NACBH is committed to facilitating large-scale change within the children’s behavioral health field, in both policy and practice, to enhance the availability and delivery of services for children and families dealing with mental or emotional disturbances. We are known for identifying key challenges and opportunities for providers in a rapidly changing system, and for connecting you with your peers and the leading experts for collaboration and learning.

Leadership requires innovation, the ability to incorporate evolving evidence, and fidelity to training, retraining, evaluation and adaptation. Over the past decade, NACBH has held a number of meetings on trauma-informed care. Responding to meeting evaluations and requests, we are reconvening to provide more practical information on implementation and sustainability: assessing your agency’s readiness to apply, expand or re-evaluate a trauma focus, tools to use with staff, clients and families, interventions that work and are consistent with trauma-informed principles, and examples of your colleagues’ experience in their agencies.

We are delighted to welcome Jane Halladay Goldman of the National Child Traumatic Stress Network (NCTSN), who will lead a team of experts in a highly interactive two-day training and strategizing session designed to explore the essential elements needed to create a trauma-informed child- and family-serving agency. The faculty will provide practical tools and consultation to adapt them to your unique settings, and work with you to develop a plan to infuse and sustain these elements in your organizations. Break-out sessions will allow for in-depth discussion of administrative and clinical roles and agency team action-planning.

The NCTSN was established by Congress in 2000 as part of the Children’s Health Act and has grown from a collaborative network of 17 to more than 150 funded centers located nationwide in universities,
hospitals and diverse community-based organizations. It brings a singular and comprehensive focus to childhood trauma with its mission to raise the standard of care and improve access to services for traumatized children and their families. Funded through the Substance Abuse and Mental Health Services Administration (SAMHSA) and coordinated by the UCLA – Duke University National Center for Child Traumatic Stress, NCTSN has developed a Core Curriculum on Childhood Trauma that provides a foundation in child trauma concepts and issues. While providing an overview of the seven NCTSN elements integral to any service system with a trauma-informed perspective, including a bibliography of resources, this training will pay particular attention to those areas previously identified for more in-depth training:

- **Modernizing the Approach to Trauma Assessment and Treatment: Moving Beyond an Instrument and an Intervention.** Assessment must be comprehensive, addressing the child’s development, environment, trauma experiences and related mental health symptoms. Staff and clinicians must understand core concepts related to child traumatic stress and learn clinical decision-making that will allow them to use a comprehensive assessment to guide treatment planning including choosing appropriate interventions, monitoring progress, and addressing other areas of a child’s family and community system.

- **Strengthening Resilience and Protective Factors of Children and Families.** Intervening with a child and family includes strengthening protective factors that buffer the adverse effects of trauma and its aftermath, as well as enhancing promotive factors that improve a child’s positive adjustment regardless of whether risk factors are present.

- **Addressing Parent and Caregiver Trauma and its Impact on Family.** Trauma is often intergenerational, and many of the traumas experienced by children are also experienced, either directly or secondarily, by their parents. Professionals working with the family should understand the potential impact on a parent and consider options such as individual treatment for the caregiver or treatment that works with both the caregiver and the child, to build resilience and other capacities essential for parenting a child who has been traumatized.

- **Creating an Environment of Care for Staff that Addresses, Minimizes and Treats Secondary Traumatic Stress.** Workforce protection was rated particularly highly for more in-depth training. Discussion will include secondary traumatic stress and related conditions such as compassion fatigue, vicarious trauma, burnout and compassion satisfaction. Agencies serving children who have been traumatized need to have policies in place that prevent, assess for and intervene with workers who experience secondary traumatic stress, and support worker resiliency.

As important as the presentations will be the participation of meeting registrants. This will be a working meeting for agency leadership, administrators, clinicians, directors of nursing, front line workers, family partners and Board members engaged in policy, practice and performance. Break-out sessions will allow for open and honest exchange among peer groups. We realize, though desirable, it may not be possible to bring entire teams but we do urge you to bring as many of your leadership team as possible. Registration fees are set to facilitate maximum attendance while taking into account the costs of the training.

This meeting, once again, offers a necessary opportunity to define, refine, create, assess and validate your understanding and implementation of trauma-informed service settings. The Don CeSar offers the perfect balance to what will be an intense learning experience – and the room block fills quickly. The camaraderie of NACBH, excellent faculty and setting make this meeting an imperative to attend.
Our Faculty

Jane Halladay Goldman, Ph.D. is the director of the Service Systems program at the National Center for Child Traumatic Stress (NCCTS), the coordinating site of the NCTSN. As the director, she oversees projects related to creating trauma-informed child and family service systems within juvenile justice, child welfare, education, medical and mental health settings as well as coordinating services and care across systems. Prior to joining NCCTS, she worked in the field of child sexual abuse and rape treatment, doing research, program development, training, community outreach, crisis intervention and on-going therapy. She developed and implemented training related to child sexual abuse, sexual assault and trauma for law enforcement, child welfare workers, district attorneys, physicians, mental health professionals, domestic violence volunteers and staff and educators. Her doctoral research was a comparative case study that examined how human service organizations have developed, incorporated and maintained structures and practices that align with their values.

Lisa Conradi, Psy.D. is a clinical psychologist at the Chadwick Center for Children and Families, Rady Children’s Hospital, San Diego. There she serves as the Project Co-Director for both the Chadwick Trauma-Informed Systems Dissemination and Implementation Project, funded by SAMHSA as part of NCTSN, and the California Screening, Assessment and Treatment Initiative, funded by the Administration for Children, Youth and Families. In this role she has authored and co-authored a variety of publications on trauma screening and assessment practices and creating trauma-informed systems, and presented nationally on innovative practices designed to improve the service delivery system for children who have experienced trauma.

Pam Toohey is the founder of the Birth Parent Association: A Parent Partnering Program in San Diego, California, providing advocacy and support for families at risk of involvement with the child welfare system. She also serves as a consultant to the Chadwick Center for Children and Families in their Trauma Informed Systems Project. She received her Alcohol and Other Drug Studies Certification and has more than 24,000 hours of practice in counseling and case management. She sits on the San Diego Children, Youth and Family’s Behavioral Health System of Care Council, the NCTSN Parent Trauma Committee and Child Welfare Committee, and has been a part of the California Southern Regional Child Abuse Prevention Councils Coalition. Most importantly, she is the proud mother of five and grandmother to ten, having been a consumer and stakeholder in the child welfare, behavioral health, juvenile justice and substance abuse treatment systems.

Erika Tullberg, MPA, MPH is a research assistant professor in the Department of Child and Adolescent Psychiatry at the NYU School of Medicine and a member of the Center for Stress, Trauma and Resilience. Her work is focused on children and families that have experienced abuse and maltreatment. She is the principal investigator and director of the Administration for Children and Families-funded Atlas Project, a collaboration between the Child Study Center, the New York City Administration for Children's Services, and the New York State Office of Children and Family Services focused on identifying and addressing trauma and other mental health needs of children, families, and staff in the state child welfare system. She is also the associate director of a SAMHSA-funded NCTSN Treatment and Services Adaptation Center focused on developing and promoting trauma-informed child welfare practice nationally. Prior to joining NYU, Ms. Tullberg was the assistant commissioner for clinical policy for the New York City Administration for Children's Services, where she led a multi-disciplinary department that planned, implemented, and oversaw program and policy development within New York City's child welfare system in the areas of domestic violence, health, mental health, and substance abuse. She has written and presented extensively on trauma-informed child welfare practice, with a focus on how trauma impacts parenting and child safety, and secondary traumatic stress experienced by child welfare staff.
HOTEL INFORMATION

The Don CeSar Beach Resort
3400 Gulf Boulevard, St. Pete Beach, Florida 33706
(800) 282-1116 Loews Reservations, (727) 360-1881 Hotel Phone

www.loewshotels.com/don-cesar-hotel

NACBH room rate: $149 single/double

$10/day resort fee includes wireless internet in guest rooms, unlimited local phone calls, 24-hour access to fitness center, complimentary yoga and aerobics classes daily

$10/day self-parking, $23/day valet parking

Option to the main hotel, at the same room rate: The Beach House Suites
Sister property ½ mile away. One-bedroom suites, with king or queen size bed in the bedroom and sleeper sofa in the living room, full kitchen, dining room, washer/dryer, view of the Gulf of Mexico, and balcony. Full resort privileges at the main hotel. Free shuttle on demand to the main hotel.

www.beachhousesuites.com

Rate effective: December 3 – 7
and, subject to hotel availability, November 30 – December 2 and December 8 – 10

Hotel reservations cut-off: Monday, November 11, 6:00 p.m. (Eastern)

A charge equal to one room night will be made for cancellations received less than 72 hours prior to scheduled arrival, and for departures before the date confirmed at check-in.

Please contact register@nacbh.org if you have any trouble making reservations for your preferred dates at our negotiated rate, so that we may inquire with the hotel directly about availability.
## Trauma-Informed Care: Tools for Implementation and Sustainability

### National Association for Children’s Behavioral Health

#### Agenda

**Thursday, December 5**

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<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>8:00 a.m.</td>
<td>Continental Breakfast</td>
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<tr>
<td>8:30 a.m. – 8:45 a.m.</td>
<td>Welcome and Overview</td>
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<td>John Damon, NACBH President</td>
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<td>Joy Midman, NACBH Executive Director</td>
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<tr>
<td>8:45 a.m. – 9:15 a.m.</td>
<td>Introducing Our Approach to Implementing and Sustaining Trauma-Informed Care</td>
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<td>9:15 a.m. – 10:00 a.m.</td>
<td>What is a Trauma-Informed Child- and Family System?</td>
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In this session participants will hear about the NCTSN definition of a trauma-informed child-and family-service system, and examples of successful strategies used by organizations to develop, infuse and sustain trauma-informed practices into their work. Elements that will be addressed include: routine screening for trauma, use of culturally appropriate evidence-based assessment and treatment, resources on trauma made available for children, families and providers, efforts to strengthen the resilience and protective factors of children and families, addressing parent and caregiver trauma, continuity of care and collaboration across systems, and addressing, minimizing and treating secondary traumatic stress among staff.

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<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>10:00 a.m. – 10:15 a.m.</td>
<td>Break</td>
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<tr>
<td>10:15 a.m. – 11:30 a.m.</td>
<td>Organizational Self-Assessment Review</td>
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Faculty will review what was learned from the Organizational Self-Assessments completed by participants prior to the meeting, focusing particularly on the areas to be highlighted over these two days: addressing parent and caregiver trauma, secondary traumatic stress and staff resilience; approaches to trauma-informed assessment and treatment; and increasing the resilience and protective factors of children and families. In addition to the content and process of the organizational analysis, discussion will include how to make and sustain organizational change. NACBH members who have implemented trauma-informed care will share their perspectives on agency self-assessment, for example, what was helpful in their process, what their self-assessment did not reveal that would have been useful to know sooner, and ongoing self-assessment to boost sustainability.
11:30 a.m. – 12:00 noon  Modernizing the Approach to Trauma Assessment and Treatment: Moving Beyond an Instrument and Intervention

Assessment must be comprehensive, addressing the child’s development, environment, trauma experiences and related mental health symptoms. Staff and clinicians must understand core concepts related to child traumatic stress and learn clinical decision-making that will allow them to use a comprehensive assessment to guide treatment planning including choosing appropriate interventions, monitoring progress, and addressing other areas of a child’s family and community system. This session will provide an overview to this comprehensive approach.

12:00 noon – 1:45 p.m.  Lunch on your own

1:45 p.m. – 2:45 p.m.  Breakout I: Senior Administrators

CEOs, COOs, Executive Directors and other senior administrators will participate in a facilitated discussion of implementation and sustainability issues for agency leadership.

1:45 p.m. – 2:45 p.m.  Breakout II: Clinicians/Clinical Supervisors

Mapping the Assessment/Treatment Pathway

This session will guide participants through a review of their agency’s assessment process, focused on identifying what works well and where they might struggle. The goal is for participants to discover ways they can enhance this process to more comprehensively and effectively address traumatic stress and improve the standard of care for children and their families.

2:45 p.m. – 3:00 p.m.  Break

3:00 p.m. – 4:00 p.m.  Creating an Environment of Care for Staff that Addresses, Minimizes and Treats Secondary Traumatic Stress

Agencies serving children who have been traumatized need to have policies in place that prevent and assess for secondary traumatic stress (STS), intervene with workers who experience it, and support worker resiliency. Protecting our workforce is essential for creating a trauma-informed organization. This session will provide an overview of secondary traumatic stress and related conditions such as compassion fatigue, vicarious trauma, burnout and compassion satisfaction. It will explore strategies developed to reduce secondary traumatic stress and increase staff resilience, including interventions from the ACS-NYU Child Trauma Institute’s The Resilience Alliance: Promoting Resilience and Reducing Secondary Trauma Among Welfare Staff. It will also integrate practice examples from NCTSN and NACBH sites as well as responses from the organizational assessment.

4:00 p.m. – 5:00 p.m.  Breakout I: Senior Administrators
Breakout II: Clinicians/Clinical Supervisors

These smaller break-out groups will explore specific strategies for addressing STS and increasing staff resilience that are most relevant to each group: senior administrators and clinical supervisors/clinicians.
5:00 p.m. – 5:15 p.m. Brief Review of the Day
6:00 p.m. – 7:30 p.m. Reception

Friday, December 6

8:00 a.m. Continental Breakfast
8:30 a.m. – 9:00 a.m. Review of Day One, Prep for Day Two
9:00 a.m. – 10:00 a.m. The Road to Resilience: Beyond Trauma

The importance of addressing trauma across the lifespan will be demonstrated, using the story of one child and family who were involved with the child welfare and mental health systems. Participants will learn strategies of meaningfully addressing parent/caregiver trauma, as well as engaging and incorporating the family voice in every level and aspect of our work.

10:00 a.m. – 10:15 a.m. Break
10:15 a.m. – 11:15 a.m. Addressing Parent and Caregiver Trauma and its Impact on Family

Trauma is often intergenerational, and many of the traumas experienced by children are also experienced, either directly or secondarily, by their parents. Professionals working with the family should understand the potential impact on a parent and consider options such as individual treatment for the caregiver or treatment that works with both the caregiver and the child, to build resilience and other capacities essential for parenting a child who has been traumatized. This session will provide an overview of parent and caregiver trauma and how it is relevant to child-serving providers. It will integrate practice examples from NCTSN and NACBH sites as well as findings and responses from the organizational assessment. The focus of this session will be on strategies for meaningfully addressing parent and caregiver trauma, even within organizations that do not primarily treat parents and caregivers.

11:15 a.m. – 12:45 p.m. Lunch and hotel check-out
12:45 p.m. – 1:45 p.m. Strengthening Resilience and Protective Factors of Children and Families

Intervening with a child and family includes strengthening protective factors that buffer the adverse effects of trauma and its aftermath, as well as enhancing promotive factors that improve a child’s positive adjustment regardless of whether risk factors are present. This session will provide a brief overview of resilience and protective factors, and include a panel representing the clinical, administrative and parent perspectives, focusing on strategies to enhance our work in this area.

1:45 p.m. – 3:00 p.m. Resource and Strategy Sharing Session

Participants will have an opportunity to explore, ask questions about, and share curricula, guides, strategies, tools and other resources developed for the creation and maintenance of trauma-informed child- and family service systems. This will be a lively, dynamic, interactive session.
3:00 p.m. – 3:30 p.m.  

**Putting It All Together**

Discussion and closing remarks.

3:30 p.m.  

**Adjournment**

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*In deference to those who requested a fragrance-free environment, we ask that you avoid wearing perfumes, colognes or other scented products.*
# REGISTRATION FORM

## NACBH 2013 TECHNICAL MEETING

## TRAUMA-INFORMED CARE:

**TOOLS FOR IMPLEMENTATION AND SUSTAINABILITY**

The Don CeSar Beach Resort, St. Pete Beach, Florida
December 5 – 6, 2013

## REGISTRATION FEES

<table>
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<tr>
<th>Early Bird – Payment E-Paid or Postmarked by October 31</th>
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<tr>
<td>$695 1st registrant from member agency</td>
<td>$795 1st registrant from non-member agency</td>
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<td>$595 2nd registrant from member agency</td>
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<td>$395 each additional from member agency</td>
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* The member registration rate for this meeting is also available to members of the Alaska Behavioral Health Association, IARCCA, the Kentucky Alliance for Children, the Minnesota Council of Child Caring Agencies and the Missouri Coalition of Children’s Agencies.

## CANCELLATION POLICY

A 50% cancellation fee will be imposed for all cancellations received between November 7 and 21. After November 21, it will not be possible to make any refunds.

## SPECIAL REQUIREMENTS

Please identify any special dietary or accessibility requirements for each registrant.

## REGISTRATION

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**OPTIONAL:** Do you have specific areas of concern for us to bring to the faculty’s attention before the meeting?

Please send completed form to register@nacb.org, (202) 362-5145 (fax) or NACBH, 2920 Brandywine Street, NW, Washington, DC 20008. Your registration will be acknowledged by email (to the first registrant, above, or per instructions in your cover email/fax) with an invoice and payment information.