

Fostering Welcoming Office Environment

ASHEW – VA Chapter

Objective

- Explore strategies for enhancing the office environment to be welcoming to children and families of varying backgrounds
- Learn from other practices about strategies and experiences they have used in their offices
- Leave with ideas that could be implemented in your practice

Principles of Trauma Informed Care

- Safety
 - creating spaces where families feel culturally, emotionally, and physically safe
 - Having an awareness of an individual's discomfort or unease
- Transparency & Trustworthiness
 - Providing full and accurate information about what's happening & what's likely to happen next
- Choice
 - Recognition of the need for an approach that honors the individuals dignity
- Collaboration and Mutuality
 - Recognition that healing happens in relationships and partnerships with shared decision making
- Empowerment
 - Recognition of an individuals strengths

Preparation

- Family Engagement
 - Enlist a family advisor or family focus groups to suggest improvements to clinical space and practice documents
 - Conduct Survey to families targeting specific information
- Physical Environment
 - Can rooms accommodate wheelchairs + strollers, multiple people (case managers, interpreters, large families)
 - Are there racial & linguistic representation in flyers, posters, printed materials?
 - Accessibility –materials in braille, access to an interpreter, is online patient platform have a mobile interface
 - Noise level, lighting, walls, toys, seating, etc.
- Staff Training
 - Train the Entire Staff- Front Desk included
 - Seek out training on topics of strength based approaches, implicit bias, cultural humility, motivational interviewing, etc.
 - Self-awareness (body language, greetings, feeling rushed)
 - Staff Self-Care

Safety

- When asking sensitive questions or explaining practice rules, explain the reason and actively listen to responses.
- Is there signage in the bathrooms that provide code words for individuals who may be at appointment with abuser
- Predictability makes people feel safe
 - If possible limit the number of staff a family encounters
 - Have staff introduce themselves to child explain what is going to happen, if child is being passed to another staff member, introduce them and explain what to expect next
 - Ask or prompt the person before touching them or their child

Transparency & Trustworthiness

- Have photos and names of practitioners posted in public spaces, so families are familiar
- Explain and clarify the purpose and use of any screening tools and what will happen to the information
- Provide Referrals and Resources that are active/relevant and follow up with families about referrals.

Choice

- Ask about use of preferred names, pronouns, and disability
- Do parents have the ability to separate from child to speak freely about concerns
- Foster an environment where parent feels they have the choice to conduct screening tools, vaccines, medications, etc.
 - “Your child is scheduled to have this vaccine were you planning on vaccinating today or do you have a different vaccination timeline in mind?” “This screening tool assess X and is typically given at this age, would you like to complete it?”

Collaboration & Mutuality

- Signage and symbols that reinforce that you are “Allies”
- Have linguistically & culturally appropriate information on resources readily available for families
- Seek family input in generating options for solutions to address their needs and identify solutions that will work for them.

Empowerment

- Frequently check for understanding, concerns, or questions
 - “How does this sound?” “From your perspective what caused this to happen”
- Review positive protective factors
 - Build on and validate individual and family strengths

Questions for Breakout?

- Is this an area your practice has examined? If so, what changes were made?
- Did your practice involve a Family Advisor, conduct a survey, or enlist a family counsel to provide feedback about the practice? If not, what are the barriers?