families who are presenting within and across their services.
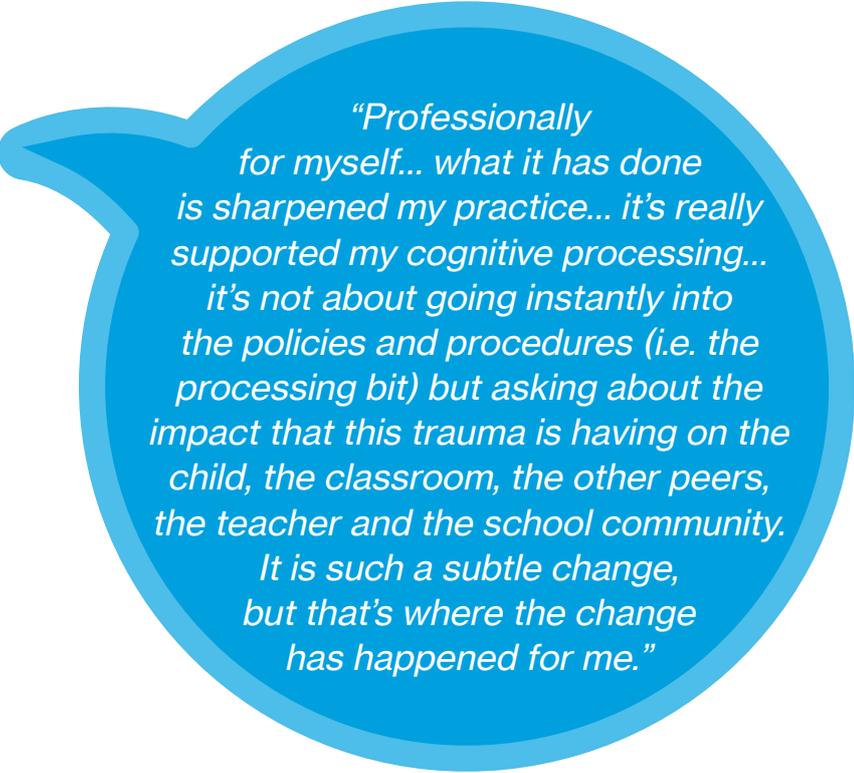
"Professionally for myself... what it has done is sharpened my practice... it's really supported my cognitive processing... it's not about going instantly into the policies and procedures (i.e. the processing bit) but asking about the impact that this trauma is having on the child, the classroom, the other peers, the teacher and the school community. It is such a subtle change, but that's where the change has happened for me."

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- Strengthening practice by enabling staff to reflect on their own role within their organisation by recognising secondary or vicarious trauma in themselves or other colleagues and being in a position of to offer support or signpost to a more appropriate service.

"The TI practice has really brought it home... change starts with me! Before the training, I would have seen it as the [responsibility of] other people but it is now acknowledging "What about that staff; what they are going through." Managers are now aware and are providing that support... TI has made us more aware that when a crisis happens... take a cup of tea, think about it, reflect about it... people acknowledging... people don't have to talk a lot about what has happened to them in their past... the fact we are more sensitised... more aware now.... We need to support each other."

Notwithstanding the above, a number of those interviewed did, however, express concern in relation to the temptation amongst some practitioners to perhaps equate the number of ACEs with the level of needs of a child/young person. Interviewees urged caution against this citing the importance of looking at the impact of individual ACEs on children, young people and well into adulthood as some may have little or no impact on outcomes whilst others may disproportionately impact. These comments were put forward as a general area of concern within a number of the organisations and were not referenced specifically in relation to the training and support provided as part of the TIP project. They reflected

on the importance for practitioners of applying their ACEs awareness and TI principles and concepts developed as a result of participating in training and support within their practice in a strengths based way rather than viewing them within a deficit based model. Indeed, the training and support provided by the TIP project reinforces the importance of examining the potential impacts that research and practice have associated as a result of experiencing an adversity/adversities during childhood without the right support and mitigating factors in place. This is regardless of how many adversities an individual may have experienced during childhood; with the right support, potential negative impacts can be mitigated*.

"Counting ACEs is not productive; [one] should be looking at resilience. I did get the training and you could think to yourself, I'll just get my list out and say you have got 5 ACEs... the reality is there were some cases where I thought it was really helpful and a child could have had 5 or 6 ACEs but they actually didn't need a service involvement because they were either resilient themselves or they had resilience in their family. That is my fear with widespread training is that people suddenly see themselves as mini-experts."

*   It is important to note that counting of ACEs was not encouraged during the TIP project training and associated programmes. The ACE and TIP training and support provided by the EITP TIP project reinforces the importance of examining the potential impacts that research and practice have associated as a result of experiencing an adversity/adversities during childhood without the right support and mitigating factors in place. This is regardless of how many adversities an individual may have experienced during childhood; with the right support, potential negative impacts can be mitigated.

"If you keep counting ACEs, that feels to me like a deficit model. Counting ACEs should only be a way to get to understanding need and then move on to get the more strengths-based approach. Our Director of Children's Services is very clear where she wants us to get to... it's a place of understanding but it's a precursor to a much more strengths-based approach with those young people."

Staff well-being and self-care

A key aspect of both the Level 1 and Level 2 training is to improve individual's knowledge of where they can go to get help or support to manage the impact of secondary or vicarious trauma if/when staff may experience it. In relation to the Level 1 training, almost three-quarters (74%) or more of those who responded stated that the training had improved awareness of their own coping strategies, improved their awareness of the support services available in their own organisation and had improved their ability to access these services.

Figure 8: Impact of Level 1 training on staff well-being and self-care
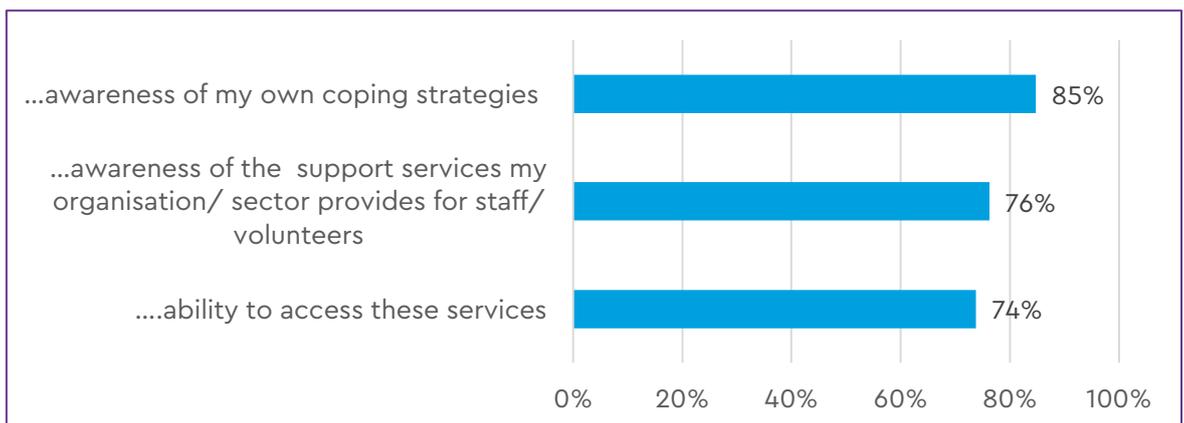
Source: Level 1 ACE Awareness evaluation questionnaire. No. of responses: 644-646

The impact of Level 2 training in terms of staff welfare shows a similar level of impact. Overall, the training enhanced participants understanding of the importance of self-care and the need to protect their own health and well-being with 90% of participants agreeing/strongly agreeing that the training had supported their understanding of the need to promote and protect their own health and well-being.

The training also supported the vast majority of participants' (85% or more) understanding of how secondary and vicarious trauma impacts on their own health and that of their colleagues. In addition, almost four-fifths of participants (79%) agreed that the training improved their understanding of the strategies and support available in their own workplace to protect their physical and emotional health and well-being.

Figure 9: Impact of Level 2 training on staff well-being and self-care
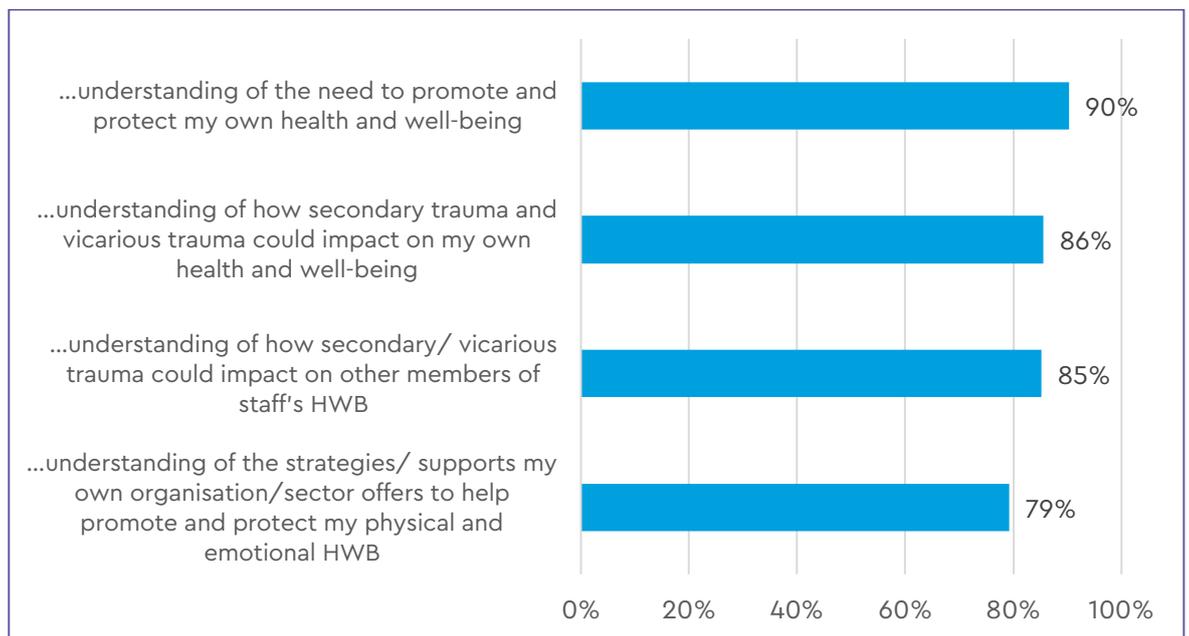
Source: Level 2 Developing Trauma Sensitive approaches to Practice Skills Training evaluation
No. of responses: 678-682

In addition to the staff safety and self-care elements of the Level 1 and Level 2 training programmes, the TIP project team hosted a self-care conference in January 2020 with Dr Tony Humphries to enhance further learning around the subject matter. Dr Humphries is a consultant clinical psychologist, author and international speaker on self-realisation and practical psychology.

This conference provided an opportunity for the 120 participants who attended the event for continuous personal reflection on their own wellbeing and explore opportunities to encourage staff to put themselves first prior to supporting their service users in order to reduce/mitigate the impact of vicarious trauma. Dr Humphries encouraged trainers and leaders to mobilise their teams to ensure conscious practice and psychological safety for both staff and clients.

Organisational/system wide outcomes

This sub-section examines the extent to which the project has contributed to the achievement of organisational/system-wide outcomes.

Two aspects of this have been explored within this section: firstly, the contribution of the project to improvements in levels of collaboration both within and across organisations; and secondly, the extent to which the project has supported organisations to integrate knowledge about trauma into organisational policies, procedures and practices which was a core aim of the project.

Collaboration within and between organisations

Senior leaders who completed an evaluation of the Be the Change Leadership programme were asked for their level of agreement in terms of the extent to which the programme had supported their organisation in collaborating with other organisations across the system. A total of 85% agreed or strongly agreed[13] that it had supported them and their organisation to enhance collaboration.

Findings from the qualitative interviews also point to the positive impacts that the training and support (e.g. the Be the Change Leadership Programme, T4T) have had on enhancing levels of collaboration. Interviewees valued the inclusiveness of a range of Government Departments, organisations and sectors very highly and welcomed the opportunity to network outside of their own teams or organisations – this was particularly welcome for developing leaders.

"Whenever we did the Train-the-Trainer programme – I was so impressed to see the mix of people in that room. The difference with this training, compared to others we have been on, is the way it has included everyone."

"The networking to know what was going on was helpful."

A number of interviewees noted a range of benefits that have materialised because of the TIP project team support provided, including:

- Improved knowledge and understanding of why collaboration and cross-organisational work is needed to mitigate the impact of childhood adversity.

"Sara's story [a training resource] was very powerful. It showed us all doing our silo working... education were doing their bit; the police arrested her for doing drugs... everyone does their wee bit and [you can] see the negative effects on her. If we worked more closely together, we may well have mitigated a lot of damage."

- Reduced silo working within organisations and the promotion of greater levels of cooperation and communication across teams, internally.

"The project, in and of itself, has pushed us to collaborate more both in terms of our own directorates; otherwise we [would have been] siloed. The training programme [we are putting on] will be a collaborative piece between child protection, psychology, education welfare, behaviour support... so it won't be unidisciplinary... I see it as a collaborative piece... the collaborative part is critical to that."

- Increased cooperation across organisations to enhance and enrich the quality of training and support.

"Definitely increased collaboration for us... we were able to have the police, the ambulance service, the trusts come together... and we shared stories and learning from other [organisations] ... [it was] good to share those experiences."

One organisation, in particular, noted how the live project work on the Be the Change leadership programme had enabled staff from across a range of departments within their organisation to collaborate to make tangible improvements to the existing physical environment for the benefit of children, young people, families and adults using their services, whilst also involving them in the process. Their involvement in the programme supported them in re-designing the physical spaces across the range of touch points internally within their service centres and the support provided through the leadership programme and TIP project team has influenced how they will design future custody suites to ensure they are trauma sensitive.

"One of the things we are looking at is the physical environment... I think we have connected in more with the likes of our estates department.... young people are contributing to what is needed. Estates are listening to them."

"We have a [number of] custody suite[s]. As a direct result of being on that leadership programme and seeing that co-design/ story board processes to see where the touch points are... that enabled me to sit down with our custody planners. We made changes to [a] custody suite as much as we can given that it has already been built. I met Professor Sarah Hull at the Rowan Centre in Antrim – she gave us advice on textures, colours and lighting that we will hopefully be able to incorporate. We story boarded the process from when the person is arrested and when they arrive... where are all the points where we can see where ACE/TI practice fits in. The physical design of our next custody suite build has changed – we have added an extra standalone wing purely for children... that would not have happened [without this project]."

A suggestion put forward to enhance this even further, specifically in relation to the live work of the leadership programme, was to expand the scope of collaboration across sectors rather than within organisations.

"We should have been identifying the themes or projects that we could have worked on collaboratively. [For example] school exclusions... if [we] had done some of that from a TI perspective... we are going to get the teacher, the social worker etc. together and take a trauma approach lens... why are these kids excluded from school. A real opportunity lost."

It should be noted, however, that the Be the Change programme provided a range of resources to demonstrate how organisations might collaborate more effectively (e.g. Sequential Intercept (SIM) and Universal Service Delivery models) and encouraged organisations to work together on their live project work. Indeed the evaluations showed that a significant majority (85%) agreed/ strongly agreed that the project had been successful in supporting organisations to develop a collaborative approach to trauma informed practice across the system. Much of the onus rests on organisations working together on their own initiative to deliver their live project work and maximise opportunities for collaboration. Whilst a number of projects have been delivered on a cross-organisation basis, there is considerable scope for organisations in any future participation in the Be the Change programme to enhance this even more. This is important given that organisations themselves recognised the need for strong levels of working together across organisations as the basis for improving outcomes for children and young people and keeping them at the centre of systems change.

The TIP project supported the delivery of two ACE Conferences in Northern Ireland in 2019 and 2020 through its position on the Northern Ireland ACE Reference Group. The NI ACE Reference Group was established to support continued momentum and integration of the ACE agenda in Northern Ireland and support the Early Intervention Transformation Programme (EITP) Trauma Informed Practice Workforce Development Project.

Both conferences were attended by senior leaders from across a wide range of sectors including government departments, health & social care, justice, education, community and voluntary, housing and local councils. The conferences were viewed positively by attendees in terms of showcasing how TIP enhanced levels of collaboration and learning locally and through international networks. It also provided attendees with an opportunity to further enhance their relationships and networks across the system and served to reinforce the need for enhancing levels of collaborative working going forward.

"[The conference] built upon the relationships developed on the Be the Change programme."

"[The conference was] informative and [it] really focused on the need for collaborative working."

Integrating knowledge about trauma into organisational policies, procedures and practices

Senior leaders who were interviewed as part of the qualitative research for the TIP Practice evaluation were invited to offer their views on the contribution of the TIP project towards supporting the development of trauma informed organisations. The consensus was that organisations are only at the beginning of that journey. Further information about the progress of organisations who began their trauma informed journey through the Be the Change Leadership Programme have been outlined in Part A of this report.

"We are on a journey... I kind of see we are at the beginning stages of that journey."

"[It is] too early in the journey. We have only been on the journey for nine months, not nine years..."

A number of interviewees specifically mentioned that their organisation had plans for developing and enhancing current organisational strategies and policies to incorporate trauma informed language and principles. Indeed, it is evident from a number of these organisation's strategies that the process for some is well underway. For example, ACEs and trauma informed practice is heavily referenced in DOJ's (Department of Justice) Strengthening Family Relations Strategy[14] and in the Executive's Children and Young People's Strategy for Northern Ireland[15]. In addition, one of the strategic objectives of the Chronic Homelessness Strategy[16] states that it is keen to raise awareness of prevention through early intervention, by identifying potential

ACEs

Adverse
Childhood
Experiences
Be the Change

risk indicators including how adverse childhood experience can be used as a chronic homelessness indicator. The TIP project, many believed, had helped to accelerate their organisation's journey towards becoming a trauma informed organisation working consistently across the system.

"Trauma Informed principles are referenced in the staff well-being policy so we can use this policy to advance the TI principles and practice. In other Child Protection and Safeguarding Policies, it may not be referenced as TIP but it has similar language."

"I have been tasked with developing a strategy and implementation plan to take forward a TI journey. It was therefore very timely and the training on Be the Change [has] helped us to create our strategy. It has been a really useful and positive experience."

"[The] Be the Change programme will help contribute to development of our strategy: It was part of our corporate strategy that we would go on this journey."

In addition, two areas in which the TIP project had helped were noted. Firstly, the TIP project supported some organisations to integrate knowledge about trauma into their organisations policies and procedures in terms of staff supervision and support procedures and strategic business plans for the organisation. Secondly, the project supported organisations commitment to ongoing continuing professional development of staff, i.e. to build capacity internally to continue delivering and cascading training and support. This helped to ensure the training programmes were sustained within organisations across the sectors thus reducing dependency on the TIP project team. These organisational impacts are discussed below.

- *Staff supervision and support procedures:* A number of interviewees believed that the project had spurred on organisations to reinforce supervision and staff support processes to make sure that account is taken of the impact of vicarious trauma on staff. The TIP project, in their view, has helped organisations to understand the need for processes (e.g. in relation to debriefing processes following a serious incident) to be inclusive of all staff, including administrative staff. It also underlined the need for staff to know where to go to get support if they are dealing with the impacts of vicarious trauma. For others, the project served as a reminder of the need for organisations to become more compassionate in terms of those who were returning to work after being off on sick leave, potentially as a result of vicarious/secondary trauma in the workplace.

"Sometimes I think when someone goes off sick... sometimes we are not desperately compassionate... someone is away off sick and we don't look at what's going on. So I think this training has challenged our organisation in relation to if we are going to be compassionate, what do we need to do that? If we are committed, we need to change how we practice."

"[We are looking at] how our supervision can look at vicarious trauma and the impact of that on staff... [its] something [for us] to look [at] down the line."

"We have changed our process as a result of doing this work. It's about self-care – we have a debrief process... one of the things we are making sure of is that admin staff are involved in the process. We have devised a checklist: what debrief happened; what supports are available for that person? We are sending out information on self-care as part of the SAI (Serious Adverse Incident) process... that is one of the things that came out of our session is that people didn't know where to go to get supports... they didn't know half of the supports existed."

- ***Commitment to professional development of staff:*** The findings from the Train-the-Trainer Programme evaluation suggest that almost three-quarters (72%) of respondents believed their organisation would fulfil their commitment to deliver at least three training sessions following the initial support provided to them. In addition, similar proportions of respondents (between 69% and 73%) believed that their organisation would provide them with the necessary time to plan, deliver and review their session delivery. It is clear from the interviews with senior leaders that there is a strong commitment to deliver ongoing ACE/TIP related workforce development opportunities and ensure appropriate provisions of support for staff in their organisations. The Train-the-Trainer programme was specifically mentioned in terms of enhancing capacity to cascade training and support to other colleagues in their organisation.

"We had between 30 and 40 staff trained as trainers. The notion of the Train-the-Trainer is that if you want organisations to deliver this beyond March, you need to provide this training. We have a number of staff who have a personal teaching remit and our intention for next year is to have a training programme for TI practice using the skills and knowledge of these people."

"We have put together a plan to agree a way forward in relation to a training programme for teachers and our own staff."

Organisations can, of course, learn from the experiences and best practices of other organisations that are further ahead in terms of implementing trauma informed principles and practices. However, a number of interviewees were concerned that an inconsistent approach could emerge where some organisations move at a very different pace to others across the system or where internal organisational structures might hinder the development of consistent approaches.

"If you tried to do this with five Education and Library Board (ELBs) it would have been chaos... Within the Education Authority there is [now] a level of coordination and consistency... I do wonder what it's like for [other organisations that have] quite discrete [operational units]... we have overcome that piece..."

"We are not the only organisation working with families... It's only going to work if everybody is working at the same pace."

Given the potential for inconsistent approaches to emerge across organisations, interviewees noted a continuing role for the existing regional approach led by SBNI to continue to develop consistent trauma informed strategies and policies across Northern Ireland.

"Given SBNI has been leading on this and they have all the multi-agency partners around the table, some of whom sit on the policies and procedures sub-group... [They could] look at developing a policy. Why would all the Trusts do something different?"

Summary

The findings reported in this section show many areas in which the TIP project has positively impacted on both personal outcomes and organisation/system wide outcomes. The following summarises the findings from both the workshop evaluations and the qualitative interview findings:

- **Personal outcomes**
  - **Knowledge of ACEs/TI principles:** Between 89% and 96% of those who completed an evaluation for the Level 1 and Level 2 workshops reported an improvement in their knowledge of ACEs and TI principles and concepts and how trauma impacts on the body physically, psychologically and behaviourally. Whilst the quantitative data showed little variation according to the sector of the respondents, the qualitative research showed that extent to which training impact varied according to the sector within which attendees worked and the role of staff within their organisation. The vast majority (92%) or more of programme participants indicated that their knowledge of TI concepts and principles was sufficiently well developed to enable them to deliver the Level 1 and 2 training programmes across their service teams/organisation. They also indicated a confidence in being able to lift and apply key learning components of the training programmes and embed them within other associated training programmes that already existed within their organisation, for example, within safeguarding training. There were few substantial differences by sector of respondent.

- **Skills and confidence:** Between 85% and 93% of those who participated in the Level 1 and Level 2 workshops reported an improvement in their ACEs/TI skills and expressed greater levels of confidence in terms of embedding ACEs and trauma skills in their practice. The findings from the Train-the-Trainer evaluation show that a large majority (86% or greater) of evaluation respondents felt equipped with the appropriate skills to deliver their own training sessions. The findings from the qualitative interviews are consistent in pointing to the positive impact of the training on developing knowledge and embedding ACE/TI principles in practice. Notwithstanding the above, a number of those interviewed did, however, express concerns in relation to the temptation amongst some participants to equate the number of ACEs with the level of needs of a child/young person. These were raised as general points within specific organisations and not related to the TIP project. There were no significant differences by sector of respondent.

- **Staff well-being and self-care:** 74% or more of those participating in the Level 1 and Level 2 training agreed/strongly agreed that the training had enhanced participants understanding of the importance of protecting their own emotional health and well-being as well as that of their colleagues. The training also contributed to an improved understanding of vicarious/secondary trauma and where staff might access support within their own organisation to manage this.

- **Organisational/system-wide outcomes**
  - **Collaboration:** Stakeholders interviewed as part of the qualitative interviews were unanimous in the view that the support provided by the TIP project had supported improved collaboration both within and between organisations. The live project work, a core part of the Be the Change leadership programme was singled out in terms of its contribution to promoting collaboration. Indeed the evaluations of the Be the Change Leadership Programme showed that a significant majority (85%) agreed/strongly agreed that the project had been successful in supporting organisations to develop a collaborative approach to trauma informed practice across the system. Notwithstanding this, there is still some considerable scope to maximise the opportunities that the live work project presents to organisations in terms of working more collaboratively with other organisations within and across sectors.

  - **Integrating knowledge about trauma into organisational policies, procedures and practices:** Senior leaders who were interviewed believed it was too early following the delivery of the initial TIP project and associated support to identify significant impacts of the project on organisational policies, procedures and practices. However, a number of emerging impacts were noted in relation to improvements in staff supervision and support procedures, where processes were reviewed to be more inclusive of all staff (including administrative staff) and more information was provided in relation to vicarious trauma. The project also enhanced organisations commitments to Continuing Professional Development of staff and increased their capacity to sustain and continue to cascade ACE/TIP training within their organisations. The need for a consistent approach to developing trauma informed policies, procedures and practices within and across organisations was noted by interviewees to help ensure consistent service user journeys across the system. The existing regional approach led by SBNI to develop consistent trauma informed strategies and policies across Northern Ireland should continue.

5 Supporting further development of TIP in NI

This section examines what further support would help organisations to move forward with embedding TIP at a system wide level.

Enablers for the further development of TIP

Interviewees and evaluation respondents identified a range of factors that could help to take forward an ACEs/TI agenda and support them in their journey to becoming trauma informed including:

- **Compassionate leadership styles and embedding values of compassion and empathy:** A cultural shift within organisations to value compassionate leadership behaviours is viewed as being critical to development of a TI organisation. Without this, it is difficult to expect frontline staff to value compassionate leadership behaviours if their leaders do not value or display them. A number of attendees at the NI ACE conference in 2020 noted the importance of leadership embedding core values within their organisation's frameworks and business plans, whilst others attributed the need to embed values such as kindness and compassion as priorities for their organisation going forward.

"You are dealing with complex organisations… and until [leaders in our organisation] display more compassionate behaviours and until they are measured and focused upon… until we measure compassionate leadership styles… we [will] not be holding people to account for behaviours across the organisation. We have already started that [cultural change]."

"[Our priority is to] embed the values of love, kindness, compassion and empathy."

"I intend to work with my team to write a business plan based on [core] values... walking the walk."

- **Trauma informed commissioning models:** A change in the funding and commissioning environment to support more effective incorporation of trauma informed principals into mainstream programme/service delivery was suggested by a number of interviewees. Alongside this, there was a recognition that incorporating ACEs/trauma informed principles into service delivery requires additional time and resource. However, for this to be fully recognised, funders/commissioners may require greater involvement in TIP activities going forward so that they more fully appreciate the time commitments/resources required and the value they bring.

"This work takes time to do properly. [Some might think] it's a 14 week programme and you only need 14 weeks... [But] to do it with a TI lens you need time for TI and using TI lens. [Therefore] we need some TI commissioning models in place. If the funding and commissioning environment doesn't change... that is a real challenge."

- **Prioritising and resourcing ACEs/TI training and support:** The Train-the-Trainer evaluation findings show that 72% believed that their organisation had committed to three programme deliveries in the year following their training.

This is despite an initial commitment from all organisations who had staff registered on this training. In addition, just over two-thirds of those who completed the evaluation believed they would have the necessary administrative support to enable smooth delivery of each programme and sufficient time to review delivery and make changes, where appropriate. Whilst a substantial proportion of organisations are already prioritising and resourcing ACEs/TI delivery, there is still a substantial minority who could be encouraged to do likewise. The issue of resourcing came up in interviews with senior leaders on a number of occasions and how resources are prioritised. One organisation noted that it doesn't have to be a choice between delivering everything or nothing, however choices may need to be made when funding is limited.

"I think the adoption of the training is done and will continue…. It is important to do that. With regards to what [else] we are doing internally – I hope that we continue but we are coming under more and more scrutiny… a lot of that is about how much we can support. One initiative we introduced requires a room to be given up in a lot of [our offices]. After the funding runs out… whether that continues or not depends on [our] budget."

- **Aligning training offering:** A number of organisations have a wide range of training and support that contains a learning content similar to the ACE/TIP training and support provided by the TIP project. It was suggested that organisations find a way to make their TI offering more consistent and coherent within and across organisations. This may also help to reduce duplication and ensure a more consistent use of trauma informed language.

> *"We have TIP and on the other hand we have therapeutic crisis intervention which has trauma sensitive [content] in it... and the behaviour aspect we got in the Trauma Informed Practice package is reflected in the TCI (Therapeutic Crisis Intervention) – 100% - no different in any way... residential social workers receive this... Now we are thinking how are we going to bring this together because... they all use the same language... I would want to see everyone using the same thing..."*

- **Continuation of networking and collaborative opportunities:** Those who participated in the TIP project appreciated the opportunities to network, but were keen to emphasise the need for those opportunities to continue so that best practice can be shared and the benefits of collaboration sustained and built upon.

"SBNI [could] consider bringing everyone from the leadership training together to share best practice, learn from each other and perhaps reflect on what we have done so far, a few times in the next year?"

"[SBNI could] continue to build on the links with partners which have been developed through the Be the Change programme."

Summary

The following points summarise the enablers that will help to sustain and further support the development of TIP in Northern Ireland:

- Promoting the development of compassionate leadership styles across leadership teams and embedding core value such as compassion and empathy;

- Putting in place a set of recommendations that may guide TI commissioning across the system to ensure that the necessary time and resources are in place to fully embed trauma informed principles, concepts and practices;

- Organisations prioritising and resourcing ACEs/TI training and support and continuing to deliver at a scale that it can appropriately resource;

- Supporting organisations to align and/or rationalise their training offering to reduce duplication and promote development of a common language in relation to trauma; and

- Finding ways to continue networking and provide collaborative opportunities to expand the trauma informed agenda, particularly at a strategic level where potential opportunities to apply service delivery models may prove effective in system understanding of trauma informed care moving forward.

Conclusions and implications for moving forward with the TIP project

This final section of the report uses the findings presented throughout to assess the extent to which the four key aims of the TIP project have been achieved and puts forward a series of suggestions for building on this work to create a trauma informed workforce in NI. The four aims of the project were as follows:

1. Raising awareness of the adverse childhood experiences which may cause trauma in a child's life;
2. Raising awareness of the potential impact of these adversities on the development of a child;
3. Enhancing ability to identify what creates resilience to cope with adversity; and
4. Improving ability to develop policies and practices to embed trauma informed practice.

Taking the first three aims above, without doubt the project has been a success. The following evidence supports this conclusion:

- ***How much did the TIP project do?*** **159** face-to-face training and support sessions were delivered to **3,626** individuals. In addition, **436** participants benefited from online learning. Those taking part in training and support sessions came from a variety of sectors with education, community and voluntary, and justice sectors representing a combined **75%** of all attendees. In addition, a range of other activities were undertaken, e.g. 26 knowledge transfer sessions to support organisations in their journey to become trauma informed organisations. This included two NI ACEs conferences attended by 274 representatives across a wide range of sectors;

- ***How well did the TIP project do it?*** Scheduling performance was high with **90%** of planned training and support sessions being delivered. In addition, attendance at sessions was high with **85%** of those who had registered for sessions attending.

- ***Is anyone better off as a result of the TIP project?*** The TIP project achieved considerable impact on all target outcomes. Between **89% and 96%** of those who completed Level 1 and Level 2 training reported an improvement in their knowledge of ACEs and trauma informed principles and concepts and in their understanding of how trauma impacts on the body physically, psychologically and behaviourally. Furthermore, between **85% and 93%** of those who participated in the Level 1 and Level 2 training reported improvements in their ACEs/TI skills and their confidence in embedding this in their practice.

Staff from across all sectors, and particularly those working within social care and the community and voluntary sectors, welcomed the opportunity the training provided to reinforce existing knowledge and skills. For many frontline staff in other sectors, such as justice and education, the training introduced them to a new language and way of working with children and families which was greatly valued.

With these significant gains in ACE and trauma informed practice knowledge, one main concern for existing and future practice continued to materialise; the risk of using the number of ACEs a child has to determine need and support. Whilst this has been a persistent challenge evidenced locally and internationally, the TIP project found these comments as a general area of concern within a number of organisations and were not referenced specifically in relation to the training and support provided as part of the TIP project. Indeed, the training and support provided by the TIP project reinforces the importance of examining the potential impacts that research and practice have linked to those who experience an adversity/adversities during childhood without the right support and mitigating factors in place. Notwithstanding this, organisations themselves should be continually mindful that some practitioners, regardless of the training and support provided by TIP, may be drawn to the notion of counting ACEs

and organisations should therefore use their internal supervision processes to make sure that practitioners use their knowledge of ACEs through a strengths-based approach to their practice.

In relation to the fourth project aim of the TIP project – the development of policies and practices to embed trauma informed practice - some notable achievements have been made however it has been recognised that this is a substantial area of work that requires a long term commitment, momentum and implementation across the system:

- There is significant commitment from organisations that engaged through the Be the Change Programme and more notably in the Train the Trainer Programme (72%) to cascade ACEs/TI knowledge and skills in their organisation;
- Evidence of enhanced collaboration within and across organisations with the Be the Change leadership programme having been singled out as a significant contributor to this; and
- Some organisations have plans to develop or improve existing HR policies and procedures to better support staff, for example, those who have experienced vicarious trauma. A number of organisations have already advanced these plans and have incorporated TI principles and concepts in relation to debriefing processes following a serious incident.

In little over two years, significant progress has been made in developing a trauma informed workforce in Northern Ireland. The foundations of knowledge, skills and practice are present with concrete plans underway for these to be strengthened. However, the journey towards organisation and system-wide change is long and this evaluation points to many organisations being at the beginning of this journey.

Implications of this evaluation for securing a trauma informed workforce

Given the above, the following points should be considered by SBNI and their member agencies as they move forward in securing organisation and system-wide change in Northern Ireland through the next phase of the project and beyond.

- **Undertaking a detailed progress review:** this evaluation concentrates on what has been achieved across, and within, organisations to date. What it does not do, however, is provide an understanding of what hasn't been achieved and what gaps exist in ACES/TI knowledge, skills and practice among those working for and with families across Northern Ireland. To achieve this, a progress review is required which would seek to answer the following questions:

  - Have all required sectors and organisations been engaged and involved to the required extent?
  - Where are these organisations on their TI journey and how would they assess the progress they have made? Organisations that took part in the Be the Change Leadership Programme were introduced to the Sequential Intercept Model (SIM) which is a strategic planning tool to assess available resources, determine gaps in service provision and helps organisations to plan for the support that individuals/families may need from a trauma sensitive and responsive approach. The SIM offers a practical framework for organisation's to: assess gaps and opportunities; identify where interventions are needed; transform fragmented systems, and streamline duplicated.

Organisations were further presented with the Universal Service Delivery Process. This Process underpins the SIM and enables organisations to map a service user journey from entry through to exit using a trauma aware and sensitive response to: identify gaps in service provision; test effectiveness of service interfaces & communication systems; promote clear role/remit/responsibility; enhance service delivery & continuous improvement and add value to organisational governance structures. The SIM and Universal Service Delivery Process offered organisations the opportunity to self-assess, self-audit to create a baseline in relation to their trauma informed journey, that in turn could inform organisational implementation plans, to set future direction in relation to progressing as trauma informed organisations.

- What are the barriers organisations are experiencing that might prevent them from making further progress?
- What are organisations future support needs?

In addition, as part of the progress review, a systematic baselining by organisations of participants' knowledge and skills would be helpful in terms of mapping out future support needs (many of which may be met by capacity developed within their own organisations). The findings from both the participant evaluations and the qualitative interviews demonstrate the need for organisations to understand better the baseline ACEs/ TI knowledge and skills within their workforce prior to staff enrolling on a particular course (whether internally or externally). Some working within clinical or therapeutic roles may already have a general knowledge of childhood adversity and trauma informed practice from academic study or in-house training provision. As a result, many of these practitioners may benefit from the more advanced knowledge and skills by attending the

Level 2 training rather than Level 1. For others who may have some level of knowledge or skills, attending Level 1 training may provide a useful opportunity to consolidate their learning and provide a recap of key concepts and principles. Organisations themselves would be best placed to drive this process forward as many have already begun to understand their workforce development needs (including the need for ACE/trauma informed training) from a service enhancement/quality improvement focus.

- **Developing and delivering a programme of shared learning and development:** To consolidate knowledge and enhance practice, a programme of shared learning and development is suggested. This could include peer support groups and learning/development events that bring people at various levels together to learn from each other as they continue on their journey towards becoming a trauma informed organisation. It is now an opportune time to draw more widely upon the knowledge and expertise of those who participated in the Be the Change Leadership programme to become system change agents in this process. Not only could this deepen organisational/sector commitment to continue on the journey, it would also help to maximise opportunities for greater levels of collaboration and enhance sustainability. Based on the findings from this evaluation, immediate areas that would benefit from these shared learning opportunities are:
  - those who engaged in the Train the Trainer programme and are cascading this in their own organisation; and
  - senior leaders who are developing organisation wide policies for supporting and developing staff.

  In rolling out this programme, expertise from specialists should be used when required to inspire, challenge and support quality learning and development.

In addition, should the Be the Change Leadership Programme be implemented in future, the following points should be noted:

- *Enhanced integration of trauma informed principles within coaching:* a number of those who participated in the Be the Change Leadership Programme, in particular, noted that there could have been a greater integration of trauma informed principles within the coaching elements of the programme. The HSC Leadership Centre (who were commissioned to deliver the Be the Change Leadership Programme) may wish to reflect on whether the depth of the briefing allocated to coaches prior to the programme beginning was sufficient. This briefing is in relation to the content of the programme (including live work elements) and, in particular, what trauma informed practice is prior to the programme delivery. If there is any further implementation of the leadership programme, the content could be enhanced accordingly. A follow up session with attendees of past deliveries could focus on this as part of the progress review (outlined above).

- *Build on the 'live work' as a way of enhancing collaboration even more:* The programme of support should also build upon the 'live work' aspect of the TIP project, providing a vehicle for those working within and across organisations to collaborate on creating more trauma responsive pathways of support for children and families.

Appendix A: TIP Project Performance Measures Quadrant

How much did we do?	How well did we do it?

• Number of workforce / service personnel engaged in project
• Number of workforce / service personnel trained
• No. of awareness raising sessions delivered
• No. of stakeholder engagement events held (e.g. workshops / seminars / briefings)
• No. of training requests received
• No. of training sessions delivered:
  - Face-to face: Level 1, 2, Train the Trainer, Knowledge transfer
  - e-learning
  - leadership development
• No. of training resources developed
	• % attendance at TIP events / training
	• Project capacity to meet demand

Is anyone better off?

#/% of workforce with improved awareness / knowledge & understanding of ACES

#/% workforce with improved confidence & skills

#/% workforce with improved empathy

Appendix B: Qualitative interview topic guide

Background

This interview/focus group is being undertaken as part of the overall evaluation of SBNI's EITP Trauma Informed Practice (TIP) project. As part of the research we are compiling a series of five case studies (one for each of the five sectors, e.g. health), to gain a deeper insight into the implementation, impact and sustainability of TIP and to help map your organisation's journey and experience to date. Each qualitative interview will comprise a focus group or series of interviews with three staff (including senior executives, front line participants, and learning and development lead) from within each of the organisations selected. The findings from these focus groups will be used to generate information for each of the case studies.

Consent form completed? ☐ Yes ☐ No

Date of interview: _ _ / _ _ / _ _

Interviewer(s): _____

Interviewee 1: _____

Interviewee 2: _____

Interviewee 3: _____

Additional interviewees? ☐ Yes ☐ No

Names: 1. _____

2. _____

3. _____

4. _____

Introduction

1. **Tell me a little bit about your role within your organisation?**
    -   What responsibilities do you have?
    -   What aspects of your role cover the work your organisation does with individuals / families that have experienced trauma?

Involvement in EITP TIP project activities

2. **Could you talk us through your journey and involvement in the SBNI's TIP project to date? Your involvement could include attendance at one or more of the following:**
    -   Level 1: ACE Awareness
    -   Level 2: Developing Trauma Sensitive Approaches to Practice Training
    -   Level 3: Train-the-Trainer Programme
    -   Level 3: Be the Change Leadership Programme
    -   Wider implementation and development
    -   Other training/meetings/events/briefings (e.g. Safeguarding, CEC training)

Prompts during interview for other section: conference inputs, stakeholder engagement participation, commissioning discussions etc.

Impact of the TIP project on your staff and organisation

3. **What impact, if any, has your involvement in these activities had on you, your team/service and your organisation as a whole? You may want to think of the following potential areas of impact**
   - Development of skills, knowledge and confidence in staff
   - Influencing practice development (i.e. staff being able to use a trauma sensitive approach in working with clients)
   - Development of a shared language and common understanding of adverse childhood experiences and trauma and their impacts
   - Promoting staff well-being and self-care
   - integrating knowledge about trauma into organisational policies, procedures and practices
   - Collaboration within organisations and across services
   - Creating staff safety, peer support and a culture of care across staff teams

4. **Overall, to what extent has the training and support provided as part of the EITP TIP project supported the development of a trauma informed culture in your organisation? Why do you say that? Have you seen any improvements?**

5. Does your organisation have a written policy in place to help ensure a consistent trauma informed response to individual(s)/families who need support?

- If yes, how detailed is the policy and how successful has it been in meeting the needs of those whom your organisation works with?

- If no, has your organisation any plans to introduce a written policy which places trauma sensitive approaches at the centre of your organisation's activities?

(Prompts: commissioning direction of trauma informed services, within estates to encompass trauma informed physical environment, within human resources; recruitment and selection of staff, induction processes, staff health and wellbeing, governance processes and direction, workforce learning and development)

6. A) To what extent has your organisation's structures developed over time to support staff to adopt a trauma informed approach to working with individual(s)/families? Support could fall into one or more of the following areas

- Staff training;
- Ongoing supervision/mentoring;
- Debriefing sessions;
- Care/support plans; and
- Staff appraisal.

B) How has the training and support provided by the EITP TIP project supported your organisation's efforts in embedding

Impact of the TIP project on service users

7. **To what extent are trauma informed principles, knowledge and skills incorporated into the service user journey? This journey includes the following points:**
    - Entry to service and transition across services;
    - Assessment;
    - Receiving the service;
    - Discharge/Exit/Release from service; and
    - Follow-up (if any).

    How has the training helped to improve the journey of individuals moving through these systems to which service delivery is trauma informed?

Sustainability

8. **Once the current project of support comes to an end in March 2020, how prepared is your organisation for ensuring that the longevity of trauma informed practice through longer term sustainable implementation plans? Tell us more? Which areas, if any, do you think you will need more support with?**

Conclusion

9. Is there anything else which has not been covered that you would like to add?

Thank you for taking part in the interview!!!

Appendix C: Be the Change Leadership Programme – Programme content

Overview of programme content

Activity	Content
Onboarding	• Outline of the initiative and process • Commitment planning • ACE overview training session
Module 1: Leading from within	• Collective leadership • Emotional Intelligence • Influence and impact • Introduction of 'Live Work'
Module 2: Leading through organisation design	• Organisation design practice and change management • Service improvement and redesign • Nudge theory • Trauma informed organisational design
Module 3: Leading within systems	• Systems leadership and theory • Co-production and co-design based practice • Sustainability and spread • Shared responsibility and interdependency
NI ACE Conference: Shared Learning Event	• NI ACE conference 2020 • Group shared learning on 'Live Work' and personal development • What does the future hold?
Other supports	• 1:1 coaching and mentoring for participants • Identified 'Insight Visits' to learn from other professions, sectors or industries • Facilitators of systems transformation and Trauma Informed Practice experts sharing the latest thinking, inspiration and best practice

Appendix D: Knowledge transfer sessions

Session	Detail
• World Health Organisation – ACEs practice-sharing visit to Oslo	• The TIP project was invited to Oslo by World Health Organisation (WHO) partners to share trauma informed practice exemplars and explore opportunities for working consistently across the WHO network.
• 5 Nations Government ACE Forum collaboration and information sharing	• The Northern Ireland ACE Reference Group continues to represent Northern Ireland at the 5 Nations Government ACE Forum in the UK. The TIP project has attended on several occasions along with partner organisations including DH, PHA, HSCB and PSNI to share learning and seek collaboration opportunities.
• Welsh ACE Hub Knowledge Transfer	• The TIP project developed a collaboration between the SBNI and Welsh ACE Hub to share models of practice and evaluation techniques.
• QUB nursing and midwifery curriculum development	• SBNI supported the Nursing and Midwifery Departments of Queens University Belfast to embed core ACE Awareness and Trauma Sensitive Skills training contents into all relevant undergraduate and post graduate modules.

Session	Detail
• Undergraduate & postgraduate modules (various)	• Third sector universities have embedded core learning components of ACE awareness and TIP into medical, nursing, PGCE (Postgraduate Certificate of Education) and social work learning modules.
• Clinical Education Centre (CEC) programme	• The CEC have embedded the ACE Awareness and Trauma Sensitive Approaches to Practice training content within existing programmes available for nursing and midwifery staff across the HSC sector. Standalone ACE/TIP training programmes are also available from the CEC at the request of HSC Trusts.
• Parenting NI workforce development training	• Parenting NI was commissioned by the Health and Social Care Board (Child Care Partnership) to provide workforce development training to the early years sector including child care providers. Within this, Parenting NI has incorporated ACE awareness, brain development and resilience building components of the TIP training into existing social and emotional behaviour training programmes and face to face Solihull programmes for staff. Standalone ACE/TIP Level 1 and 2 training is also being delivered by this provider.

Session	Detail
• Signs of Safety	• The Signs of Safety Team has embedded core elements of the ACE Awareness training and resources into the regional roll out of Signs of Safety training in Northern Ireland. This includes the ACE Animation and Trauma Lens tool.
• Safeguarding training	• A number of organisations including the Public Health Agency, Sport NI, arts sector and local government have embedded core ACE Awareness training components into their current safeguarding training for staff and volunteers.
• F2 doctors training	• F2 doctors have attended a sector specific ACE training session through the project and these core components have been incorporated within ongoing medical training.
• Volunteer Now Coordinators training session	• This session brought together 10 Keeping Safe Training Coordinators who are hosted by Volunteer Now to deliver safeguarding training across the CVS sector, local councils and arts sector through a Keeping Safe Training Programme. The project team facilitated a workshop with Volunteer Now and Trainers as they reviewed the content of the Keeping Safe Training to embed learning components of the ACE/TIP training.

Session	Detail
• BHSCT administration team workshop	• The project, in partnership with the BHSCT Be the Change Leadership Programme representatives, hosted a workshop with a number of administrative teams from across the BHSCT to understand the potential vicarious trauma they may be experiencing working on the frontline of the health service with clients who have been impacted by ACEs and presenting with behaviours of trauma. This workshop has enabled a trauma informed pathway of action to be determined by the BHSCT moving forward with strategic implementation of this agenda.
• BHSCT Family Champions Workshop	• The project hosted a short workshop with the BHSCT Family Champions who are leading on the Think Family agenda in the BHSCT. This session enabled the project team to share the learning components of the ACE/TIP training programmes and work together with Family Champions to explore and integrate the models of practice.
• 3 Department of Education training sessions	• These sessions were delivered to senior education sector officials and included an introduction to ACEs/TI principles and concepts.

Session	Detail
• NIHE knowledge exchange session	• A training session was hosted with the NIHE training managers to share ACE/TIP key learning components from a housing executive perspective to explore developments within training and support for HR managers supporting staff through supervision, team meetings and through the development of an emotional health and wellbeing framework for the organisation.
• NI ACE Conference 2020	• The purpose of this conference was to share strategic developments of the NI ACE Reference group which included the implementation and embedding of the TIP project and associated support. The conference also provided an opportunity to disseminate knowledge of the project and support sharing of good practice across sectors. This year the conference provided organisations engaged in the Be the Change Leadership Programme with opportunities to share information on their live project work. For more details on the conference, see: http://www.cypsp.hscni.net/wp-content/uploads/2020/05/NI-ACE-Conference-2020-Report.pdf

Session	Detail
• Trauma Informed Environments Seminar	• SBNI hosted this seminar in partnership with Queens University Belfast and Trauma Informed Oregon. It focused on trauma informed care environments to promote physical and psychological safety. The resources have been used by a range of organisations to create trauma sensitive environments in prisons, schools and councils to name a few. A total of 174 people attended this learning seminar.
• 7 education sector knowledge exchange sessions	• 7 information sessions were hosted by the project in September/October 2019 bringing together principals, vice principals and pastoral care leads from across pre-school, primary and post primary schools. This was an opportunity for the project team to raise awareness of the trauma informed schools model through the ACE agenda, to provide some preliminary ACE training and to share the model of dissemination of training for schools in Northern Ireland.

Session	Detail
• NISCC Seminar and ACE webpages	• The project hosted a seminar with social are and social workers sharing the compulsory learning components of the ACE/TIP training. This session was hosted by NISCC and developed into a webinar that is readily available online for social care/work staff. The project has also been working with NISCC to develop an ACE/TIP learning resource on the NISCC website for social care/work staff which includes training materials, practical resources and recommended reading.
• CCMS Directorate Away Day Knowledge Exchange Input	• The project was invited to attend the CCMS Directorate Away Day through the Be the Change Leadership Programme CCMS representatives. This was an opportunity for the project to share the strategic focus of this transformation programme with senior managers within CCMS and provide an insight into the opportunities of trauma informed schools training for teaching and academic staff.

Session	Detail
• Community and Voluntary Sector Leadership Programme	• A 2 day leadership programme was hosted in Craigavon in February 2020 to bring together 48 chief executives and directors from across the community and voluntary sector. The programme expanded the emotional intelligence of leaders working within their own organisations through developing compassion for their staff who are working with clients who are presenting with significant trauma. The programme also provided a space for leaders to build their capacity in ACE awareness and trauma informed practice and how an organisation may begin to introduce an organisational shift in culture and values through the trauma informed agenda.
• Local Government Safeguarding Network	• The project hosted a short knowledge exchange session with the local safeguarding coordinators from across the 11 local councils through this network meeting. The project team shared some of the key learning components with coordinators and worked together with participants to understand how, through the Volunteer Now Keeping Safe Safeguarding Training Programme, the project could enable the roll out of the ACE/TIP agenda within local council safeguarding training.

Session	Detail
• Ards and North Down Safeguarding Panel	• As above with Local Safeguarding Network – local keeping safe trainers, sports coach managers.
• Belfast City Council Safeguarding Panel	• These safeguarding sessions were delivered to directors and senior leads for safeguarding, community development and economic development leads.
• NMDDC/ABC Safeguarding Panel	• As above with Local Safeguarding Network – local keeping safe trainers, sports coach managers.

Appendix E: Stakeholder meetings/events

Project meetings

- TIP steering group programme board meeting

Wider stakeholder meetings

- Belfast City Council Safeguarding Panel
- X3 SBNI Safeguarding Panels (Belfast, Southern, S. Eastern)
- Action Trauma Conference
- NI ACE Briefing Session with All Party Group for CYP
- Infant Mental Health Conference
- Restorative Practice Conference
- Judiciary presentation
- DOH Make It Happen Presentation
- Best for Every Child Leaders Event
- 10th Annual PPAG Seminar
- DOE Permanent Secretary presentation
- Playboard Conference
- NISSC Seminar
- TIP steering group programme board meeting
- NIHE Implementation meetings x3
- ACE Conference planning meeting
- Child Care Partnership implementation meeting
- St John the Baptist Nurture School meeting
- NI Prison Service implementation meetings and Board of NIPs Governor meetings
- Education Authority briefing meeting
- TI Communities meeting with Whiterock Community Centre, BCC and NIHE
- PBNI implementation meeting
- Quarterly Five Nations ACE Government Forum meeting
- Education X 4 – DE Safeguarding Leads meeting; Department for Economy meeting re FE Colleges; CCMS Schools Case Study session; and NICIE Staff development day training session

Wider stakeholder meetings

- Implementation meeting with Faith Sector
- BHSCT/SEHSCT SIM Implementation meeting
- Principals roadshow stakeholder events which engaged over 200 principals/vice principals.

ACEs

Adverse
Childhood
Experiences
Be the Change

Footnotes

1 A copy of the system change readiness report can be found here: https://www.safeguardingni.org/sites/default/files/sites/default/files/imce/EITP%20Trauma%20Informed%20Practice%20Systems%20Change%20Regional%20Insight%20Report%20Final.pdf

2 A copy of the Regional Training Needs Analysis (TNA) can be found here: https://www.safeguardingni.org/sites/default/files/sites/default/files/imce/Northern%20Ireland%20TNA%20Report%20%28Final%29.pdf

3 Awareness and Level 2 Developing Trauma Sensitive Approaches to Practice Training

4 Copies of the all three report cards are available on the SBNI website at: https://www.safeguardingni.org/aces/publications-and-helpful-resources.

5 Copies of the evaluation forms can be found at the following: Level 1 Evaluation form: https://www.safeguardingni.org/sites/default/files/sites/default/files/imce/Level%201%20ACE%20Awareness%20Training%20Evaluation%20Form%20%28Final%29.pdf and Level 2 Evaluation: https://www.safeguardingni.org/sites/default/files/sites/default/files/imce/Level%202%20Training%20Evaluation%20Questionnaire%20%28Final%29.pdf

6 This included amongst others: three EITP Programme Board meetings, 11 EITP TIP Steering Group meetings and five EITP Implementation Manager meetings.

7 This included briefings with the Department for the Economy; Department for Communities; Department of Health meetings (x3); Department of Education meetings (x4) which included meeting the Permanent Secretary and the Education Minister; and 3 strategic meetings with Department of Education.

8   This figure relates to four separate sessions. An individual may be registered and have attended all four sessions and will be counted more than once in these figures.

9   Further details, including Live Work Posters can be found in the evaluation of the Be the Change Programme: https://www.safeguardingni.org/sites/default/files/sites/default/files/imce/Be%20the%20Change%20Programme%20-%20Evaluation%20Report%20%28Final%29.pdf

10 34 leaders who participated in the programme completed an end-point evaluation representing an overall response rate of 63%.

11 A further 15% stated they could not comment as they did not have an opportunity to attend.

12 These findings differ from those gathered as part of the Training Needs Analysis which showed that despite the relatively high levels of awareness among respondents of ACEs, the study showed a high level of interest and need among respondents for receiving more training across all aspects of ACEs and TIP.

13 This is based on 34 respondents to the 'Be the Change' Leadership Programme Evaluation.

14 https://www.justice-ni.gov.uk/sites/default/files/publications/justice/strengthening-family-relations-strategy.pdf

15 https://www.education-ni.gov.uk/sites/default/files/publications/education/2019-2029%20CYP%20Strategy.pdf

16 https://www.nihe.gov.uk/Documents/Supporting-documents/RS-246-02-19-Chronic-Homelessness-Action-Plan-ACCE.aspx

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