



FAMILY SERVICES *of* PEEL

Since 1971

A RESOURCE GUIDE ON TRAUMA TRAINING AND SERVICES IN PEEL REGION

Family Services of Peel
Peel Institute on Violence Prevention

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ACRONYMS

FSP	Family Services of Peel
GAIN-SS	Global Appraisal of Individual Needs - Short Screener
HITS	Hurt, Insult, Threaten, and Scream
LOCUS	Level of Care Utilization System
OCAN	Ontario Common Assessment
ODARA	Ontario Domestic Assault Risk Assessment
PHQ-9	Patient Health Questionnaire-9
PIVP	Peel Institute on Violence Prevention
PTSD	Post-Traumatic Stress Disorder
SARA	Spousal Assault Risk Assessment
SHIP	Services and Housing In the Province
TEQ	Traumatic Events Questionnaire
TOR	Terms of Reference

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INTRODUCTION

Peel Institute on Violence Prevention (PIVP) is an interdisciplinary and inter-sectoral collaborative initiative among agencies in the Region of Peel working toward the eradication of all forms of violence. Operating within an equity lens and an anti-oppressive, anti-racist framework, the PIVP is a focal point for data-driven, evidence-informed practice, which will improve the organization of services, combining the perspectives of the diverse population served, academia, and community service providers. Through funding from the Ontario Trillium Foundation and administered by the Family Services of Peel (FSP), the work of PIVP is developed by a group of social and health sciences researchers.

This project aims to implement a region-wide screening model that will provide opportunities to develop a cohesive, regional response to trauma. Besides, this project will provide and expand trauma training, as well as the implementation and adoption of a standardized trauma screening tool. The result is to improve access, coordination and continuity of care of trauma survivors.

This guide describes the design and application of a regional survey to determine which organizations specialize in trauma training and offer trauma-centered services. It presents the resources available on trauma services, programs and training in the Region of Peel.

BACKGROUND

In October 2012, Sandra-Lynn Coulter of the Ontario Woman Abuse Screening Project facilitated a presentation called *“How we are making Every Door a Right Door.”* The objective of the training was to improve staff application of skills and knowledge of mental health and addiction. The expected outcome of the training included: (a) increased knowledge of trauma-informed practice and capacity among the staff; (b) an improved awareness and knowledge of best practices for trauma screening using trauma-informed and gender-responsive lens; and (c) an improved awareness and implementation of best practices using a trauma-informed gender-responsive lens. Following this event, managers and stakeholders from numerous sectors joined forces to coordinate and improve services in Peel Region for mental health, addictions, and trauma.

A strong need was identified within the Region of Peel to improve services for women who had experienced trauma. A committee was created as a joint venture between the Peel Committee

on Sexual Assault and the Peel Committee Against Woman Abuse. It was established to coordinate the sectors of trauma, mental health and addictions and to create a seamless continuum of services for individuals in need while being sensitive towards the needs of the diverse population of Peel.

The Committee has become part of the Peel Institute on Violence Prevention (PIVP). The membership of the Committee expanded to include agencies from a variety of fields: mental health, substance abuse, Trauma, health care and newcomer services (Appendix 1- List of current members).

In November 2012, the Committee commenced a broad review of 10 screening tools used by member agencies. It was determined that mental health and addictions sectors used tools mandated by the Province, namely the Ontario Common Assessment of Need (OCAN) and the Catalyst. In contrast, some trauma agencies had each developed their tools. Although most of the tools included inquiries about trauma experiences, the delivery of questions and the follow up of responses raised concerns. From a trauma-informed lens, gaps existed in the type and format of the questions.

Term of Reference (TOR) and a three-year work-plan was drafted in 2013, following a small grant from the Central West Local Health Integration Network, which allowed for a consultant to be hired to assist the Committee.

The **Goals** of the three-year plan were as follows:

- To assess current screening practices in the mental health, addictions and trauma sectors and provide recommendations to partners that will allow for more comprehensive screening.
- To form partnerships and strengthen relationships that will enable organizations to address clients' needs from a trauma-informed perspective effectively.
- To identify gaps in our network of services (which include referrals, screening, and counselling) to create a plan for achieving a seamless continuum of services for people experiencing trauma, addictions and mental health, and to implement this plan.
- To increase knowledge and capacity among the agencies in the three sectors, with a focus on trauma.
- To keep the perspectives of survivors who have experienced mental health, addictions and trauma integral to the process of enhancing our services.

The Committee agreed upon the following **Definition of Trauma**.

The word “trauma” is used to describe experiences or situations that are emotionally painful and distressing, and that overwhelm people’s ability to cope, leaving them powerless. Trauma has sometimes been defined in reference to circumstances that are outside the realm of typical human experience. Unfortunately, this definition doesn’t always hold true. For some groups of people, trauma can occur frequently and become part of the collective human experience.

*In addition to terrifying events such as violence and assault, we suggest that relatively more subtle and insidious forms of trauma—such as discrimination, racism, oppression, and poverty—are pervasive. And when experienced chronically, they have a cumulative impact that can be fundamentally life-altering.*¹

In October 2013, the Seamless Counselling Committee moved to bring together a small group to search and analyze additional screening tools for mental health, substance abuse, and trauma.

Initial work focused on gathering information about screening tools. A screening tool known to the Committee was the Global Appraisal of Individual Needs - Short Screener (GAIN-SS)². The Committee assessed this tool. While the GAIN-SS screens for both mental health and substance abuse, given its focus on depression and anxiety, it does not screen for other mental health disorders. Therefore, the sub-committee decided not to pursue the GAIN-SS or similar tools. A limited scope was a recurring problem while investigating all-encompassing screening tools. As a result, the Committee chose to move away from familiar screening tools and instead look into exploring options available outside of the Peel Region.

Academic medical journals, as well as literature from mental health, substance abuse, and trauma associations, were consulted to locate information on the most highly recommended tools. In the process, similarities amongst the top-rated options became apparent. The best screening tools

¹ <http://www.nonviolenceandsocialjustice.org/FAQs/What-is-Trauma/41/> accessed March 2016

²GAIN Short Screener (GSS). Concurrent Substance Use and Mental Health Problems in Youth: Screening for Concurrent Substance Use and Mental Health Problems in Youth. Centre for Addiction and Mental Health. (2009). http://knowledgex.camh.net/amhspecialists/Screening_Assessment/screening/screen_CD_youth/Pages/GSS.aspx

³The PHQ-9: validity of a brief depression severity measure. Kroenke K, Spitzer RL, Williams JB. Journal of General Internal Medicine. 2001 Sep; 16(9): 606-13. <http://www.ncbi.nlm.nih.gov/pubmed/11556941>

⁴CAGE - Adapted to Include Drugs (CAGE-AID). Richard L. Brown, Laura A. Saunders, 1991. http://bit.ly/CAGE-AID_inst

are those that cover as wide a range as possible and have high assessment reliability, and at the same time, are easily understood and do not require a vast amount of time to administer. As such, the sub-committee took into consideration to review the Patient Health Questionnaire-9 (PHQ-9)³ for mental health and CAGE Adapted to Include Drugs (CAGE-AID) for substance abuse.⁴

The report concluded a restatement as to why the above screening tools were chosen and to help guide the Committee towards the Traumatic Events Questionnaire (TEQ), which was proposed as an option to replace the Chatham-Kent screening tool.

In 2014, the Committee looked at screening/assessment tools that were already in use by several Committee member agencies. The focus was shifted from “women” to “more gender-inclusive.” Interviews were conducted with practitioners. The ‘Jean Tweed Trauma Questionnaire’ was recommended, as an alternative for training, to avoid the complexity of previously suggested questionnaires. The Jean Tweed tool was considered to be more conversational, something that is already working, trauma-focused, and versatile across sectors. The Committee found this tool easier for intake workers to fill out during screening and assessments with clients. Questions could be posed conversationally, rather than formally and clinically.

During 2015, the Committee established a sub-committee to develop training, employing an adaptation of the Jean Tweed Trauma Questionnaire. The training included the following areas: Social Determinants of Health and Well-Being, the introduction of an equity framework, defining trauma, trauma screening versus trauma assessment, introducing the trauma screening tool, practicing the tool with a case scenario, strategies for dealing with disclosure, responding to trauma exposure for the workers, and referrals, resources and bibliography.

Evaluations help to measure the value and effectiveness of a learning programme. The Committee chose the most powerful framework for the evaluation of training programmes, the Kirkpatrick Evaluation Model (Kirkpatrick, D. L. 1959). Kirkpatrick’s model is based on four simple questions that translate into four levels of evaluation. These are Level 1. **Reaction**: At this level, data on the participant's reaction are gathered at the end of a training programme. This level measures the learner’s perception (reaction) of the course. Level 2. **Learning**: The intention at this level is to assess whether the learning objectives for the programme are met. This is usually done through an appropriate tester examination. Level 3. **Behaviour**: The intention at this level is to assess whether job performance changes as a result of training. This performance testing is to indicate the learners’ skills to apply what he has learned in the classroom. This evaluation involves testing the students’

capabilities to perform learned skills while on the job rather than in the classroom. Level-three evaluations can be performed formally (testing) or informally (observation and judgments). Level 4. **Results:** The intention at this level is to assess the costs vs benefits of training programmes, i.e. organizational impact in terms of reduced costs, improved quality of work, increased quantity of work, etc. It measures impact, which includes monetary efficiency, morale, teamwork, etc. Collecting, organizing and analyzing level-four information can be difficult, time-consuming and more costly than the other three levels, but the results are often quite worthwhile when viewed in the full context of its value to the organization (Rajeev P., Madan M.S., Jayarajan K. (2009)

PIVP's trauma screening training included an adaptation of the first three levels of Kirkpatrick evaluation adapted by Monica Riutort, Manager of the Peel Institute on Violence Prevention in consultation with Elisabeth Jensen, Faculty of Health, at York University. A Pre and Post-training survey evaluated the First level; the second level evaluation was done through focus groups with participants randomly selected among trainees, and the third level was done by client files retrospective study.

A first Trauma Screening Training in Peel was conducted in October 2015 by members of the Seamless Services for Mental Health, Addiction, and Trauma Committee. Twenty staff members from Supportive Housing in Peel (SHIP), now named as (Services and Housing in the Province), were trained. In 2016, all staff of Elizabeth Fry Society of Peel, in 2017 Family Services of Peel and 2018 Catholic Cross-Cultural Services staff, were trained. PIVP also developed a Training of Trainers on Trauma Screening, and twelve organizations from across the Province of Ontario were trained in 2018. As a result, six of the trainers' trained their agency staff in 2019 with a total of over 120 trained personnel.

RATIONALE

The survey was conducted to determine which organizations offer trauma training/workshops, and specializes in trauma screening and offer trauma-centered services. The survey is part of a pilot survey for the project named: "Reducing the Impact of Trauma in the Community through Improving Seamless Care and Services in the Region of Peel.". Through the trauma training and adoption of the trauma-screening tool, the goal is to establish a comprehensive, inter-sectoral response to Trauma in the Region of Peel. Bringing together a diverse group of agencies around a shared understanding of trauma and standardized intake procedures will create lasting service integration and strengthen collaboration.

METHODOLOGY

The primary method of data collection was an online survey designed by the Family Services of Peel (FSP) - Peel Institute on Violence Prevention (PIVP). In response to requests from survey participants, the online survey was then sent in a PDF format to all the organizations involved in the study.

The **Objectives** of the survey were as follows:

- To scan the organizations offering trauma programs/services in the Region of Peel
- To learn about services providers that have tools to screen for trauma
- To learn about other means that the organizations use to screen for trauma
- To identify the organizations, who offer trauma training/workshops

The following **activities** were completed:

- A regional survey was designed and conducted to determine which organizations specialized in trauma training and offer trauma centered services. A set of survey questions were developed. We applied open-ended and closed-ended questions, requiring both a single response and multi-response answers. The survey's language was simple.
- A search was conducted to identify organizations/agencies working on trauma. Fifty-one organizations were identified through the initial search, as service providers for trauma.
- All fifty-one organizations were invited and encouraged to participate and respond to an online survey. It was then sent to them as a PDF attachment.
- The data was collected and analyzed, and the results presented in charts and graphs. Text analysis was used to discover common response trends. The information gathered was to be shared with all respondents.
- A resource guide on trauma services providers in Peel Region was completed
- A resource guide on organizations that offer trauma training/workshop in Peel was completed

SURVEY FINDINGS

Number of organizations identified and approached = 51 (Service Providers)

Number of respondents = 22 (43.1%)

Service Providers not offering Trauma services, but have screening tools = 1 (4.5%)

Service Providers in Peel responded as offering Trauma Services/Programs = 15 (68.2%)

Service Providers in Peel offering Trauma Training/Workshop = 8

*Number of service providers responded to the question =14 organizations, only eight reported that they offer trauma workshops/training, but some organizations did not mention the name or the description of the training.

Service Providers offering Trauma services

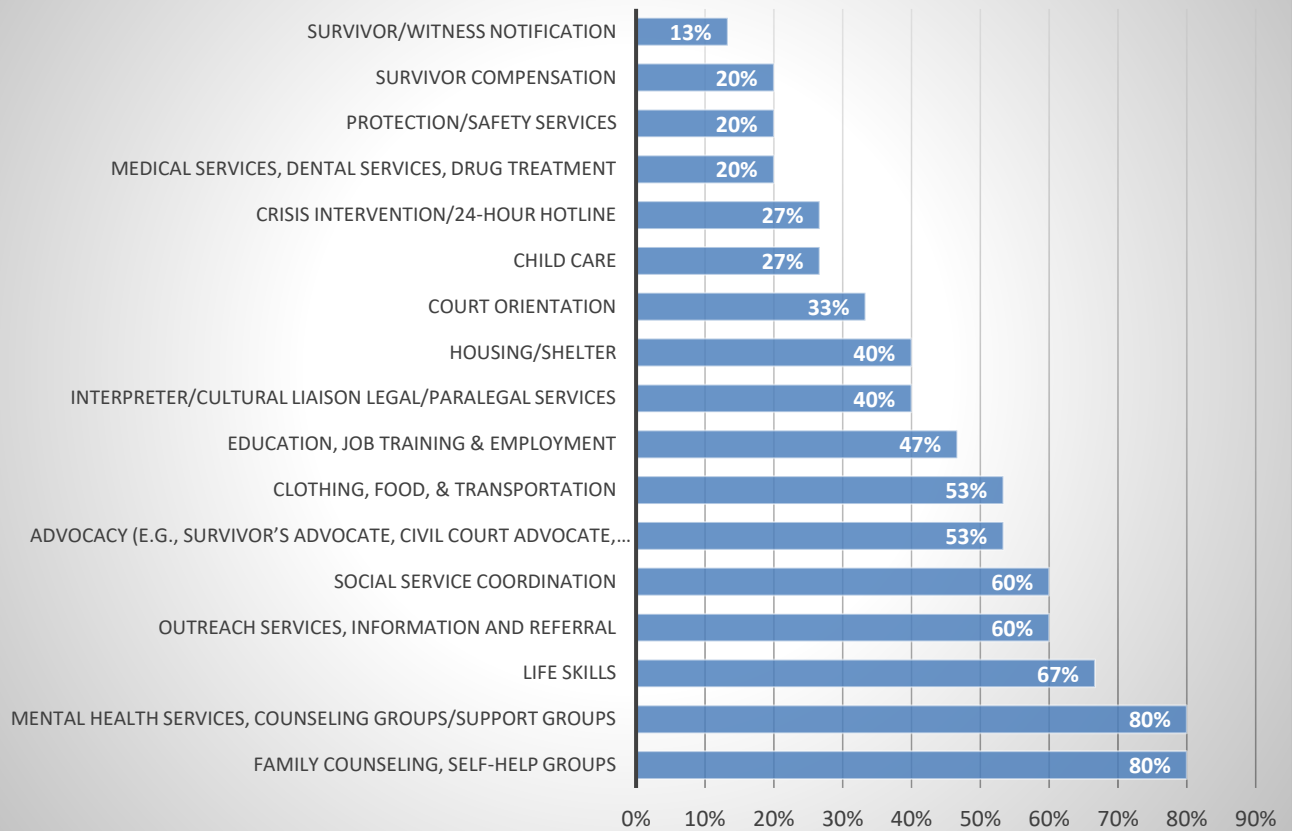
(N=15)

Screening tools	Number	%
Service Providers that have trauma screening tools	3	20.0
Service Providers that have other screening tools	5	33.3
Service Providers that have other ways (means) for screening	3	20.0
Service Providers that do not have Screening Tools/ways	4	26.7

Tools Used by Service Providers = ODARA, Jacqueline Risk Assessment Tools, ACES Screening (basic), Assessment Risk and Service Planning, ACE Quiz, PCL, PIVP Trauma Screening Tool, OCAN, GAIN-SS, LOCUS, B-Safer, SARA, HITS, Risk Assessment, Danger Assessment, Safety Plan, Informal Interviews, and Clinical Assessment. (Appendix 3: Tools used by service providers).

Services Provided to Trauma Survivors = 80% of the respondents provide family counselling, self-help groups, mental health services, and counselling/support groups. 67% assist by teaching various life skills. 60% of the respondents offer outreach services, information and referral, and social service coordination. 53% of them offer advocacy to the survivors (e.g., Survivor's advocate, civil court advocate, an immigration advocate, and clothing, food, and transportation). 47% offer education and employment services. About 40% offer interpreter/cultural liaison services, legal/paralegal services, and housing/shelter services. Other services include the following: Court orientation (33%), child-care, crisis intervention/24-hour hotline (27%), medical services, dental services, drug treatment, protection/safety services, survivor compensation (20%), and survivor/witness notification (13%).

What services has your agency/organization provided to trauma survivors?



SURVEY LIMITATIONS

These are some of the limitations of the survey:

- The accuracy and quality of the information provided by the organizations were not on par. Our search for Peel Region organizations that offer services in trauma, mental health, and addiction, was through the services databases (Appendix 2: Databases). Organizational websites uncovered the following: Many organizations do not update their websites, resulting in inconsistencies with services that they provide.
- Some of the organizations were inaccessible, as their websites did not list contact information.
- In the absence of a recognized and formally established comprehensive listing of trauma service providers, reaching the desired sample was a challenge.
- The major limitation was incompleteness or partial responses by 30% of respondents, which limited the reliability of the information gathered.

A RESOURCE GUIDE FOR TRAUMA SERVICES/PROGRAMS IN PEEL REGION, FEBRUARY 2020

N = 15

Organization / Program Name	Address	Contact Information	E-Mail	Websites	Services Provided
Caledon\Dufferin Victim Services, Caledon East Office, Victim Crisis Assistance Ontario	c/o OPP-Caledon Detachment 15924 Innis Lake Rd, Caledon East, ON L7C 2Z1 View Address on Google Maps	Mon-Sun 24hrs 905-951-3838 519-942-1452 Toll-Free 1.888.743.6496	E-Mail	www.cdvs.ca	Trauma Services: 24 hour a day crisis support Other services: Advocacy • Court support and accompaniment. • Transportation and accompaniment to local shelters or hospitals. • Walk-in support and outreach services • Information and referral • Personal safety planning • Survivor/witness notification • Social service coordination • Survivor compensation
Caledon\Dufferin Victim Services, Orangeville Office, Victim Crisis Assistance Ontario - Dufferin Office	c/o Orangeville Police Service 390 C Line, Orangeville, ON L9W 3Z8 View Address on Google Maps	Mon-Sun 24hrs 905-951-3838 519-942-1452 Toll-Free 1.888.742.2658	E-Mail	www.cdvs.ca	Trauma Services: 24 hour a day crisis support Other services: Advocacy • Court support and accompaniment. • Transportation and accompaniment to local shelters or hospitals. • Walk-in support and outreach services • Information and referral • Personal safety planning • Survivor/witness notification • Social service coordination • Survivor compensation
Catholic Family Services of Peel Dufferin - Brampton	William G Davis Centre for Families 60 West Dr, Ste 201 Brampton, ON L6T 3T6 View Address on Google Maps	Intake 905-450-1608 ext. 112 ;	E-Mail	www.cfspd.com	Trauma Services: Mental health services, Counseling groups/support groups Other services: • Life skills • Child care • Clothing, Food & Transportation • Family counselling, Self-help groups • Outreach services, Information and referral • Case conference

Organization / Program Name	Address	Contact Information	E-Mail	Websites	Services Provided
Catholic Family Services of Peel Dufferin-Mississauga	2227 South Millway Suite 202, Mississauga ON, L5L 3R6 View Address on Google Maps	905-897-1644	E-Mail	www.cfspd.com	Trauma Services: Mental health services, Counseling groups/support groups Other services: • Life skills • Child care • Clothing, Food & Transportation • Family counselling, Self-help groups • Outreach services, Information and referral • Case conference Information and referral • Case conference
Family Services of Peel, Abuse Prevention	5975 Whittle Road, Suite 300 Mississauga, ON L4Z 3N1 View Address on Google Maps	Intake 905-453-5775 Office 905-270-2250 TTY: 905-270-7357 Fax: 905-270-2869	E-Mail	https://fspeel.org/services/trauma-intervention/	Trauma Services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • Advocacy • Legal/paralegal services • Life skills • Education, Job training & Employment • Clothing, Food & Transportation Outreach services, Information and referral • Social service coordination
Family Help Online, Family Counselling and Support	1020 Johnsons Lane Mississauga ON L5J 4L8 View Address on Google Maps	647.444.9457 1-888-365-9457	E-Mail	http://www.familyhelponline.ca/Services.html	Trauma Services: • Mental health services, Counseling groups/support groups • Family counselling, Self-help groups

Organization / Program Name	Address	Contact Information	E-Mail	Websites	Services Provided
Family Transition Place	Courtyards of Caledon - 18 King St.E., Bolton, ON L7E 1E8 View Address on Google Maps	519-942-4122 ; Help Line: 519-941-4357; 519-941-HELP; TTY: 519-942-1651 Fax: 519-942-8243	E-Mail	www.familytransitionplace.ca	Trauma Services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • Advocacy • Child care • Legal aid • Court orientation • Life skills • Housing/shelter • Education, Job training & Employment • Clothing, Food & Transportation • Medical services, Dental services, Drug treatment • Outreach services, Information and referral • Crisis intervention/24-hour hotline • Protection/safety services • Survivor/witness notification • Social service coordination • Survivor compensation
Indus Community Services Brampton Branch	60 Gillingham Drive, Suite 500 Brampton, ON L6X 0G6 Canada View Address on Google Maps	905-459-4776 Fax: 905-459-4347	E-Mail	https://induscs.ca/	Trauma Services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • advocacy • Interpreter/cultural liaison Legal/paralegal services • Court orientation • Life skills • Education, Job training & Employment
Indus Community Services Head Office, Mississauga	3038 Hurontario St Suite 208 Mississauga ON L5B 3B9 View Address on Google Maps	905- 275-2369 Fax: 905-275-6799	E-Mail	https://induscs.ca/	Trauma Services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • advocacy • Interpreter/cultural liaison Legal/paralegal services • Court orientation • Life skills • Education, Job training & Employment

Organization / Program Name	Address	Contact Information	E-Mail	Website	Services Provided
Interim Place	P.O. Box: 45070, Mississauga, L5G 1C9	Administration office: 905-403-9691 Community Support & Outreach Program 905-676-0257 Toll-free: 1-855- 676-8515 TTY: 905-676- 1413 crisis lines at 905-676 8515 or 905-403-0864 TTY: (905) 403-0453	E-Mail	http://www.interimplace.com/	Trauma Services: Mental health services, Counseling groups/support groups • Crisis intervention/24-hour hotline Other services: • Advocacy • Outreach services, Information and referral • Interpreter/cultural liaison Legal/paralegal services • Court orientation • Child care • Housing/shelter • Education, Job training & Employment • Clothing, Food & Transportation • Medical services, Dental services, Drug treatment • Protection/safety services • Social service coordination • Survivor compensation
MIAG Centre For Diverse Woman & Families Multicultural Inter-Agency Group of Peel	3034 Palstan Rd, Ste M3 Mississauga, ON L4Y 2Z6 View Address on Google Maps	905-270-6252	E-Mail	http://miag.ca/services/	Trauma services: • Mental health services, Counseling groups/support groups • Family counselling, Self-help groups • Other services • Social service coordination
Our Place Peel	3579 Dixie Road, Mississauga, ON L4Y 2B3 View Address on Google Maps	905-238-6916	E-Mail	https://www.ourplacepeel.org/	Trauma services: • Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • Life skills • Housing/shelter • Education, Job training & Employment • Clothing, Food & Transportation • Outreach services, Information and referral • Social service coordination supporting and connecting youth age 16-24 to all services

Organization / Program Name	Address	Contact Information	E-Mail	Websites	Services Provided
Peel Family Education Centre	4 Sir Lou Dr., Suite 104, Brampton, ON L6Y 4J7 View Address on Google Maps	905-452-0332 Fax: 905-452-0717	E-Mail	https://familyedcentre.org/	Trauma services: counselling, Self-help groups Other services • Life skills • Family
Polycultural Immigrant Community Services	2225 Erin Mills Parkway, Mississauga ON L5K 1T9 View Address on Google Maps	905-403-8860	E-Mail	http://www.polycultural.org/what-we-do/health-and-wellness/crisis-counselling	Trauma services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • Life skills • Housing/shelter • Education, Job training & Employment • Outreach services, Information and referral • Social service coordination
Punjabi Community Health Services Family Enhancement Program	2980 Drew Road, Unit # 241, Mississauga, ON L4T 0A7 View Address on Google Maps	Malton: 905-677-0889	E-Mail	www.pchs4u.com	Trauma services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services: • Advocacy • Life skills • Child care • Housing/shelter • Education, Job training & Employment • Clothing, Food, & Transportation • Medical services, Dental services, Drug treatment • Outreach services, Information and referral

Organization / Program Name	Address	Contact Information	E-Mail	Websites	Services Provided
Punjabi Community Health Services	50 Sunny Meadow Blvd Suite # 201 Brampton, ON L6R 0Y7 View Address on Google Maps	Brampton: 905-677-0889	E-Mail	www.pchs4u.com	Trauma services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups Other services • Advocacy • Life skills • Child care • Housing/shelter • Education, Job training & Employment • Clothing, Food, & Transportation • Medical services, Dental services, Drug treatment • • Outreach services, Information and referral
Rising Angels Awareness & Restorative Care			E-Mail	https://risingangels.net/training-2/	Trauma services: Mental health services, Counseling groups/support groups • Family counselling, Self-help groups • Crisis intervention/24-hour hotline Other services: • Advocacy • Court orientation • Life skills • Clothing, Food, & Transportation • Outreach services, Information and referral • Social service coordination
Trillium Health Centre Women's Health Services, Peel Committee on Sexual Assault Chantel's Place	100 Queensway West Mississauga, ON View Address on Google Maps	905) 848-7580 Ext. 2548	E-Mail	http://trilliumhealthpartners.ca/patients/services/womens/Chantel-s-Place/Pages/default.aspx	Trauma services: Mental health services, Counseling groups/support groups Other services • Clothing, Food, & Transportation • Medical services, Dental services, Drug treatment •

A RESOURCE GUIDE FOR TRAUMA TRAINING/WORKSHOPS IN PEEL REGION, FEBRUARY 2020

N = 8

Organization / Program Name	Address	Office Phone	E-Mail	Websites	Training Name or Description
Family Services of Peel	5975 Whittle Road, Suite 300 Mississauga, ON L4Z 3N1 View Address on Google Maps	Intake 905-453-5775 Office 905-270-2250 TTY: 905-270-7357 Fax: 905-270-2869	E-Mail	https://fspeel.org/services/trauma-intervention/	FSP-PIVP Trauma Screening Tool
Family Help Online	1020 Johnsons Lane Mississauga ON L5J 4L8 View Address on Google Maps	647.444.9457 1-888-365-9457	E-Mail	http://www.familyhelponline.ca/Services.html	Past talks include- understanding loss and trauma in early childhood, creating personal wellness, fostering attachment, relationships first in adoption.
Family Transition Place	Courtyards of Caledon - 18 King St.E., Bolton, ON L7E 1E8 View Address on Google Maps	519-942-4122 ; Help Line: 519-941-4357;519-941-HELP; TTY: 519-942-1651	E-Mail	www.familytransitionplace.ca	The organization did not describe the training/workshop that they offer
Interim Place	P.O. Box: 45070, Mississauga, L5G 1C9	Administration office: 905-403-9691 Community Support & Outreach Program Phone: 905-676-0257 TTY: 905-676-1413 Toll-free: 1-855-676-0257	E-Mail	http://www.interimplace.com/	The organization did not describe the training/workshop that they offer
Peel Family Education Centre	4 Sir Lou Dr., Suite 104, Brampton, ON L6Y 4J7 View Address on Google Maps	905-452-0332 Fax: 905-452-0717	E-Mail	https://familyedcentre.org/	The organization did not describe the training/workshop that they offer

Organization / Program Name	Address	Office Phone	E-Mail	Websites	Training Name
Polycultural Immigrant Community Services	2225 Erin Mills Parkway, Mississauga ON L5K 1T9 View Address on Google Maps	905-403-8860	E-Mail	http://www.polycultural.org/what-we-do/health-and-wellness/crisis-counselling	The organization did not describe the training/workshop that they offer
Rising Angels Awareness & Restorative Care			E-Mail	https://risingangels.net/training-2/	Mending Broken Wings
Trillium Health Centre Women's Health Services, Peel Committee on Sexual Assault Chantel's Place	100 Queensway West Mississauga, ON View Address on Google Maps	905) 848-7580 Ext. 2548	E-Mail	http://trilliumhealthpartners.ca/patientservices/womens/Chantels-Place/Pages/default.aspx	The organization did not describe the training/workshop that they offer

CONCLUSION

The survey findings were synthesized and interpreted, to make a corresponding, reasoned judgment:

- Most respondents of the survey offer life skills, stress management and crisis counselling.
- Trauma screening and trauma-specific services and programs are still in their early stages.
- A number of organizations that offer trauma services reported not having trauma screening tools to identify trauma.
- It is important to continue promoting the FSP Trauma Screening Tool and training. It is evidence-based and includes evaluation approaches. It is helpful to organizations that offer trauma services or work with trauma survivors.
- Several respondents provided names of tools that they use for screening trauma survivors, which do not appear to address trauma-specific screening (Appendix 3: Tools used by service providers).
- A standardized method of data collection for agencies providing services for survivors of Trauma in Ontario should be established to inform client services better and evaluate client

outcomes. We discovered, during this process, that not all organizations are ready to share information and not all have proper records of data that can be shared.

- There is a need to increase collaboration, ongoing communication and information sharing among agencies to improve the comprehensiveness and continuity of care for trauma survivors.
- We need to support the meaningful engagement of survivors and include their voices in all areas of policymaking and service development to enable the creation of better services for those affected by trauma, addiction, and mental health.
- It is crucial for the services providers to update their websites, to keep the information consistent with the services they are currently providing.
- It is imperative to create a national service provider database with updated and accurate records of trauma services, programs and training information. This database must be easily accessible to individuals, clients, and service providers.

APPENDIX 1: Seamless Services for Mental Health, Addiction Trauma (SSMHAT) Committee members

- Monica Riutort – (co-chair) Peel Institute on Violence Prevention
- Shereen Rampersad – (co-chair) Services and Housing In the Province (SHIP)
- Sandra Rupnarain – Family Services of Peel
- Jennifer Wiedenmann - Peel Addiction Assessment and Referral Centre
- Eunice Bueno - Jean Tweed Centre
- Elisabeth Jensen – Faculty of Health – York University
- Berna Bolanos – Catholic Cross-Cultural Services
- Sophia Graham – Region of Peel
- Shelina Jeshani – Catholic Family Services of Peel Dufferin

APPENDIX 2: Databases

- eMentalHealth.ca, Mental Health Services, Help and Support in your community
<http://www.ementalhealth.ca/Peel-Regional-Municipality/Post-Traumatic-Stress-Disorder-PTSD-Trauma-and-Abuse/index.php?m=heading&ID=76>
- CentralWestHealthline.ca
<https://www.centralwesthealthline.ca/>
- Refugee Services PDF - Region of Peel
<https://www.peelregion.ca/planning-maps/newcomers/RefugeeServices.pdf>
- The Central West Concurrent Disorders Network (CW CDN)
<http://centralwestcdn.ca/who-we-are>
- Region of Peel, Quick Guide, Mental Health & Addictions Resources Serving Peel Region & Dufferin County, Canadian Mental Health Association Peel
<https://www.peelregion.ca/housing/pdf/cmha-peel.pdf>
- 211Central.ca
<https://www.211toronto.ca/quick/Central%20Region/ORGANIZATION/Mental%20Health/Peel%20Region>
- 211Ontario
<https://211ontario.ca/211-topics/mental-health-addictions/addiction-counselling/>
- Peel Community Services Directory - CIOC
<https://peel.cioc.ca/>
- Community Services Directory, Information on community programs and services for families in Peel.
<https://peelfamilyconnect.cioc.ca/record/CMH0221?>

APPENDIX 3: Tools Used By Service Providers

Tools ³	Description	Tools Function
ODARA	Ontario Domestic Assault Risk Assessment (ODARA) is an empirically-tested and validated spousal assault risk scale developed in Ontario, Canada (Hilton et al., 2004, cited in Hanson et al., 2007). It was the first actuarial risk assessment tool designed specifically to measure wife assault. It was developed by the Ontario Provincial Police and the Ontario Ministry of Health as a brief tool for use by frontline Police and victim service providers, (Hilton and Harris, 2007, and Mental Health Centre Penetanguishene).	Risk assessment tool
Jacqueline Risk Assessment Tools	Dr. Jacquelyn Campbell created the original DA based on her study of IPV homicide and clinical experiences as a nurse providing care to many women who reported experiencing IPV in shelters and the health care system. The measure was subsequently tested and further developed with input from various experts working with IPV to evaluate victims of IPV for increased risk of homicide	Danger Assessment
ACES Screening (basic)	The ACE questionnaire is a simple scoring system that attributes one point for each category of adverse childhood experience. The ten questions each cover a different domain of trauma and refer to experiences that occurred before the age of 18. Higher scores indicate increased exposure to trauma, which have been associated with a higher risk of adverse consequences	Trauma screening tool for the population before age 18
PCL	The PCL is a standardized self-report rating scale for PTSD comprising 17 items that correspond to the key symptoms of PTSD. Two versions of the PCL exist: 1) PCL-M is specific to PTSD caused by military experiences, and 2) PCL-C is applied generally to any traumatic event.	Standardized self-report rating scale for PTSD that scans the effect of trauma

³ List of tools as named described by participants
 Family Services of Peel – Peel Institute on Violence Prevention
 A Resource Guide on Trauma Services and Training in Peel Region – May 2020

FSP Trauma Screening Tool	FSP Trauma Screening Tool includes a preamble or an introduction and a Trauma Screening Questionnaire with seven questions, most of which are open-ended, thus making it qualitative as opposed to quantitative. It seeks to build trust and rapport as it is client-centered and strengths-based.	Trauma screening tool
OCAN	Ontario Common Assessment of Need (OCAN) It is a standardized, consumer-led decision-making tool that assesses client needs in 22 domains.	Consumer-led decision-making tool
GAIN-SS	GAIN-SS screens for both mental health and substance abuse. Given that its focus is on depression and anxiety, it does not screen for other mental health disorders The GAIN-SS Global Appraisal of Individual Needs– Short Screener is one of the few available screeners that addresses both mental health and substance abuse problems	Screener for mental health and substance abuse problems
LOCUS	The Level of Care Utilization System or LOCUS tool has been designed by the American Association of Community Psychiatrists (2009) to allow staff who work in inpatient hospital environments with patients with psychiatric problems (such as emergency departments, psychiatric sections of general hospitals or in psychiatric hospitals) to determine the level of care that an individual should receive.	A tool to determine the level of care that an individual should receive
B-SAFER	The B-SAFER Brief Spousal Assault Form for the Evaluation of Risk has been developed by the authors of the SARA in response to calls, particularly from law enforcement agencies, for shorter risk assessment tools that can be administered in a shorter timeframe. The B-SAFER tool has ten items, derived by factor analysis from the 20 items used in the SARA (Kropp, Hart and Belfrage, 2005, cited in Kropp, 2008). “The B-SAFER has been piloted in Canada and Sweden, and preliminary findings suggest that the B-SAFER ratings are associated with the type and number of management strategies recommended by police. Further, it appears that the use of the B-SAFER contributed to reduced recidivism rates in a sample of Swedish offenders (Kropp, 2004a, 2007).” (Kropp, 2008)	Risk assessment tool

SARA	The SARA Spousal Assault Risk Assessment Guide is designed to predict both intimate partner violence and lethality (Guo and Harstall 2008). The SARA consists of 20 items that focus on criminal history, psychosocial adjustment, spousal assault history and information on the alleged offence.	Spousal Assault Risk Assessment tool
HITS	The Hurt, Insult, Threaten, and Scream HITS included questions about physical abuse, emotional abuse, and threats, but excluded sexual abuse.	Domestic Violence Screening Tool
GAINS	<p>The GAINS model was developed when the center was first established and is still at the heart of the center today. The model includes the following core strategies:</p> <ul style="list-style-type: none"> • Gather: Screen for and collect new research findings and best practices • Assess: Synthesize this information into appropriate and targeted communication for various types of users • Integrate: Organize facilitated learning and follow-through • Network: Build and strengthen networks and infrastructure • Stimulate: Identify and use the most cost-effective ways of achieving significant results <p>For the past several years, the GAINS Center has focused on:</p> <ul style="list-style-type: none"> - Creating a trauma-informed criminal justice system workforce - Applying science to services - Promoting the use of evidence-based practices in program development - Developing trauma-informed systems 	A tool to work with mental health and addiction survivors

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