

TRAUMA-INFORMED NETWORKS OF CARE PLANNING GRANT REPORT

Sutter County Children and Families Commission

May 2022



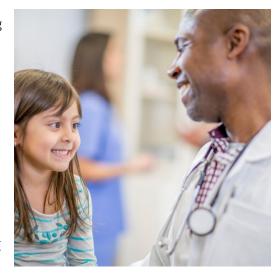
Planning Grant Purpose

During the 2020-2021 fiscal year, Sutter County Children and Families Commission (SCCFC) was one of several counties to receive the ACEs Aware Network of Care grant, issued in December of 2020 by the Department of Health Care Services in partnership with the Office of the California Surgeon General.

The ACES Aware initiative aims to prevent adverse childhood experiences (ACEs) by promoting ACE

screening in children and adults, improving treatment of ACE-Associated Health Conditions (AAHCs), and preventing the intergenerational transmission of toxic stress. To do this, the Initiative seeks to build a strong and sustainable network of care in local communities in California. The target of this \$45 million grant initiative is to reduce ACEs by half in one generation.

Network of Care grant funds were offered to create and maintain formal connections between "health care providers, social services systems, and community partners to address the referral and response needs of Medi-Cal providers, patients, and families following an ACE screening, and to prevent future trauma and toxic stress, whenever possible.¹"



The statewide ACEs aware initiative coordinator – Aurrera Health Group – created a roadmap² to guide communities in operationalizing their plan. They suggested the following milestones to be accomplished during the initiative's periods of planning and implementation:

| Milestone #1: | Establish a Strong Leadership and Accountability Structure |
|---------------|--|
| Milestone #2: | Connect with Health Care Providers and Other Community Agencies |
| Milestone #3: | Achieve Community and Health Care Integration |
| Milestone #4: | Consider Financing and Technology Needs |
| Milestone #5: | Evaluate and Improve the Strength of the Trauma- Informed Network of Care |

¹ Cited from: https://www.acesaware.org/blog/grant-opportunity-support-trauma-informed-networks-of-care/

 $^{^2\} https://www.acesaware.org/wp-content/uploads/2020/12/Draft-Network-of-Care-Roadmap-Final-12-14-20-For-Public-Comment.pdf$

Planning Grant Activities

SCCFC used the grant funds to start planning and building a Network of Care in the county in order to create a comprehensive approach to screen for ACEs, and to interrupt the toxic stress response in children and adults by providing appropriate referrals to services. Applied Survey Research (ASR) supported local research and implementation.

Using the statewide roadmap, SCCFC created a work plan and began connecting with local agencies to start building relationships and conduct a readiness assessment. The Network of Care that SCCFC has initiated includes two Medi-Cal providers (Peach Tree Health and Feather River Tribal Health), social services (Sutter-Yuba Behavioral Health, Domestic Violence Council & Child Abuse Prevention Council, and Women Shelter) and other community-based organizations (e.g., school district and law enforcement).

In March 2021, some of these agencies completed the ACEs aware assessment tool and met virtually to discuss the state of the network at that point in time. By that time, the participating agencies had already invested resources in making sure that staff members are knowledgeable about the initiative and the science behind Adverse Childhood Experiences and toxic stress, but there were still a few agencies that needed to participate in the certified ACEs Aware Core Training.

Additionally, at the initial assessment, agencies were also aware of the principles and strategies of trauma-informed care but generally, except for one provider (PeachTree Health), had not taken any formal steps to formalize policies and implement these into their practices.

Following the initial assessment, SCCFC's program coordinator spent time connecting and building relationships with the two Medi-Cal health care providers in the county – Peach Tree Health and Feather River Tribal Health. Together with ASR, the program coordinator conducted interviews with representatives of these health care agencies to better understand their clinical protocols, how they train their staff, and what systems they are using to track referrals.

Based on the interviews, it was concluded that a unified referral system might be needed in the county to help NoC partners work cohesively to achieve community and health care integration (see Milestone #4 above). To that end, ASR facilitated presentations with two established referral data systems – FindHelp (formerly 'Aunt Bertha') and Unite Us – so that their representatives can demonstrate the benefits of having such systems in place.

March 2021 Initial Readiness Assessment April 2021 KII with MediCal **Providers** May 2021 Demos of Available Referral Data Systems June 2021 Convene NoC; **Additional ACEs Trainings** July 2021 Survey of NoC Partners August 2021 Community Training: Developing a Trauma Informed Approach September 2021 **End of Grant ACEs Aware Assessment**

Following the demonstrations of referral portals, SCCFC worked with the NoC partners to **identify** additional ACEs Aware training needs and to find a time to convene the NoC partners (in person, given that COVID concerns had somewhat decreased in the summer of 2021). ASR launched a survey to gauge these needs, and all of the partners who responded to the survey (N = 13) expressed interest in having ACEs training to their staff. A third of the respondents (N = 4) attested that none of their staff had been trained, another third (N = 4) mentioned that a few of their staff have been trained, and the rest (N = 4) indicated that most of their staff had been trained. Additionally, only two partners of 11 who responded to the question said that they have policies in place for ACEs screening, and 4 out of 11 said that they routinely assess for ACEs. A few partners who did not have policies in place for ACEs screening explained that they have an informal process and that they perform ACEs screenings, but not on a regular basis:

"The enrollment process for Heathy Sutter Co Home Visiting Program" Includes the 'parent survey' which asks questions about childhood trauma"

"We have a workflow for ACEs screening, but no specific policy and procedures, as it's a standard assessment in Behavioral Health"

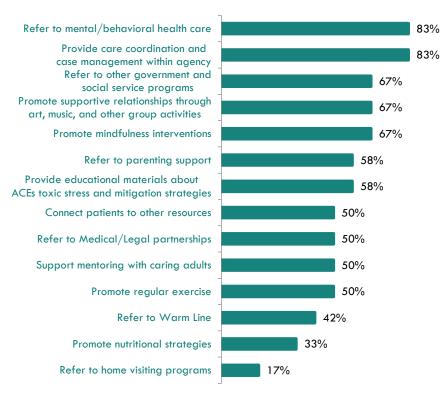
"Our risk and needs assessment also assesses ACEs and completed for every referral (kid)"

"There is a component of intake/screenings that addresses trauma"

As can be seen in the chart at right, many of the partners indicated that they respond appropriately when they identify that someone is subjected to ACEs, with the majority (83%) referring to behavioral health services and/or providing in-agency case management and coordination.

Finally, partners expressed interest in using a shared data portal to send and receive client referrals among the NoC partners, with 42% indicating that they were 'Very interested,' 29% indicating that they were 'Interested,' and 29%

What do you/your staff do when you suspect that someone is experiencing ACEs? (Select all that apply)



indicating that they were 'Somewhat interested.'

The planning grant activities concluded with a **community training** – "Key Principles of Developing a Trauma Informed Approach" with Becky Haas – and a **final readiness assessment** of the ACEs Aware initiative in the county.

Achievements During the Planning Grant

Despite the challenges imposed by the ongoing COVID-19 pandemic, in particular the difficulty in forming strong in-person relationships between members of the NoC, SCCFC was able to push through and showed great progress and success in several ways.

First, from the initial assessment in March to the final assessment in September, NoC partners indicated progress on 6 out of the 14 indicators of the ACEs aware assessment tool³. Specifically, the NoC partners became more aware of the principles and strategies of trauma-informed care, the available ACEs tools and education materials, and have generally taken some formal steps to creating policies and having a strategy in place on how to invest resources and build staff members' knowledge. Partner also indicated that they were thinking about how to implement the initiative further and have plans for continuing education.

To help the county better address and prevent Adverse Childhood Experiences (ACEs), SCCFC has nurtured a great partnership with the two Medi-Cal providers in the county, has built a Network of Care in the county that involved multiple agencies, and has invested funds in training the Network of Care partners on the effects of ACEs.

Another success is the great partnership that SCCFC created with the two Medi-Cal providers in the county. SCCFC has been working directly with Peach Tree's Behavioral Health directors to provide ACEs screening during Help Me Grow Sutter County events. These events typically included eight screening stations: positive discipline, hearing, height & weight, fine & gross motor skills, oral health, vision, speech & language, learning & cognitive skills. Now the Help Me Grow events include another station for ACEs screening. The ACEs screening started in the summer, with a representative of the Medi-Cal providers conducting the ACEs screenings in a sensitive manner, and giving additional information and educational materials to families to explain the consequences of ACEs. Thus far, there was a good response from the families that have completed the screener.

In addition to the screening events, the **two healthcare providers have invested in educational and therapeutic books and tools to support the training of their staff and to provide adequate materials and information to their clients.** For example, Peach Tree Health has added a text messaging platform to send ACEs/PEARLs assessments directly to patients, and responses are held in a HIPAA secure dashboard for therapists to review with patients at their next appointment. They are training case managers and interns on how to screen with ACEs/PEARLs and explain toxic stress to patients and provide education. They also review their clinical protocols on a regular basis and have modified them as needed to address the needs of their constituents, providing them with appropriate referrals to individual and/or group counseling, psychiatry, substance use program, or other resources and services in the community. Finally, providers have been working towards establishing bi-directional agreements with all partners to standardize the referral procedure following ACEs screens.

³ Many of the indicators in the ACES Aware Readiness Assessment apply to the implementation phase of the work, and hence a change was not expected on them.

Sustaining The Network of Care

SCCFC has decided to use the remaining funds of the planning grant to act on the interest expressed by the NoC partners in having a unified system for screening and bi-directional referrals. Since December of 2020, they have been working with FindHelp to create a user-friendly, locally-branded referral portal that makes it easy to refer people to social services and charities, and keep track of the reported needs, whether individuals received the services to which they were referred, and the outcomes of the referrals. After planning meetings to establish vision and map out the steps for configuration, build-out, launch, and ongoing post-launch support, Sutter County's FindHelp platform launched on 3/4/2022. FindHelp designed two unique sites that document resource and bi-directional referral activity. Both sites, a community-facing site -- http://sutterkids.findhelp.com/ -- and an internal site for SCCFC team, track analytics and web traffic activity. After completing two trainings, NoC users are certified and can join a growing community of practice user group. Additionally, SCCFC FindHelp admin group has at least one admin who has completed facilitation training to conduct trainings.

Site analytics over the current 90-day period show:

- More than 700 users accessed and utilized Sutter County's FindHelp platform and conducted almost 1,950 searches over almost 970 sessions. Users logged over 850 interactions, demonstrating that more information was sought about verified programs and made more than 60 connections that included about 15 referrals with half documented as closed loop referrals. Additionally, navigators performed over 70 activities to follow up on seeker referrals and needs.
- Most engaged programs that had showed highest click utilization activity included SCCFC Help Me Grow, Family SOUP support for families of children with special needs, Alta California's Early Start Program, SCCFC Child Behavioral Services, and E Center's Head Start program. Top needs searches by category included food (20%), housing (18%), care (16%), health (12%), and money (10%), and the most commonly searched terms included food pantry, SCCFC, preschool, emergency food, and help paying for housing.
- By geography, most search volume reflects Sutter (1,483 searches), Yuba (192), and Butte (125) counties, with Yuba City (1,385 searches), Marysville (124), Chico (81), Live Oak (57), and Olivehurst (39) as top cities. Similarly, top zip codes searches 95991 and 95993(Yuba City), 95901 (Marysville), 95953 (Live Oak) and 95928 (Chico).

In addition to the bi-directional referral portal, SCCFC has invested resources to become knowledgeable about the principles and strategies of trauma -informed care by being a key partner in the "Handle with Care" initiative. Handle with Care is a trauma-informed approach for supporting children who have been exposed to a traumatic event that require a response from law enforcement. It is a program that involves multi-agency collaboration between law enforcement, educators, and mental health staff and equips each agency's personnel with trauma-sensitive interventions. With a goal to support children feel safe and increase resilience — which are critical to helping children focus, learn and thrive, this initiative helps NoC in its mission to build a system of trauma-informed care. The first virtual Trauma-Informed workshop was held in the summer of 2021, and garnered a lot of interest, with over 100 attendees, as well as follow

up interest from other community partners to join the NoC. Since then, SCCFC has been working on developing a process to address the needs of children who have been subjected to ACEs that required police involvement. When police are called to a scene where a child is present, the police will inform the child's school so that the school will be aware that the child went through a traumatic experience and provide appropriate resources to the child and their family. The plan is to establish an appropriate workflow and train key personnel and stakeholders. The initiative is set to be piloted in the next fiscal year (2022-2023) in Live Oak district — an area of the county that historically has seen more police and welfare cases involving children.

Finally, SCCFC and its devoted staff are committed to strengthening the screening and response system in the county, with the goal of creating a robust system that can reduce ACEs amongst the county's children and interrupt the intergenerational transmission of ACEs. SCFCC is continuously looking for funding opportunities so that the Handle with Care initiative can get implemented, evaluated and expanded. Additional funds will also help in maintaining the momentum of the work that has begun with the NoC partners, in establishing a unified system in the county that regularly screens individuals for ACEs and promptly responds to their needs using the new county-wide bi-directional referral platform.

In sum, in less than one year, Sutter County Children and Families Commission and its Network of Care partners have made substantial progress implementing a system of care that will protect and help heal the county's children and families from the effects of trauma.

