## Adverse Childhood Experiences Screening and Trauma-Informed Care in Pediatrics

Odeli M. Burgueño, RN, BSN, DNP Student<sup>1</sup> Salem Dehom, PhD, MPH<sup>1</sup>

#### Loma Linda University School of Nursing<sup>1</sup> Inscriptions Children's Clinic, Wildomar, CA<sup>2</sup>

#### PURPOSE

- Implement primary, secondary, & tertiary prevention measures for ACEs & toxic stress, including training for healthcare providers, for English- and Spanish-speaking patients
- Mitigate ACEs-Associated Health Conditions (AAHCs) by screening for the triad of adversity
- Promote a trauma-informed culture of care in a Southern California pediatric primary care clinic

## BACKGROUND

- 1 out of 6 adults has experienced ≥4 ACEs
- Trauma-informed risk assessments & provider-guided action planning during well child visits can prevent lifelong negative health outcomes
- Since 2020, Providers are Required to be ACEs Aware Trained in CA for Screening and Billing

#### ACE-Associated Health Conditions: Pediatrics

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			ACEs Aware, 2020

## METHODS

- Readiness Assessment of Providers: Becoming ACEs Aware in California Training certified
- EMR Smart Phrase ".aces" & Patient Handout
- Pediatric ACEs and Related Life Events Screener (PEARLS) & Trauma-Informed Care Algorithm
- Pre- & Post-Education Surveys
- Providers used ACEs Aware: ACE Screening Clinical Workflow, ACEs and Toxic Stress Risk Assessment Algorithm, & AAHCs for Pediatrics
- Interim data analysis demonstrated need for 2<sup>nd</sup> education session: Case Study & Revision to EMR Smart Phrase ".aces2"
- Post-Training Assessment will be conducted
  www.PosterPresentations.com

# ACEs have been linked to 9/10 leading causes of death in California 61.7% of Adults ≥ 1 ACE

## Strategies to Regulate the Stress Response



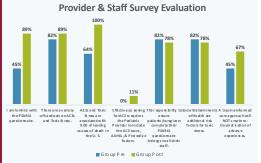
## Take a picture for more info

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## **RESULTS**

- Step 1. Pre-Evaluation
  - 2/5 Providers ACEs Aware in CA Trained
  - 8- weeks Baseline Data Gathered
- CA Screening Policy Reviewed CEU Incentive Offered
- Step 2. Interim Evaluation
  - ACEs Implementation Knowledge and Practice Gap
- Step 3. Post-Evaluation
- 100% Policy Compliant with ACEs Aware Training
- Documentation Compliance Assessment: In progress
  Provider/Staff Project Evaluation: 100% feel more
   acuipand to amount or refer families & 00% want to
- equipped to empower or refer families & 90% want to continue to build a culture of trauma-informed care



## **CONCLUSION**

- ACEs screening clinical workflow implementation requires more than a one-time training session
- · Important to link knowledge and practice
- Engage clinic administration, including biller, in implementation process

## **FUTURE DIRECTIONS**

- ACEs Aware trained Medi-Cal providers in primary care are offered reimbursement from the state of CA for annual screenings for the triad of adversity to mitigate the intergenerational transmission of adversity
- Promote a trauma-informed culture of care in all pediatric and adult care settings

## REFERENCES



## ACKNOWLEDGEMENTS

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