



Trauma Skilled Training Report March 2023

Part of the National Trauma Training Programme

Care Experienced Children and Young people

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Appendix A - Pre and Post Training Reported Intended Learning Objectives (ILOS)

1. Background

Following the successful pilot of NHS Education for Scotland (NES) Trauma Skilled level training for the workforce supporting Care Experienced Children and Young People, a full-time post, delivered as a job share, was brought into NES with the aim to roll out the training to further identified priority groups. These were identified and agreed by the National Steering Group for the National Trauma Training Programme and the Children, Young People and Families Joint Leadership Group. The priority groups included Children’s Hearing Scotland, Scottish Children’s Reporters Administration (SCRA), support staff within secure care settings, and Public Health nurses including School Nurses, Health visitors and care experienced nurses. As the programme of work progressed and multi – agency days were offered, a number of other professionals with a Children and Young People with care experiences remit from third sector organisations such as advocacy workers, were also trained.

Trauma Skilled training was offered as a comprehensive package, comprising of completion of two of the Trauma Skilled E-modules on the Turas learning platform, prior to attending a one full day training (offered either face to face or virtually). Participants were then offered two follow up coaching sessions which were set at 4 weeks and 8 weeks post training. Evaluation of training used both a qualitative and quantitative approaches, but the primary outcome measure was participants self-assessment on a number of ILO’s (see appendix A)

2. Uptake of training

Programs of training dates were set with the original proposal to offer 450 training places from August through to the end of the financial year in March 2023. In total 456 professionals attended and completed the trauma skilled training day. Below is a breakdown of numbers trained between August 2022 and March 2023

Table 1 – Training overview of training places delivered 22/23

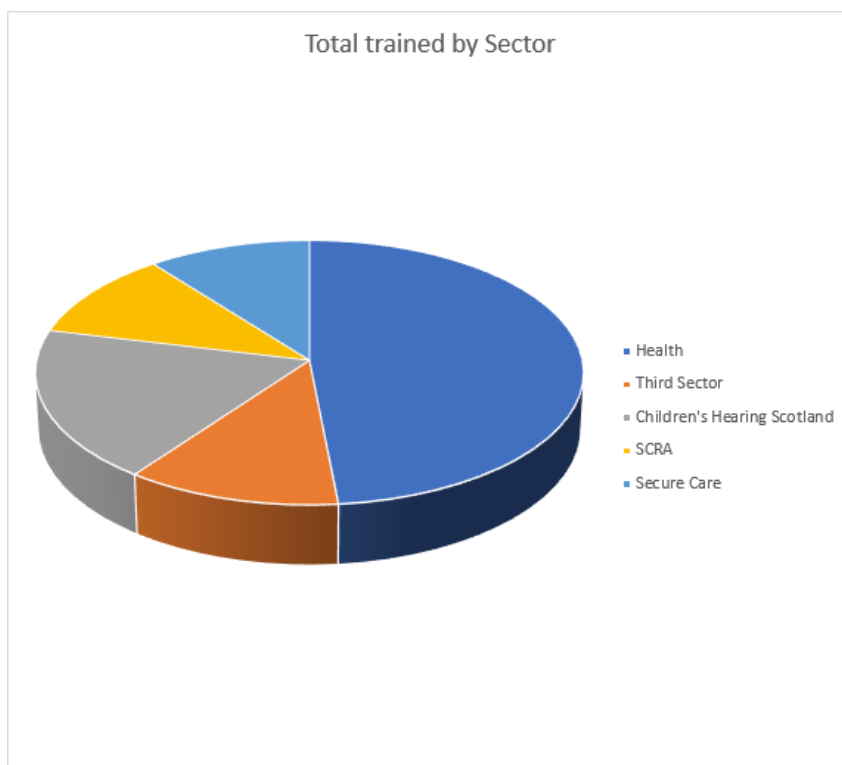
	<i>Trainings</i>	<i>Number of People Trained</i>
Aug	1	18
Sep	2	35
Oct	1	29
Nov	3	86
Dec	1	29
Jan	5	121
Feb	4	84
March	2	54
Grand Total	19	456

The initial uptake of training was slower than hoped which might be as a result of beginning the training dates during a holiday period. A total of 6 training dates, which were booked by two of the identified agencies, were cancelled at short notice and we were unable to fill these places. This had a significant impact on the numbers trained, however we were able to increase capacity by offering several online multiagency training dates between January and March 2023 which were well attended.

24 dates & 600 places were offered overall. 76% of the offered places were taken up

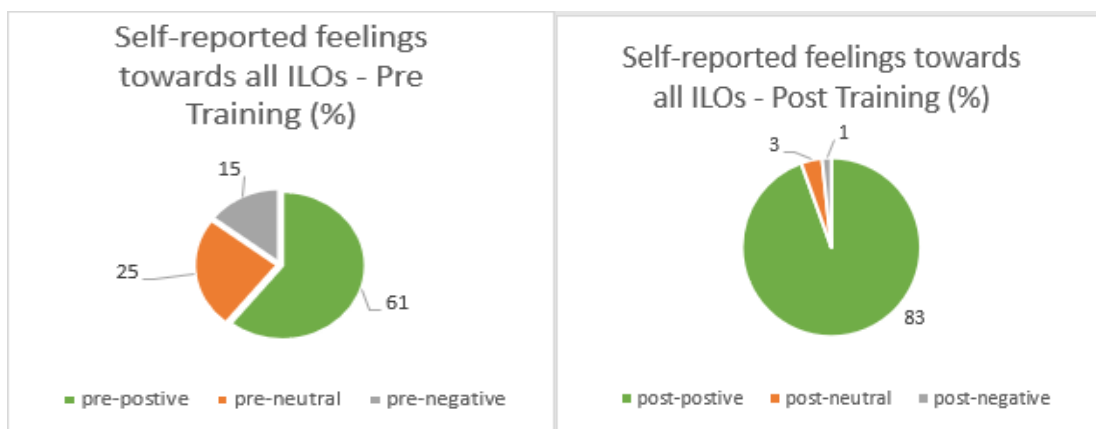
Table 2: Breakdown of staff groups trained

Health	221
Third Sector	53
Children's Hearing Scotland	85
Scottish Children's Reporters Administration (SCRA)	49
Secure Care	48
Grand Total	456



3. Pre and Post Training Reported Intended Learning Objectives (ILOS)

Participants were asked to rate their own confidence in the intended learning outcomes both ahead of and following the one-day training sessions (see appendix A for ILO's). In terms of the learning programme, participants will already have completed e-modules at the pre-training stage which is hypothesised to have impacted on their reports. Alternative methods of achieving a baseline measure are being considered going forward.



Following the one-day training, nearly all participants were positive about having achieved the ILO's. There was a significant positive trend noticed in the post training ILO's for those who attended face to face training.

4. Qualitative data from evaluation

Below are direct quotes taken from the evaluations and clustered into the following themes changes in practice, what was useful about the training, possible changes, and over all comments.

1. Changes in practice:

'Review and reflect on direct contact, purpose, and level during what appear to be more settled times. Directly yet supportively tackle avoidance. Always leave the door open for folk to dip in when needed. Take back group supervision to team'

'The Healthy Child Service will be adopting the Window of Tolerance with families who access the service. When further developing the service we will have the key principles of trust, safety, collaboration, empowerment and choice. I feel we do this to an extent but this training has enabled me to reflect on this at a deeper level.'

'Reassured that connection and the relationship with people are vitally important - connection before correction is very helpful for me to think about in practice. Also the 6Rs - and the trauma informed principles. Also using the window of tolerance to explain symptoms - to help support understanding. Holding back from fixing the problem.'

"Be more aware/mindful during observations of the possibility that Panel members may have experienced trauma or be pushed out with their window of tolerance by either hearing material (live or written) or their own current life experiences and if seems appropriate explore this in feedback discussions"

2. What was useful about the training:

"Awareness of prevalence of trauma, recognition of behaviours associated with it, types and causes and basic interventions. Also having trainers that gave first hand stories as examples of the points they were making"

"Having the opportunity to discuss key elements of trauma informed care, the principals, the assumptions and the way in which recovery may take place and relating them to our work. I found the Window of Tolerance session and discussions extremely useful and certainly raised myself awareness of ways in which I react/interact. The CONNECT BEFORE CORRECT will be invaluable"

'Really helpful information to understand trauma/disclosures, how to recognise and respond in practice. Allowing me to reflect about children/young people and families I work with, plus my colleagues, family, friends and applying the trauma informed principles with every person we meet with.'

'Incredibly useful. Kim and Ashley acknowledged the concerns, limitations and challenges that are present in my role. They were able to teach with context, reassurance and encouragement which has given me confidence in delivering trauma informed/skilled practice. This training is highly relevant to my role and the matter in which is was delivered was clear, concise and informative. I truly believe my practice will be better having completed this training. (Thank you!).'

' This training is of fundamental importance; it's a foundation on which to build a more aware and socially cohesive society in Scotland.'

' I think the e learning was an excellent resource, great content and great presentation. The opportunities to discuss were great at the training day, and I think the quality and accessibility of the e learning made that possible. The key messages came over very clearly, and I think were very empowering in making it clear that everyday interactions carried out with care can be small steps to allow someone to recover from their trauma.'

3. What could be changed with the training?

'I think that [my organisation] it would benefit from greater specificity in relation to the context in which we are working. I'm not convinced that participants fully grasped the neuropsychological changes associated with the window of tolerance. I think that there could have been a stronger element of the out of cognitive control element of this.'

'It is interesting to be part of a multi-disciplinary group, but I would love to brainstorm with health visiting colleagues about what this means for our service and roles specifically and how we can push towards best practice'

'I think that the trainers can put more demanding tasks onto the trainees for example, saying that 1 person from each group will be expected to feedback and when we are sharing experience agree common themes. - I also think that having a case study to go through might strengthen the discussion from things we could do to 'how should we approach this case?' dos and don'ts. -

'As I had recently completed modules 1&2, I did not feel that I needed the re-cap sections in the first part of the one day session.'

'I feel the training would have greater quality if held in person as it would be easier I think to share and elicit responses. I would also be interested in going more in depth about the physical developmental impacts that trauma can have (how it can physically change the way the brain works etc)'

4. Any other comments, facilitators knowledge, overall experience:

'Facilitators were very interesting, and both worked well together. They were extremely knowledgeable and taught the subject in a relaxed manner that made learning easy.'

'Feedback from others was the improvement from the initial Trauma training at the start of the year in comparison to this one. ALOT more children hearing centred which makes all the different for our panel community. Thank you!'

'It was an excellent training experience and enhanced by the trainers and participants sharing their own vignettes/experiences.'

'Facilitators clearly understand the subject matter and were passionate about the subject. They also allowed time for discussions and exploration of principals.'

'Many thanks Ashley and Kim. You were excellent presenters and I felt in really good hands. The examples you were able to share were interesting and helped explain the topics well. Thank you both. This is such important work'

The slides were simple and clear visually, explained well and at a good pace. I liked the use of breakout rooms which created interesting conversations and sharing of experiences. The trainers were approachable, warm and encouraging of participation throughout. They clearly had a lot of experience and insight that added loads of depth to the content. Really enjoyed it.

5. Coaching sessions

Coaching sessions were less well attended than hoped and this has made it more challenging to evaluate given the limited data available from the online evaluation. From the trainer's perspective these worked well with staff who had a direct role and a high level of contact with CYP and offered an opportunity to discuss any barriers or challenges participants had faced in embedding the knowledge and skills from the training into practice. A review of the content of the coaching sessions and the ways in which they are offered to participants would be beneficial going forwards as well as discussion with organisations putting people forward for the training in how to increase engagement.

6. Training for Trainers (T4T)

All stakeholders were offered the potential opportunity of making the training sustainable and extend the reach of the Trauma Skilled Practice learning by way of a Train the Trainers programme. An application form, eligibility criteria and materials were created and developed within NES to enable this to take place.

The offer requires participants to have

- attended the training and
- apply or be nominated for a one-day training provided by NES which will equip and support them to roll out training to staff and colleagues within their own organisation.
- Meet the criteria set out by NES in terms of trainer's experience and knowledge base

We were delighted that almost every single organisation who received the training expressed interest in engaging in this offer, which we feel highlights the perceived benefits and value placed on the training at skilled level. We also had several nominees from our colleagues in Scottish Government and have made this offer available to Secure care providers across Scotland. Training materials have also been shared with the Transforming Psychological Trauma Implementations Coordinators (TPTICS) who are funded via NES to support the broader implementation of the National Trauma Training Programme and to allow for further reach. The first cohort of T4T took place on 6th March 2023, with 18 participants from a variety of backgrounds, work is now ongoing to develop a supportive network and assist the new trainers to roll out the programme within their own organisations and workplaces.

7. Summary

Training has been delivered as planned meeting both targets in terms of numbers trained and priority groups.

Overall, the training package has been very positively received and there remains a high demand for the Trauma Skilled day, with around 210 on a waiting list for future dates. This demand appears to have been created both by highlighting the availability of package through various networks and via positive feedback from participants shared with colleagues.

Training has been delivered to both single organisations and to mixes of professionals in different organisations. This does not appear to have influenced the outcomes and both seem to have been useful and have advantages.

Some qualitative data highlight the advantages of face-to-face training; however it appears that a blended approach has worked well for some participants.

Following the initial success of this package, current plans are to continue to roll out the training and run a second Train the Trainers in 23/24.

Appendix A - Pre and Post Training Reported Intended Learning Objectives (ILOS)

