

# Annual Evaluation Report 2021

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## Centro Sávila Triage Evaluation Report



Centro Sávila



# Executive Summary

Centro Sávila (CS) serves communities across New Mexico by providing behavioral health care, assistance in navigating the healthcare system, and community support services. Regardless of one's ability to pay, their services are offered in a peaceful and respectful way. CS aims to create a safe healing space for all of their clients. As such, each of CS's programs are committed to empowering clients and reducing health disparities.

In the short amount of time that CS has been operating, the organization has expanded their services from the South Valley to the greater Bernalillo County area to address a need in these communities for culturally appropriate care and advocacy. In response to the needs of its clients, the organization started and maintained multiple programs and has formed partnerships with city and county governments and other community organizations.

CS has experienced rapid growth in funding, the volume of clients served, and in the services provided by the organization. The growth of CS has caused CS to restructure the triage and intake process to streamline services and provide ease of access to clients. The Evaluation Lab worked with CS's leadership, staff, and clients to evaluate:

1. If the triage and intake process is trauma-informed.
2. The perspectives of staff about the ongoing changes experienced by the organization related to the intake and triage process.
3. The perspectives of clients regarding the previous intake and triage process.

Specifically, the evaluation team analyzed how staff and clients perceived, were involved in, and are affected by the ongoing changes to the intake and triage process. The information gathered from focus groups identified recommendations to support the organization's mission.

The evaluation team conducted six focus groups. Two focus groups were with clients. Four focus groups were conducted with staff. We spoke with staff members from the enrollment team, and from the scheduling team. Focus groups are a great way to learn about participants' subjective experiences and understand complex issues within a group.

Data analysis suggests CS leadership and staff are aligned in the need for changes to the intake and triage process as a means to keep up with CS's growth and reduce wait times for clients. All groups are committed to upholding CS's mission. The main areas of concern are support based – asking staff for input, providing adequate training to staff, and providing additional space for staff's social-emotional support.

Data analysis suggests clients have a deep appreciation for Centro Savila, so much so that the evaluation team recommends CS increase their community outreach and awareness campaigns. The evaluation team also recommend that intake and triage be more individualized to each client's needs.



# Introduction

Centro Sávila aims to create a service-centered environment that works to overcome the institutional and systemic barriers to accessing healthcare. They provide clinical services for youth, adults, families and groups for preventive care to address matters such as mental health, alcohol and substance abuse disorders. The primary goals of this evaluation are three-fold: first, The evaluation team seek to determine whether the client triage process is trauma-informed, and second, to understand the perspectives of staff about the ongoing changes experienced by the organization related to the intake and triage process. And finally, The evaluation team seek to understand the perspectives of clients regarding the previous intake and triage process.

*"Es un lugar  
(Centro Sávila) de  
esperanza."*

Centro Sávila's clients receive individual or family/ couples counseling sessions, as needed for their unique circumstance. When necessary, clients receive emergency services. Clients receive services through a variety of grant-funded programs, such as VOCA, the Victims of Crime Act program that seeks to provide assistance to victims of severe crime; the Critical Time Intervention (CTI) program, which aims to minimize the long-term impact of early childhood trauma through family counseling; and the Bernalillo County Pathways program, providing navigators the help that is needed to fill individuals' unmet needs; Peer Case Management, which aims to foster one-on-one interactions with families to identify and address barriers so that people can access the resources they need to achieve health goals; Suicide Prevention Programs, provides culturally and linguistically specific, trauma informed services to prevent suicide; Public Benefits Enrollment Assistance, which assists community members with applications for Medicaid, Medicare, the New Mexico Health Insurance Exchange, UNM Hospital Financial Assistance and other resources to help pay for the cost of health care. Through each of these programs CS helps improve health outcomes and reduce health disparities in Bernalillo county. Throughout the process of connecting clients with the appropriate programming, Centro Sávila hopes their processes are trauma-informed. To be trauma-informed is to act in a way that demonstrates the understanding of the impact that interpersonal violence and victimization on an individual's life and development (Elliot et al 2005).

All Evaluation Lab projects are developed and implemented as collaborations with the dual goals of increasing student knowledge of social justice, and of building evaluation capacity in the organization. The following evaluation team of students, organization staff and an Evaluation Lab Team Lead jointly planned and implemented the project:

- Amelia Bierle | MPP Candidate | UNM Evaluation Lab Fellow
- Alex Shomaker | MPP Candidate | UNM Evaluation Lab Fellow
- Charla Orozco | MPLA | UNM Evaluation Team Lead
- Bill Wagner | Executive Director | Centro Sávila

- Guiovanna Aguirre | Finance Director | Centro Sávila
- Sofía Olay | Program and Evaluation Coordinator | Centro Sávila
- Sandra Mora | Director of Operations | Centro Sávila



## Work Performed

### Evaluation Goals

The evaluation team determined the scope of the evaluation within the context of the needs of the organization. The primary goal of this evaluation was to determine if the client triage process is trauma-informed from the client and staff perspectives. The process was undergoing changes and improvements; and the goal of the evaluation was to supplement those updates with data from clients and staff about their experiences. Additionally, this evaluation sought to understand the clients' perspectives of the previous intake and triage process. Finally, this evaluation set out to understand staff perspectives about the ongoing changes experienced by the organization related to the intake and triage process. The areas of the intake and triage process that underwent change were GoToConnect, a new phone management system, new job roles, and clinician guidelines.

### Planned Activities

To attain the goals set forth, the evaluation team conducted focus groups and interviews with Centro Sávila clients and staff.

To create the client focus group questions the evaluation team identified specific metrics of trauma-informed services. Based on Elliot (2005), the evaluation team defines trauma-informed services using the following guidelines or principles:

1. *Recognize the impact of violence and victimization on development and coping strategies;*
2. *Create an atmosphere that is respectful of survivors' needs for safety, respect, and acceptance;*
3. *Employ an empowerment model;*
4. *Identify recovery from trauma as a primary goal;*
5. *Maximize survivors' choices and control over their recovery; and*
6. *Base treatment in relational collaboration.*

To address the first and second trauma-informed metrics described above, the evaluation team asked participants to share two words that represented how they felt after their first call to CS. To address metric three and four of trauma informed services the evaluation team asked participants to describe how they felt after undergoing Centro Sávila's triage and intake protocols. Finally, to address metrics five and six the evaluation team asked participants if they felt in control throughout the triage and intake process and whether they had the option to accept or decline the help that they were offered.

To create the staff-focus group questions the evaluation team identified specific areas of trauma-

informed organizational practices. Based on Menschner (2016), the team defined trauma-informed organizational practices using the following guidelines:

1. *Offering opportunities for staff to explore their own trauma histories;*
2. *Supporting reflective supervision, in which a service provider and supervisor meet regularly to address feelings regarding patient interactions;*
3. *Providing trainings that raise awareness of secondary traumatic stress;*
4. *Encouraging and incentivizing physical activity, yoga, and meditation; and*
5. *Allowing “mental health days” for staff.*

To assess the level of the trauma-informed organizational practices, the evaluation team asked staff how often they find themselves sad after a day’s work and to choose two words to describe how they feel after a negative experience with new CS clients. To address metrics one and two outlined above, the team asked staff to identify the CS support structures they feel comfortable utilizing to relieve stress – one-on-ones with supervisors, team debriefings, and/or weekly staff meetings. To address metrics three through five, the team asked staff if additional support could be helpful when dealing with stressful situations at CS and if so, to describe what that support would look like.

In addition to questions that evaluated trauma-informed organizational practices, the evaluation team developed questions to assess staff perspectives of the changes made to the triage and intake process.

To learn about staff experiences with the recent changes in the intake process at Centro Savila, the evaluation team asked staff to discuss management of the phones using GoToConnect, their new job roles, and the new clinician guidelines.

## **Execution**

**Protocol:** The client and staff focus groups took place over Zoom. This was a familiar location for the participants since it was the central interaction platform throughout the mandated Covid-19 shutdown. Each session lasted no longer than one hour.

Before the focus group began, the team explained the purpose and process of the evaluation as well as confidentiality and consent. The evaluation team asked participants which language they preferred to communicate in for the focus group; all but one focus group used English – in that specific focus group there was a mix of Spanish and English.

The team lead of the evaluation team and alternating students conducted the focus groups and interviews. One (rotating) member of the team took notes while the other two-team members conducted the sessions. In addition to the detailed notes taken, the evaluation team recorded the focus groups and meetings for analysis purposes.

**Transcribing and Coding:** The evaluation team reviewed the detailed notes and audio recordings to ensure the integrity of participants’ responses. The evaluation team created codes for all participant responses, which categorized the responses to establish common groupings as mentioned by the clients and staff members. The evaluation team then examined these codes to identify common larger themes – topics, ideas and patterns of meaning that repeatedly came up.



# Data Analysis

The main goal of this evaluation was to assess the trauma-informedness from a systematic perspective, which focused on both client and staff experiences. In short, analysis of focus group and interview data suggest that while Centro Sávilá is trauma-informed from a client perspective, there are opportunities for improving the trauma-informed staff experience. Below is a list of the summaries for each finding related to each perspective:

## Staff:

- CS changes were positively perceived
- New technology is beneficial
- High levels of job satisfaction
- CS communication is insufficient

## Client:

- Deep appreciation for CS
- Need a more individualized intake process
- CS awareness campaigns and outreach
- Need for increased CS mingling

## Staff Experiences:

### Finding 1. Staff positively perceived the changes.

*“I’m very appreciative of the positive changes Sandra is making on Centro Sávilá”*

Focus group data suggests that each of the staff members acknowledge the need for changes within the structure of Centro Sávilá. Nevertheless, the data suggests that going forward prior to changes the staff should be consulted, should receive clear directives regarding any changes to job roles, and should receive clear protocols to carry out the duties of their job.

Additionally, the evaluation recommends clear directives and protocols regarding roles because staff expressed concern surrounding the nuances of each of the program requirements. Specifically, staff found the intake forms, questionnaires, and assessments needed for each program unclear.

In sum, staff appreciate the positive changes and would appreciate additional directives, input, and support.

**Finding 2. New technology is beneficial.** Staff found that the new technology is supportive of their positions and CS's growth. The staff expressed excitement with the new changes in that it will make their jobs easier. Specifically, staff were impressed with the GoToConnect system. Nevertheless, there were suggestions from staff to clarify phone line extensions.

*“The new system is good but I’m still learning how to manage it”*

*“Nobody is teaching us how to use the phone”*

Additionally, the staff felt as though they taught themselves the new systems, which they acknowledged as feasible but that additional support in these areas would have eased the transition and made it easier on clients.

**Finding 3. Job satisfaction at Centro Sávila**

Staff love working at CS and with the clients. However, they need some additional mental, emotional, and professional supports to manage tough calls, experiences, and work-related stress.

Focus group data suggests that while staff meetings are an option for staff to use to decompress and receive support from others, staff meetings do not provide the necessary outlet for discussing difficult situations. Findings suggest that these meetings often contain organizational updates and other brief updates related to business information. As such, data suggests it might be difficult to utilize this structure as a means to discuss tough situations.

The data also suggest that the effectiveness of the supports that currently exists for staff -- 1-on-1's with supervisors, debriefings, and weekly staff meetings -- are highly dependent on the team that staff are a part of. Not all teams receive the same level of support, because each team has its own organizational system for allowing decompression time. The weekly meetings used by the CTI program were helpful in stress relief and decompression. CS staff should look to that program as guide of improving weekly staff meetings across all programs.

*“Working at Centro Savila makes me feel... proud, accomplished & happy”*

**Finding 4. Communication is insufficient.**

*“The communication from upper management is lacking and it feels as though they don’t listen to their*

Staff feel there is a lack of communication between upper administration and staff “on the ground.”

The data supports a need for improved communication between upper management and other staff. Increased communication will be helpful for staff to voice suggestions, questions, and concerns. Staff felt their suggestions could provide great insight that would ultimately increase knowledge of and areas for improvement within staff day-to-day operations.

## Client Experiences:

### Finding 1. Deep appreciation for CS.

Clients who participated in focus groups shared their deep appreciation for CS and expressed that they feel safe and comfortable with CS Staff, particularly that CS provided a comfortable space for them during a time of need.

Clients spoke highly of all staff members, continually repeating how nice and grateful they were for their help in addressing their needs.

### Finding 2. Need for a more individualized intake process.

Some clients acknowledged that the intake process was confusing and time consuming. This was particularly true for clients who were not in a crisis. In these situations, the clients felt that the triage questions were intrusive and unnecessary.

However, for clients who were seeking help because of emotional distress, they thought the intake process provided them with a sense of hope. They communicated that in a time of deep distress the questions asked by CS staff made them feel their problems would be resolved soon.

*“I felt supported, I felt there was a lot of hope, nothing made me feel uncomfortable actually it (intake) was the opposite, it made me feel hopeful.”*

*“I felt like it (intake) was invasive because I just wanted to get help with some classes for my family”*

As such, the data suggests that the intake process cannot be a one size fits all approach; rather it should accommodate each client based on the services they seek. While this finding comes from CS’s old intake process, the evaluation team believe this remains a valuable insight that CS consider for any future evaluations of the new process.

Additionally, clients recommended reducing the time spent on the waitlist. The longer they had to wait to get the services that they needed, the more stressful the intake process became for them.

**Finding 3. CS awareness campaigns and outreach.**

Clients felt that “everyone should know about CS” based on their positive experiences with the organization. As such, clients recommended an expansion of community outreach.

There was a specific recommendation to increase outreach in schools around Albuquerque so that more families can take a class at CS. Clients explained that they are always excited to recommend Centro Sávila to their friends and family.

*“Centro Sávila should work on their exposure so more people know about their services”*

**Finding 4. Increased CS mingling.**

Clients recommended that there be more networking and community building within the CS organization.

*“It would be nice for different programs to network with each other and mingle to get to know more people at Centro Sávila”*

The client focus group was a great experience for clients because they were able to connect with other members of the CS community. One client even said that the focus group was cathartic because she felt like she could express themselves with others who could relate.

As such, clients expressed that they would enjoy more client-to-client events where they are able to build a community with other clients at Centro Sávila.



## Recommendations

The evaluation team based these recommendations on the outcomes of the focus groups conducted with CS staff and clients. The recommendations intend to provide CS leadership immediate steps to address the challenges posed by a period of rapid growth and ongoing change. The evaluation team believes in the importance of addressing the stated challenges regarding communication and organizational structure by developing and adhering to a flexible theory of change that will inform a documented strategic plan. CS benefits from highly dedicated staff, managers, and leaders that have fully bought-in to the goals of the organization. Leadership has a unique opportunity to tap into the creative and professional insights of its staff to assist with the growth and inform decision-making.

### **Client-side recommendations:**

First, the evaluation team recommend that CS continue to refine the flow of triage & intake to reduce confusion and wait times for the sake of clients. It is important to incorporate staff into this process as staff have invaluable experience from working with clients every day.

Second, the evaluation team recommend that CS increase their outreach events to inform the community of CS services. Especially, informing families in the community of the classes offered.

Finally, the evaluation team recommend that CS incorporate more networking within CS so that clients are able to build a community and further develop relationships within that community.

### **Staff-side recommendations:**

First, the evaluation team recommend institutionalizing regular one-on-one (or otherwise small-scale) meetings among staff to address secondary trauma and increase the flow of communication between management and staff. All Centro Sávila locations should follow this.

Second, the evaluation team recommend providing handouts or sending emails to staff to provide information regarding support groups for staff and clinical directors.

Third, the evaluation team recommend hosting optional trainings on training, clinical assessments, and other professional development opportunities. We recommend internal trainings for staff to understand the nuanced inner workings Centro Sávila's intake and triage process.

Finally, the evaluation team recommend that employees receive sufficient time for decompression and self-care based on an assessment of their individual workloads. As Centro Sávila continues to grow, the workload of employees grows, increasing their risk of secondary trauma.

### **Recommendation rationale:**

The evaluation team base these recommendations for staff on the premise of trauma-informed intake and triage as established in the evaluation plan. While the concept of trauma-informed intake and triage is new, the evaluation team based the interpretation on the following principles of trauma-informed care posited by Elliot et al. (2005):

- Recognize the impact of violence and victimization on development and coping strategies;
- Identify recovery from trauma as a primary goal;
- Employ an empowerment model;
- Maximize survivors' choices and control over their recovery;
- Base treatment in relational collaboration;
- Create an atmosphere that is respectful of survivors' needs for safety, respect, and acceptance;
- Emphasize survivors' strengths, highlighting adaptations over symptoms and resilience over pathology;
- Minimize the possibilities of re-traumatization;

- Strive to be culturally competent and to understand each survivor in the context of their life experiences and cultural background; and
- Solicit consumer input and involve consumers in designing and evaluating services.

Following these principles from the standpoint of an employee, the evaluation team re-interpret them more specifically as follows:

- Acknowledge the risk of secondary trauma to staff who work directly with survivors;
- Provide space for staff to debrief with others after emotionally taxing interaction with survivors;
- Provide space for staff to decompress and care for themselves in order to ensure their own well-being, as the well-being of the staff can have an impact on the well-being of clients;
- Encourage staff team-building, camaraderie, and an overall sense of group belonging;
- Celebrate individual staff's strengths and achievements and respect their own needs for safety, respect, and acceptance; and
- Provide staff with the adequate tools and training necessary to provide supportive and non-traumatizing experiences to clients.

Because of the growing workload on staff and the recent sudden changes in staff roles, the evaluation team emphasize the importance of practices that nurture and maintain the values of the organization on an individual basis for staff. Research strongly suggests that employees who feel greater motivation to work in public service are better equipped to cope with daily work stressors in ways that offset those stressors' negative effects, which have the potential to undermine an employee's motivation and desire to remain in the field in the long-run if left unchecked (Christensen, Paarlberg, & Perry, 2017). Institutionalizing one-on-one (or otherwise small-scale) among staff to address stress and secondary trauma across all Centro Sávila locations is likely to help meet this need. Not all staff felt as though weekly staff meetings were the appropriate forum for decompression, believing them to be too large or more focused on workplace updates. Centro Savila should share information relating to any services available to staff (such as self-care and counseling offerings) with them periodically to ensure they are aware of available services.

Based on staff feedback, the evaluation team found that where some enrollment staff were comfortable with conducting assessments such as the Colombia Suicide Risk Assessment, others were not, and not all believe they had adequate training to use them in a trauma-informed way. The evaluation team recommend formally training enrollment staff to conduct these assessments to ensure that the client intake process remains as trauma-informed as possible for both clients and staff. Centro Savila should identify the staff who already feel comfortable with providing these assessments and encourage them to work with those who do not.

Additionally, the evaluation team believe that staff should receive adequate training in any new services, software, or skills relating to their job roles. This relates to the importance of nurturing and maintaining public service motivation: small hassles in the workplace, such as not understanding how to use certain software or new technology, can exacerbate the daily work stressors that can undermine employees' motivation and desire to work in public service (Christensen, Paarlberg, & Perry, 2017). Before CS implement any new changes, it is necessary to allow adequate time for staff training to take place in order to reduce stress on staff and to continue to ensure trauma-informed service to clients.

Staff camaraderie and sense of belonging is also an outcome of note, and the evaluation team strongly recommend that staff input be sought prior to suggesting changes. CS should take into account staff thoughts, feelings, and concerns when making management decisions, another facet of ensuring minimization of workplace stressors (Christensen, Paarlberg, & Perry, 2017). The staff the evaluation team spoke with expressed feeling unheard and even railroaded into the changes that started at the beginning of 2021, which caused a major amount of stress for them. Therefore, in addition to the time to dedicate to staff training, it is recommended time be given to invite and encourage staff input on proposed changes. This should be multi-modal in order to allow the broadest variety of feedback. For example, weekly staff meetings could open discussion for proposed changes. Additionally, online surveys (through SurveyMonkey or Google Forms) are a way to encourage anonymous feedback via email. Feeling as though their input matters is likely to improve staff's sense of belonging in the organization.

Ultimately, when staff feel heard, welcomed, and supported in the workplace, they will have improved capacity to healthily cope with stressors and remain motivated to work in their roles at Centro Sávilá. Staff wellbeing and public service motivation is a major element of providing supportive and trauma-informed service to clients.



## Next Steps

Based on the recommendations outlined above in addition to our observations made throughout the year, The evaluation team suggest the following next steps to help Centro Sávilá improve its evaluation capacity:

### **Trauma-informed services and organizational practices evaluation**

Using the definition and metrics of trauma-informed services and organizational practices prepared earlier in this report, Centro Sávilá may conduct regular internal evaluations to determine whether or not they are maintaining a trauma-informed organization for both clients and staff. These evaluations would likely be best conducted quarterly or annually.

### **Feedback system**

In the interest of maintaining a trauma-informed organization for clients and staff, Centro Sávilá may create a feedback system or forum for both clients and staff to express any comments, questions, or concerns that they might have. Respondents should have the option to choose whether or not they would like to remain anonymous, as anonymity can allow people to feel more comfortable to express themselves fully. Centro Sávilá should regularly review submissions to the system and take them into account during internal evaluations.



## References

- Christensen, R. K., Paarlberg, L., & Perry, J. L. (2017). Public service motivation research: lessons for practice. *Public Administration Review*, 77(4), 529-542.
- Elliott, D. E., Bjelajac, P., Fallot, R. D., Markoff, L. S., & Reed, B. G. (2005). Trauma-informed or trauma-denied: Principles and implementation of trauma-informed services for women. *Journal of Community Psychology*, 33(4), 461-477.
- Menschner, C., & Maul, A. (2016). Key ingredients for successful trauma-informed care implementation. Trenton: Center for Health Care Strategies, Incorporated.



# Appendix A – Client Focus Group

## Interactive Focus Group Script For Centro Savila Clients

Date of Focus Group: 2/12/2021

Time of Focus Group: 3:30 pm

Focus group goals:

1. Determine if first contact, triage, intake and assessment are effective and trauma-informed.

### Script and timeline:

3:30 pm **Introductions** and verbal consent. Please share your video if you're willing (not required), tech stuff (mute when not speaking so we can hear your fellow group mates; unmute to speak or share in the chat; chats go can to the full group or to one of us directly), if you would rather not share your name, please feel free to log in/join as anonymous. We'd like to record, but we won't if that makes anyone uncomfortable - introductions of us (who we are PLUS our role in the focus group), explain how valuable their feedback is.

*Good afternoon and thank you so much for being here with us! We just have a few things to do before we get started. First, a few quick Zoom reminders:*

- *Please share your video if you are willing so we can see who we are chatting with*
- *Out of respect for your fellow participants please stay muted when you are not speaking so we can hear what the speaker has to say.*
- *There is also the option of using the chatbox if you prefer that.*
- *You will receive a gift card for \$50 to walmart for participating today.*
- *We'll read this "Consent Form" first to explain our project and the purpose of having this focus group today. It sounds super formal because it's straight from our class but we promise the group will be much more casual than this!*

*Muy buenas tardes y muchas gracias por estar aquí con nosotros. Tenemos unas pequeñas cositas que hacer antes de empezar. Por primero, unos cuantos recuerdos de Zoom:*

- *Si están dispuestos, por favor comparten sus videos para que todos puedan ver con quién hablamos.*
- *Por respeto a sus compañeros, quédense en 'mute' cuando no están hablando para que podamos escuchar la gente que habla.*
- *También tienen la opción de usar el "chatbox" para compartir sus ideas y respuestas si prefieren*
- *Van a recibir una tarjeta para \$50 para Walmart para participar hoy.*
- *Tenemos que leer este "formulario de consentimiento" para explicar nuestro proyecto y la propuesta de tener este grupo hoy. Suena bien formal porque es directamente de la clase pero les prometemos que el grupo será casual. [Read Consent]*

**Icebreaker:** Please share your name (if you're willing) and when you started at Centro Savila - year and month if you remember

Por favor, presentarse al grupo (si quiere) y **cuando empezaron con Centro Savila - si recuerdan el año y mes por favor.**

3:45pm **Activity 1: Poll - How did you hear about CS? ¿Cómo se dieron cuenta del Centro Savila?** We are going to put up a poll on your screen. Vamos a poner una encuesta en la pantalla. Please select the option that best represents how you heard about CS or select "other" and write in your answer. Por favor escogen la opción que es la mejor representación de como oyeron del Centro Savila. Si no hay una opción que explica su situación, por favor escogen "other" y escriban su respuesta. (Friends/Family; Social Media; Other Organizations; I had not heard of CS prior to this referral; Google; Other (please chat)).

[Materials needed: Survey Monkey/Google form Link]

3:50pm **Activity 2:** Please share two words (either verbally or in the chat) that represent how you felt after your first call to CS. ¿Cuáles son las dos palabras que vienen a la mente cuando piensan en su primer contacto con el Centro Savila? Comparten las por boca o por el "chatbox". (2-3 minutes to brainstorm and write/share it)

[Materials needed: Zoom White Board - someone of us assigned to save the white board]

**Time for reflection/follow-up:** Participants are asked/can share about why they chose certain words, offered the opportunity to expand. Does anyone want to share why they chose their words or provide more detail on the words they chose? ¿Alguien quiere compartir porque escogió estas palabras o explicar sus palabras en más detalle? (5 minutes for this)

4:00pm **Activity 3:** Entendimos que la persona con quien hablaron por principio tenía que preguntarles muchas preguntas para conectarles a los programas y servicios apropiados. Cuando estaban dando respuestas a las preguntas, cómo se sintieron?

**Time for reflection/follow-up:** Does anyone want to share more or provide more detail? ¿Alguien quiere compartir más o explicar en más detalle? (5 minutes for this)

4:10pm **Activity 4:** Did you have the option to accept or decline the help that was offered to you? Did you feel in control of your experience with CS? ¿Tuvieron la opción de aceptar o desistir el apoyo que les ofreció el Centro Savila? ¿Se sintieron que tuvieron control de sus experiencias con el Centro Savila?

4:15pm **Plus and delta:** Ask participants to spend some time discussing the positives and potential areas for improvement of the intake process. What are some of the positives, or some of the things you would change for the next CS clients? ¿Qué les gusta sobre el proceso de registro en Centro Savila? ¿Qué les gustaría ver cambiado?

[Materials needed: Zoom White Board - someone of us assigned to save the white board]

4:30pm **Closing:** Thank you all so much for your time and the feedback! Your answers will be very helpful as Centro Savila works to improve their intake processes. Muchísimas gracias a todos

por darnos su tiempo y sus ideas - sus sugerencias serán muy ayudables en mejorar el proceso de registro en Centro Savila.



# Appendix B – Staff Focus Group

## Universal Staff Focus Group Introduction

### Interactive Focus Group Script For Centro Savila

Date of Focus Group: 2/17/2021

Time of Focus Group: 4:00 pm

The focus group with Patricia, Alma, and Coby will focus on crisis assessment and the new intake (triage) process. The goals are to:

1. help the UNM team understand how intake is or is not a trauma informed process (both for the clients and for the staff);
2. determine how staff feel (or do not feel) support through their secondary trauma by CS.

### Script and timeline:

4:00pm **Introductions** and verbal consent. Please share your video if you're willing (not required), tech stuff (mute when not speaking so we can hear your fellow group mates; unmute to speak or share in the chat; chats go can to the full group or to one of us directly), if you would rather not share your name, please feel free to log in/join as anonymous. We'd like to record, but we won't if that makes anyone uncomfortable - introductions of us (who we are PLUS our role in the focus group), explain how valuable their feedback is.

*Good afternoon and thank you so much for being here with us to chat about the new changes implemented on February 1st! We just have a few things to do before we get started. First, a few quick Zoom reminders:*

- *Please share your video if you are willing so we can see who we are chatting with*
- *Out of respect for your fellow participants please stay muted when you are not speaking so we can hear what the speaker has to say.*
- *There is also the option of using the chatbox if you prefer that.*
- *We'll read this "Consent Form" first to explain our project and the purpose of having this focus group today. It sounds super formal because it's straight from our class but we promise the group will be much more casual than this!*
- *By remaining logged into this meeting, you confirm your consent to participate. :)*
- *So we've mentioned who each of us are - we each have different roles in the focus group - Amelia and I will be facilitating the group; Alex will take notes so she won't be participating as much.*
- *We want this to be an open space for sharing so we want to encourage everyone to stay positive and remember not to pass judgement on any responses you may hear today - the goal is to help Centro Savila to improve.*
- *Our agenda today - 4:00 to about 4:30 we will talk about how the new changes are going and from 4:30 on we'll talk about your experiences as staff.*

**Icebreaker:** Please share your name and when you started at Centro Savila - year and month if you remember

4:10 pm      **Intro to activity 1** - Thank you for being here today and taking part in the evaluation. We understand there have been changes introduced to the triage process and that you are a part of the enrollment team.

4:11pm      **Activity 1: Tell us how managing the phones using GoTo Connect has been going.** Feel free to jot down some notes, or draw out a diagram if that helps. *[Give participants 3 minutes to brainstorm.]* Okay, can anyone volunteer to **start** us off with a share?

## Enrollment Team Focus Group Questions

4:15pm      **Activity 2: Tell us how managing a schedule for intake is going.** Feel free to jot down some notes, or draw out a diagram if that helps. *[Give participants 3 minutes to brainstorm.]* Okay, can anyone volunteer to **start** us off with a share?

[Materials needed: **Jamboard** - folks could use it to jot their roles down?]

4:20pm      **Activity 3: Large group discussion - Are the clinician guidelines helpful?** Together as a whole group, let's take about 5 minutes to talk about the clinician profiles and scheduling guidelines. Do you have any suggestions for how they could be improved? In phase 2 what would you like to see or be added to the document from a clinical perspective?

4:25pm      **Activity 4: How do you feel about doing the Columbia Risk assessment?** Feel free to jot down some notes, or draw out a diagram if that helps. *[Give participants 3 minutes to brainstorm.]* Okay, can anyone volunteer to **start** us off with a share?

[Materials needed: **Jamboard** - folks could use it to jot their roles down?]

4:30pm      **Intro to Part 2 of Focus Group** - The last time we spoke with staff at CS there were suggestions to improve emotional support. We'd like to get your feedback about what this could look like at CS.

4:30pm      **Activity 5: Jamboard questions:**

1. What causes stress when working with clients at Centro Savila? Please share on the Jamboard. (2-3 minutes to brainstorm and write/share it)
2. After taking tough calls what helps you decompress and regroup? (2-3 minutes to brainstorm and write/share it)
3. Do you feel as though some additional support could be helpful when dealing with stressful situations at CS? What does that support look like to you?
4. Please share your thoughts on the effectiveness of sharing during weekly staff meetings. (2-3 minutes to brainstorm and write/share it)

4:40pm **Activity 6:** Poll - How often do you find yourself sad after a day's work? & Please check all the structures you feel comfortable using, if any. (1 on 1's with supervisors, Debriefings, Weekly staff meetings, other)

4:45pm **Activity 7:** An employee assistance program (or EAP) is an employee benefit program that assists employees with personal problems and/or work-related problems that may impact their job performance, health, mental and emotional well-being. Offered by an organization that is external to the employer, it is a voluntary, work-based program that offers free and confidential assessments, short-term counseling, referrals, and follow-up services to employees who have personal and/or work-related problems. If CS offered EAPs, would you be interested/comfortable utilizing it? (Explain)

4:50pm **Activity 8: Plus and delta:** Ask participants to spend some time discussing the positives and potential areas for improvement of the triage process. What are some of the positives, or some of the things you would change about the process?

[Materials needed: Jamboard]

4:55pm **Activity 9: Final thoughts & Closing:** What else should we know? Reminder that people are welcome to email us if there's anything they didn't get to say/share or didn't want to share in the group. Share my email in the chat

**Closing:** Thank you all so much for your time and the feedback! Your answers will be very helpful as Centro Savila works to improve their intake processes.

## Scheduling Team Focus Group Questions

3:15pm **Activity 1.5: Large group discussion - Are the clinician guidelines helpful?** Together as a whole group, let's take about 5 minutes to talk about the *clinician profiles and scheduling guidelines*. Do you have any suggestions for how they could be improved?

3:20 pm **Intro to Part 2 of Focus group** - The last time we spoke with staff at CS there were suggestions to improve emotional support. We'd like to get your feedback about what this could look like at CS.

3:21pm **Activity 2:** Jamboard questions:

1. What causes stress when working with clients at Centro Savila? Please share on the Jamboard. (2-3 minutes to brainstorm and write/share it)
2. After taking tough calls what helps you decompress and regroup? (2-3 minutes to brainstorm and write/share it)
3. Do you feel as though some additional support could be helpful when dealing with stressful situations at CS? What does that support look like to you?

4. Please share your thoughts on the effectiveness of sharing during weekly staff meetings. (2-3 minutes to brainstorm and write/share it)

3:40pm **Activity 3:** Poll - How often do you find yourself sad after a day's work? & Please check all the structures you feel comfortable using, if any. (1 on 1's with supervisors, Debriefings, Weekly staff meetings, other)

3:42pm **Activity 3.5:** An employee assistance program (or EAP) is an employee benefit program that assists employees with personal problems and/or work-related problems that may impact their job performance, health, mental and emotional well-being. Offered by an organization that is external to the employer, it is a voluntary, work-based program that offers free and confidential assessments, short-term counseling, referrals, and follow-up services to employees who have personal and/or work-related problems. If CS offered EAPs, would you be interested/comfortable utilizing it? (Explain)

3:50pm **Activity 4: Plus and delta:** Ask participants to spend some time discussing the positives and potential areas for improvement of the triage process. What are some of the positives, or some of the things you would change about the process?

[Materials needed: Jamboard?]

3:55pm **Activity 5: Final thoughts & Closing:** What else should we know? Reminder that people are welcome to email us if there's anything they didn't get to say/share or didn't want to share in the group. Share my email in the chat

**Closing:** Thank you all so much for your time and the feedback! Your answers will be very helpful as Centro Savila works to improve their intake processes.