Adverse Childhood Experiences Screening and Trauma-Informed Care in Pediatrics

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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

Symptom or Health Condition	For ≥ X ACEs (compared to 0)	Odds Ratio
Asthma[31,32]	4	1.7 - 2.8
Allergies[32]	4	2.5
Dermatitis and eczema[33]	3*	2.0
Urticaria[34]	3*	2.2
Increased incidence of chronic disease, impaired management[35]	3	2.3
Any unexplained somatic symptoms[25] (eg, nausea/vomiting, dizziness, constipation, headaches)	3	9.3
Headaches[36]	4	3.0
Enuresis; encopresis[5]	–	–
Overweight and obesity[9]	4	2.0
Failure to thrive; poor growth; psychosocial dwarfism[1,1-4]	–	–
Poor dental health[6, 22]	4	2.8
Increased infections[5] (viral, URIs, LRTIs and pneumonia, AOM, UTIs, conjunctivitis, intestinal)	3*	1.4 - 2.4
Later menarche[41] (≥ 14 years)	2*	2.3
Sleep disturbances[6,37]	5**	PR 3.1
Developmental delay[38]	3	1.9
Learning and/or behavior problems[3]	4	32.6
Repeating a grade[25]	4	2.8
Not completing homework[25]	4	4.0
High school absenteeism[37]	4	7.2
Graduating from high school[24]	4	0.4
Aggression; physical fighting[39]	For each additional ACE	1.9
Depression[40]	4	3.9
ADHD[42]	4	5.0
Any of: ADHD, depression, anxiety, conduct/behavior disorder[30]	3	4.5
Suicidal ideation[30]		1.9
Suicide attempts[30]	For each additional ACE	1.9 - 2.1
Self-harm[23]		1.8
First use of alcohol at < 14 years[1]	4	6.2
First use of illicit drugs at < 14 years[1]	5	9.1
Early sexual debut[1] (<15-17 y)	4	3.7
Teenage pregnancy[1]	4	4.2

*Odds ratio represents at least one ACE, but also includes other adversities
**Prevalence ratio represents at least one ACE, but also includes other adversities

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 2nd education session: Case Study & Revision to EMR Smart Phrase ".aces2"
- Post-Training Assessment will be conducted

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

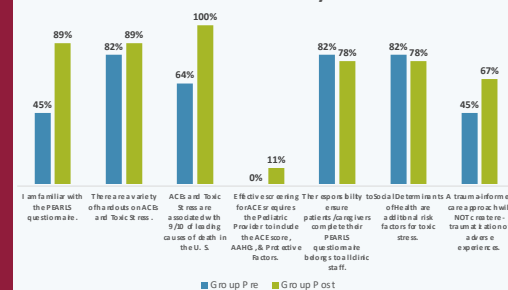Bhushan et al., 2020

Take a picture for more info

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 equipped to empower or refer families & 90% want to continue to build a culture of trauma-informed care

Provider & Staff Survey Evaluation

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

See QR Code Abstract