

Screening for ACEs in SBHCs

—
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Learning Objectives

1. Describe barriers and facilitators to implementing ACEs screening and TIC in SBHCs
2. Identify key practices for:
 - ✓ Getting started with ACEs screening
 - ✓ Incorporating youth voice into screening practice
 - ✓ Implement screening within a network of care



Welcome!



Type in chat:

- ✓ *Name*
- ✓ *Agency*
- ✓ *Location*
- ✓ *Role*

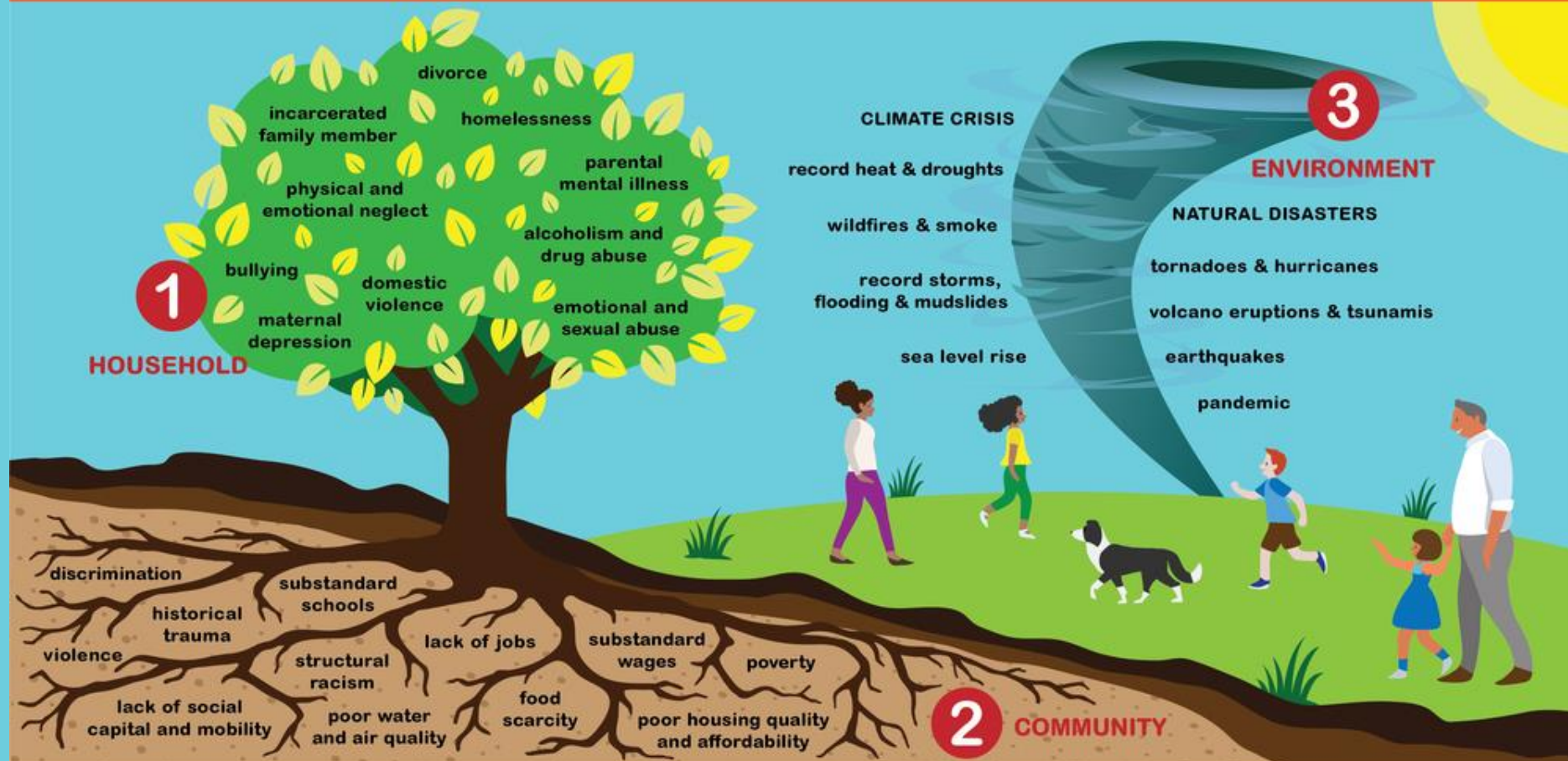




Landscape of ACE Screening through CA's ACEs Aware

3 Realms of ACEs

Adverse childhood and community experiences (ACEs) can occur in the household, the community, or in the environment and cause toxic stress. Left unaddressed, toxic stress from ACEs harms children and families, organizations, systems and communities, and reduces the ability of individuals and entities to respond to stressful events with resiliency. Research has shown that there are many ways to reduce and heal from toxic stress and build healthy, caring communities.



Thanks to [Building Community Resilience Collaborative and Networks](#) and the [International Transformational Resilience Coalition](#) for inspiration and guidance. Please visit [ACEsConnection.com](https://www.acesconnection.com) to learn more about the science of ACEs and join the movement to prevent ACEs, heal trauma and build resilience.



We Know...

- ACEs are **common and frequently** co-occur
- ACEs are associated in a **dose-response fashion** with many leading causes of poor health
- **Inequities exist** along axes of race, ethnicity, class, gender, sexuality, and educational attainment
- **Safe, stable, and nurturing relationships** and environments are protective

The Pandemic's Impact

- Children and families are at increased risk for traumatic stress and loss
- Children and families may have reduced access to services and supports
- Youth-serving orgs facing uncertainties, loss of contact youth/patients, adapting to remote learning/telehealth – burnout
- Pandemic has exacerbated existing health and education inequities – and created new ones



CA's ACEs Aware Initiative

- Aims to reduce ACEs and toxic stress by half in one generation.
- Focuses on prevention education, early identification of ACEs, and treatment of toxic stress through primary care settings.



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CA's ACEs Aware Initiative

- Offers Medi-Cal providers training, screening tools, clinical protocols, and payment for screening children and adults for ACEs.
- Qualified Medi-Cal providers are eligible for a **\$29 payment** for screening patients up to age 65 with full-scope Medi-Cal using a qualified screening tool.



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ACEs Aware Clinical Response

A clinical response should:

- Apply principles of **trauma-informed care**
- **Identify and treat ACE-Associated Health Conditions** by supplementing usual care with **education** on toxic stress and stress regulation strategies
- Validate existing **strengths and protective factors**
- **Refer** to needed patient resources or interventions
- **Follow up** as necessary

Pediatric ACEs and Related Life Events Screener (PEARLS)

TEEN (Self-Report)- To be completed by: Patient

At any point in time since you were born, have you seen or been present when the following experiences happened? Please include past and present experiences.

Please note, some questions have more than one part separated by "OR." If any part of the question is answered "Yes," then the answer to the entire question is "Yes."

PART 1:

1. Have you ever lived with a parent/caregiver who went to jail/prison?
2. Have you ever felt unsupported, unloved and/or unprotected?
3. Have you ever lived with a parent/caregiver who had mental health issues?
(for example, depression, schizophrenia, bipolar disorder, PTSD, or an anxiety disorder)
4. Has a parent/caregiver ever insulted, humiliated, or put you down?
5. Has your biological parent or any caregiver ever had, or currently has a problem with too much alcohol, street drugs or prescription medications use?
6. Have you ever lacked appropriate care by any caregiver?
(for example, not being protected from unsafe situations, or not being cared for when sick or injured even when the resources were available)
7. Have you ever seen or heard a parent/caregiver being screamed at, sworn at, insulted or humiliated by another adult?
Or have you ever seen or heard a parent/caregiver being slapped, kicked, punched beaten up or hurt with a weapon?
8. Has any adult in the household often or very often pushed, grabbed, slapped or thrown something at you?
Or has any adult in the household ever hit you so hard that you had marks or were injured?
Or has any adult in the household ever threatened you or acted in a way that made you afraid that you might be hurt?
9. Have you ever experienced sexual abuse?
(for example, has anyone touched you or asked you to touch that person in a way that was unwanted, or made you feel uncomfortable, or anyone ever attempted or actually had oral, anal, or vaginal sex with you)
10. Have there ever been significant changes in the relationship status of your caregiver(s)?
(for example, a parent/caregiver got a divorce or separated, or a romantic partner moved in or out)

Add up the "yes" answers for this first section:



Please continue to the other side for the rest of questionnaire →

PART 2:

1. Have you ever seen, heard, or been a victim of violence in your neighborhood, community or school?
(for example, targeted bullying, assault or other violent actions, war or terrorism)
2. Have you experienced discrimination?
(for example, being hassled or made to feel inferior or excluded because of their race, ethnicity, gender identity, sexual orientation, religion, learning differences, or disabilities)
3. Have you ever had problems with housing?
(for example, being homeless, not having a stable place to live, moved more than two times in a six-month period, faced eviction or foreclosure, or had to live with multiple families or family members)
4. Have you ever worried that you did not have enough food to eat or that food would run out before you or your parent/caregiver could buy more?
5. Have you ever been separated from your parent or caregiver due to foster care, or immigration?
6. Have you ever lived with a parent/caregiver who had a serious physical illness or disability?
7. Have you ever lived with a parent or caregiver who died?
8. Have you ever been detained, arrested or incarcerated?
9. Have you ever experienced verbal or physical abuse or threats from a romantic partners?
(for example, a boyfriend or girlfriend)

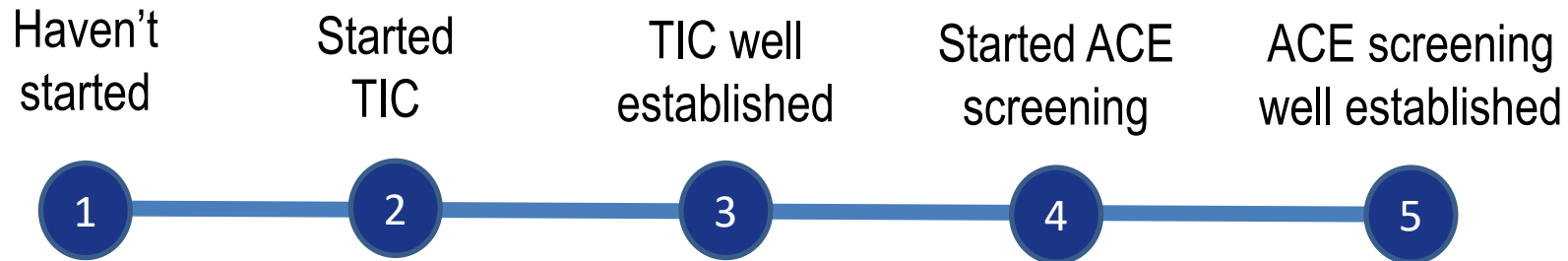
Add up the "yes" answers for the second section:

PEARL Screener Adolescent Self-Report, de-identified

<https://www.acesaware.org/wp-content/uploads/2019/12/PEARLS-Tool-Teen-Self-Report-De-Identified-English.pdf>

Where is your organization in this journey?

Where is your organization in your journey towards implementing trauma-informed care and ACE screening? Type number(s) in the chat.



Why focus on SBHCs?

- Coordinate care for medically underserved youth
- Employ multidisciplinary health professionals
- Provide high-quality, convenient, culturally responsive and youth-friendly care
- Eliminate many structural barriers to service use
- Enable universal prevention education within a network of care



Project Goals & Activities

Goals

- Identify barriers and facilitators to implementing ACEs screening in SBHC settings
- Generate practice & research recommendations

the **etr** blog

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Adverse Childhood Experiences: Engaging School-Based Health Centers Through ACEs Aware

By Stephanie Guinasso, PhD, MPH | March 9, 2022

Senior Research Associate, ETR

Activities

- Listening sessions
- Virtual PLC
- In-depth interviews
- Comprehensive literature review
- Practice paper





Project Findings – Barriers, Facilitators & Lessons Learned

What are some barriers?



Type in the chat:

- ✓ *Barriers to implementing TIC*
- ✓ *Barriers implementing ACE screening*



Barriers and Facilitators: Trauma-Informed Care

Barriers



- Leadership **buy-in**
- **Time and resources** for staff training and reflection, building and maintaining partnerships, working across systems
- **Ongoing training accessible to all staff**

Facilitators



- **Key champions**
- More **flexible staffing**
- Orientation towards **social justice and youth-centered care**
- **Community health workers**

Barriers and Facilitators: ACE Screening

Barriers



- Lack of **resources and capacity**
- Concerns about **adolescent-friendly, confidential care**
- Concerns about **unintended consequences**
- Lack of **training for clinical providers**
- Issues of **time and paperwork**

Facilitators



- **Key champions**
- **Stakeholder education and feedback**
- SBHCs are a **trusted source of care**
- **Integrated behavioral health care**
- **Positive patient response**



“I worry that it will negatively impact the relationships they have with their patients who are already so vulnerable and already don’t have a lot of adults that they trust.... We’re working so hard to get adolescents into medical care. We don’t want them to come one time, get an ACE screen and then not come back.”

~SBHC Behavioral Health Provider



"I'm able to create these dialogues and these conversations with young people that revolve around them and things they've experienced. It has created really meaningful relationships within the clinic itself."

~SBHC Medical Social Worker

Barriers and Facilitators: Care Coordination

Barriers



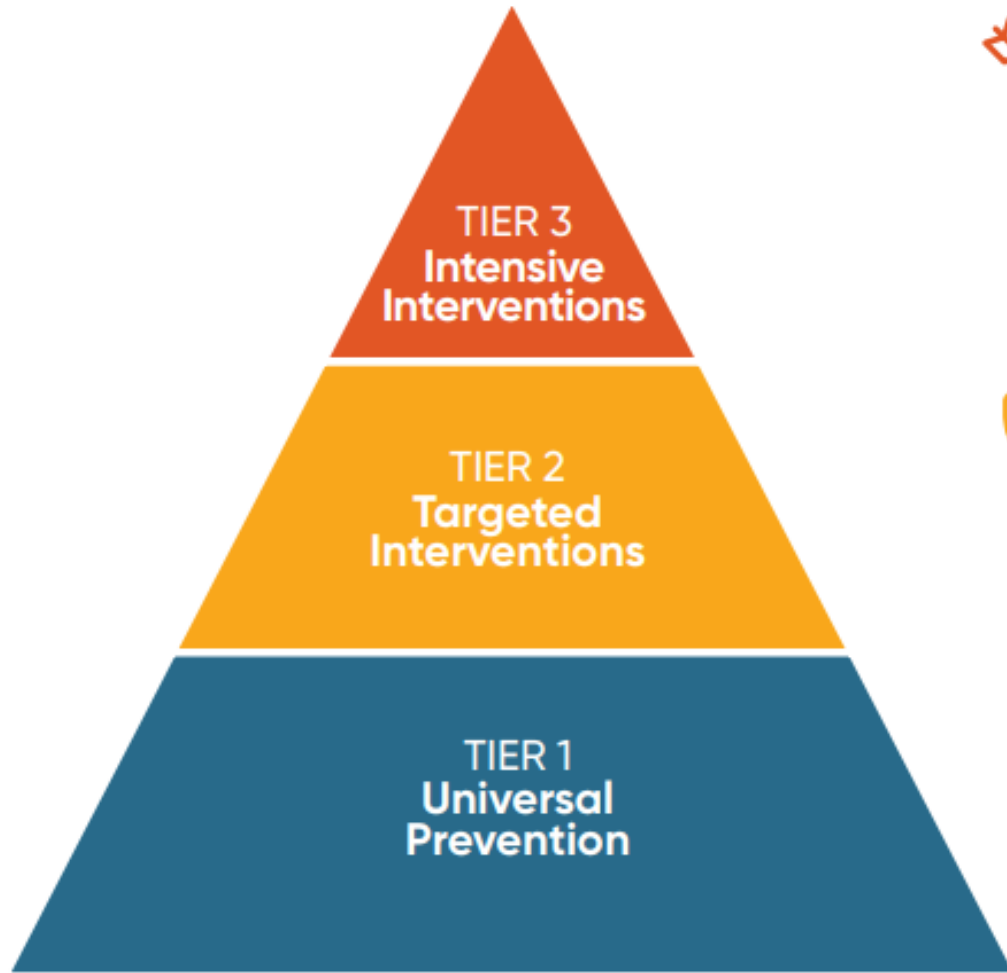
- Lack of mental health providers
- Data sharing restrictions

Facilitators



- Integrated care models
- Good working relationships

Figure 1. Strategies for Addressing Toxic Stress Through Multi-Tiered Systems of Support in Schools



Tier 3 – Intensive Interventions

- Provide intensive individual, group, and family services
- Offer crisis support for school staff



Tier 2 – Targeted Interventions

- Support individual students at risk for higher toxic stress responses
- Counsel educators to address specific student needs
- Facilitate student support groups
- Participate in Coordination of Services Teams



Tier 1 – Universal Prevention

- Educate students and caregivers on ACEs, toxic stress, and SBHC services
- Provide professional development for school staff

Key Learnings

- Begin with an organizational culture of **trauma-informed care**
- **Many perceived barriers** to ACE screening
- **Engage stakeholders** early and often
- SBHCs a **trusted source of care**; screening **deepened clinical relationships**
- Investments in **collaborative care models and mental health providers** are essential
- SBHCs can offer **universal education and interventions** for entire school communities
- **Learning communities** fill an important gap in the absence of evidence-based practices

Reflections

-
- ✓ *What is one thing from the research supports what you already know?*
- ✓ *What is something new you learned?*





Key Practices and Recommendations

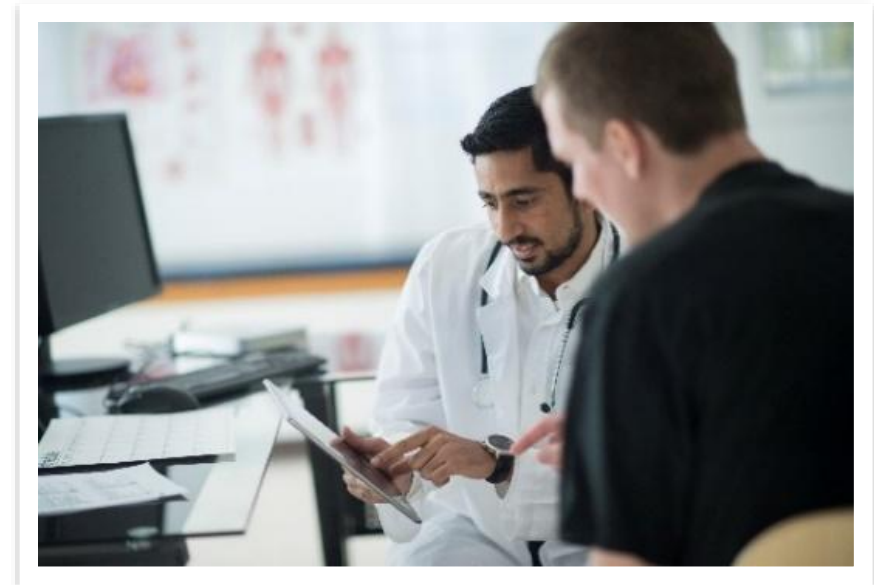
Universal Education

Additional Adversities are Risk Factors for Toxic Stress

- “Social determinants of health are conditions in the environments in which people live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. The social determinants of health are: education, employment, health systems and services, housing, income and wealth, the physical environment, public safety, the social environment (including structures, institutions, and policies), and transportation.”*
- While validated odds ratios are available in large, population-based studies using the 10 standardized ACE criteria, the strengths of association between other experiences/social determinants of health and health outcomes have not been similarly standardized.

Universal Education = Equity in Health = Harm Reduction

Provides an opportunity for patients/clients to make the connection between violence, health problems, and risk behaviors.



**This is something to consider as a precursor to ACE/PEARLS Screening to promote health equity, and trust.*

Other Universal Education Strategies to Complement Provider Interaction

- Make resources and information available for patients to pick up on their own (waiting room, exam room, restrooms, etc).
- Hang posters, create a bulletin board or other display about healthy relationships and support services for those experiencing relationship abuse, child maltreatment and other traumas and toxic stresses.
- Have workshops for students on “Stress Busters” and how to cope with stress
- Include messaging on all tip sheets/educational materials:

“Sometimes difficult things that happened to us in the past can make [asthma, healthy eating and activity, quitting smoking, etc] more challenging or harder to manage. Let us know. We can help.”

Choosing De-Identified vs Identified ACEs

Pediatric ACEs and Related Life Events Screener (PEARLS)
 TEEN (Parent/Caregiver Report) - To be completed by: **Caregiver**

At any point in time since your child was born, has your child seen or been present when the following experiences happened? Please include past and present experiences.

Please note, some questions have more than one part separated by "OR." If any part of the question is answered "Yes," then the answer to the entire question is "Yes."

PART 1:

- Has your child ever lived with a parent/caregiver who went to jail/prison?
- Do you think your child ever felt unsupported, unloved and/or unprotected?
- Has your child ever lived with a parent/caregiver who had mental health issues?
(for example, depression, schizophrenia, bipolar disorder, PTSD, or an anxiety disorder)
- Has a parent/caregiver ever insulted, humiliated, or put down your child?
- Has the child's biological parent or any caregiver ever had, or currently has a problem with too much alcohol, street drugs or prescription medications use?
- Has your child ever lacked appropriate care by any caregiver?
(for example, not being protected from unsafe situations, or not cared for when sick or injured even when the resources were available)
- Has your child ever seen or heard a parent/caregiver being screamed at, sworn at, insulted or humiliated by another adult?
OR has your child ever seen or heard a parent/caregiver being slapped, kicked, punched beaten up or hurt with a weapon?
- Has any adult in the household often or very often pushed, grabbed, slapped or thrown something at your child?
OR has any adult in the household ever hit your child so hard that your child had marks or was injured?
OR has any adult in the household ever threatened your child or acted in a way that made your child afraid that they might be hurt?
- Has your child ever experienced sexual abuse?
(for example, anyone touched your child or asked your child to touch that person in a way that was unwanted, or made your child feel uncomfortable, or anyone ever attempted or actually had oral, anal, or vaginal sex with your child)
- Have there ever been significant changes in the relationship status of the child's caregiver(s)?
(for example, a parent/caregiver got a divorce or separated, or a romantic partner moved in or out)

Add up the "yes" answers for this first section:

Please continue to the other side for the rest of questionnaire →

This tool was created in partnership with UCSF School of Medicine. Teen (Parent/Caregiver Report) - De-identified

Pediatric ACEs and Related Life Events Screener (PEARLS)
 TEEN (Self-Report)- To be completed by: **Patient**

At any point in time since you were born, have you seen or been present when the following experiences happened? Please include past and present experiences.

Please note, some questions have more than one part separated by "OR." If any part of the question is answered "Yes," then the answer to the entire question is "Yes."

PART 1: Please check "Yes" where apply.

- Have you ever lived with a parent/caregiver who went to jail/prison?
- Have you ever felt unsupported, unloved and/or unprotected?
- Have you ever lived with a parent/caregiver who had mental health issues?
(for example, depression, schizophrenia, bipolar disorder, PTSD, or an anxiety disorder)
- Has a parent/caregiver ever insulted, humiliated, or put you down?
- Has your biological parent or any caregiver ever had, or currently has a problem with too much alcohol, street drugs or prescription medications use?
- Have you ever lacked appropriate care by any caregiver?
(for example, not being protected from unsafe situations, or not being cared for when sick or injured even when the resources were available)
- Have you ever seen or heard a parent/caregiver being screamed at, sworn at, insulted or humiliated by another adult?
OR have you ever seen or heard a parent/caregiver being slapped, kicked, punched beaten up or hurt with a weapon?
- Has any adult in the household often or very often pushed, grabbed, slapped or thrown something at you?
OR has any adult in the household ever hit you so hard that you had marks or were injured?
OR has any adult in the household ever threatened you or acted in a way that made you afraid that you might be hurt?
- Have you ever experienced sexual abuse?
(for example, has anyone touched you or asked you to touch that person in a way that was unwanted, or made you feel uncomfortable, or anyone ever attempted or actually had oral, anal, or vaginal sex with you)
- Have there ever been significant changes in the relationship status of your caregiver(s)?
(for example, a parent/caregiver got a divorce or separated, or a romantic partner moved in or out)

How many "Yes" did you answer in Part 1?:

Please continue to the other side for the rest of questionnaire →

This tool was created in partnership with UCSF School of Medicine. Teen (Self-Report) - Identified

Foundations for Screening

Clinical Practices to Reduce Environmental Stressors

- Having **warm hand offs** to other professions available, making phone calls with clients, etc.
- Meaningful connections between PCP and other Service Providers
- Sending **text reminders** about appointments
- Relieve key stressors in teen's lives by supporting **basic needs**
 - SBHCs offering backpacks of food for families
 - Immigration Clinics
 - Transportation Support
 - Community Health Workers
 - Training youth to lead/participate in peer support networks

Trauma-Informed Approaches to Intervention

- It is recommended that adolescents beginning between ages 11 and 14 **spend time alone with their health care providers.**
- **Develops trust**, facilitating sensitive disclosures and discussions in future visits
- **Motivational Interviewing** to elicit intrinsic motivations and **being clear about confidentiality and limits** have shown to help adolescents feel more comfortable disclosing sensitive information

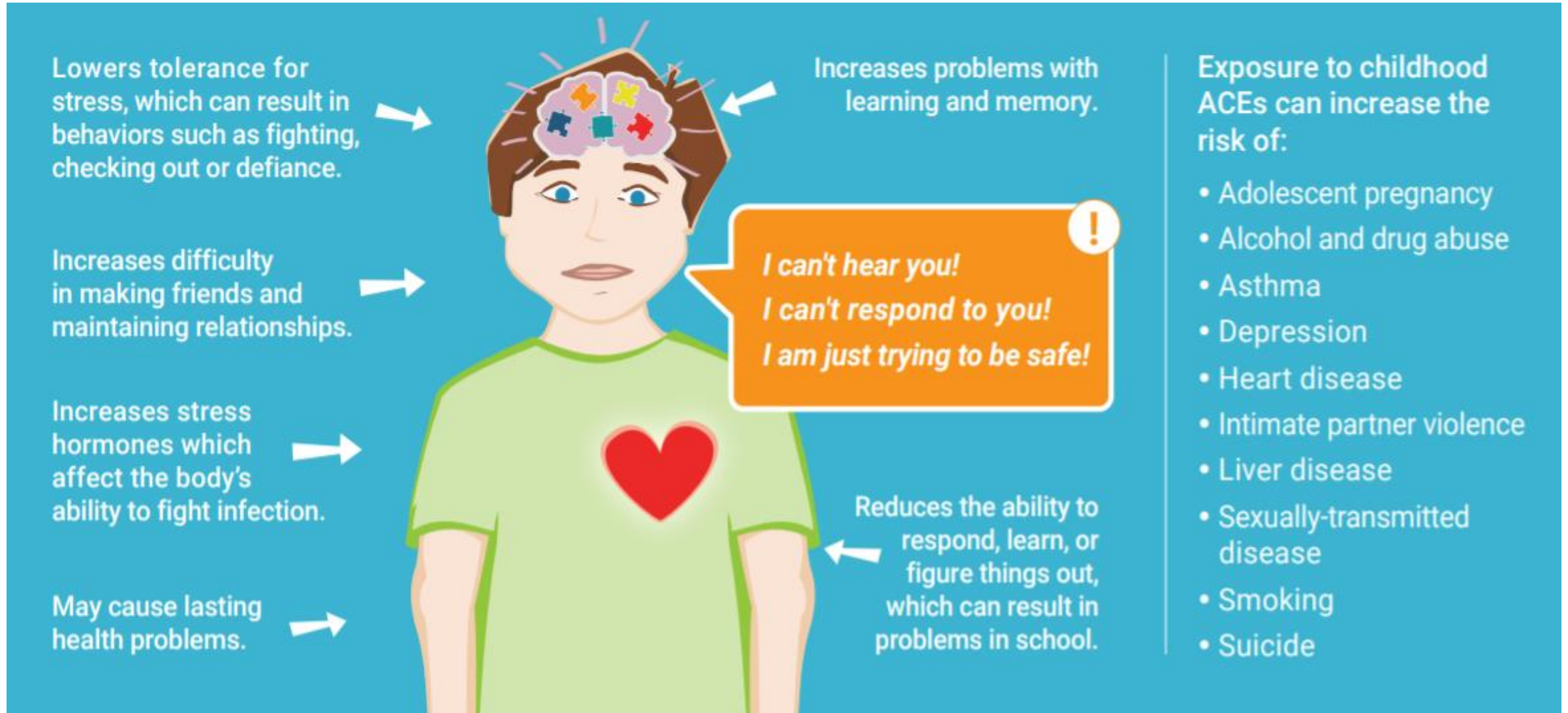
Voices of Teens About ACES Screening

Preliminary Results from Teen Focus Groups (2021):

- Recommend de-identified screening
- Mixed reviews on questionnaire - “too strong” vs. “like that it’s so clear with examples”
- Explain purpose of screener and open a conversation related to screening - not always happening in their experiences
- Explore and strengthen peer supports
- For providers: Show genuine interest, develop comfort with asking questions & receiving any answer
- Going beyond the questionnaire to make a personal connection with youth

Examples

Screening as Universal Education



Letter Example

Dear Parent or Caregiver,

At your child's visits, we often ask you to complete a few questionnaires before meeting with your provider.

Why do we ask these questions?

While we're the experts in children's health, you are the expert on your child. Your child's daily experiences affect their health. We want to make sure your child receives the best quality care, both physically and emotionally, and answering these questions gives your provider a clue on what is going well with your child and where you and your child may want some more support.

We're here to help.

We know answering these questions may be hard, so these questions are optional. Or you may choose to fill it out later and return it to our clinic. All your answers will be kept confidential. On page 2 is a list of resources that may help support your child and family. Feel free to keep this cover sheet as a reference.

Your provider will review your answers to the questionnaire and may discuss available resources for support. Feel free to ask questions. We're here to help if you want us to.

Thank you,

LifeLong Medical Care – School Based Health Centers

Stress Buster Workshop

Quality Sleep:

Students talked about ways to get quality sleep and created room sprays with essential oils that support sleep



Stress Buster Workshop

Experiencing Nature:

In a wooded area, students planted their own cutting and got their hands in the dirt.



Stress Buster Workshop

Balanced Nutrition:
Students discussed
balanced nutrition and
created their own water
bottles filled with
flavorings such as mint
and watermelon.



Stress Buster Workshop

Mental Health:

Students were led through a screener to identify resilience factors and feelings identification in the body.



Buffering Supports

School Examples

- Mentoring
- Physical Exercise
- Mindfulness in Classrooms
- Education & Promotion of Balanced Nutrition

Medical Provider Examples

- Promotion of Healthy Relationships
- Nutritional Strategies
- Sleep Hygiene
- Education on toxic stress and mitigation

Behavioral Health Examples

- Mindfulness
- Therapy addressing trauma
- Peer Support Services
- Crisis counseling and Suicide Prevention

What are your key take-aways?



Type in the chat:

- ✓ *One insight or aha*
- ✓ *One action you will take*



questions?





REGISTRATION NOW OPEN!

EARLY BIRD PRICING THROUGH JULY 15TH

REGISTER TODAY

etr.org/ythlive

 GLOBAL VIRTUAL CONFERENCE

 OCTOBER 12-13

PRESENTED BY **etr.**

thank you.

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