HSD Provider Conference

October 22, 2025

<u>Notes from Session</u>: Building Resiliency in Our Staff: a debriefing model for addressing moral injury

Presenters: Drew Gabham- ccc director of outreach and strategy

Moderators: n/a

Notetaker: Freja Lyons

<u>Main Points from Session Overview/Presentation:</u>

1. Let's talk about how hard our jobs are-
2. We will discuss the importance of addressing staff, compassion fatigue, and burnout and moral injury- provide intro to STAR-T model
3. Staff are our number one resource investment, and they are reporting high levels of stress
4. In one study Shiff and Lane found rates of 33 % of staff reporting high levels of traumatic stress from work
5. Trauma stewardship book is a great resource
6. Compassion fatigue: compassion fatigue is an acute reaction due to the exposure to client's trauma and the professional desire to provider support- unlike burnout which is tied to work demands, compassion fatigue stems from the empathetic engagement in others pain
7. Moral injury is defined as perpetuating, failing to prevent, bearing witness to, or learning about acts that transfers deeply held moral beliefs and expectations
8. Supporting staff wellness:
   - The usual (PTO breaks good pay)
   - Support to set boundaries
   - Every day and crisis self-care supports
   - Good supervision- difference between managing and supervising)
   - Team culture and sharing of responsibilities
   - Connecting with others

- And when needed formal debriefing

9. What is your self-crisis plan- how do you know when you are not well and how can you get support when this is the case
10. Supervision is how are you doing- vs being managed
11. What was your glimmer for today?
12. Holding a place for grief-we have a lot of people who don't survive
13. Night of remembrance on December 21- community grieving- really healing space for a lot of people
14. We ritual loss and successes with teams- so we are reminded
15. When these things don't work- debriefing model
16. People want to be seen heard and valued, connected to others, safe, and have choices
17. When might you offer a debrief:
    - When law enforcement gets involved
    - Violence is witnessed or threatened
    - Respond to an overdose
    - Death of a client or co-worker
    - Someone is evicted or exited from a program
    - For cumulative toll of recent losses
    - When the community is impacted
    - When staff asks for it
18. What is it:
    - Protected time for the team to comet together 60 -90 minutes
    - Time to focus on how staff are doing – what they need to finish their shift or to show up to next shift
    - Most impactful when offered within 72 hours of event
    - It is not therapy or counseling- but coregulation and connection
    - Offered per event- sometimes more than once
    - Often best to be offered by outside team members (trained in the model)
    - And investment in your team
    - It is not a time to process or improve
19. CISM- critical incident stress debriefing – comes in and then leaves

20.   STAR- t model goes beyond CISD
- Is about co-regulation and connection
- It does not focus on the retelling of the event but on how we as staff are truly experiencing an event
- It helps the staff to hear from others, connect with others and find ways to get back into the "window of tolerance"
- Less about talking about and more about experience with each other
- About re-regulating

21.   STAR-t model uses secondary trauma
- STAR- t model uses the term secondary trauma to capture that some workers are overwhelmed by some direct tasks/actions from the work such as collecting evidence or hearing stories and from indirect exposure to how staff talk about these topics in meetings with leads to a "Secondhand Trauma" exposure and buildup
- But these cumulative exposures that staff have and are impacted by leads us to
- Body tracking ability- where do you feel the trauma

22.   STAR-t debriefing steps:
- Gather
- Naming the pie
- Connections
- Noticing
- Engaging the PTE
- Tracking the response
- Closing
- Follow- up