

# Trauma Informed Practice Procedure

CPSN strives to ensure that all Clients will be provided with the support necessary for them to access trauma-informed practice. CPSN will also ensure that arrangements are in place to facilitate the continuity of support that is critical to the safety, health, and wellbeing of clients and workers in the event of a disclosed or undisclosed trauma.

All aspects of CPSN's services, including administration, management and service delivery is assessed and modified to incorporate trauma-informed principles into practice.

<b>Record of procedure development</b>	
<b>Version</b>	<b>Date approved</b>
Version 1	February 2026
	February 2028

  

<b>Responsibilities and delegations</b>	
<b>This procedure applies to:</b>	CPSN Staff, Employees and Contractors
<b>Procedure approval:</b>	CEO
<b>Review of Procedure Compliance</b>	General Manager, Service Delivery
<b>Specific responsibilities:</b>	All Leadership team Client Liaison Coordinators Support Workers Clients (and where appropriate, their decision-makers) and key people in their life as directed by the Client

# Policy statement

This procedure describes **how** CPSN implements its Trauma Informed Practice Policy.

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## Definitions

The following definitions apply to this Procedure and its associated Policy:

**Decision** is a planned course of action, either short or long term, regarding the lifestyle, healthcare or financial affairs of an individual.

Healthcare decisions include but are not limited to:

- Seeking or obtaining a diagnosis;
- Accessing (or refusing) information and supports;
- Responding to crisis (falls, incidents); and
- Agreeing or refusing *medical treatment*.

**Lived experience** is the first-hand knowledge of trauma and trauma responses through personal experience. People with lived experience are seen as experts on their lives and experiences.

**Risk management** is the development and implementation of a program which makes every attempt to identify and mitigate potential risks to workers, clients and others.

**Trauma** is the response to an event, series of events or set of circumstances that is physically or emotionally distressing or life-threatening and overwhelms an individual's ability to respond. Trauma overwhelms a person's ability to cope when faced with a threat. Trauma arises from activation of the instinctive survival response, sometimes referred to as flight/fight/freeze to overwhelming threat. As such, it originates as a response in the nervous system.

**Trauma-informed care** is a framework for support delivery based on knowledge and understanding of how trauma affects people's lives, their support needs and service usage. It means integrating an understanding of trauma into all levels of care and avoiding re-traumatisation or minimising the impact of the individual's experience of trauma.

**Trauma-informed practice** is an approach that recognises that trauma is common and that people accessing services and people delivering services may be affected by trauma. Trauma-informed practice is an approach that is holistic, empowering, strengths-focused, collaborative and reflective. It promotes physical, emotional, spiritual and cultural safety.

**Trauma-specific services** - Trauma-specific services and practitioners use therapeutic interventions intended to support healing and recovery for people in relation to their experiences of trauma and their individual needs.

**Intersectionality** – refers to how different aspects of a person's identity such as gender, class, race and sexual identity can overlap and combine.

**Intergenerational trauma** is the psychological and emotional impact of trauma experienced by people passed to subsequent generations in that group.

**Re-traumatisation** is when events reflect earlier experiences, thoughts, memories or feelings related to a past traumatic event.

**Vicarious trauma** - Vicarious trauma is 'the cumulative effects of exposure to information about traumatic events and experiences, potentially leading to distress, dissatisfaction, hopelessness and serious mental and physical health problems' (Monash Gender and Family Violence Prevention Centre 2021, p. iii).

## Procedure

### Purpose of this Procedure

To ensure that all staff and volunteers provide support services that recognise, understand, and appropriately respond to the impacts of trauma experienced by people with disabilities.

This procedure applies to all employees, contractors, and volunteers involved in service delivery, client support, and administrative roles within the organisation.

Guiding Principles:

1. Understanding trauma and its impact;
2. Promoting every client's rights, safety, and wellbeing;
3. Supporting client control, empowerment, choice and autonomy;
4. Ensuring cultural competence;
5. Promoting safe and healing relationships, based on trust;
6. Sharing power and governance;
7. Promoting the potential for recovery; and
8. Integrating care

This procedure guides all staff within the organisation in **how** they need to do their work. It promotes consistency, good practice, and provides an accountability tool against which people's actions and compliance with the procedure can be measured.

The *Trauma Informed Practice Procedure* outlines the roles and responsibilities for implementation of the policy. These roles and responsibilities are embedded within this procedure.

### Procedure

All staff will undertake trauma informed practice training provided by CPSN. Training will include (but not limited to) the key principles of trauma informed support (as per Blue Knot guidelines). Training will build knowledge and skills from which CPSN staff can acknowledge trauma and its impact and uphold key elements of these guiding principles.

1. Understanding trauma and its impact

CPSN acknowledges the importance of trauma informed practice in the context of a population with high rates of reported trauma. The organisation will apply universal precaution and act as though each client may be affected by trauma, whether they have disclosed existing traumas or not. It is acknowledged that many living with cerebral palsy experience different types of trauma as part of their life journey.

## 2. Promoting every client's rights, safety and wellbeing

Through the development of skills and knowledge CPSN staff will maintain an awareness of the increased vulnerabilities that people with disability may face when receiving supports and will take action to ensure these vulnerabilities are mitigated within all interactions and supports provided.

Staff responses and behaviours are consistent, predictable, and respectful to help establish a safe physical and emotional environment.

## 3. Supporting client control, empowerment, choice and autonomy;

CPSN will maintain awareness and respect for clients' human rights and freedoms and will provide opportunities for clients to make all decisions relating to the supports they receive and participate in setting their goals to help strengthen their sense of autonomy.

## 4. Ensuring cultural competence;

CPSN provides a culturally safe and competent approach to trauma-informed practice to clients from culturally and linguistically diverse backgrounds, including Aboriginal and Torres Strait Islander clients. The organisation recognises that cultural context can influence clients' perception of and response to traumatic events and their recovery process. The organisation respects diversity and uses interventions which are respectful of and specific to cultural backgrounds.

Staff are provided with cultural competency education and training regarding the different meanings and expression of trauma in different cultures. For Aboriginal and Torres Strait Islander clients, supports will be provided with an understanding of the trauma experienced by previous generations of Aboriginal and Torres Strait Islander people, as well as how this intergenerational trauma is experienced by many younger Aboriginal and Torres Strait Islander people today.

[For more information on trauma and Aboriginal and Torres Strait Islander communities, see <https://healingfoundation.org.au/>]

CPSN will embed cultural competence into all aspects of the organisation. This includes diversity in the staff profile, policy development, and support delivery through information that is in different languages and arranging translators for clients when necessary. The organisation will also consult with culturally diverse clients to ensure that processes are appropriate and accessible.

## 5. Promoting safe and healing relationships, based on trust;

CPSN understands that safe, authentic and positive relationships can facilitate the disclosure of trauma and ensure that a client is responded to appropriately. CPSN will promote collaborative, strengths-based practice that values the client's expertise and judgement. Where possible, clients will be afforded the opportunity to choose the staff member(s) who provide support, to build trust and ensure they feel safe and supported in the service environment.

## 6. Sharing power and governance;

CPSN recognises the impact of power and ensures that power is shared across all levels of the organisation, whether related to daily decisions or in the review and creation of policies. The voice participation of those with lived experience will be actively encouraged to modify and integrate supports which are accessible to clients.

CPSN will emphasise a 'doing with' approach to providing supports rather than a 'doing to' model. Language has the potential to promote or undermine wellbeing and to support or deny personal power.

The organisation recognises that power differences can make processes for making a complaint difficult for clients and their families. CPSN will encourage feedback and ensure that complaints can be delivered in a variety of ways. When complaints are received, they will be managed and responded to in a respectful, effective manner which leads to action.

#### 7. Promoting the potential for recovery

CPSN understands that trauma recovery is possible for everyone regardless of how vulnerable they may appear, that it is individually determined, and that clients have a right to define a successful outcome of supports. Staff will emphasise skill building rather than the management of symptoms, provide opportunities for the client to be involved in their care, facilitate peer support and help to establish future-oriented goals.

#### 8. Integrating care

CPSN will provide supports that consider all aspects of a client's wellbeing, including their physical, emotional, social and spiritual needs. Communication both within CPSN and with other providers involved in a client's care will be clear, organised and streamlined to ensure integrated care, treatment and support. Staff will understand their client's needs and will enable the coordination and delivery of supports to be in partnership with the client and their support network.

#### **Review of Procedure**

This procedure will be reviewed by CEO upon any of the following events occurring:

- a review of the Trauma Informed Practice Policy
- changes in accepted practice standards
- changes in external requirements such as legislation
- staff identifying gaps or problems in implementing the procedure
- service user feedback.

#### **Training plan**

As stated in this Procedure

#### **Prerequisites**

Trauma Informed Practice Policy

[Blue Knot Foundation](#): Disability Guidelines for Trauma Informed Practice

## **Maintaining appropriate records**

Records will be kept for seven years.

CPSN records are maintained using cloud-based technology systems, covering HRIS, CRM and Operational documentation.

#### **Forms that apply to this procedure**

[BlueKnot Disability guidelines](#)

#### **Document Revision History**

**This document is only valid on the day it was printed.**

V1 February 2026

<b>Who</b>	<b>Version</b>	<b>Date</b>	<b>Description of review</b>
GMSD	1	Feb 2026	New Procedure to align with Trauma Informed Practice policy