

PLAN OF CARE-PART 2-Preventing ACES (PACE)

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

BENEFICIARY:

INTERVENTION LEVEL

INTERVENTIONS

Using Motivational Interviewing, complete the following brief interventions.

- Opportunity for Care
- Priority for Care

- Date of Intervention:

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- Infant is currently exposed to/at risk of ACES.

- Trauma history or more recent experience revealed during course of services.

- Refused all interventions.

- 1. Complete Childhood Experiences Worksheet (ChEW) with caregiver(s) to explore past ACES that may be impacting the family and which positive supports are present for the infant.

- 2. Discuss Adverse Childhood Experiences and Positive Childhood Experiences with handout *Understanding ACES*.
 - Educate on prevalence and awareness of impact on health and parenting
 - Discuss ACES in current environment for infant/other children in home and role of
 - Positive Childhood Experiences
 - Protective Factors
 - Refer to appropriate mental health treatment provider, infant mental health service provider or community resource for support.

- 3. Review and discuss *Parenting to Prevent and Heal ACES* handout with caregiver.
- 4. Review and discuss *4 Building Blocks of HOPE* with caregiver.
- 5. Discuss how to recognize protective factors in order to reduce ACE impact for children utilizing one or more of the tools in PACE POC2 Companion Guide.
- 6. Discuss stress reduction and self-care strategies with caregiver.
- 7. Discuss impact of **substance misuse** in context of infant/child ACE in home, refer to local resources.
- 8. Discuss impact of **mental health** in context of infant/child ACE in home, refer to local resources.
- 9. Discuss impact of **interpersonal violence** (physical, sexual, psychological/emotional, coercion) in context of infant/child ACE in home, refer to local resources.
- 10. Discuss **additional ACE factors**: family member incarcerated; refugee or immigration experience; history of physical or emotional neglect; environmental substance exposures; racism and/or historical trauma; death, divorce, or separation of caregivers; living with a family member with mental illness; mass impact events (e.g., COVID, experience with war, natural disaster).
- 11. Refer caregiver(s) to applicable community resources and supports.

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