

Ten Best Practices for Providing Trauma-Informed Care

Goal: To effectively and consistently provide trauma-informed care¹ so that every patient, client, and staff member feels cared for and safe across Planned Parenthood locations.

1. Make a Connection Through Language

- Greet patients in a warm and welcoming way.
- Reference patient history for any past trauma. Ask all patients if examinations/procedures are challenging for them.
- Avoid terms that may serve as trauma cues.
- Ensure inquiries about safety and sexual history are always open-ended questions.
- **You can:**
 - Allow patients who may be anxious the opportunity to share: "Many patients are anxious about examinations or procedures. What concerns do you have about today's visit?"
 - Avoid terms like "spread your legs", "bed", or "just relax".

2. Acknowledge Trauma Experience with Caring Words

- If a patient discloses an assault experience, acknowledge their experience with language that conveys care and support.

You can:

- Use caring words: "I am very sorry to hear you went through that. How can I be helpful?"
- Make a referral: "If you ever want to speak with a social worker or counselor about your assault, this organization has great professionals who are always there to listen."



Make a Connection

3. Recognize Urgency and Accommodate

- If a patient discloses an assault experience and appears acutely upset, pause the flow of the encounter and practice flexibility in regular workflow in order to meet their needs.

You can:

- Use caring words and a supportive tone: "I'm sorry to hear that. Thank you for trusting us with this information. We'll be sure to provide you with the care you need today."
- Offer to contact a rape crisis program for immediate in-clinic assistance if patient wishes.



Acknowledge the Reality

4. Foster Self-agency

- Give patients as much control and choice as possible throughout the visit.
- Meet and engage in conversations with patients first while they are dressed.
- Allow a companion or support person to accompany the patient.

You can:

- Remind the patient they are in control: "I will stop if you ask, although there will be a point where I'll need to complete the procedure. I will let you know before we reach that point."



Keep Them in the Loop

The symbols represent In This Together Workplace Values and Service Standards.

¹ A trauma-informed care approach "realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in patient, staff, and others involved with system; responds by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively prevent re-traumatization." (SAMHSA, 2014).

5. Minimize Non-Essential Touch

- Physical examinations should minimize non-essential touch.

You can:

- Avoid touching the inner thigh, as it is an erogenous zone. Instead, tell the patient, "You're going to feel my hand on your vulva, which is just outside your vagina."
- Resist resting your non-working hand on any part of the patient's body.
- Ask the patient to pull back the drape sheet when they are ready for you to begin the exam.

7. Be Deliberate About the Care Environment

- Avoid TV/Video content with potential trauma cues.
- Make trauma resources easily visible and accessible.
- Distribute 'My Plan' cards in the waiting room.
- Maintain awareness that actions that may seem hurried can convey to a patient they will be rushed and not receive personalized care.

You can:

- Give patient a 'My Plan' card upon checking in: "This is our My Plan card. Many patients like to complete it before being seen by their health care provider. It helps ensure we meet all your needs and answer all your questions before you leave today. Here's a pen you can use."

9. Practice Self-care

- Recognize when you are experiencing difficulty; take a break, and seek support.

You can:

- Learn to recognize your mind/body reactions, so you can recognize your behavior and work to enhance positive outcomes.
- When you're having a tough time, ask a colleague to jump in for a few minutes. Or, identify someone you can reach out to for support, either onsite or remotely.

6. Practice Asking For and Observing Consent

- Knock and ask for permission to come in before entering a patient room.
- Ask about patient needs and preferences.
- Seek continued consent and observe carefully for concerns.

You can:

- Ask: Would you like me to explain each step before I proceed or do you prefer a quiet space?"
- Ask for permission before touching a patient: "Are you ready, can we begin the exam now?"
- When observing discomfort, say: "I sense you are feeling uncomfortable. What can I do to help?"

Confirm the Plan

8. Clear the Slate

- Breathe deeply in between patients and during intense encounters to stay centered and focused.

You can:

- Say calming words to yourself: "I'm doing good work here." or "I'm calm and carrying on."
- Remember patients labeled as "difficult" may be struggling with trauma histories.

10. Seek Continuous Feedback

- Practice continued and regular monitoring of the patient survey data and comments.
- If you believe, or others believe, you said something that may be considered insensitive or disrespectful, check-in and accept any constructive feedback with gratitude.

You can:

- Filter Press Ganey comments by using terms such as 'rape' or 'violence' to identify feedback specific to trauma histories and needs. Monitor and respond to feedback via Google and Yelp.
- Ask others if what you said was offensive and take time to discuss: "I was feeling stressed earlier and I'm concerned I acted rudely to you. Do you have a moment to discuss with me?"