**Free Tools and Assessment Measures**

# 1) Secondary Traumatic Stress in Child Welfare Practice: Trauma-Informed Guidelines for Organizations

[The Chadwick Center for Children & Families](http://www.chadwickcenter.com/) at Rady Children's Hospital San Diego released a set of trauma-informed guidelines with concrete strategies for approaching secondary traumatic stress (STS) in 2016.  While these guidelines were created for intended use within child welfare systems, they may be easily adapted into other child-and family-serving organizations.

These guidelines were created as part of the Chadwick Trauma-Informed Systems Dissemination and Implementation Project (CTISP-DI), supported by funding from the [Substance Abuse and Mental Health Services Administration](https://www.samhsa.gov/) (SAMHSA).  The guidelines highlight strategies and approaches to STS throughout 4 phases in the life of a child welfare worker (or other child-and family-serving professional), including the hiring phase, first 3 months on the job, the cumulative effect over time, and critical incidents.

# Link: <https://ctisp.files.wordpress.com/2017/01/stsinchildwelfarepractice-trauma-informedguidelinesfororganizations.pdf>

# Source: *Chadwick Trauma-Informed Systems Dissemination and Implementation Project. (2016). Secondary traumatic stress in child welfare practice: Trauma-informed guidelines for organizations. San Diego, CA: Chadwick Center for Children and Families.*

**2) Secondary Traumatic Stress Informed Organizational Assessment (STSI-OA)**

The STSI-OA is an assessment tool that can be used by organizational representatives at any level to evaluate the degree to which their organization is STS-informed, and able to respond to the impact of secondary traumatic stress in the workplace. The STSI-OA identifies specific areas of strength, and opportunities to implement STS informed policies and practices. The results of this tool can be used as a roadmap for future training and implementation activities in the area of STS and trauma-informed care.

-For a copy: www.uky.edu/CTAC  
-For electronic scoring: www.STSInformed.com  
-Contact Ginny Sprang, Ph.D. for more information at sprang@uky.edu

**3) Using the Secondary Traumatic Stress Core Competencies in Trauma-Informed Supervision**

The STS Supervisory Competencies is a tool that individuals and organizations can use as a benchmark of the competencies needed to provide effective STS supervision and is also a map to resources that can help address gaps in those competencies.

<https://www.nctsn.org/sites/default/files/resources/fact-sheet/using_the_secondary_traumatic_stress_core_competencies_in_trauma-informed_supervision.pdf>

*Source*: NCTSN

**4) Vicarious Resilience Scale (VRS)**

“Vicarious resilience refers to unique, positive effects that transform therapists in response to witnessing trauma survivors’ resilience and recovery process. This study describes the development and exploratory factor analysis of the first instrument to assess vicarious resilience.”

*Source*: Killian, K.D., Hernandez, P., Engstrom, D. & Gangsei, D. (2017). Development of the Vicarious Resilience Scale (VRS): A measure of positive effects of working with trauma survivors. *Psychological Trauma: Theory, Research, Practice & Policy, 9*, 23-31.

To obtain the scale please contact Kyle Killian: <kyle.killian@capella.edu>

**5) Low Impact Debriefing Tool**

“Low impact debriefing” or “Low impact processing” is a strategy that was developed by Françoise Mathieu and Robin Cameron in 2008 to address the risk of emotional contagion and secondary traumatization when debriefing and/or discussing difficult traumatic details with colleagues and loved ones. Four simple steps are suggested to pause and reflect on the content that each of us needs to share when discussing difficult material. It was originally published in Mathieu’s 2012 book “The Compassion Fatigue Workbook”.

This infographic and postcard can be reprinted and used in your workplace:

<https://www.tendacademy.ca/wp-content/uploads/2019/03/Low-Impact-Debriefing-2019.pdf>

**6) The CE-CERT Model:**  Miller, B., Sprang, G. (2016) A components-based practice and supervision model for reducing compassion fatigue by affecting clinician experience*, Traumatology* 23(2).

https://www.researchgate.net/publication/292177012\_A\_Components-Based\_Practice\_and\_Supervision\_Model\_for\_Reducing\_Compassion\_Fatigue\_by\_Affecting\_Clinician\_Experience