



GUIDE WITH EXAMPLES

MSW Trauma Informed Care Field Placement Student Learning Plan

The learning plan is a document developed by you and your agency instructor within the first few weeks of your field experience. It outlines activities that will enable you to exhibit the 9 core competencies as outlined by the Council on Social Work Education (CSWE) through at least 1 activity for each practice behavior. The examples are a general starting point as the unique agency activities along with your educational and professional goals should shape the activity you identify under each practice behavior.

Orientation to agency (please include a response to the following items):

1. Orientation activities include: introductions to all staff, tour of facility, explanation of office procedures, complete required orientation training
2. Measures the agency is taking to ensure physical safety and health of the student: Student is accompanied on home visits and client transports by another agency staff, intern or volunteer. Student is not allowed to physical restrain clients.
3. Agency requirements/response if the student is injured: Report to supervisor. Documentation to be completed. Notification to faculty liaison.
4. Agency requirements/response if the student would present health related symptoms that might compromise the health of the agency staff and clients: Students who present or report symptoms of health concerns to include a temperature of 100.5 degrees F will report this information to supervisor, who will determine if student is allowed on site. Student may be allowed to complete remote internship activities from home for a minimum of X days.
5. Restrictions on the student's personal travel during the semester. (For example, if the student leaves the county, state or country for personal reasons, what are the agency requirements prior to coming back to the agency, if any?): No restrictions on personal travel. Or....If the student travels outside the state of Iowa, they will have to complete remote internship activities from home for a minimum of X days prior to returning to the agency.

Learning Plan Activities

[Bracketed material are descriptions and examples]

Competency 1–Demonstrate Ethical and Professional Behavior

[Description: Trauma-informed social workers recognize and demonstrate the key characteristics of trauma-informed practice. They adhere to the ethical responsibility to represent themselves as competent only within the boundaries of their education, training, supervised experience, or other relevant professional experience. They are knowledgeable about the impact of personal and collective, secondary, and vicarious exposure to trauma. They demonstrate ethical behavior by developing and maintaining professional development activities at the micro, mezzo, and macro levels. They engage in ethical decision making that addresses the potential risk for harm

and retraumatization in the helping relationship. Trauma-informed social workers understand their own trauma-related history, clients' experience of trauma, and their positionality as it relates to issues of diversity.]

Competency 1–Demonstrate Ethical and Professional Behavior

- a. Identify and demonstrate ethical practices, including maintaining physical, interpersonal, spiritual, emotional, and psychological boundaries for clients and client systems, face-to-face and virtual, and demonstrate the ability to assess and address barriers to safety for clients across the lifespan.

[EXAMPLES:

- Work reflects meeting agency standards regarding confidentiality, informed consent, documentation, communication, and timeliness.
- Use effective communication skills (verbal, written, electronic) in establishing and maintaining professional boundaries.
- Apply relevant components of the Social Work Code of Ethics in managing professional boundaries.
- Establish and maintain empathic but clear social work boundaries during intakes, interviews, direct care, discharge planning, etc.]

- b. Practice in self-reflection, self-regulation strategies, and self-care practice including reflective trauma-responsive supervision to prevent and address secondary traumatic stress, compassion fatigue, vicarious trauma, and burnout in self and organization to enhance effective practice, policies, and research that considers ethical decision making related to trauma.

[EXAMPLES:

- Seek out and use supervision to guide practice and self-care.
- Develop and maintain self-care plan regarding exposure to secondary traumatic stress/vicarious trauma, compassion fatigue, and burnout.
- Research best practices of dealing with secondary traumatic stress, compassion fatigue and burnout, and share out findings with agency staff.]

- c. Demonstrate understanding of personal trauma-related history and their positionality as well as clients' experience of trauma as it relates to age, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, immigration status, marital status, political ideology, race, religion and spirituality, sex, sexual orientation, and tribal sovereign status.

[EXAMPLES:

- Demonstrate a holistic perspective utilizing the person-in-environment framework incorporating culture, spirituality, and ethnicity.
- Connect elements of Trauma Informed Care within holistic framework.
- Demonstrate use of client self-determination by utilizing holistic inquiry to create opportunities for client decision making.]

Competency 2– Engage Diversity and Difference in Practice

[Description: Trauma-informed social workers know that trauma occurs in a socio-political-cultural context, creating variable risk for trauma. They understand the intersectionality of diversity that result in disproportionate trauma exposure, access to services, and social support resources. They engage in trauma work grounded in values of cultural humility, respecting all individuals as experts of their own experiences. They understand the ideals of inclusive excellence, the complex history and impact of structural oppression, and the effects of intergenerational and historical trauma on an individual's, family's, or community's ability to thrive. Trauma-informed social workers uphold policies and protections for vulnerable people and marginalized populations in practice and research, advocating for trauma-informed interventions

and inquiry. Clients are valued from a strength perspective as individuals inherently capable of healing, resiliency, and wellness.]

- a. Develop and demonstrate cognitive self-awareness and affective self-regulation in response to the influence of personal biases and values in working inclusively with clients and constituencies.

[EXAMPLES:

- Articulate elements in the client's life background that create vulnerability to disparities in treatment and services.
- Articulate elements in services that create disparities in treatment of clients.
- Identify the impact of one's own privilege and power on the helping relationship, and how to leverage it to advance the client's well-being.
- Identify and list further learning needs. Give examples of how this will be addressed and what will be done with the information learned (i.e. professional development, professional readings).]

- b. Demonstrate the meaning of trauma and responses for individuals, families, and cultural and societal groups into all levels of social work practice grounded in cultural humility.

[EXAMPLES:

- Tailor assessment practices to identify the diversity strengths and needs of client.
- Tailor intervention strategies to encourage these strengths and address these needs of client.
- Write treatment plans documenting these tailored efforts.]

- c. Implement trauma-informed principles of care, advocating for policies and trauma-sensitive services at the individual, organizational, and societal levels that are responsive to those underrepresented and oppressed in society.

[EXAMPLES:

- Tailor individual client assessment and/or intervention strategies that are trauma-sensitive.
- Recognize, recommend and help implement agency level trauma-sensitive approaches to care for client base and employees.]

Competency 3– Advance Human Rights and Social, Economic, and Environmental Justice

[Description: Trauma-informed social workers recognize that trauma adaptation and growth are most attainable when fundamental human rights of individuals, families, communities, and populations are upheld and restored. They are knowledgeable about how traumatic events do not occur evenly across societal groups and understand that the contextual realities of trauma survivors often affect their ability to recover and thrive in ongoing and posttraumatic circumstances. They advocate for policies and services to transform the social, economic, and environmental conditions that limit human rights and the quality of life, thus, promoting resilience and growth.]

- a. Understand and apply the intersectional knowledge between human rights frameworks and the principles of trauma-informed care with individuals, families, communities, and the workforce across micro, mezzo, and macro practice.

[EXAMPLES:

- Identify human rights violations that may be contributing to the presenting issues and what you can do with that information.
- Validate feelings of social injustice, identify opportunities for self and social empowerment, and incorporate such opportunities within treatment planning.
- Understanding and assisting client in grievance procedure.
- Participate in a community coalition meetings and identify what role you will take and/or what you will do with the information learned.

- Participate in lobby day and make recommendations based on experience.]
- b. Implement and encourage practices and policies that facilitate empowerment, resilience, and posttraumatic growth.
[EXAMPLES:
 - Use a trauma lens to articulate how human rights and social justice violations are impacting client functioning.
 - Participate on multi-disciplinary teams and state what your role is and/or what you will do with your learnings from these teams.
 - Identify how you will share/advocate the social work and human rights perspectives.
 - Collect and author clients' life stories, including perspectives about current problems and their vision of justice related to a specific topic (Freeman, 1997) and identify what you will do with this information.
 - Identify and list further learning needs. Give examples of how this will be addressed and what will be done with the information learned (i.e. professional development, professional readings).]

Competency 4– Engage In Practice-informed Research and Research-informed Practice

[Description: Trauma-informed social workers understand the role of theory and its relationship to evidence-informed trauma intervention. They can apply the neurobiological research on the impact of trauma experiences to explain the bio-psycho-social and cultural factors related to trauma. They examine the effects trauma has on diverse populations and commit to strategies that advocate for research-informed trauma practice. Trauma-informed social workers understand the varying effectiveness of trauma treatment models or approaches for healing or mitigating the effects of trauma across cultures and can apply the appropriate treatment modalities. Trauma-informed social workers understand the important role of interdisciplinary research in trauma practice and collaborate interprofessionally with all stakeholders, including client systems and practitioners, to improve outcomes. Trauma-informed social workers for policies and systemic changes to ensure that all agencies, organizations, and systems that work with people who have histories of trauma become trauma informed.]

- a. Understand the impact of trauma on brain structures and biological processes, including impairments in memory, cognition, attachment, affect regulation, and long-term somatic responses and apply to practice.
[EXAMPLES:
 - Explore and record from the perspective of "what has happened to the client" as compared to "what are the client's problems".
 - Document the relevant elements of neurobiology, epigenetics, childhood adversity and resiliency that are at play in this exploration.]
- b. Understand that ongoing neurobiological maturation and neural plasticity create continuing opportunities for recovery and adaptive developmental progress and apply in practice.
[EXAMPLES:
 - Tailor engagement practices that expand the client's sense of safety.
 - Tailor practice interventions that expand the client's use of healthy coping mechanisms.]
- c. Use trauma-relevant theory and the research literature to inform and conduct scientific inquiry and trauma research.
[EXAMPLES:
 - Research best practices of trauma-informed care and share out findings with agency staff.

- Share constructive feedback on ways to strengthen the use of trauma informed care best practices in the agency.]

Competency 5– Engage in Policy Practice

[Description: Social workers engage in trauma-informed policy practice with a framework guided by principles of safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and cultural, historical, and gender issues. Trauma-informed social workers understand that policy affects an agency’s capacity to provide trauma-informed services. They use a trauma-focused lens to approach policy practice at local, state, national, and global levels and across fields of practice to mitigate trauma and prevent retraumatization by and within systems. Trauma-informed social workers seek to advance policy that recognizes and builds on the resilience of trauma-affected systems: individuals, families, groups, communities, and organizations, including the workforce, through policy analysis and advocacy.]

- Engage in the policy proposal process to amend policies across levels and fields of practice that are counter to the principles of trauma-informed practice or that retraumatize, victimize, or oppress.

[EXAMPLES:

- Assess the impact of the agency's policies as to their positive and/or negative influence on trauma informed care practices/principles (holistic focus, self-care, strengths perspective, collaborative planning, nonjudgmental manner). Explain what you will do with these findings.
- Assess the impact of the community/local policies as to their positive and/or negative influence on trauma informed care practices/principles. Explain what you will do with these findings.]

- Advocate for trauma-informed policies to increase access and enhance service delivery, including self-care and other provisions for social workers affected by trauma.

[EXAMPLES:

- Research and share model trauma informed care policies relevant to agency practices.
- Research and share model trauma informed care policies relevant to community/local practices.]

Competency 6– Engage with Individuals, Families, Groups, Organizations, and Communities

[Description: Trauma-informed social workers recognize that individuals, families, groups, organizations, and communities affected by trauma may have experienced a variety of emotional, psychological, and physical disturbances. Therefore, the process of engagement models a restorative and trusting relationship focused on pacing, empathic responding, mirroring, co-regulation, attending, and awareness of nonverbal behavior, including the use of empirically informed engagement and outreach strategies. The collaborative alliance with the client and or client systems formed during the engagement process provides safety for the client and acknowledges that disclosure of trauma occurs at the client’s pace. The trauma-informed social worker provides genuineness, sensitivity, and respect and pays particular attention to triggering stimuli and responses for themselves and the client.]

- Synthesize and apply relevant theories of trauma and recovery in therapeutic relationships, organizational culture, and systems of care.

[EXAMPLES:

- Identify any concerns clients have about their safety and provide concrete ways they can strengthen their safety.

- Describe behavioral issues in a nonjudgmental manner that acknowledges and incorporates understanding of trauma history.
 - Use of the S.E.L.F. framework to identify the safety issues, emotional management issues, what has to be given up for change to occur, and what is the vision we are moving toward.]
- b. Use a range of interventions to address underlying motivations that influence help-seeking and help-rejecting behaviors, in a variety of contexts (e.g., from micro to macro) that affect engagement.
- [EXAMPLES:
- Develop individualized lists of positive social supports.
 - Make connections to and expand positive social supports.
 - Utilize universal trauma precautions, such as assuming that the person you are working with is coping with the effects of trauma.]
- c. Demonstrate attention to nonverbal behaviors and cues, emotional dysregulation, and wariness of institutions that impede the establishment of a therapeutic alliance.
- [EXAMPLES:
- Provide options to clients to self-soothe.
 - Recognize, recommend and help implement agency level trauma-sensitive approaches to care for client base and employees.]

Competency 7– Assess Individuals, Families, Groups, Organizations, and Communities

[Description: Social workers assess for the impact of trauma by using a range of behavioral, cognitive, affective, spiritual, and neurological indicators and a review of risk factors, protective factors, strengths, and resilience. They assess organizational and systemic factors that influence trauma-informed agency and organizational policies and procedures to promote effective care. Social workers collect and apply assessment data to inform the development of interprofessional, interorganizational, and collaborative systems for trauma-informed care and use data to assess the impact of compassion fatigue and vicarious and secondary trauma on staff and organizations. Social workers use principles of developmental and ecological theory in trauma-focused assessments at the micro, mezzo, and macro levels. Social workers use empirically sound trauma assessment tools that are culturally and developmentally relevant for the client to ensure that clients are physically and emotionally safe.]

- a. Assess organizational policies for their potential to strengthen trauma-informed evidence-based programs and practices and evaluate organizational readiness to engage in such change.

[EXAMPLES:

- Identify ways in which the agency implements the 7 Sanctuary Commitments (Open Communication, Emotional Intelligence, Social Learning, Nonviolence, Democracy, Growth and Change, Social Responsibility). Explain what you will do with these findings.
 - Identify ways in which the agency implements the key principles of the Trauma Informed Approach (Safety, Trustworthiness, Transparency, Peer Support, Collaboration, Mutuality, Empowerment, Voice, Choice). Explain what you will do with these findings.]
- b. Practice micro- and macro-level trauma-informed assessment skills that explore and examine the effects of all types of trauma, trauma context, and history of trauma exposure and assess for risks, strengths, protective factors, and development of trajectory.

[EXAMPLES:

- Engage in formal assessment of the trauma experienced by those you are serving.

- Articulate the impact of the trauma experience when participating in diagnostic formations.
- Engage in community assessments that focus on risk and protective factors.]

Competency 8– Intervene with Individuals, Families, Groups, Organizations, and Communities
 [Description: Social workers addressing trauma strive to create trauma-informed systems of care that recognize and respond effectively to signs of traumatic distress in human beings across their lifespan and throughout the various service settings that clients access. They bring a compassionate and nonjudgmental stance to their work and build relationships with clients, colleagues and collaborators based on safety, support, respect, and trust. They work to increase psychological, emotional, physical, and spiritual safety in individuals, families, communities, and organizations.

They increase resilience by helping clients develop ways of managing future exposure to potentially traumatic events while maintaining a positive sense of the future that allows maximal engagement with life opportunities. Social workers are knowledgeable about the theoretical and empirical foundations of trauma-informed practice and apply that knowledge to identify and implement developmentally and culturally appropriate trauma-focused interventions.

Trauma social workers facilitate healing with client systems by processing trauma experiences within somatic, affective, cognitive, and spiritual domains in a phase-based approach that attends to safety and meaning making. Trauma social workers value strength-based and empowerment-oriented approaches to practice that recognize promotive and protective factors, resiliency, and opportunities for posttraumatic growth in individuals, families, organizations, and communities. Trauma social workers build practice-based evidence to determine how to intervene in the absence of research-based evidence, when new interventions are emerging, or when modifications and adaptations are needed for cultural or contextual reasons.]

- a. Use strategies to establish a sense of safety, identification of strengths and resiliency for a collaborative therapeutic relationship.

[EXAMPLES:

- Identify and implement concrete ways to expand healthy self-soothing and self-regulating behaviors and coping strategies.
- Identify possible signs of re-traumatization and take steps to help the client manage the emotions and stress effectively.
 - Create, implement and evaluate safety plans.]

- b. Critically select and implement developmentally and culturally appropriate trauma-informed evidence-informed interventions in conjunction with practitioner expertise and client preferences to address the adverse consequences of trauma.

[EXAMPLES:

- Identify ways to strengthen the capacity for choice by engaging in positive new behaviors rather than repeating old patterns.
- Recognizing and validating what must be given up for change to occur while reinforcing positive and new coping strategies.
 - Develop a treatment plan informed by client's trauma history incorporating recommendations/referrals for trauma specific treatment when warranted.]

- c. Advocate for the advancement of trauma-informed organizational systems of care.

[EXAMPLES:

- Devise an organizational safety plan.
- Apply empirically supported trauma informed interventions and models (Motivational Interviewing, Seeking Safety, Solution Focused Therapy, Mindfulness, etc...)]

Competency 9– Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities

[Description: Trauma-informed practitioners understand the impact of current and historical trauma on individuals, families, groups, organizations, and communities, and they critically evaluate and apply this knowledge in evaluating process and outcomes and use this information to inform practice decisions and quality assurance to strengthen systems of care. Qualitative and quantitative methods, including standardized measures and culturally responsive methods, are used systematically to gather data in order to evaluate processes and outcomes and increase practice effectiveness at all levels.]

- a. Recognize and practice the key characteristics of a trauma-informed organization.
[EXAMPLES:
 - Conduct an agency analysis to compare and contrast findings with the characteristics of a trauma informed care organization (required Field Seminar assignment) and share out with agency.]
- b. Systematically evaluate processes and outcomes related to trauma-informed practice.
[EXAMPLES:
 - Identify the outcomes articulated in the treatment plan.
 - Assess the extent to which the treatment outcomes advance safety (physical, psychological, social, moral), positive emotional self-soothing and self-regulating practices, and positive coping strategies.
 - Identify the gaps and recommend revisions to treatment outcomes to further strengthen trauma recovery.]
- c. Apply assessment and evaluation measures when working with diverse client systems.
 - Identify the outcomes articulated in agency continuous improvement plans.
 - Identify the gaps and recommend revisions to organizational outcomes that are trauma-sensitive.]

Required Signatures:

Student Signature:

Date:

Field Instructor Signature:

Date:

Faculty Liaison Signature:

Date:

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