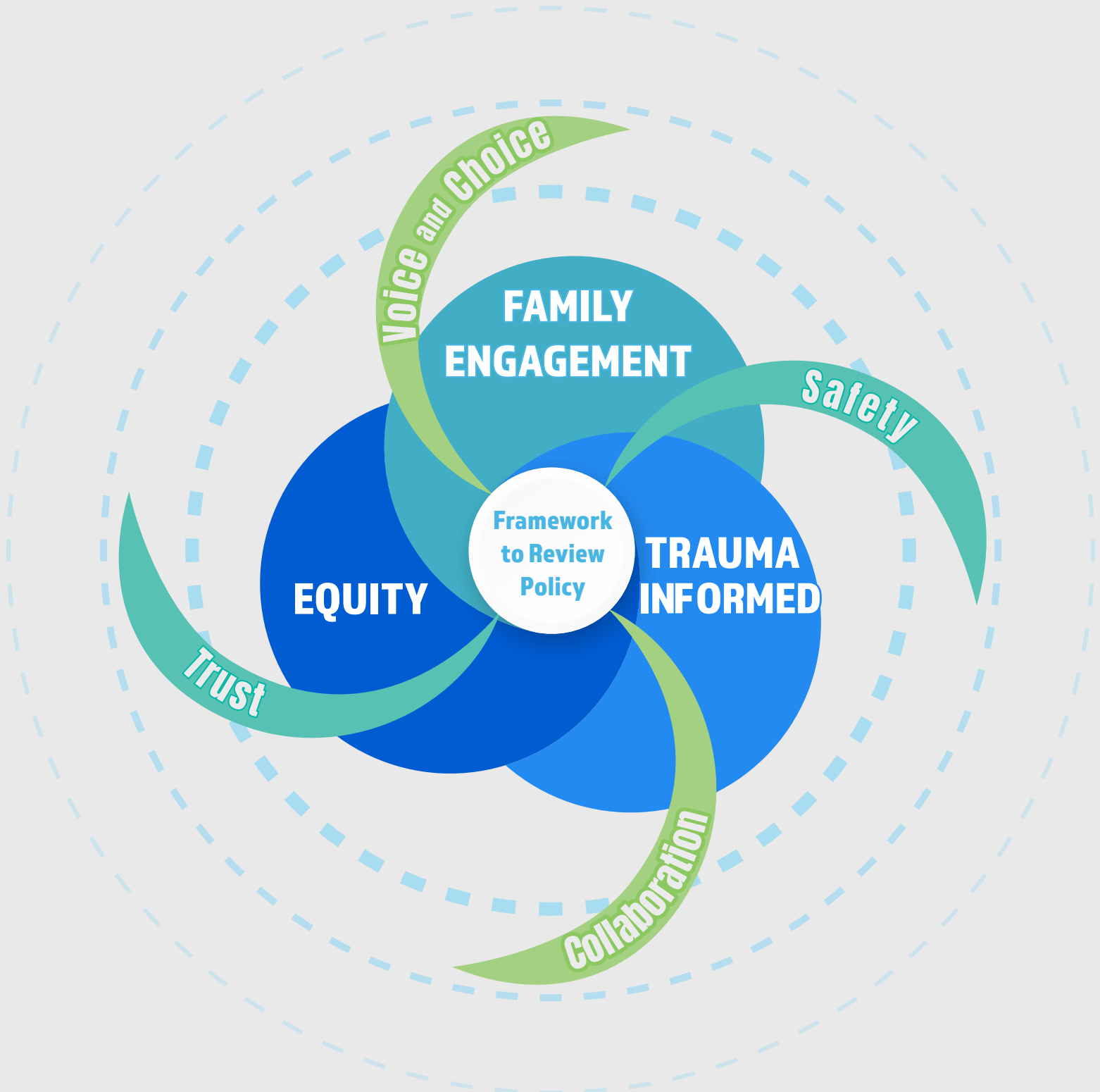


Policy Review Toolkit

A Framework to Assess and Integrate Trauma-Informed Care,
Equity and Family Engagement Into Your Policies



Policy Review Framework and Process

This resource is a helpful roadmap for developing and reviewing policies related to the provision of behavioral health services for children, youth and families. When developing new policies or reviewing and updating existing policies it is important to evaluate their impact on the workforce as well as on the children, youth, and families being served. This process should center on a trauma-informed and equity-focused approach, incorporating best practices for meaningful family engagement throughout. Fairfax County has created a range of resources and collaborative partnerships to support this effort, many of which are referenced in this guide. The guidance provided is designed to be adaptable and applicable across various health and human services settings.

Three ways to use this framework:

This resource is intended to support the regular review of existing policy, the revision of policies in response to internal or external factors, and in the development of new policies to address emerging needs.

REVIEW
Existing Policy

REVISE
Existing Policy

DEVELOP
New Policy

Getting Started:

Owner of Policy (Who is accountable for administration?)

What are the desired results/outcomes of the policy?

What available data should be considered as it relates to this policy?

What additional data is needed (if any)?

What are the steps to collect additional data – are resources available?

Who will be impacted by the policy?

Workforce

Internal and external teams

Stakeholders/Partners

Clients/Public

What are the impacts?

Does it make sense to get input from the public on this policy? ☐ No ☐ Yes

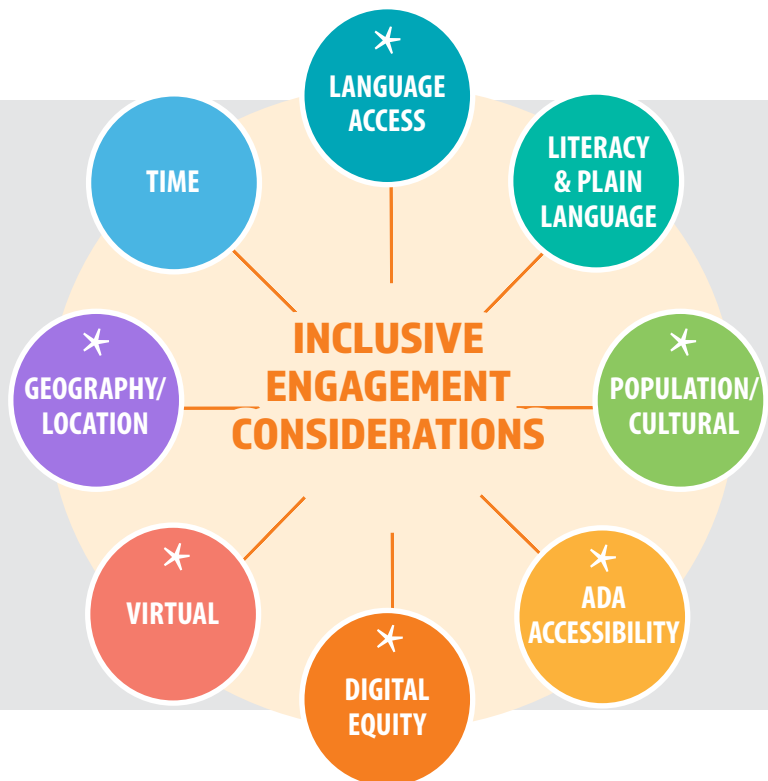
If public input is necessary, prioritize inclusive representation by engaging individuals from diverse cultural, ethnic, and racial backgrounds, as well as those from the LGBTQIA+ communities through policy, management and advisory teams and committees. When possible, leverage existing groups or bodies to contribute their perspectives to the process.

Some groups to consider include:

- [Opportunity Neighborhoods](#)
- [Fairfax County Youth MOVE - Youth MOVE National](#)
- [Mental Health in Fairfax County | JSSA](#)
- [FFF Formed Families Forward](#)
- [National Alliance on Mental Health | NAMI](#)
- **Healthy Minds Fairfax's Family Advisory Board**
DFSHealthyMinds@fairfaxcounty.gov

What Makes Engagement Inclusive?

* Requires additional infrastructure and resources.



Fairfax County Community Engagement Spectrum

CORE PRINCIPLES: Equitable • Trusted • Data-Driven • Meaningful • Transparent • Accessible

The county's commitment to the community is to be clear about the level of engagement expected for decisions.

Various relationships, capacity building, community outreach, communications and marketing activities occur continuously and simultaneously to support the engagement levels noted below:

Engagement Level	Community Role	↔	Fairfax County Role
Understand	Listen and ask questions to comprehend and grasp significance.		Provide the community with balanced objective information.
Contribute	Share concerns and aspirations and consider the concerns and aspirations expressed by others.		Listen to and acknowledge concerns and aspirations expressed by the community and ensure they are considered.
Collaborate	Partner with the county in the development of alternatives and the identification of preferred solutions.		Look to the community in the formulation of solutions and incorporate into decision making to the maximum extent possible.
Decide	Accept trust of county and community to respect and represent their interests in the decision-making process.		Strategically delegate decision-making as appropriate, such as with boards, authorities and commissions.

Policy Alignment Rubric

Utilize the policy alignment rubric to assess your trauma-informed care principles, equity considerations, and where applicable, family engagement practices. The intended outcome of this review:

- Policy that explicitly prioritizes mental health equity, addressing disparities and ensuring access for all populations, including marginalized communities.
- Policy that is fully aligned with trauma-informed principles including safety, trust, empowerment, and cultural responsiveness.
- Policy that actively promotes family engagement, providing structured opportunities for family input and support in decision-making.
- Policy that includes clear implementation strategies, accountability measures, and evaluation processes to ensure effectiveness.

Trauma Informed	Fully	Partially	Not Yet	N/A
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Safety — Physical and Psychological

Policy is designed to promote and maintain safety across physical, psychological, social and moral domains. They are balanced to meet the needs of the workforce and those being served.

Trustworthiness – Openness, Transparency, Boundaries, Accountability

Policy is communicated using clear and accessible language to ensure understanding by those responsible for implementation and those affected. Transparency and accountability are emphasized throughout.

Collaboration – Authentic Partnership

Policy developed through genuine collaboration with clients, families and partners. Hierarchical structures are de-emphasized. Stakeholders actively seek input from staff and clients, with opportunities provided for feedback and revisions.

Voice & Choice – Empowerment and Autonomy

Policy supports client, family and partner involvement in planning and decision-making. Emphasis is placed on empowerment, respect for autonomy and self-efficacy. Clear rationale and contextual information are provided to support informed decision-making.

Equity – Inclusive and Culturally Responsive

Policy developed with consideration of cultural, historical, generational and gender-related factors that may influence trauma. Professionals account for the potential impact on individuals based on race, class, gender and other social identifiers.

Equitable	Fully	Partially	Not Yet	N/A
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Access to Behavioral Health Services

Policy ensures clients can access behavioral health services in a meaningful and sustainable way. It considers healthcare benefits, scheduling, age, transportation, treatment modalities and other factors to eliminate barriers to access.

Language Access

Policy ensures clients who speak languages other than English have access to services. This is achieved through the hiring of multilingual providers and providing access to mental health-trained interpreters and translation services. Materials (e.g., intake forms, consent documents, educational resources) are available in multiple languages.

Plain Language

Policy is written in clear, plain language, free from complex medical or behavioral health terminology. Key concepts and instructions are presented in a way that is easy to understand for individuals with varying literacy levels. The policy is tested and reviewed by individuals with different literacy levels, including those with lived experiences, to ensure accessibility.

Disability Accessibility

Policy ensures that behavioral health care services, facilities, communication methods, treatment modalities, and digital platforms are fully accessible to individuals with diverse disabilities (e.g., physical, sensory, developmental, cognitive and behavioral health). Provisions for reasonable accommodations are in place. Policy aligns with legal requirements (e.g., ADA) and protects individuals with disabilities from discrimination, bias or barriers to equitable care.

LGBTQIA+ Rights

Policy explicitly protects and affirms the rights of LGBTQIA+ individuals, ensuring non-discrimination, respectful language and inclusive care for diverse sexual orientations, gender identities and expressions. Policy safeguards the confidentiality of LGBTQIA+ clients, including the protection of sensitive information such as gender identity and chosen names when appropriate. Clients are supported in disclosing their LGBTQIA+ status and ensured a safe and respectful environment.

Family Engagement	Fully	Partially	Not Yet	N/A
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Inclusive Voice

The voices of the youth and family were prioritized in every stage of policy development, implementation and evaluation.

Data-Informed Process

Policies were informed by authentic family input gathered through tools such as surveys, focus groups and community conversations.

Ongoing Communication

Families continue to be engaged regularly through multiple, accessible communication channels, including meetings, digital platforms, community forums, multilingual resources and more.

Equitable Participation

Each team or group involved in policy work should include at least two non-agency partners who represent youth and/or family voice. These partners must be adequately prepared, supported and compensated — monetarily or otherwise — to ensure meaningful and equitable participation. To further support their engagement, a designated team member should provide mentorship before, during and after meetings to clarify content and offer ongoing assistance.

Accessibility & Inclusion

Policies and practices are designed to accommodate the diverse needs of families, including transportation, communication modes, meeting times and formats and disability access.

Leadership Commitment

Agency leaders use flexible, proactive and positive practices that promote inclusive and equitable engagement of youth and families.

ACCOUNTABILITY

How do we ensure accountability? (policy is being followed)

What training, technical assistance or support will the workforce responsible for this policy need to support successful implementation?

Who do we need to communicate with about this policy and its results, and who is responsible for that communication? (internal and external)

When should this policy be reviewed to determine if it is having its intended impact?

Date for review: Cadence for future review: (e.g. annually, every 5 years):

What measures/data points will we rely on to determine impact?

LOGISTICS

Where is this process documented?

- Internal written policy or memos
- External facing communications (e.g. websites, pamphlets, etc.)
- Training or program manuals

Identify all places where the new/revised policy will need to be documented, and where out-of-date materials that need to be archived are located so they can be removed and replaced with the current policy.

Identify training or communication needs associated with implementation of the new/revised policy.

Notes:

Appendix 1 - Policy Development Best Practices

Resources

- Equity (One Fairfax) - [GARE Racial Equity Toolkit](#)
- Principles of trauma-informed care - [Principles-of-Trauma-Informed-Care](#)
- Inclusive, affirming and person-first language examples:
 - [Inclusive Language Guide](#)
 - [Trauma-Informed and Hope-Centered Language Checklist](#)
- Readability Tools:
 - Use a readability checker (search online for free versions such as Grammarly or Readable) and/or use Microsoft Word's readability tools to ensure the use of plain language in public facing documents. Seek guidance on plain language at <https://www.plainlanguage.gov/guidelines>

Appendix 2 - Policy in Action

Resources

Safety	Space is set up in a way that promotes safety of the workforce and of those being served. For example, no one has their back to the door in rooms where services are being delivered.
Trustworthiness	<ul style="list-style-type: none">• Clinicians have a stance of curiosity and honesty, describing treatment with sensitivity and transparency, highlighting ways in which it may be helpful and yet challenging.• Confidentiality and its limits are clearly communicated to children, youth and families.• Appointment times are honored, and communication is timely when changes must be made.
Collaboration	<ul style="list-style-type: none">• Clinicians work collaboratively with clients/families and partners to better understand the clients' perspectives on therapy content and gain agreement on goals.• Families are viewed as experts and are included throughout the treatment planning process.
Voice & Choice	<ul style="list-style-type: none">• Clinicians support access to and understanding of resources, programs and services available and serve as collaborative partners.• Professionals work to provide options and choices to ensure all decisions and plans reflect client's and family's values and preferences.
Equity	<ul style="list-style-type: none">• Agencies are inclusive with cultural norms presented at events and programs (e.g., kinds of food and drink served; how youth and family are greeted). Use the process to encourage reflection or gather feedback.• Clients are guaranteed equitable access to telehealth services when applicable and clinically appropriate, regardless of internet connectivity or device availability. Accommodations are in place for clients with limited or no internet access and those with low digital proficiency. Alternative service options (e.g., in-person or phone-based counseling) are available for clients facing digital barriers.• Outreach efforts are culturally sensitive, considering faith-based differences, cultural perceptions and multigenerational preferences, with engagement through various platforms like community events, social media, and websites.
Family Engagement	<ul style="list-style-type: none">• Provide opportunities for meaningful peer support.• Decisions are grounded in child, youth or other client's and their family members' perspectives.