Welcome!

California ACEs Learning and Quality Improvement Collaborative (CALQIC)
ACEs Implementation Office Hours
August 19, 2021

Housekeeping Reminders

Audio
Link your audio to video if you called in via phone

Name
Add your name & organization

Chat Box
Please chat in your questions

Tech Issue
Private chat Nikki Navarrete for assistance
Agenda

- Housekeeping & Session Goals
- Warm Activity
- Sustainability & Spread
- Breakout Group Discussions
- Report Back & Questions
- Upcoming Opportunities
- Feedback & Closing
Office Hours Goals

1. Share an overview and the key elements of the ACEs Sustainability Framework and Assessment Tool

2. Surface core challenges and wins in sustaining and spreading ACEs screening

3. Create a space for sharing and peer connection around opportunities to address core challenges
High-level insights from Q2 (April – June) clinical data reporting

### Aim 1: Percent of Medi-Cal PCPs attested to the state ACEs training

- **Q3 2020 (n=385)**: 48%
- **Q4 2020 (n=392)**: 65%
- **Q1 2021 (n=393)**: 80%
- **Q2 2021 (n=398)**: 84%

Aim 1 target = 100%

Note: One clinic has not been able to report attestation rates.

### Aim 2: Percent of participating clinics screening (pediatrics and/or adults)

- **Q3 2020**: 41%  
- **Q4 2020**: 45%  
- **Q1 2021**: 63%  
- **Q2 2021**: 82%

Aim 2 target = 100%

Summary of Q2 2021 screening data

- **20 clinics** are screening **pediatric** patients only  
  - Increase from 17 in Q1
- **7 clinics** are screening **adult** patients only  
  - Increase from 5 in Q1
- **13 clinics** are screening **both** pediatrics and adults  
  - Increase from 9 in Q1
Warm Up Activity

• Take a minute to reflect & use the chat box:
  • What is one change you’ve made from the past 18 months/COVID era that you want to sustain in your life,?
  • What are the steps you are going to take to make sure that change sticks?
Faculty

- Karissa Luckett, RN, BSN, MSW
- Proud to be a Nurse for over 25 years
- Has worked in quality arena and part-time for the Joint Commission for the past 12 years
- Doesn’t know what she wants to be when she grows up
- Momma Bear to a lovely 16-year-old daughter and a 2-year-old Cavalier King Charles
Using a Sustainability Framework & Matrix Tool
Key Factors to Sustain Change

1) Innovation
2) Measurement
3) Human Factors
4) Culture
5) Change Management
6) Leadership
7) Knowledge in Action
8) Engagement
9) Evaluation
10) Empowerment

Jeffcott (2014)
Project Summary

• A PDSA model helps to standardize a workflow plan that will ensure sustainability
• Use insights and lessons learned (Knowledge in Action) to educate and train additional staff or re-engage (Engagement) strategic leaders
• Make sure you have a thorough monitoring
• Review other key documents to see if there are other opportunities to strengthen your project (storyboards, quarterly data reports, roadmap, change ideas)
Change Ideas

Ramp Up: Rapid and Iterative Cycles

Changes That Result in Improvement
Implementation of Change
Wide-Scale Tests of Change
Follow-up Tests
Very Small-Scale Tests

Hunches, Theories, Ideas

DATA

Rapid = Frequent
# Rapid Cycle Worksheet

**Title of PDSA:**

- aim statement:

<table>
<thead>
<tr>
<th>PDSA Cycle No.</th>
<th>PLAN</th>
<th>DO</th>
<th>STUDY</th>
<th>ACT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>What <em>change</em> are you testing?</td>
<td>What have you <em>learned</em> from previous PDSAs?</td>
<td>What <em>predict</em> will happen?</td>
<td>What <em>data</em> will you collect to know how it's working?</td>
</tr>
<tr>
<td>1</td>
<td></td>
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<tr>
<td>2</td>
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<tr>
<td>3</td>
<td></td>
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</tr>
</tbody>
</table>
Sustainability Matrix

**Process**
- Value of Innovation and Adaptability
- Data Collection and ongoing Monitoring

**Staff**
- Staff Engagement and On-going Training
- Clinical and Leadership Engagement

**Organization**
- Infrastructure
- Fit with Strategy
### Project Reflection and Sustainability Matrix

**Part I Process: Value of Innovation and Adaptability**

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Describe what, if any, was the value or improvement the project brought to your clinic?</td>
<td></td>
</tr>
<tr>
<td>2) What would need to be changed for the project to bring value/improvement to the clinic?</td>
<td></td>
</tr>
<tr>
<td>3) Describe what, if any, was the value or improvement the project brought to patient care?</td>
<td></td>
</tr>
<tr>
<td>4) What would need to be changed for the project to bring value/improvement to your patients’?</td>
<td></td>
</tr>
</tbody>
</table>
# Project Reflection and Sustainability Matrix

## Part I Process: Value of Innovation and Adaptability

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe what, if any, was the value or improvement the project brought to your clinic?</td>
<td>Makes sure we’re IDing kids who need psychosocial services. It felt good that the clinic was ready to handle whatever was going to come from asking these questions. Putting forward this philosophy that we care about these issues is important.</td>
</tr>
</tbody>
</table>
| What would need to be changed for the project to bring value/improvement to the clinic? | 1) having symptoms be determined by clinician  
2) incorporating the health educator  
3) clarifying procedure around tallying how many patients are referred to social workers |
### Staff: Staff Engagement and On-going Training

<table>
<thead>
<tr>
<th>Describe if and how staff saw value and were engaged in the project.</th>
<th>Social worker thought this was a positive experience for students. Helpful for her to talk with people. MA handed out screener but didn’t get too involved- Jane really took ownership.</th>
</tr>
</thead>
<tbody>
<tr>
<td>What would need to be changed to bring greater value/engagement for the staff in phase 2?</td>
<td>New RN should be brought in- so she knows what’s being looked for. She could explain what the screener is for. She will be sent the webinar.</td>
</tr>
<tr>
<td>Was there a clear need for additional training of any of the clinic staff for the project’s success?</td>
<td>The staff felt initially trained well. As we added extra people we felt that they were behind. They have 3 new NPs coming in Sept, one just started in June.</td>
</tr>
</tbody>
</table>
## Organizational Matrix Example

<table>
<thead>
<tr>
<th>Organization: Infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td>What other team members did you identify as being <em>critical</em> to the success of the project that were not initially engaged when it started?</td>
</tr>
<tr>
<td>Describe what other resources (staff/equipment/services) would have been useful in the project?</td>
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</tbody>
</table>
Breakout Groups
Breakout Groups

You’ll be placed into one of two groups.

1. What factors contributed to your confidence in your teams’ ability to spread and sustain your ACEs screening and response work?

2. What are the core challenges your team is facing in spreading and sustaining your ACEs screening?

3. Share a strategy that has been successful in helping your organizations spread your ACEs screening efforts.
Considerations

Is it time to spread or sustain?

- Process Factors (innovation, data collection)
- Staff Factors (engagement, training)
- Organization Factors (alignment, infrastructure)
Report Back
Reflection

1. What factors contributed to your confidence in your teams’ ability to spread and sustain your ACEs screening and response work?

2. What are the core challenges your team is facing in spreading and sustaining your ACEs screening?

3. Share a strategy that has been successful in helping your organizations spread your ACEs screening efforts.
Closing
Important Dates & Timelines

- **Clinic Interviews with CCHE**: August
- **Endpoint Assessment**: September
- **Core Team Interviews**: September-October
- **Final Quarterly Data Report**: October 15
<table>
<thead>
<tr>
<th>Event Description</th>
<th>Dates</th>
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</thead>
<tbody>
<tr>
<td>ACEs Implementation Office Hours:</td>
<td>Aug 19, 2021 (1-2pm)</td>
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<tr>
<td>Spreading &amp; Sustaining</td>
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<tr>
<td>Final Virtual Learning Session</td>
<td>Sept 21, 2021 (11am-2pm)</td>
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<tr>
<td>Coaching Calls</td>
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<tr>
<td>Quarterly Report #5</td>
<td>Due Oct 15, 2021</td>
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<tr>
<td>Clinic Interviews</td>
<td>Aug 2021</td>
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<tr>
<td>Clinic Capacity Assessment</td>
<td>Sept 30, 2021</td>
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<tr>
<td>Team Interviews</td>
<td>Oct 2021</td>
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<tr>
<td>Final Report &amp; Budget to CCI</td>
<td>Nov 1, 2021</td>
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</table>
September 21, from 11am-2pm
Final Virtual Content Session

1. Showcase and celebrate CALQIC teams' work over the past 16 months, including hearing cohort-wide evaluation highlights and directly from teams about their top CALQIC takeaways and their vision for ACEs screening and response work moving forward.

2. Identify and discuss roadblocks, opportunities, and supportive resources to sustain the implementation and spread of ACEs screening.

3. Learn about what's next in the movement to prevent and address the impact of ACEs ad toxic stress.
Reminders

• Register: [https://www.careinnovations.org/calqic-sept21-final-learning-session/](https://www.careinnovations.org/calqic-sept21-final-learning-session/)

• Pre-Work:
  • During this session, all teams will be asked to share about your CALQIC journey with two other teams in breakout rooms.
  • **These slides are a template** to structure your sharing. Instead of slides, consider making a 2-3 minute video that “shows” what you want to share. We encourage you to be creative—this is your story!
  • Due September 10 to nikki@careinnovations.org.
Poll

Experience
On a scale of 1-5, please select the number below that best represents your overall experience with today's session:

(Single Choice)
5 - Excellent
4 - Very Good
3 - Good
2 - Fair
1 - Poor

Use of Time
Please select the number below that best represents your response to the statement: Today's session was a valuable use of my time.

(Single Choice)
5 - Excellent
4 - Very Good
3 - Good
2 - Fair
1 - Poor
Thank you!

For questions contact:

Megan O’Brien  
(she/her/hers)  
Director  
mobrien@careinnovations.org

Nikki Navarrete  
(she/her/hers)  
Senior Program Coordinator  
nikki@careinnovations.org

Jackie Nuila  
(she/her/hers)  
Program Manager  
jacqueline@careinnovations.org