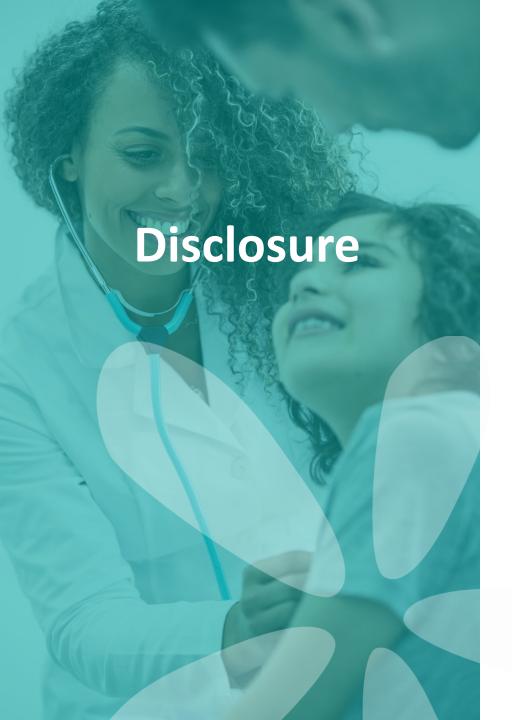
Bridges to Resilience Conference November 4, 2024



Ama Atiedu, MS MSOD, Population Health Program and Evaluation Manager, Cottage Health
Sarah Hemmer, M.D., Pediatrician, American Indian Health and Services
Tamara Harrah, MPH, PeRC Coordinator, Cottage Health



None of the planners or speakers for this presentation have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



- 1. Overview of PeRC and its accomplishments to date
- 2. Highlight PeRC's progress and opportunities to address the diverse needs of children and families in Santa Barbara County
- 3. Discuss partnership with the Network of Care and its work around diversity, equity and inclusion (DEI)



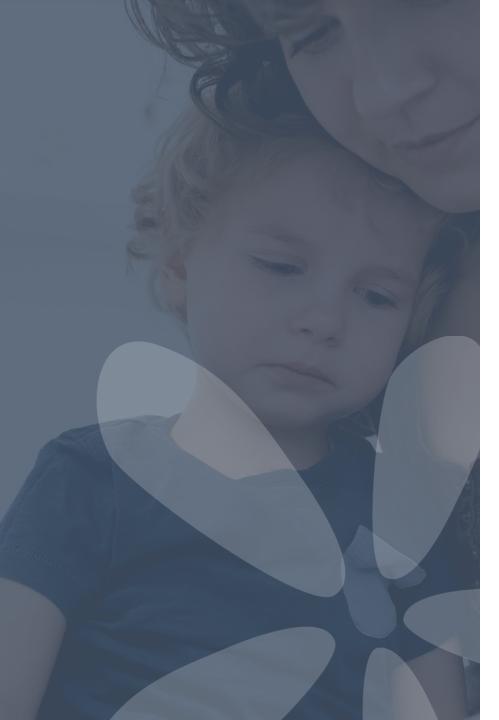
- Pediatric Resiliency Collaborative (PeRC)
 Overview
- 2. PeRC Data
- 3. Diversity, Equity, and Inclusion (DEI) Needs in PeRC Clinic
- 4. Network of Care DEI Efforts



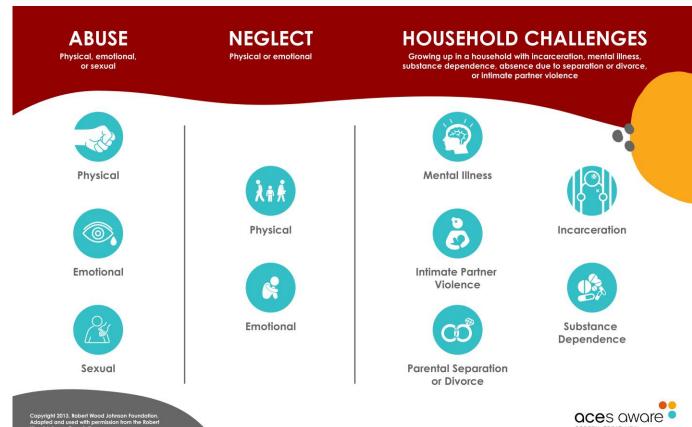
What are Adverse Childhood Experiences (ACEs)?

The term Adverse Childhood Experiences (ACEs) comes from the 1998 landmark study by the Centers for Disease Control and Prevention (CDC) and Kaiser Permanente. It describes 10 categories of adversities experienced by age 18 years: abuse, neglect, and/or household challenges.

- Abuse: physical, emotional, and sexual abuse
- Neglect: physical and emotional neglect
- Household challenges: incarceration of household members, or growing up in a household with mental illness, substance dependence, parental absence due to separation or divorce, or intimate partner violence



10 Categories of Adverse Childhood Experiences



ACEs and Resiliency in Santa Barbara County

2016 - 2017

Resilience Documentary

Bridges to Resilience
Conference

Santa Barbara Resiliency
Project

2018

Nadine Burke-Harris in Santa Barbara

Resilient SB County

Carpinteria Children's Project Pilot

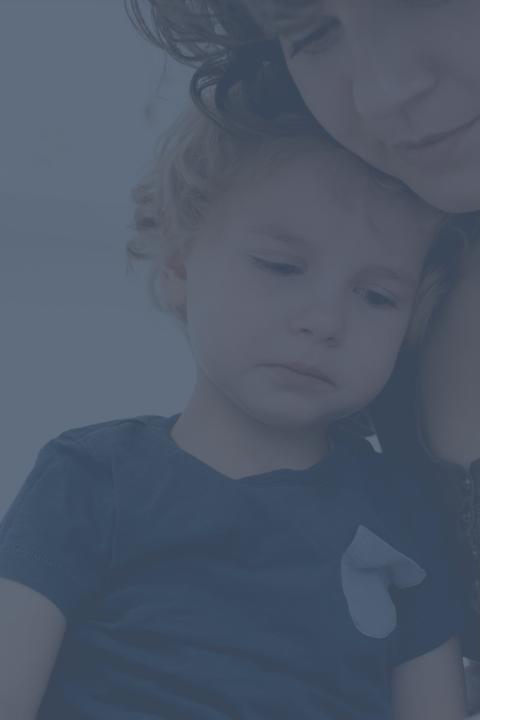
2018/2019

Resilient Santa Barbara
County
(KIDS Network)

2019/2020

Pediatric Resiliency
Collaborative

CHCCC ACEs Aware Grant



PEDIATRIC RESILIENCY COLLABORATIVE

CALM

Carpinteria Children's

Project

CenCal Health

Cottage Health

Family Service Agency

James S. Bower Foundation

Priory Fund

Resilient Santa Barbara

SB County Public Health

Care Centers

SB Neighborhood Clinics

Pediatric Resiliency Collaborative (PeRC)

VISION

Build healthier families and communities by promoting trauma-informed [medical] care, supporting family resilience, and addressing Adverse Childhood Experiences (ACEs) in Santa Barbara County.

Pediatric Clinic Support



Pediatric Resiliency Collaborative Model



TRAIN

PeRC trains all pediatric providers and staff on ACEs and resiliency



LAUNCH

PeRC provides technical assistance with implementation



SCREEN

Clinics screen
children and
parents,
receives
Medi-Cal
reimbursement



CONNECT

Clinics connect to FSA advocate and CALM therapist as appropriate



EVALUATE

PeRC evaluates clinic progress and community impact

Clinic Reach

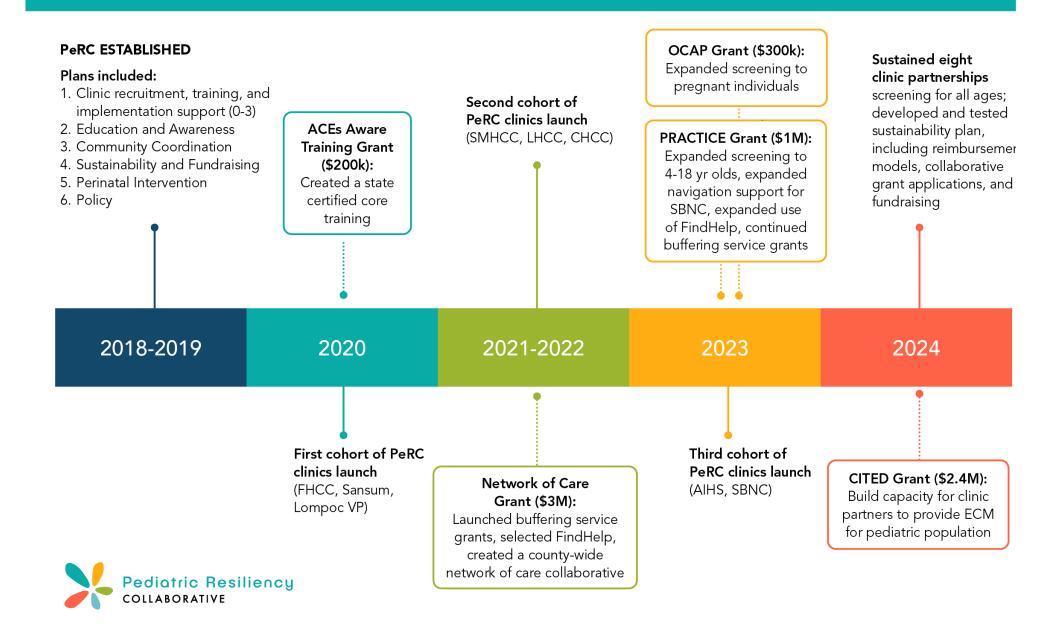
Pediatric Medical Group CHC Guadalupe of Santa Maria CHC CHC Santa Maria II (Vallarta) Santa Maria Health New Cuyama CHC Del Valle **Care Center** CHC Santa Maria I Santa Ynez Tribal (Santa Maria Way) Health Clinic **Lompoc Health Care Center** Goleta Franklin Health **Neighborhood Clinic** CHC Lompoc **Care Center Eastside Dr. Cindy Blifeld** Neighborhood Clinic Isla Vista **Neighborhood Clinic American Indian Existing PeRC Clinic Partners Health & Services** Carpinteria Westside **Potential Clinic Partners** Sansum Hitchcock Health Neighborhood **Pediatric Medicine**

Care Center

Clinic

Circles to scale with number of pediatric CenCal members (ages 0-18)

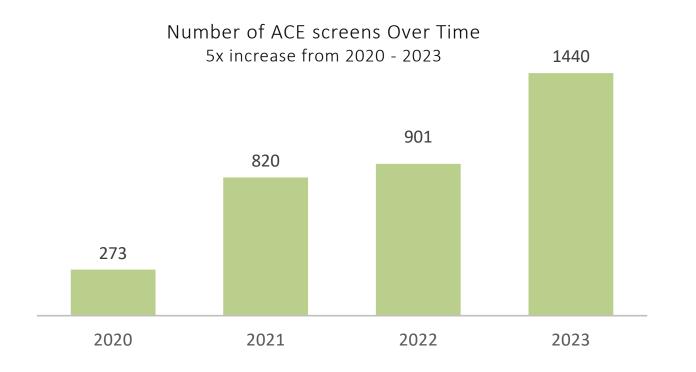
Pediatric Resiliency Collaborative





PeRC Growth and Expansion

Since 2020, PeRC has expanded to 7 clinics, screening over 3,000 children.



Medical Provider Voices

"The ACE's screener has helped us detect folks who need more specific questions asked. I've been surprised by unexpectedly high ACE scores from families I thought we knew."

"Personally, there is not so much of a sense of helplessness. When I deal with difficult cases, I can provide real connections to basic needs, parenting classes or therapy."



2023 Pilot - Screening Expansion to Children Ages 4-18

Lompoc Health Care Center, Santa Maria Health Care Center, American Indian Health and Services

ACEs Screening Children Ages 0-3 Qualifying score of 1 or more	
Children screened for ACEs	497
Children with a Qualifying ACE Score	289

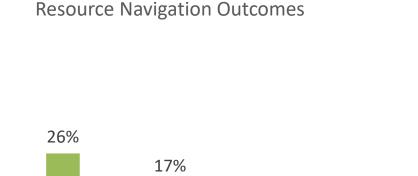
ACEs Screening Children Ages 4-18 Qualifying score of 4 or more	
Children screened for ACEs	425
Children with a Qualifying ACE Score	19

PeRC Referrals and Engagement

2020 – 2023 Referral Outcomes from all PeRC Clinics



PeRC Referrals and Engagement



Declined

services

3%

Services in

progress

1%

Duplicate referral

54%

Completed

Services

Never made

appointment

Medical Provider Voices

"Referrals to the PeRC team has been the best part of this experience. The referral is easy, and the response rate has been great."

"Having someone to help navigate the medical system and community supports is a blessing for most of our families.."

PeRC Referrals and Engagement

787 Families Referred to PeRC Services

699 (89%) clients referred to Resources Navigation

117 clients (18%) referred to CALM for therapy services

97 clients (15%) participated in parenting intervention

64 clients (6%) were recommended to buffering services

Service Provider Voices

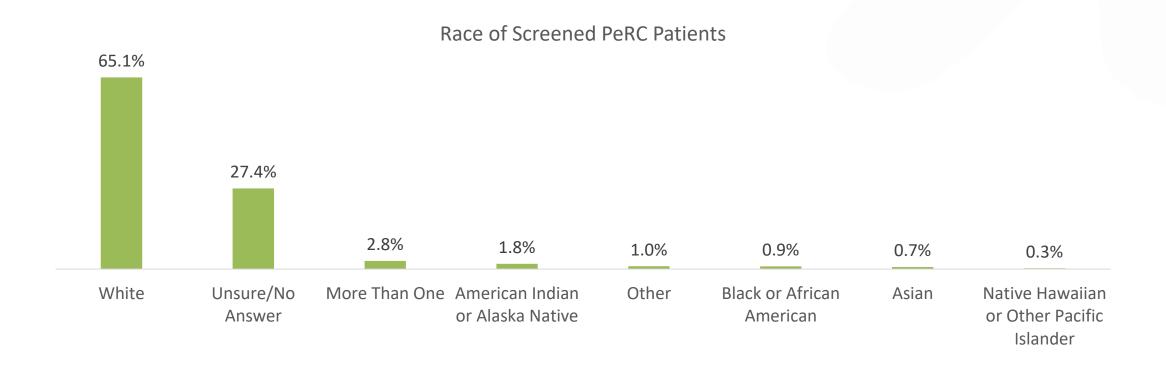
"Once they feel confident that someone speaks their language, they open about more of their needs."

"PeRC is helpful as a "one stop shop" – families who qualify for PeRC are at an advantage...They get a lot of resources and information with just one referral."

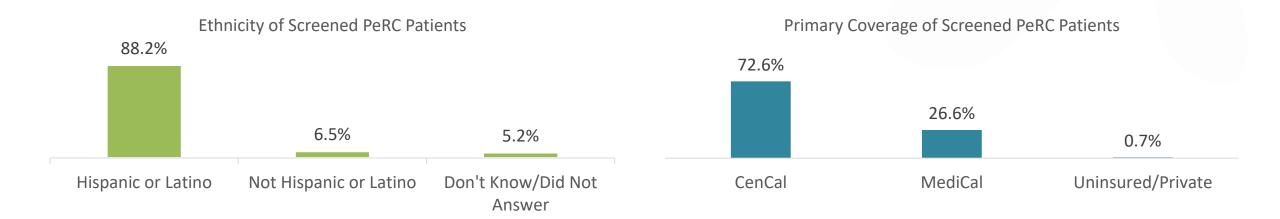
Resource Navigation Top Outgoing Referrals

- 62% basic needs
- 14% health and wellness
- 12% childcare or early education

ACE Screening Demographics (2023)







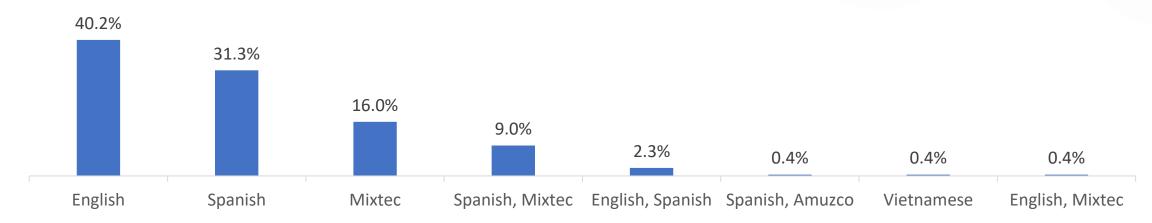
Medical Provider Voices

"Having Mixteco speaking navigators has been so impactful for the patients."

"Our patient population includes many who are unable to read/write or who require translation which adds a lot of time to the process."

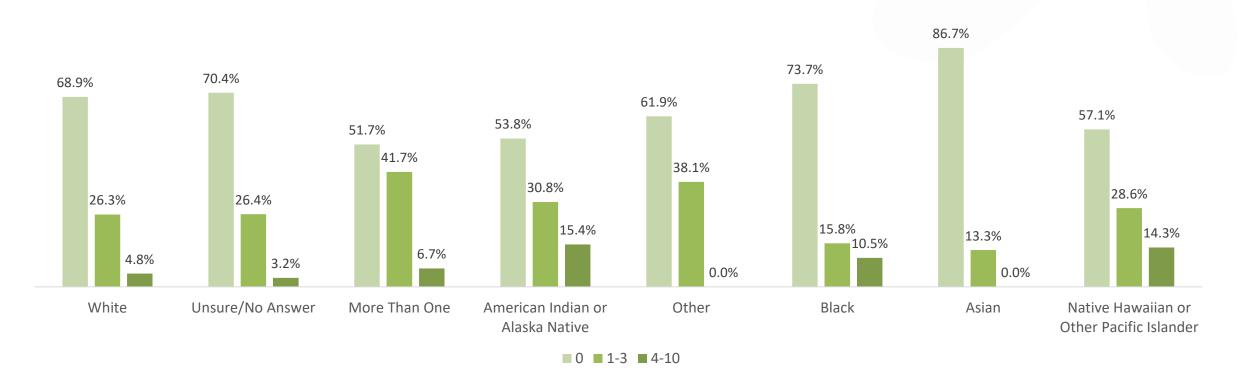
Navigation Service Client Demographics (2023)



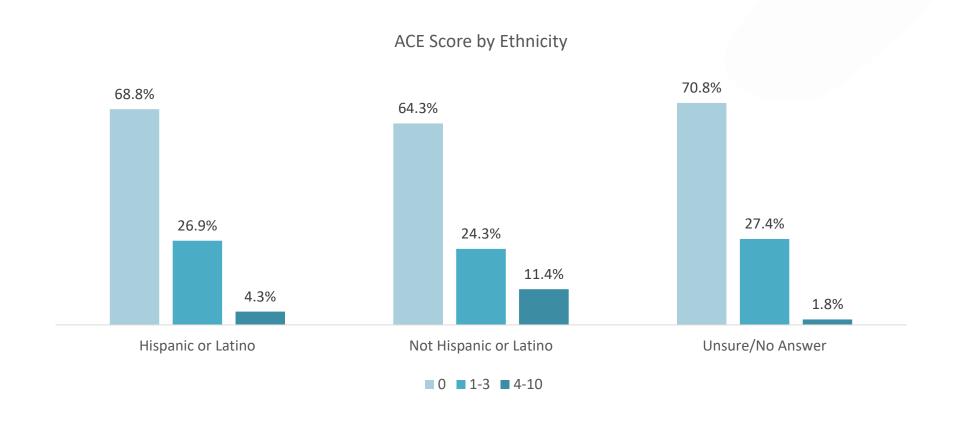


Demographics by ACE Score (2023)

ACE Score by Race



Demographics by ACE Score (2023)





Positive PeRC Experience:

Gratitude for the PeRC program
Wide range services
Responsiveness and personalized care

Awareness of ACEs Enhanced

New understanding of ACEs More informed parenting strategies Motivation to break cycles of trauma

Positive Impact on Child Development:

Understanding of child development Learned developmental milestones activities Guidance on nutrition and health

Improvements in Health and Wellbeing:

Parental mental health Child's physical and behavioral health Healthier lifestyle practices Enhanced social support systems

Challenges in Service Access:

Technological barriers & language issues Need for more inclusive access strategies

Recommendations for Program:

Expansion to reach a wider audience Improve follow-up mechanisms
Additional educational materials

PeRC Participant Voices

"They have been amazing. They have been very helpful, and they have been a great resource for me to go to as a new mom."

"Just seeing my daughter go from..
being very shut down... [to] now
that she's like wanting to go to
school and, and like meet new
people and friends and she's very
open... she's been doing a lot
better and speaking up too, you
know, that was a big one."



Diverse Needs of American Indian Health and Services (AIHS) Patients

- Racially and ethnically diverse
- Linguistically diverse
- Diverse gender identities and sexual orientations -
- Diverse abilities
- Socioeconomic resources

Steps AIHS takes to meet the diverse needs of our patients with regards to ACES screening

- Staffing
- Addressing literacy challenges
- Addressing technology barriers
- Cultural competency training for all staff annually
- Viewing ACES through the lens of historical trauma
- Focusing on building intergenerational resiliency
- Offering an in-house behavioral health team

Diversity, Equity, and Inclusion Efforts to Explore Together

- How do we connect with families where both parents work 1+ jobs?
- How do we represent the ACES screen in pictographs or have a systematic way of meeting the needs of our patients who do not read?
- Translation of ACES screen into multiple languages in online registration system?
- How do we educate our clinical navigators on programs available for families so all navigators are aware of the resources?

Diversity, Equity, and Inclusion Efforts to Explore Together

- Can we create community partner maps so that families can access local resources based on where they live?
- Can we have clinical navigators who speak languages other than English and Spanish and represent a variety of racial and ethnic groups?
- Curriculum to formally and thoroughly educate our providers and staff on DEI?



ACEs Aware Definition of a Network of Care

A group of interdisciplinary health, education, and human service professionals, community members, and organizations that support adults, children, and families by providing access to evidence-based "buffering" resources and supports that help to prevent, treat, and heal the harmful consequences of toxic stress.



Vision

Families and children are healthy, resilient, and thriving in their communities

Mission

To establish support systems that nurture and protect children and families, with paths to resilience and a network of care to prevent, identify and address Adverse Childhood Experiences

VIDEO

Santa Barbara County Network of Care

AN INTEGRATED AND ALIGNED APPROACH



Providers screen for ACEs and refer to services

Buffering Services

Mindfulness | Quality Sleep | Balanced Nutrition Physical Activity | Supportive

Navigation and Therapeutic Supports

Brief Parenting Intervention | Resource Navigation Therapeutic Services

Network of Care: Workgroup

Buffering Services

- Continue to connect service providers to NoC efforts
- Support connections between service providers and medical providers
- FindHelp outreach
- Recognition of traumainformed service providers

Training

- Survey partners to determine training needs
- Outreach to sectors not yet engaged
- Refine and coordinate a training resource list

Equity

- Provide resources for partners to assess current practices through an equity lens
- Coordinate implicit bias and other equity training
- Possible focus on specific area, such as language justice



Clarity around DEI Efforts

- Finding: Stakeholders report a lack of consistency and transparency in DEI efforts
- Recommendation:
 Provide clear
 communication, common
 language, unified
 practices, and defined
 principles

Community Voice

- Finding: Assessment indicate insufficient representation of community, parent, and youth voices
- Recommendation:
 Recruiting and engaging these stakeholders is essential for building meaningful community relationships.

Balanced Perspective

- Finding: A more balanced view of the communities served is necessary
- Recommendation:
 Provide education around healing from trauma, especially for underserved populations.



Focus Areas for Underserved Populations:

- **Finding:** There is a need to prioritize healing from historical and intergenerational trauma
- Recommendation: Address institutional distrust and emphasize community strengths

Strategies for Community Transformation:

- **Finding:** There is a need to acknowledge historical truths and celebrate community resilience
- Recommendation: Translate the science of resilience in culturally relevant ways to support meaningful transformation



- Launch DEI survey
- Ongoing workgroup meeting
- Resource and training hub



