

# Addressing Adverse Childhood Experiences in MIHP: ACEs Prevention POC2 Pilot Project Updates

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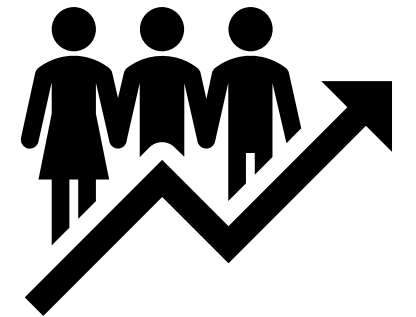
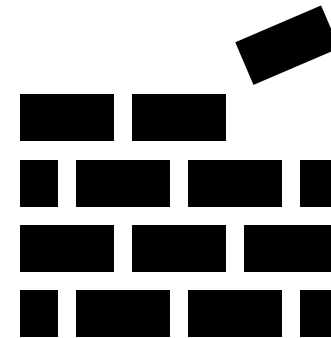
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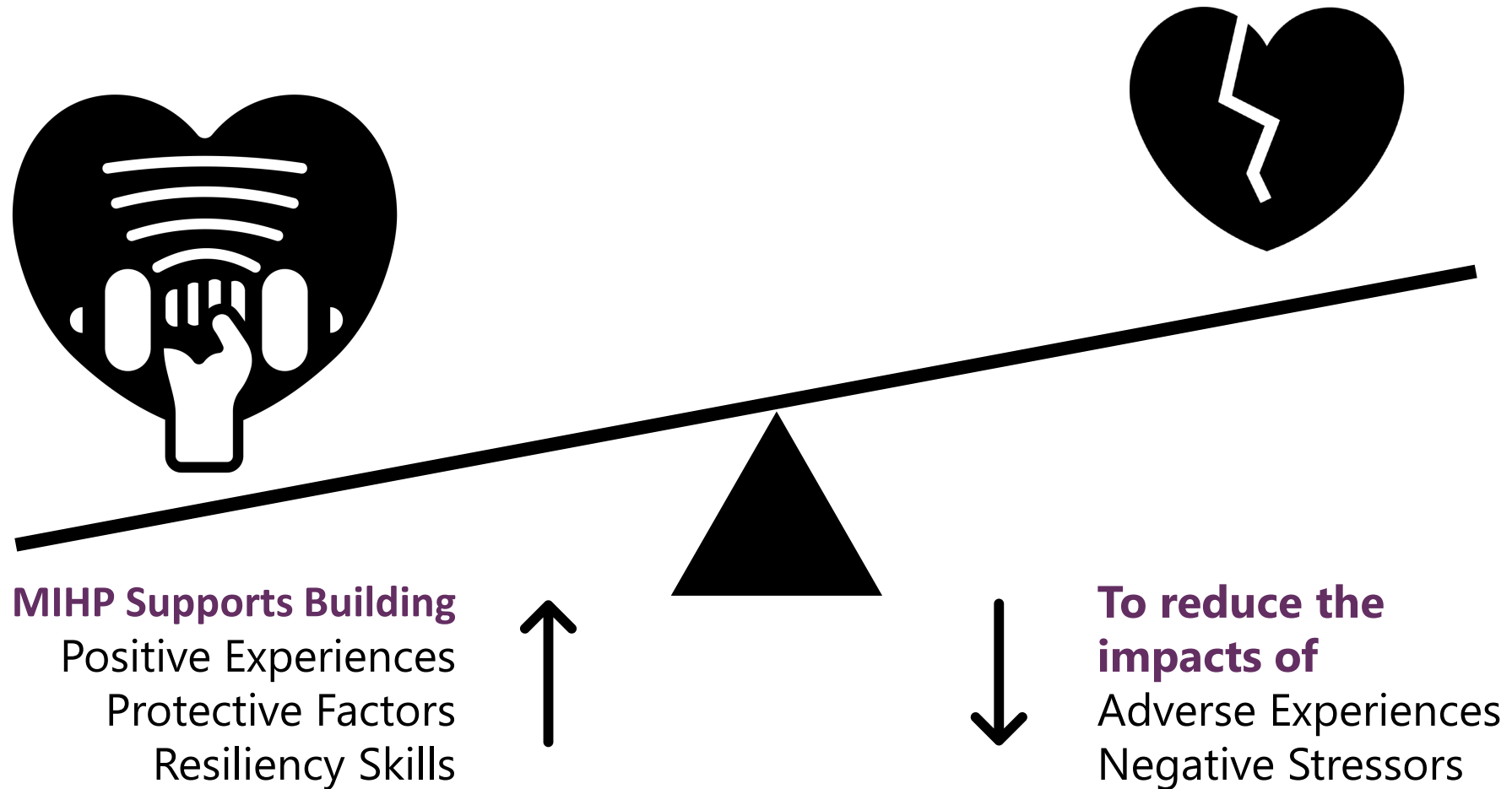
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# Preventing Adverse Childhood Experiences: Data to Action Grant

- **Build** a state-level surveillance infrastructure that ensures the capacity to collect, analyze, and use ACE data to inform statewide ACE prevention activities
- **Support** the implementation of data-driven, comprehensive, evidence-based ACE primary prevention strategies in alignment with Michigan's Statewide Action Plan to address ACEs



# Home Visitors are Key Partners in Ensuring a Strong Start for Children



# Special Thanks to Our Pilot Sites

- American Indian Health and Family Services
- Caring and Sharing Family Life Services
- Grand Traverse Health Department
- Kent County Health Department
- Marquette County Health Department
- MOST MIHP
- Ottawa MIHP
- St. Clair Health Department
- Tuscola County Health Department



# Adverse Childhood Experiences Prevention Plan of Care 2 Pilot

<b>ASSESS</b>	for ACEs risk using the Decision Guide
<b>IMPLEMENT</b>	ACEs Prevention POC2 with at-risk families
<b>TRACK</b>	assessment and implementation
<b>REPORT</b>	data to MPHI each month and attend TA calls

# ACEs Prevention POC2 Resources

## Decision Guide for ACEs Prevention POC2 Which Families Should Receive the Program?

Family Name \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### START HERE

1

Count the number of moderate or high-risk domains from this list on the **Maternal Risk Identifier** for pregnancy visits or **Infant Risk Identifier** for infant visits. These domains are related to some of the known ACEs.

Risk Identifier completed		Moderate or High Risk write '1'
1 Abuse/Violence		
2 Alcohol		
(choose <u>one</u> ) <input type="checkbox"/> Maternal <input type="checkbox"/> Infant		
3 Housing		
4 (Family and) Social Support		
5 Stress/ Depression		
6 Drug Use		
7 Add lines 1-6. This is the Total # of ACEs-related Risks.		<input type="text" value="▲"/>

2

Not all ACEs are collected on the Risk Identifier screeners. You can consider other risk factors identified during visits when deciding whether to offer the ACEs Prevention POC2. These are things that might come up as a natural part of relationship building with families. If they do, feel free to note them and consider if the ACEs Prevention POC2 makes sense for a family. **You do not need to ask about these things, and you should not make assumptions about whether these exist.** Only include them if they come up naturally in conversation. **They can be current experiences or something parents experienced during their own childhoods.**

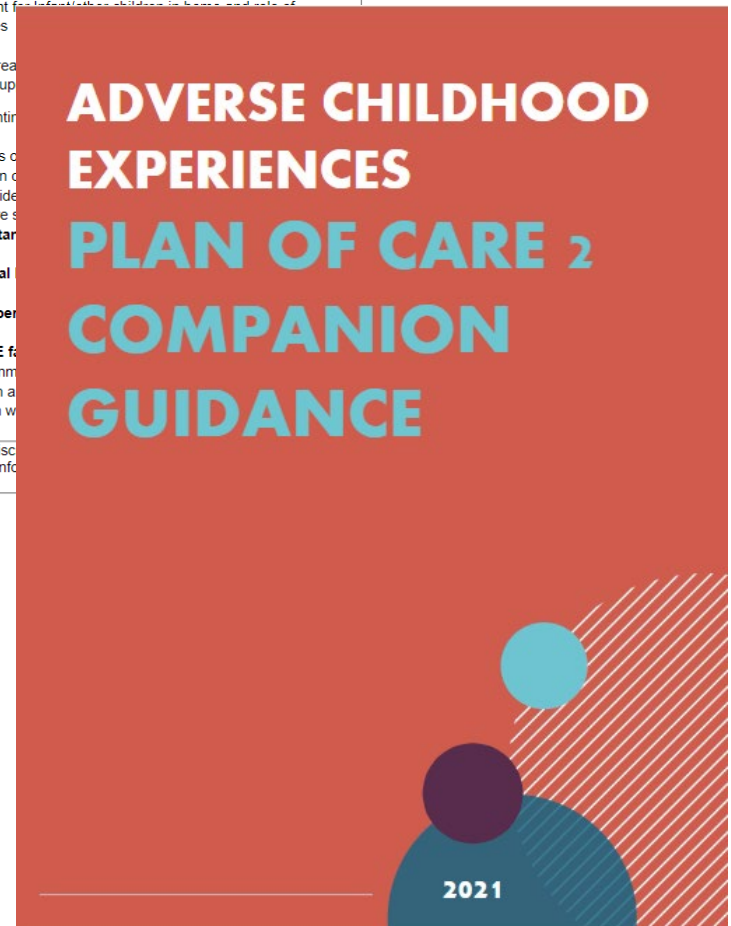
Other Risk Factors discovered through home visits		Identified as Family Experience write '1'
8 Family Member Incarcerated		
9 Physical or Emotional Neglect		
10 Environmental Substance Exposures		
11 Experience with Racism and/or Historical Trauma		
12 Death of Caregiver		
13 Living with a Family Member with Mental Illness		
14 Mass Impact Event (such as COVID, war, natural disaster)		
15 Add lines 8-14. This is the Total Other Risk Factors.		<input type="text" value="■"/>
16 Add boxes on line 7 and line 15. This is the Total All Risk Factors.		<input type="text" value="▲"/>

Continue to Page 2 →

## MATERNAL PLAN OF CARE-PART 2-ACES PREVENTION MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

BENEFICIARY: INTERVENTION LEVEL	INTERVENTIONS
<input type="checkbox"/> <b>LOW</b> Date of Intervention Level Change: / / <ul style="list-style-type: none"> <li>0 ACEs on Risk Indicator</li> <li>AND</li> <li>0 ACEs identified during visits</li> </ul>	<input type="checkbox"/> Refused all interventions  1. Discuss Adverse Childhood Experiences and Positive Childhood Experiences. -Educate on prevalence and awareness of impact on health and parenting -Discuss ACEs in current environment for infant/other children in home and state of -Positive Childhood Experiences -Protective Factors -Refer to appropriate mental health provider or community resource for support
<input type="checkbox"/> <b>MODERATE</b> Date of Intervention Level Change: / / <ul style="list-style-type: none"> <li>1-2 ACEs on Risk Indicator OR</li> <li>1-2 ACEs identified during visits</li> </ul> OR <ul style="list-style-type: none"> <li>1-3 ACEs from all sources</li> </ul>	2. Review and discuss ACEs and Parenting beneficiary. 3. Review and discuss 4 Building Blocks of 4. Discuss protective factors in reduction of the approved tools in Companion Guide 5. Discuss stress reduction and self-care s 6. If applicable, discuss impact of <b>substan</b> refer to local resources. 7. If applicable, discuss impact of <b>mental</b> to local resources. 8. If applicable, discuss impact of <b>interper</b> home, refer to local resources. 9. If applicable, discuss <b>additional ACE</b> f physical or emotional neglect, environm trauma, death of caregiver, living with a events (e.g., COVID, experience with w
<input type="checkbox"/> <b>HIGH</b> Date of Intervention Level Change: / / <ul style="list-style-type: none"> <li>3 or more ACEs on Risk Indicator</li> <li>OR</li> <li>3 or more ACEs identified during visits</li> </ul> OR <ul style="list-style-type: none"> <li>4 or more ACEs from all sources</li> </ul>	

The Michigan Department of Health and Human Services (MDHHS) does not discriminate on the basis of race, religion, age, national origin, color, height, weight, marital status, genetic information, expression, political beliefs or disability.



# ACEs and Parenting

Attachment C: Parenting to Prevent and Heal ACEs (Available in English, Spanish, and Dari)

## Starting the Conversation

“

“We know strong relationships are very important for raising healthy children and we now know that some things can get in the way of strong relationships.”

“

“From what you have shared before, I see that there are some tough things that have happened in the past to you. What would you like to see be different for your baby?”

“

“I appreciate how hard it is to think about these difficult experiences. How do you think these experiences affect your parenting now?”

“

“How do you want it to be different for your child?”

## KEY POINTS

1

ACEs can impact our parenting without us knowing

2

Caregivers want better things for their own children

3

ACEs history can build resilience in caregivers

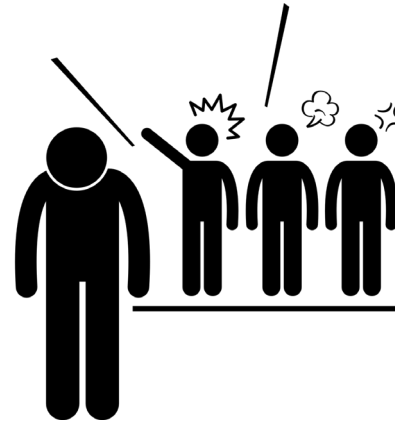
# Special Issues Addressed

Foster Caregivers and other out-of-home placements

Self-care for home visitors while talking about ACEs

Racism and historical trauma as an ACE

Mass impact events as an ACE

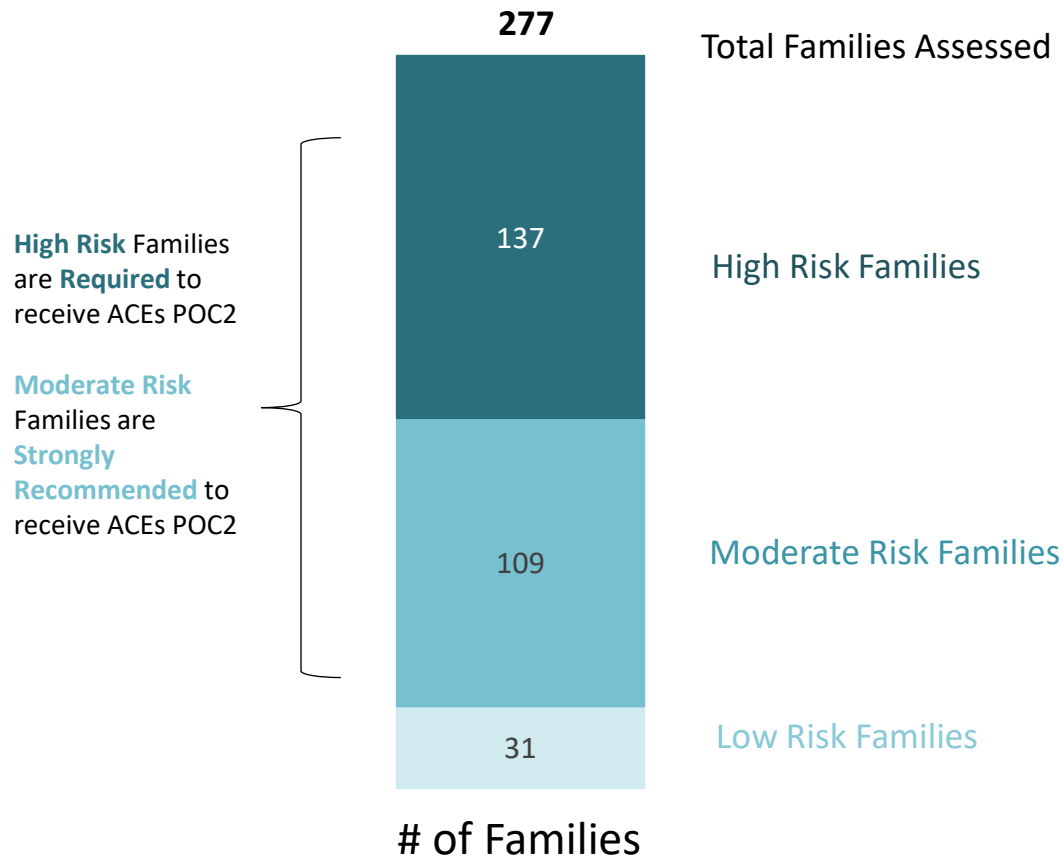




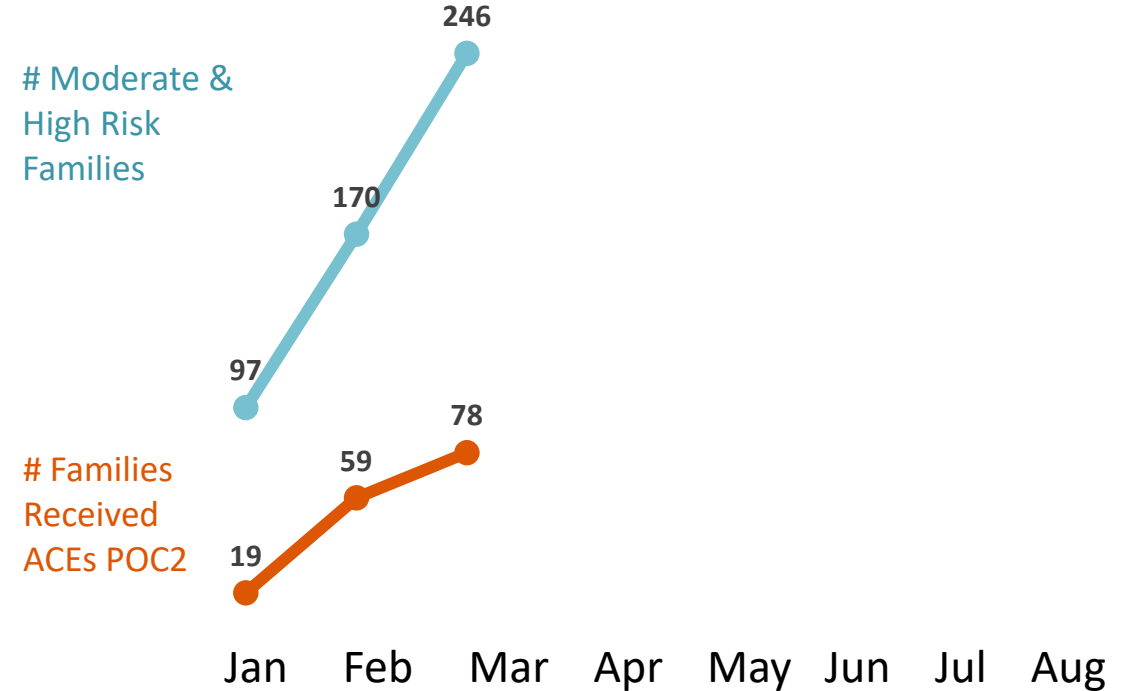
# ACEs Prevention POC2 Pilot

Collective Site Summary-March 2022

**Most families screened are recommended for the ACEs Prevention POC2 (cumulative data)**



**32% of families at Moderate & High Risk of ACEs have received ACEs Prevention POC2 (cumulative data)**



# Opportunities

- A new frame for hard experiences and current challenges
- ACEs Prevention POC2 has strengths-based, conversational approach
- Working with a whole family to interrupt inter-generational cycles
- Opportunity for parents to understand themselves and each other better



# Challenges

- Screening: No full ACEs screening and no protective factors screening
- Assessing and talking with multiple family members
- Need more time for ACEs conversations
- Impact on home visitors to learn about and have conversations around these new topics



# MOST MIHP

- About our agency
- Serve Southeast Michigan
- Families we serve



make the "most" out of life

FOR MORE INFORMATION

[WWW.MICHIGAN.GOV/MIHP](http://WWW.MICHIGAN.GOV/MIHP)

[WWW.MICHIGAN.GOV/MEDICAID](http://WWW.MICHIGAN.GOV/MEDICAID)

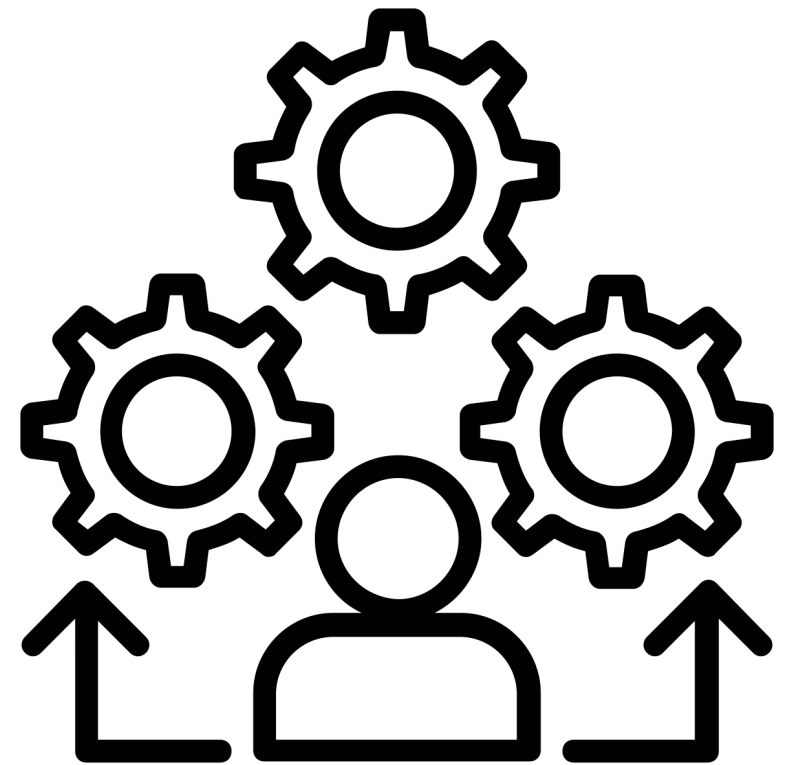
# Program Coordinator Perspective

## Benefits of ACEs Prevention POC2

- Helps families build better relationships with home visitors allowing families to embrace MIHP programs
- ACEs is a deeper dive into care offering families an opportunity to thoroughly engage in their health plan
- ACEs is a more therapeutic approach and personalized care
- The ACEs pilot helped in team building

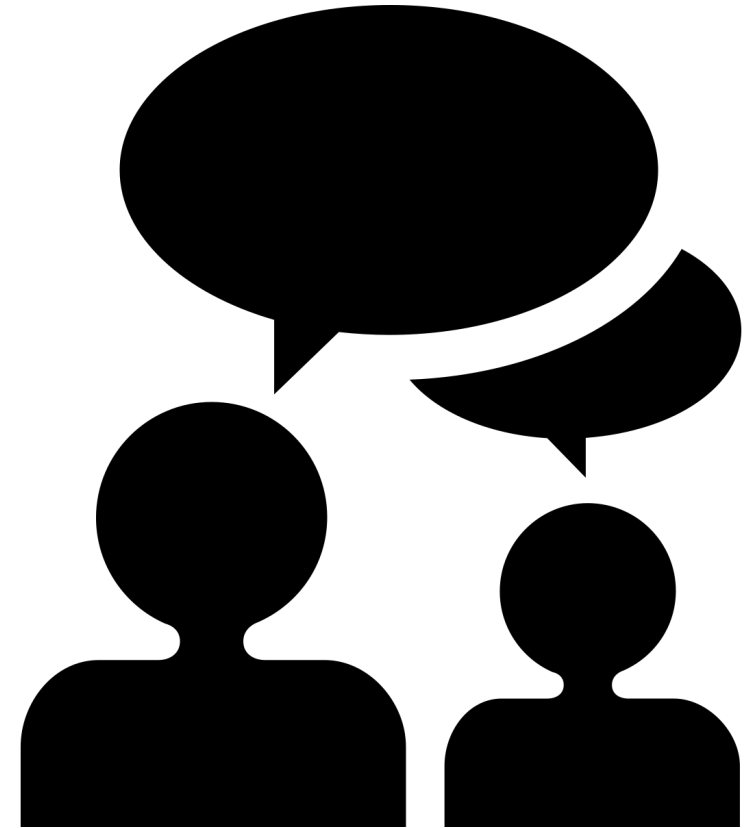
## Challenges

- Maintaining a consistent flow of care due to visit limitations



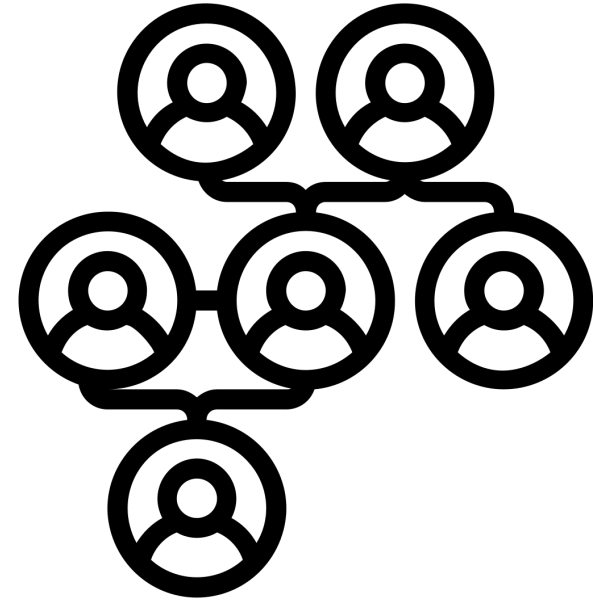
# Benefits to Clinicians

- Conversation starter instead of a traditional “tool”
- Serves as a good starting point for sensitive or tough topics
- Helps build and strengthen the clinician-family relationship because it facilitates a genuine interest in the family’s well-being
- Affords the clinician more time to provide support and resources



# Benefits to Families

- Family system's approach to healing from trauma benefits all children in the household
- Strengths-based approach reaffirms what some families are already doing well and can showcase their existing skills
- The "Parenting to Prevent and Heal" handout has been most beneficial
  - Provides ideas for families who are ready to make a change
  - Reinforces those who are already doing some of the activities
  - Helps families lead by example with family members and friends
- Gives families a starting place to break generational curses due to a family history of trauma



# MOST MIHP Conclusions

ACES Prevention POC2 is an effective way for clinicians to move families through the continuum of good health because good emotional health leads to good physical health.





# Kent County MIHP

- About our Agency
- Serve Western Michigan
- Families we serve



HEALTH  
DEPARTMENT

*Caring today for a healthy tomorrow*

# Reflections on POC2 Materials

- Education for home visitors – ACEs Prevention Companion Guide
  - Deep dive into very specific topics
  - Resilience, attachment, discipline, trauma, emotional regulation, biting...
  - Helpful with or without POC2
- Handouts
  - Easy to read and understand
- Enhances Connection
  - Opportunity for deeper assessment and connection
  - Opening to acknowledge and approach past trauma

**NURTURE & PROTECT KIDS AS MUCH AS POSSIBLE**



Be a source of safety and support.

**MAKE EYE CONTACT**

Look at kids (babies, too). It says, "I see you. I value you. You matter. You're not alone."

**SAY, "SORRY"**

We all lose our patience and make mistakes. Acknowledge it, apologize, and repair relationships. It's up to us to show kids we're responsible for our moods and mistakes.



**MOVE AND PLAY**

Drum. Stretch. Throw a ball. Dance. Move inside or outside for fun, togetherness and to ease stress.

**GIVE 20-SECOND HUGS**

There's a reason we hug when things are hard. Safe touch is healing. Longer hugs are most helpful.



**SLOW DOWN OR STOP**

Rest. Take breaks. Take a walk or a few moments to reset or relax.

**PACES Connection** | WITH SUPPORT FROM  **Family Hui.**  
A Program of Lead4Tomorrow

# Best Timing for ACEs Prevention POC2

- Works better for families who are stable and ready
- Families in crisis are harder—longer process to get to ACEs conversation
  - 1 of the 4 building blocks of Hope (safe equitable, stable environment)
- Possible Process
  - Get over a hurdle
  - Reflect on that as a success
  - Can introduce ACEs POC2 during a period of calm for families
- Hard to ask high risk families to provide something for their children that they don't have themselves
  - Parents need the same ongoing protective factors that we are asking them to provide their children – resources for stability, safety, social connection
  - Dealing with ongoing toxic relationships, domestic violence, homelessness, lack of support, lack of ability to self regulate, mental illness, drug use



# Next Steps

Findings and recommendations from pilot to MIHP Fall 2022

Modification of ACEs Prevention POC2, training, and guidance based upon pilot MIHP site feedback and experience

Training on ACEs prevention POC2 available MIHP wide

Statewide MIHP release May 2023

Full state start date June 2023

Required use June 2024

Thank  
you!

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