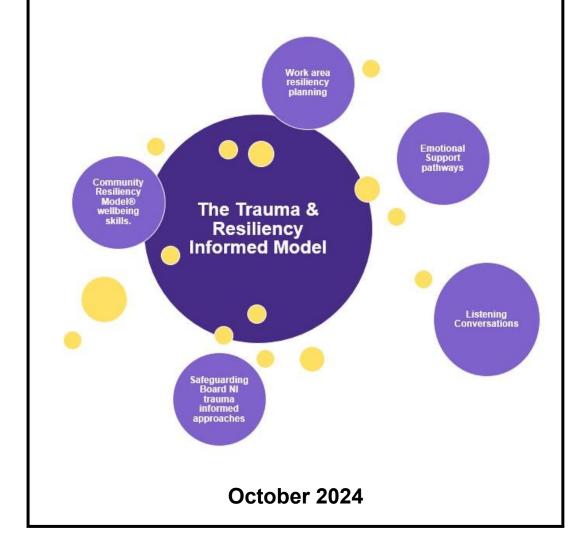


Framework for Implementing the
Trauma and Resiliency Informed
Model (TRIM) in the Independent
Commission for Reconciliation and
Information Recovery

Phase 1



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1. Executive Summary

This document outlines the Commission's trauma and resiliency informed model. It sets out why the Commission has chosen to place such a priority on supporting people and how, through a whole-organisation approach, it will embed these principles in all of its work. The core purpose of the trauma and resiliency informed model is to support victims, survivors and families when they engage with the Commission.

The document also explains the principles of the model and our implementation strategy. It commits to best practice and to improvement.

1.1 Why the Commission is embedding the trauma and resiliency informed model

The Commission acknowledges that it will engage with individuals who have experienced traumatic events. At an early stage in its development, the Commission recognised there was a need to design practice, process and policy in a way that was attentive to the impacts of trauma. We have built on this, aiming to develop a style of engagement that will support people, specifically those who are experiencing trauma impacts along with other ongoing impacts of the Troubles/Conflict, for example, deep grief. Alongside how we engage with people it is also important that the Commission itself adopts practices internally and builds a culture that takes the impacts, including the ongoing impacts, of traumatic experiences into account.

1.2 How we will do it

Since March 2024, the Commission has been developing its trauma and resiliency informed model; building on earlier work and engagements to understand the impacts of trauma due to the Troubles/Conflict. We have engaged with specialists, including people with lived experience. This concluded with a <u>public consultation</u> where we asked for people's views, and <u>decisions</u> were taken as a result. Since May 2024 the Commission has been operational and engaging with victims, survivors and families and delivering using the trauma and resiliency informed approach, aiming to be trauma-informed and resiliency focussed. We are already learning how we can better put our Model to use.

Improvement is always possible. Over the next 12 months the Commission will continue to engage with key stakeholders, including experts, people with lived experience, those who engage with the Commission and staff, to draw from their learning and experience, honing the Model to the meet the challenges and opportunities presented by the Commission.

Key steps being undertaken to embed the trauma and resiliency informed model across the Commission include:

- Embedding the model to create a safe, supportive, and responsive
 environment that acknowledges the prevalence of trauma and its effects on
 victims, survivors and their families, the Commission's workforce and the
 wider community with whom they engage.
- Recognising and responding to the impact of trauma on individuals, ensuring that organisational processes are designed to promote healing and resilience, reducing the risk of retraumatisation. Crucially, it recognises and acknowledges that people have shown resilience, and displayed strength in approaching the Commission. A trauma and resiliency informed approach will also ensure the workforce is supported for their own wellbeing and to maintain the supportive engagements with others that we expect.
- Guiding practices, such as management of physical spaces that minimise
 the risk of re-traumatising people when they engage with the Commission,
 thereby supporting them to maintain engagement through the lifetime of an
 investigation. This will also support the well-being of the workforce.
- Providing a whole-system, collaborative approach with strong and compassionate leadership and robust governance. It needs to be a live and dynamic process where reflection, learning, evaluation and improvement are continuous.
- All staff engage Resiliency Planning within their work areas, following
 mandatory training in the Community Resiliency Model® wellbeing skills. Post
 training, staff will identify opportunities to embed a trauma and resiliency
 approach into their everyday work, individually and as teams. This process

- will also help identify what the trauma and resiliency team can further do to support staff and to embed the trauma learning and resiliency focussed ethos.
- Implementing Listening Conversations for both individual staff members and groups of staff. Listening conversations will play a key role in reducing stress, enhancing resiliency and self-care but also crucially the learning and reflection from the Listening Conversation process will inform the ongoing development and evolution of the Trauma and Resiliency Informed Model within the Commission.
- Working collaboratively to achieve better support outcomes for victims, survivors and their families on the common ground of commitment to those individuals who continue to experience the impacts of the trauma of Troubles/Conflict related events.

1.3 Monitoring and evaluation

Ongoing monitoring and evaluation is imperative to ensuring that training and practices are embedded to achieve the desired outcomes. Mechanisms to gather feedback to refine learning and develop content include: pre and post training assessments, feedback from Listening Conversations, information gathered from those who engage with the Commission, case reviews and peer reviews.

1.4 Implementation plan

This Framework will follow a **phased implementation**, gathering learning from each Phase to inform the design and implementation of the next Phase. This includes understanding any barriers to effective implementation and ensuring that interventions are delivered as intended.

In 2025-2026 the Commission will publish a full Implementation Strategy which will draw on engagement and codesigned elements. This will include key stakeholders and will support the ongoing delivery and effectiveness of the Commission's Trauma and Resiliency Informed Model.

2. Introduction

The Independent Commission for Reconciliation and Information Recovery (the Commission) has been operational since May 2024.

The Commission developed its Operational Design Framework in July 2024¹. The Commission's approach is underpinned by three essential principles:

- Compliance with the European Convention on Human Rights (ECHR);
- Respect for the principles of the 1998 Belfast Good Friday Agreement2; and
- Focus on providing useful information to those affected by the Troubles/Conflict.

The Commission is committed to being trauma and resiliency informed. In the Operational Design Framework (July 2024), the Commission highlighted the importance of implementing a trauma and resiliency-informed approach towards the needs of victims, survivors and their families, supporting them to maintain engagement with the Commission through the lifetime of an investigation.

Fundamental to this is implementing the Trauma and Resiliency Informed Model (TRIM) in a way that makes it integral to the culture and standard operating processes of the Commission. This will ensure the Commission is fulfilling its statutory duty to not put people at risk, ensuring their safety throughout their engagement. It requires creating a safe, supportive, and responsive environment that acknowledges the prevalence of trauma and its effects on victims, survivors and their families, the Commission's workforce and the wider community with whom they engage. It also requires leadership and vigilance, at every level and in every sphere of the Commission's work.

2.1 Importance of the Trauma and Resiliency Informed Model

A trauma and resiliency informed approach recognises and responds to the impact of trauma on individuals, ensuring that organisational processes are designed to promote healing and resilience, reducing the potential of retraumatisation. Crucially, it recognises and acknowledges people have displayed strength in approaching the Commission. A

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¹ <u>Commission The Operational Design Framework - Independent Commission for Reconciliation & Information Recovery</u>

The Belfast Agreement - GOV.UK (www.gov.uk)

trauma and resiliency informed approach will also ensure the workforce is supported, nurtured and sustained. This will interlink across all of the Commission's directorates and business areas.

The Commission's Trauma and Resiliency Informed Model will provide the context for:

- attending to the individual needs of victims, survivors and their families;
- accessibility in presentation of communications, access to buildings, meeting in safe spaces and creating safe spaces;
- carrying out investigations;
- policy development;
- communication and engagement at all levels;
- · well-being of the workforce; and
- learning and development of the workforce.

Drawing on learning from the Commission's consultation about trauma informed practice, the Commission's trauma and resiliency informed approach will serve the following priorities:

- 1. Supportive Environment: The Trauma and Resiliency Informed Model helps embed a culture and environment where the focus is on understanding and addressing the impact of trauma, on the victims, survivors and their families who engage with the Commission, on the individual staff who interact with them but also on the whole system of the Commission and the interactions and relationships within it.
- **2. Improved Well-being:** The model promotes overall physical and psychological wellness, which can lead to increased productivity and a healthier workplace.
- **3. Enhanced Resilience:** By teaching everyone in the workforce how to manage their stress responses, the organisation can create a more resilient workforce. These skills can also be deployed at any time as appropriate in any interactions that staff have with those who engage with the Commission.

4. Promoting Reconciliation: By designing, developing and implementing a Trauma and Resiliency Informed Model, the Commission puts people at the heart of its work and commits to fostering an environment of healing and resilience, supporting them to maintain engagement with the Commission through the lifetime of an investigation and ultimately improving outcomes for victims, survivors and their families and the workforce.

2.2 Who is the Trauma and Resiliency Informed Model for in the Commission?

The Trauma and Resiliency Informed Model is being developed by and implemented into the 'whole-system' of the Commission from the outset. The Commission recognises the need for trauma and resiliency related knowledge and skills across the whole workforce, not just for those with a remit to respond directly to the needs of people affected by trauma. Staff may also carry trauma as a result of the Troubles/Conflict.

Staff members across the workforce have varying roles and functions within the Commission. Some may not feel confident or comfortable about the subject of trauma and its impacts, while others may consider it is not relevant to their role. This is important to acknowledge. The Trauma and Resiliency Informed Model is not about everyone at the Commission becoming trauma experts; rather it is an integrative Model that consolidates the values, standards, principles and skills in the Commission, setting the context to generate the right culture. The trauma and resiliency model will guide the practices, such as management of physical spaces that minimise the risk of re-traumatising people when they engage with the Commission, thereby supporting them to maintain engagement through the lifetime of an investigation. It will also support the well-being of the workforce. It is everyone's business.

Embedding a trauma and resiliency approach systemically and meaningfully in an organisation is ambitious. It requires a whole-system, collaborative approach with strong and compassionate leadership and robust governance. It needs to be a live and dynamic process where learning, evaluation and reflection should be continuous. Successful outcomes for victims, survivors and their families will be achieved with strong leadership and shared culture, values and principles. These

underpin the development and implementation of the Trauma and Resiliency Informed Model.

2.3 Scope of the Trauma and Resiliency Informed Model Implementation Framework

The Commission has asserted its commitment to embedding a trauma and resiliency informed approach into all aspects of its practice. In developing this living and evolving Framework, the Commission is committed to practically commencing, monitoring and evaluating the process of developing and implementing the Trauma and Resiliency Informed Model.

This Framework is part of a complex organisational environment, in which business planning, performance and risk, and statutory compliance must be balanced with the development of a progressive culture. The Framework is designed to set and guide the process and implementation of the Trauma and Resiliency Informed Model across all levels of the Commission.

It outlines the requirements for sustainability and effectiveness in the longer term to ensure the Trauma and Resiliency Informed Model is embedded into the physical environment, the culture of the organisation, its policies, practices, and the roles and functions of all those who work in the Commission.

The Commission's Trauma and Resiliency Informed Model takes account of available scientific evidence (neuroscience in particular), but it is important that it evolves organically to reflect the reality of the lives of people who engage with and who work in the Commission. The continuous development of the Trauma and Resiliency Informed Model will therefore involve key stakeholders in its design and with ongoing learning and evaluation it will evolve incrementally. Over 12 months the Commission will engage with key stakeholders, including experts, people with lived experience, those who engage with the Commission and staff, to draw from their learning and experience, honing the Model to the meet the challenges and opportunities presented by the Commission.

The Framework is based on an implementation science approach, which articulates the need to consider drivers to successfully embrace and embed new practice in any organisation. Implementation science is crucial when embedding a trauma and

resiliency-informed approach because it provides a structured framework to ensure that evidence-based practices are effectively and meaningfully integrated, adapted and sustained within the Commission. A phased approach is required. This Framework sets out the implementation science considerations that need to be addressed by the Commission in implementing the Trauma and Resiliency Informed Model.

From the outset the Commission will robustly monitor and evaluate the process of incremental development and implementation of the Trauma and Resiliency Informed Model and its impact and outcomes for victims, survivors and their families and the workforce. In 2025-2026 the Commission will publish a full Implementation Strategy which will be co-designed with all key stakeholders to support the ongoing delivery and effectiveness of the aspirations of the Trauma and Resiliency Informed Model in the Commission. This will be modelled and evolved within the wider context of overarching organisational strategy.

2.4 Key Stakeholders for the Trauma and Resiliency Informed Model Implementation

The nature of the role and function of the Commission necessitates significant engagement with an extensive number of stakeholders. For the purpose of co-design and implementation of the Trauma and Resiliency Informed Model moving forward, the key stakeholders who need to be involved, as a minimum, are:

- Representatives of victims, survivors and their families;
- Representation from each department of the Commission;
- Representation from relevant bodies in Great Britain and the Republic of Ireland;
- Trauma Resource Institute; and
- Safeguarding Board NI.

3. Background and Context of the Trauma and Resiliency Informed Model

This section sets out the Vision, Mission, Values,³ Guiding Principles, Strategic Context, Legislation and Cultural Drivers which guide policy development and the everyday practice of Commissioners, officers and others working on behalf of the Commission.

Collectively, these set the context for, and underpin the process of, developing and implementing the Trauma and Resiliency Informed Model and provide an overarching framework for the Commission to monitor and evaluate its trauma and resiliency informed culture and practice.

The Vision, Mission and Values of the Commission are:

3.1 Vision

A society that is more reconciled because the Commission has provided greater information to the public about deaths and serious injuries during the Troubles/Conflict.

3.2 Mission

An independent Commission committed to serving victims, families and survivors by thoroughly investigating and establishing the facts of past events, to provide an acknowledgement of the wrongdoing, in a way that is sensitive to the trauma experienced and assists with the promotion of reconciliation.

3.3 Values

The Commission's Code of Conduct⁴ was published in December 2023 and sets out the values the whole Commission has adopted to guide its work. They are the standards of behaviour that can be expected of Commissioners, officers and others working on behalf of the Commission as follows:

³ Our vision, mission and values - Independent Commission for Reconciliation & Information Recovery (Commission.independent-inquiry.uk)

⁴ Commission Code of Conduct

• Integrity

Putting the obligations of public service above your own personal interests. Acting in line with other applicable professional obligations and standards.

Openness

Being truthful and straightforward in your communications and your engagement while respecting confidences and keeping information safe.

Respect

Treating everyone with whom you interact with courtesy, irrespective of their background or beliefs. Engaging in constructive, respectful and professional dialogue even in the case of differing opinions.

Impartiality

Behaving in a fair and objective manner, treating all equally, remaining open minded and taking decisions based on evidence.

Accountability

Operating within legal requirements, including the European Convention on Human Rights, the Equality Act 2010 and equivalent equality legislation in Northern Ireland, the requirements of the Northern Ireland Troubles (Legacy and Reconciliation) Act 2023, and within the objectives and policies of the Commission. Being willing to justify decisions, actions and omissions.

3.4 Guiding Principles

The 4 principles set out below have been adopted by the Commission to guide culture and values, the role and function of all in the Commission, the physical environment, everyday practice, policy development and learning and development.

Trauma & Resiliency Informed Model: Guiding Principles

Physical, emotional and psychological safety:

Physical, emotional and psychological safety were compromised by the experience of the Troubles/Conflict. The culture and values as well as skills development and physical

environment at the Commission should support the physical, emotional and psychological safety of everyone who engages with and who work at the Commission.

Empowerment, choice and collaboration:

Empowering individuals by validating their experiences, providing choices, and involving them in decision-making processes develops a sense of confidence and control and reminds Commission staff of their resilience and ability. Those engaging with the Commission should benefit from a collaborative approach that draws in the experience, skills and knowledge of all.

Trustworthiness & openness:

Trust in the Commission is a challenge given the many suspicions people impacted by the Troubles/Conflict retain, in part due to their experience of previous investigative bodies. While the Commission is not responsible for the legislation, building trust with those who engage with the Commission will require taking their concerns about the Commission seriously. Trustworthiness requires good relationships built with those who engage with the Commission. Listening, responding, keeping communication lines open and taking concerns or questions seriously is essential. Building and maintaining trust through openness about policies, procedures, and interactions is imperative so that individuals engaging with the Commission can both understand and express how the Commission goes about its work.

Cultural, historical & gender considerations:

Recognising and addressing the cultural, historical, and gender contexts of the Troubles/
Conflict is essential. The historical and ongoing discord between cultures in Northern
Ireland, Great Britain and the Republic of Ireland, the protracted, multi-generational and
ongoing impact and the extent and role of gender in the Troubles/ Conflict needs to be
understood.

3.5 Commission Charter of Commitments⁵

Published in July 2024, this Charter sets out the following in terms of the quality of relationships and how they will be nurtured in the Commission as follows:

⁵ <u>Commission Charter of Commitments - Independent Commission for Reconciliation & Information Recovery</u>

- The Commission is committed to establishing good relationships and supporting those with whom it engages. Support is based on the Trauma and Resiliency Informed Model adopted by the Commission to pay attention to the wellbeing needs of those who engage with the investigative process.
- The Commission will train and support staff to be trauma and resiliency informed, strengthening them to maintain good working relationships, attend to their wellbeing and to the wellbeing of all those whom they engage with.
- Commission staff are encouraged to take account of the impact their behaviour may have on requesting individuals, to provide feedback about their experience and to respect agreements set out in this document.
- Commission staff are encouraged to take support to ensure their own wellbeing. A variety of support routes are open to them.
- Requesting individuals can expect the values of the Commission to be evident during their engagements. These values are integrity, openness, respect, impartiality and accountability.
- Requesting individuals can expect Commission staff to consider their needs, including any concerns about how their experience of trauma could be affected by engagement with the Commission.
- Requesting individuals are encouraged to take account of the impact their behaviour may have on Commission staff, to provide feedback about their experience and be open to receiving feedback about their impact.
- Requesting individuals are encouraged to take support to ensure their own wellbeing. A variety of support routes are open to them.

3.6 Commission Cultural Drivers

 Ways of Working: Across the Commission workforce, ways of working should encompass the values, beliefs and attitudes that guide the Commission. This sets expectations for how employees should behave and interact with one another and the public as they perform their day-to-day responsibilities and contribute to the Commission's overall mission.

- **Leadership:** Strong and committed leadership is key to facilitating shared and inclusive agreement on priorities and objectives, valuing learning and innovation and modelling the values of the Commission.
- Communication: Effective communication is the backbone of a healthy organisational culture, driving growth, innovation, and success. Crucial to the culture of the Commission, good communication:
 - Fosters Collaboration: Clear and open communication helps team members understand their roles and responsibilities, leading to better collaboration and teamwork.
 - Builds Trust: When leaders communicate transparently, it builds trust among employees, making them feel valued and secure in their roles.
 - Enhances Productivity: Good communication ensures that everyone is on the same page, reducing misunderstandings and increasing efficiency.
 - Encourages Innovation: A culture of open communication allows for the free exchange of ideas, fostering innovation and creative problem-solving.
 - Aligns Goals: Effective communication helps align individual and the Commission's goals, ensuring that everyone is working towards the same objectives.
- Inclusivity: An inclusive culture refers to a workplace environment that values
 and embraces diversity, where every individual feels respected, valued, and
 empowered to contribute their unique perspectives, talents, and experiences.
 Inclusivity goes beyond mere representation; it's about creating an
 atmosphere where differences are not only accepted but celebrated, and
 where all employees have equal opportunities to thrive and succeed.
- Learning and Development Opportunities: The Commissions Learning and
 Development should go beyond the focus of the specific skills required to fulfil
 a job role and include developing learning and fostering innovation to build the
 soft skills necessary to succeed and grow together as a Commission in line
 with its values and mission. Trauma informed learning, emotional intelligence,
 inclusion and belonging, adaptability, and resilience are important in creating
 a healthy and productive culture.

Psychological Safety: Psychological safety in the Commission is crucial for
fostering an environment where employees feel comfortable expressing their
ideas, asking questions, and raising concerns without fear of negative
repercussions. This sense of security can lead to greater innovation, as team
members are more likely to take risks and contribute unique perspectives.
Moreover, psychological safety supports diversity and inclusion, encourages
learning from mistakes, and can improve overall employee engagement and
satisfaction. Leaders play a key role in establishing this culture by modelling
the right behaviours and creating a climate of trust and respect.

4. Core Foundation of the Trauma and Resiliency Model

The development and implementation of the Trauma and Resiliency Informed Model is an evolving process; it is not a one-time initiative but an ongoing journey that requires commitment to continuous learning, adaptation, and dedication to the well-being of all engaged with and involved in the Commission.

This Framework sets out the core components which are the foundation of the Trauma and Resiliency Informed Model. These form the fundamental basis upon which the Model will develop and evolve for the Commission. The core components are set out below; they are inter-linked and inter-dependent, and their premise and themes have synergy and overlap. They are as follows:

4.1 Community Resiliency Model⁶

At the core of the Trauma and Resiliency Informed Model is the evidence-based Community Resiliency Model (CRM)®. This mandatory evidence-based skills training for all in the Commission was developed by the Trauma Resource Institute, California⁷. The Trauma Resource Institute, a non-profit organisation based in Claremont, California, is dedicated to creating trauma-informed and resiliency-focused individuals and communities worldwide. They offer two main training models:

1. Trauma Resiliency Model (TRM): This model is designed for mental health professionals and focuses on helping individuals reprocess traumatic experiences

⁶ Community Resiliency Model (Community Resiliency Model)® — Trauma Resource Institute

⁷ Trauma Resource Institute

from a biological perspective. It also teaches skills to help individuals manage traumatic stress reactions; and

2. Community Resiliency Model (CRM)® (Community Resiliency Model): This model consists of six wellness skills aimed at community members and leaders, providing them with tools to support themselves and others in their social networks.

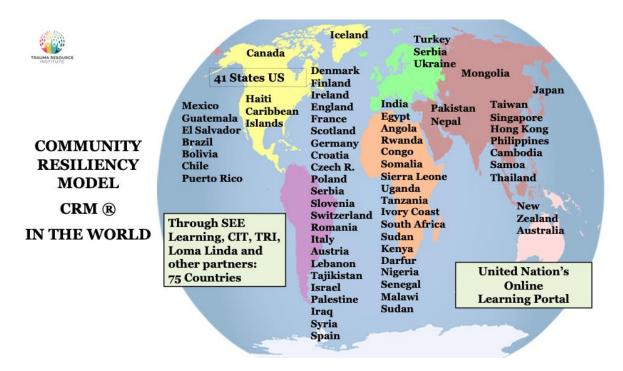
The Community Resiliency Model's ® goal is to help to create "trauma-informed" and "resiliency-focused" communities that share a common understanding of the impact of trauma and chronic stress on the nervous system and how resiliency can be restored or increased using this skills-based approach.

The Community Resiliency Model® has been widely adopted internationally. Collaborations include:

- The Social, Emotional, and Ethical (SEE) Learning is an innovative K-12 education program developed by Emory University, inspired by His Holiness the Dalai Lama. SEE Learning™ provides educators with the tools to foster the development of emotional, social, and ethical intelligence for students and themselves. CRM® concepts are in Chapter 2 of this curriculum. The curriculum is free and so is the online learning platform.
- United Nations Population Fund (UNFPA) in Angola initiative which engaged 50 trainees affiliated with UNFPA based in Angola, aiming to equip them with the necessary skills to disseminate the CRM® curriculum through formal workshops to 180 Young Adult Social Mobilizers (YASMs). These mobilizers, in turn, are tasked of bringing CRM, reaching 6,000 youths and young adults across various regions of Angola over a span of four years.
- The Christopher Wolf Crusade started by Christopher's mother, Cammie Wolf Rice, is dedicated to bringing an end to the Opioid Epidemic through the creation of the Life Care Specialist Program launched at Grady Hospital in Atlanta. It is dedicated to the memory of Christopher Wolf who lost his life as a result of an opioid addiction developed after multiple surgeries. CRM® is integrated into the program.

The Trauma Resource Institute is also a founding member of The International Transformational Resilience Coalition whose mission is to promote and support

comprehensive preventative initiatives in North America and internationally to proactively build psychological and psycho-social-spiritual resilience for climate change.



These applications and examples highlight the Community Resiliency Model's (CRM)® versatility and effectiveness in enhancing resilience and well-being across diverse populations and challenging, high stress environments. There is also strong emerging evidence to suggest that the Community Resiliency Model (CRM)® is a valuable tool in police and other legal settings, contributing to both individual well-being, stress reduction and improved performance, improved community relations, achieving best evidence and overall organisational health.

Given the evidence-base, application and principles and techniques of the Community Resiliency Model, it has been accepted and approved by the Executive Committee as being relevant and important to the work of the Commission. The Community Resiliency Model is therefore a mandatory core element of the training plan for the entire workforce in the Commission and sets an important context for the design, development and embedding of the Trauma and Resiliency Informed Model more broadly.

The Key aspects of the Community Resiliency Model (CRM)® are:

- **1. Biological Focus:** Community Resiliency Model (CRM)® emphasises understanding how trauma and stress affect the nervous system and provides tools to reset its natural balance;
- **2. Accessibility:** The skills are easy to learn and can be used by anyone, regardless of their background or education level⁸; and
- **3. Community-Centric:** Community Resiliency Model (CRM)® encourages individuals to share these skills with their wider social networks, fostering a supportive and resilient community⁹.

The Community Resiliency Model (CRM)® training is standardised to ensure fidelity to the evidence-base and to provide a structured approach to training individuals in building resilience to trauma. The adherence to this process ensures that the training is consistent, scalable, and can be disseminated across various communities. It includes a set of well-defined protocols that guide the training process, emphasising the importance of understanding the impact of trauma and chronic stress on the nervous system. This is important for the Commission. It means that everyone, irrespective of their role and responsibility in the organisation will have the same core training. Adoption of this training and the application of the skills taught will be via the Work Resiliency Planning process outlined further below.

4.2 Safeguarding Board for Northern Ireland (Safeguarding Board NI) Trauma Informed Approaches¹⁰

The Safeguarding Board for Northern Ireland has developed Trauma Informed Approaches to support various sectors, including Health, Social Care, Education, Justice, and the Community and Voluntary sectors. Key aspects of their programmes in brief are:

1. Early Intervention Transformation Programme: Launched in 2018, this programme aimed to build professional capacity to understand and address the

⁸ The Community Resiliency Model, an interoceptive awareness tool to https://www.cambridge.org/core/journals/global-mental-health/article/community-resiliency-model-an-interoceptive-awareness-tool-to-support-population-mental-wellness/4D502FB3141F38C48389A3DC1919873E.

⁹ Community Resiliency Model (Community Resiliency Model)® — Trauma Resource Institute. https://www.traumaresourceinstitute.com/crm/.

¹⁰ Trauma Informed Approaches (safeguardingni.org)

impact of Adverse Childhood Experiences (ACEs) through trauma-informed practices;

- **2. Training and Resources:** Safeguarding Board NI provides extensive training and resources to help professionals integrate trauma-informed approaches into their work. This includes understanding the effects of trauma and developing skills to support individuals affected by it;
- **3. Cross-Sector Collaboration:** The initiative involves collaboration among 21 member agencies and partners to embed trauma-informed practices across all aspects of service delivery;
- **4. Ongoing Support:** After the initial Early Intervention Transformation Programme funding ended in 2021, the Trauma Informed Practice team continues to support member and partner agencies through the cross-Executive Programme on Paramilitarism and Organised Crime; and
- **5. Research and Development:** Safeguarding Board NI has commissioned research to further advance trauma-informed approaches, with findings and recommendations shared to enhance implementation across Northern Ireland.

Partnership working between the Commission and Safeguarding Board NI is crucial given the synergy of the work and the opportunity it provides for mutual learning, sharing of resources, research collaboration and more. This has already been initiated on a number of levels and is reflected in the implementation plan Phase 1. The training referenced in points 1. and 2. are being adapted by the Commission and will be delivered to all staff as part of their mandatory training.

4.3 Work Area Resilience Planning

This aspect of the Trauma and Resiliency Informed Model is central to its ongoing development, continuous improvement, sustainability and ownership by all in the Commission. Following mandatory training in the Community Resiliency Model® wellbeing skills, all staff will engage Resiliency Planning within their work areas. This will be a supportive process where staff, post training, will assess their knowledge, attitudes, and skills and identify opportunities to embed a trauma and resiliency approach into their everyday work, individually and as teams. This process will also help identify further training and supports needed.

4.4 Listening Conversations

It has long been recognised that when people engage with those who experience emotional distress, they themselves can experience similar distress. This has been described as vicarious or secondary trauma which over a prolonged period of time can lead to burnout. Conventional wisdom suggested that this emotional response indicated that there was something wrong with the individual, often being responded to with comments like, "you're over-identifying with the client", or "you're taking this too personally". Recommended remedies included taking time off, attending additional training or, in extreme cases, finding an alternative job. This judgemental attitude led many to deny any emotional resonance with their clients and to value ideas like, "I just don't let it get to me", or "I'm able to separate myself from the distress of the other".

The emergence of non-judgemental, trauma and resiliency informed practice fundamentally changes this perspective. It recognises that when a worker engages effectively (irrespective of their role) with someone who has experienced, or is experiencing distress, this results in their nervous system resonating with that person and the worker experiencing similar emotions.

Listening Conversations provide a non-judgemental opportunity to bring the insights of the trauma and resiliency informed approach alongside the wellness skills of the Community Resiliency Model® to support Commission members' engagement with the stories individual Requesting Individuals need to tell throughout their journey with the Commission.

They are an invitation to step back from, observe and be curious about the day-to-day interactions between Requesting Individuals and Commission members at all levels of the organisation, including the Executive Committee and the Board. This is important because, just as individual staff and staff groups will resonate with the trauma experienced by Requesting Individuals, so too will the whole living system of the Commission. The expected manifestation of this in a system is the re-enaction of trauma dynamics where patterns of stress and trauma experienced by individuals begin to reflect in the organisation's behaviour and culture. This may become apparent in how individuals and different teams and Directorates within the Commission interact and relate to each other. Listening Conversations therefore

provide a crucial non-judgemental opportunity to increase individual and system selfawareness and address this.

Listening conversations are a key component of the Trauma and Resiliency Informed Model. They are being implemented for both individual staff members and groups of staff. Listening conversations will play a key role in reducing stress, enhancing resiliency and self-care but also crucially the learning and reflection from the Listening Conversation process will inform the ongoing development and evolution of the Trauma and Resiliency Informed Model within the Commission.

Expected Outcomes from Listening Conversations are:

- Enhanced self-awareness and capacity to accurately resonate with the emotions of others;
- Better understanding of the range of emotions evoked by engaging in the work of the Commission;
- Increased ability to draw on wellness skills to maintain and enhance resiliency;
- More conscious awareness of aligning with the value base of the Commission;
- Reduced risk of burnout through processing the impact of others' emotions;
- Experience of being supported by the Commission;
- Decreased risk of reacting out of personal emotional struggles to the stories told by requesting individual;
- Enhanced practical skills in supporting requesting individuals on their journey with the Commission; and
- Harness the collective insight and learning of the workforce that will contribute to the effectiveness and efficiency of Commission's work and ongoing evolution of the Trauma and Resiliency Informed Model.

4.5 Emotional Support Pathway for Requesting Individuals and their Families

A proposal for Independent Emotional Support provision was sought from MindWise and received at the end of June 2024.

Further discussion and reflection, including with the Victims and Survivors Service (VSS), about the highly developed landscape of support provided by groups across NI already funded for support and advocacy work with legacy bodies, has led to ongoing discussion about how MindWise can assist the Commission, by being part of a network of support within effective referral pathways to support victims and survivors and their families. Currently, the Commission is working with MindWise to increase the robustness of the interim emotional support provision and engage in developing a more effective and integrated model in the longer term.

Pathways to support must be agreed and pressures on services monitored collaboratively, including with the Troubles Permanent Disablement Pension Scheme and the Regional Trauma Network who operate in the same legacy space

It is clear that a more complex picture of support is required, including different pathways and options. The Commission is committed to working collaboratively to achieve the better support outcomes for victims and survivors and their families on the common ground of commitment to those individuals who continue to experience the impacts of the trauma of Troubles/Conflict related events. With a robust interim emotional support service in place the Commission is focussing on integrating with the network of existing support, using learning from existing legacy bodies and collaboratively working to provide the best possible support to victims, survivors and their families.

5. Implementation Strategy

This Framework outlines the structures, processes and methodologies required to implement, embed and evaluate the effectiveness of the Trauma and Resiliency Informed Model systemically within the Commission.

Given the range of backgrounds and the varying roles and functions of the workforce, it also highlights and proposes mitigations to address the expected challenges of such an approach being meaningfully embraced by all in the

Commission. Recognising and addressing these challenges proactively will help ensure a smoother implementation process and create a more resilient and supportive organisational environment.

This Framework sets out a **phased implementation approach** where learning from each Phase informs and dictates the design and implementation of the next Phase. It also focuses on understanding and addressing the barriers to effective implementation and ensuring that interventions are delivered as intended to achieve the desired outcomes. Phased implementation will allow for ongoing evaluation, growth and adaptation of the Trauma and Resiliency Informed Model. Each Phase should lead incrementally to the development of a Trauma and Resiliency Informed Model that is bespoke and adaptable to the work of the Commission and that is 'owned' by all and embedded naturally into the culture and everyday work of the Commission.

When implementing the process of developing and embedding the Trauma and Resiliency Informed Model the following will be considered:

5.1 Evidence-Based Practice

This ensures that the trauma and resiliency-informed practices being implemented in the Commission are based on the best available evidence, enhancing their effectiveness and reliability. The Community Resiliency Model has a strong evidence-base and has demonstrated effectiveness in a variety of settings across the world. This is mandatory training for all staff in the Commission. The Commission also has an opportunity to contribute to this growing body of international evidence and application.

5.2 Contextual Adaptation

The application and adaptation of all training delivered to fit the specific context and needs of the Commission, making them more relevant and sustainable for everyone, is a key aspect of embedding the Trauma and Resiliency Informed Model.

Continuous assessment of learning and development needs, alongside celebrating success will be part of the implementation plan. The development of Resiliency Work Plans for individuals and work areas is one of the most important aspects of this process. The application of the core skills and learning of the Trauma and Resiliency

Model is an ongoing process that requires continuous assessment, adaptation, and leadership commitment from all levels of the organisation. It is critical to the success of the Trauma and Resiliency Informed Model and the aspect that will lead to sustainability and better outcomes for all.

5.3 Overcoming Barriers

Identifying and addressing potential barriers to implementation is crucial. The Commission is a new organisation with many demands and staff may feel overwhelmed by additional responsibilities related to the training and implementation of the Trauma and Resiliency Informed Model. It is important therefore that workloads are manageable and there is adequate support and resource in terms of time and budget to develop and implement this important Model. The phased implementation approach will be helpful to allow for robust planning and gradual adjustment.

Consideration needs to be given to recognising and addressing potential staff resistance. This can be done by emphasising the benefits of trauma and resiliency training for those who engage with and those who work in the Commission, and by clear and regular communication, and involvement of staff in the design, implementation and development process of the Trauma and Resiliency Informed Model. This fosters a transparent and supportive environment and encourages open communication and opportunities for staff and those who engage with the Commission to voice their concerns and suggestions.

Within the context of Northern Ireland, it is accepted that staff may also have lived experience of trauma and additionally for all in the Commission there is potential for primary and secondary trauma; Human Resources processes that provide timely and accessible support is therefore very important, such as the Employee Assistance Programme.

5.4 Monitoring and Evaluation

Ongoing monitoring and evaluation are imperative to ensuring that the training and practices are being delivered correctly and are adopted and embedded to achieve the desired outcomes. Evaluating the effectiveness of trauma and resiliency-informed practices can be complex. Pre- and Post-Training Assessments should be developed and undertaken before and after all training to measure changes in

knowledge, attitudes, and skills and also to identify strengths and areas for further support and improvement.

Feedback mechanisms for everyone in the Commission also need to be in place via multiple avenues e.g., 1 to 1 line management, Listening Conversations, involvement in task and finish groups, Work Resiliency Planning processes, Case Reviews, peer reviews etc., to gather feedback from participants to refine the overall learning and development content, delivery and adaptation processes of the Trauma and Resiliency Informed Model.

Outcome measures need to be developed to assess the impact of the Trauma and Resiliency Informed Model and any of its component parts (as set out in Section 5) on organisational outcomes, such as staff well-being, the experience of Requesting Individuals, and service effectiveness. This evaluation data is key to refining practices and components of the Trauma and Resiliency Informed Model and will inform scaling across the organisation. A long-term evaluation process will monitor the impact of the comprehensive TRIM training on the Commission practices and outcomes for those who engage with and who work in the Commission over time.

5.5 Sustainability and Continuous Improvement

The commitment and engagement of the leadership of the Commission along with engagement and involvement of victims, survivors and their families and other statutory, community and voluntary partners will ensure that trauma and resiliency-informed practices are effective and sustained in and by the Commission as a whole system over the long term. Co-production principles¹¹ are key to the success of the development and implementation of this Model.

It is important that training relating to the implementation of the Trauma and Resiliency Informed Model is planned in conjunction with all mandatory training relating to policies and procedures in the Commission.

The implementation plan for the Trauma and Resiliency Informed Model should outline its inclusion in the mandatory induction training for all new employees. It

¹¹ <u>Co-Production Guide for Northern Ireland - Connecting and Realising Value Through People | Department of Health (health-ni.gov.uk)</u>

should also include development of a Knowledge and Skills Framework that recognises where more specialised training is needed for those in specific job roles.

As outlined throughout this Framework, the ongoing inclusion and co-production process will ensure that the learning and development content of the Trauma and Resiliency Model reflects the latest research, best practice and experience of those engaged with and who work in the Commission.

5.6 Actions from October 2024

A clear plan of action is required for the next 12 months to deliver on, collaborate with others, receive challenge and finalise the Model so that the focus remains on the needs of those with who engage with the Commission, in particular, the victims and survivors of the Troubles/Conflict.

6. Actions for the First 12 Months

A year-1 phased implementation plan will include:

Year 1 phased implementation plan

Recruiting a Trauma and Resiliency Informed Model team.

Designing and rolling out a training course in the Community Resiliency Model which will be part of essential training for the entire workforce.

Undertaking regular consideration of staff needs to ensure trauma impacts are constantly monitored and addressed.

Developing work area resiliency plans, including how work areas can support, inform and inspire one another, aiming to maintain hope and compassion within the Commission.

Implementing opportunities for people within the Commission to be trained as Community Resiliency Model teachers to increase overall Commission resiliency for maintaining the trauma and resiliency focus.

Implementing Listening Conversations for Case Support and Investigator teams, and for others across the Commission on request, building evidence of effectiveness and identifying areas for improvement.

Developing and implementing an integrated emotional support network and pathways.

Formalising a working relationship with Safeguarding Board NI to advise, challenge and support the Commission.

Building on planned training to embed the trauma informed and resiliency focussed culture within the Commission.

Assessing and improving physical environments to promote safety and comfort.

Reviewing, revising and improving the policy checklist and developing other tools in relation to policy and practice.

Implementing measures, evaluation approaches and impact of the Community Resiliency Model wellbeing outcomes.

Establishing a team to facilitate collaborative working strategic planning for phase 2, including analysis and learning from phase 1.

Finalising the -Framework for the Trauma and Resiliency Informed Model and an ongoing workplan with monitoring for improvement measures.

7. Next steps

- Publish the Trauma and Resiliency Informed Model Framework Document on the Commission website.
- Develop and implement a plan to engage with interested parties and stakeholders.
- Develop a delivery plan in line with this Framework, setting out milestones and targets for the next 12 months.
- Agree and implement a public event or events to provide updates and plan a further engagement within the next 12 months.