Welcome!

California ACEs Learning and Quality Improvement Collaborative (CALQIC)

Virtual Session #3

December 10, 2020

While we're waiting, please:

Find your team name and add the number to the front of your name
(i.e. 11. Jessicca Moore, PHC)

1 Borrego Community Health Foundation	2 Eisner Pediatric and Family Medical Center	3 Family Health Centers of San Diego	4 Harmony Health Medical Clinic and Family Resource Center
5 La Clinica de La Raza Inc.	6 LA County Department of Health Services	7 Long Valley Health Center	8 Los Angeles Christian Health Centers
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13 Santa Rosa Community Health	14 Sonoma County Indian Health Project	15 The Regents of the University of San Francisco - Fresno	n/a If you're a guest, no need to rename yourself.

If you called in, please be sure to link your video with your phone.

Housekeeping Reminders

Audio

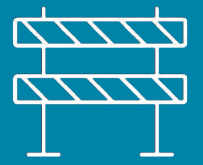
Link your audio to video if you called in via phone

Chat Box

Please chat in your questions

Name

Add your team number in front of your name



Tech Issue

Private chat Jaclyn Lau for assistance

CCI Program Leads

Tammy Fisher
Senior Director

Megan O'Brien
Senior Program Manager

Nikki Navarrete
Senior Program Coordinator

Jackie Nuila
Program Manager

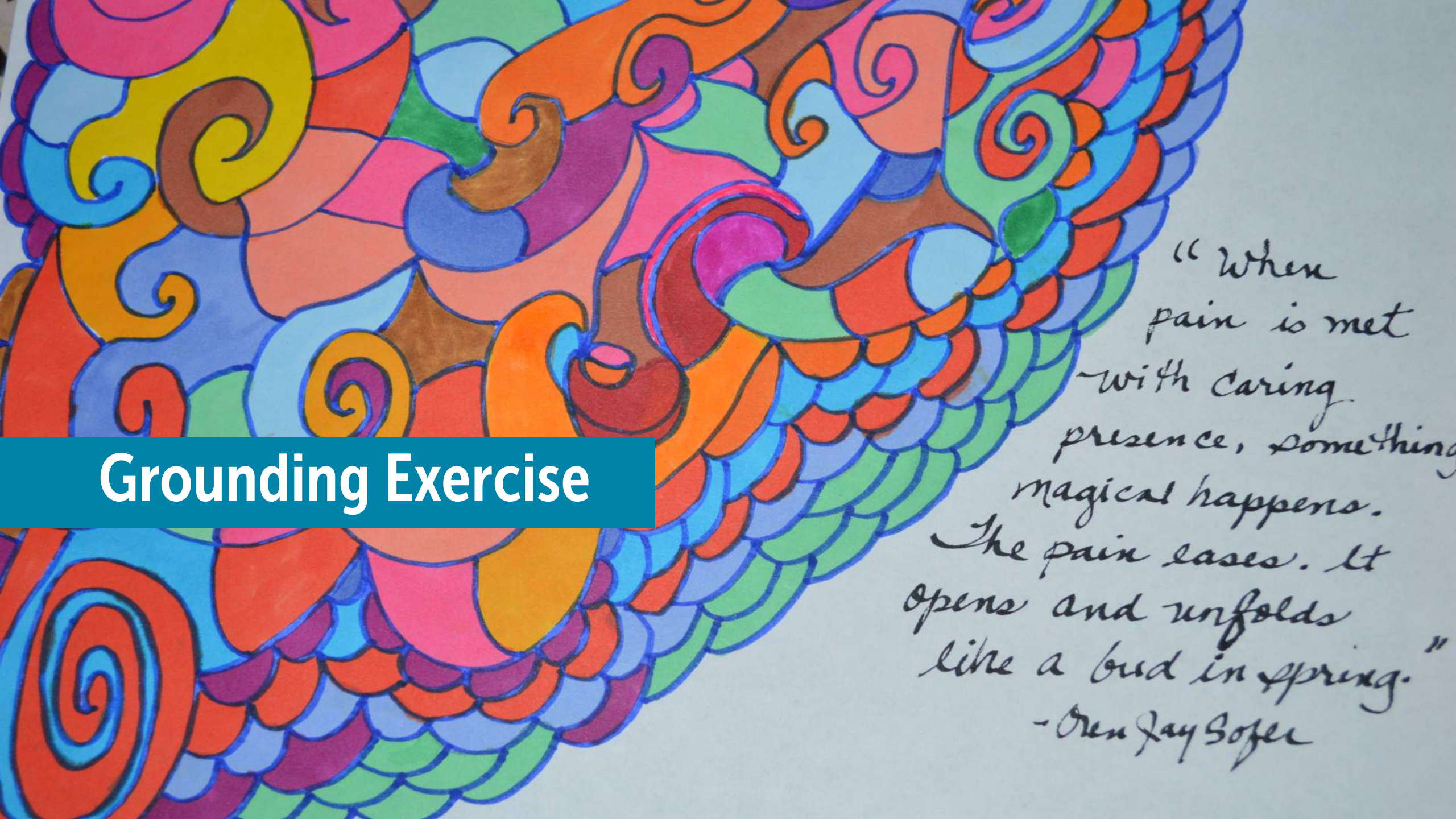
CALQIC UCSF Leadership

Anda Kuo
MD, UCSF Co-Director

Marguerita Lightfoot
Ph.D. UCSF Co-Director

Eddy Machtinger
MD, UCSF Co-Director

Naomi Bardach
MD, MAS, UCSF
Evaluation Lead


Grounding Exercise
"When pain is met with caring presence, something magical happens. The pain eases. It opens and unfolds like a bud in spring."
-Ben Jay Sofer

Program Structure

15-month learning collaborative that will build on existing organization-led initiatives & interventions so that clinics can further test, develop & strengthen their role as a place to screen for ACEs, treat trauma & promote resilience.

Phase 1

Building a Foundation for ACEs Screening & Response

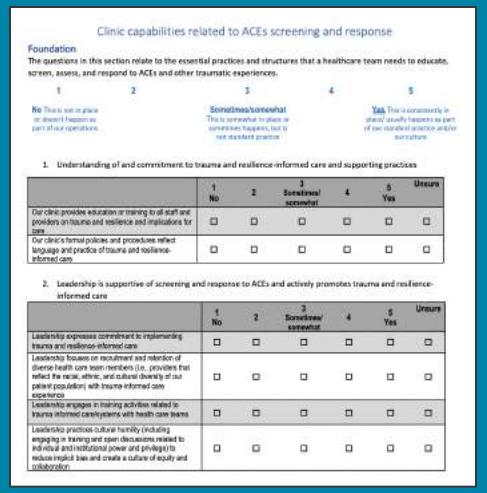
Phase 2

Test & Implement ACEs Screening & Response

Phase 3

Spread & Sustain

Phase 1: Building a Foundation


Clinic capabilities related to ACEs screening and response

Foundation

The questions in this section relate to the essential practices and structures that a healthcare team needs to educate, screen, assess, and respond to ACEs and other traumatic experiences.

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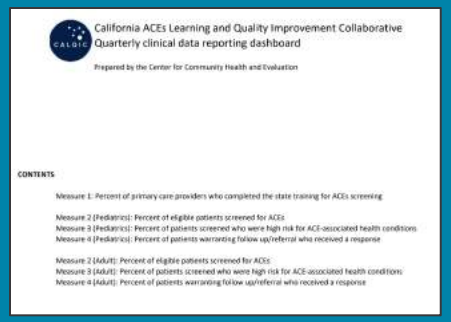
1. Understanding of and commitment to trauma and resilience-informed care and supporting practices

	1 No	2	3 Sometimes/ somewhat	4	5 Yes	Unsure
Our clinic provides education or training to all staff and providers on trauma and resilience and implications for care	☐	☐	☐	☐	☐	☐
Our clinic's formal policies and procedures reflect language and practice of trauma and resilience-informed care	☐	☐	☐	☐	☐	☐

2. Leadership is supportive of screening and response to ACEs and actively promotes trauma and resilience-informed care

	1 No	2	3 Sometimes/ somewhat	4	5 Yes	Unsure
Leadership expresses commitment to implementing trauma and resilience-informed care	☐	☐	☐	☐	☐	☐
Leadership focuses on recruitment and retention of diverse health care team members (i.e., providers that reflect the racial, ethnic, and cultural diversity of our patient population) with trauma-informed care experience	☐	☐	☐	☐	☐	☐
Leadership engages in training activities related to trauma informed care/systems with health care teams	☐	☐	☐	☐	☐	☐
Leadership practices cultural humility (including engaging in training and open discussions related to individual and institutional power and privilege) to reduce implicit bias and create a culture of equity and collaboration	☐	☐	☐	☐	☐	☐

Baseline assessment


California ACEs Learning and Quality Improvement Collaborative

Quarterly clinical data reporting dashboard

Prepared by the Center for Community Health and Evaluation

CONTENTS

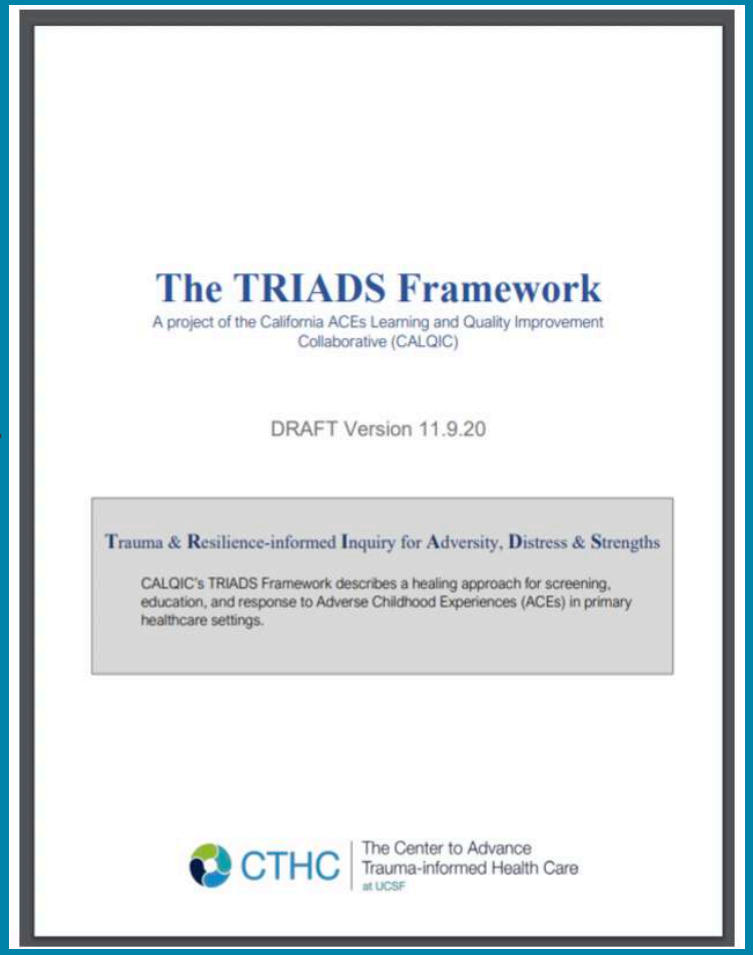
Measure 1: Percent of primary care providers who completed the state training for ACEs screening

Measure 2 (Pediatrics): Percent of eligible patients screened for ACEs
Measure 3 (Pediatrics): Percent of patients screened who were high risk for ACE-associated health conditions
Measure 4 (Pediatrics): Percent of patients warranting follow up/referral who received a response

Measure 2 (Adult): Percent of eligible patients screened for ACEs
Measure 3 (Adult): Percent of patients screened who were high risk for ACE-associated health conditions
Measure 4 (Adult): Percent of patients warranting follow up/referral who received a response

Data Report Dashboard

Baseline Workflow


The TRIADS Framework

A project of the California ACEs Learning and Quality Improvement Collaborative (CALQIC)

DRAFT Version 11.9.20

Trauma & Resilience-informed Inquiry for Adversity, Distress & Strengths

CALQIC's TRIADS Framework describes a healing approach for screening, education, and response to Adverse Childhood Experiences (ACEs) in primary healthcare settings.

CTHC The Center to Advance Trauma-informed Health Care at UCSF

Phase 1: Building a Foundation

Solidifying your **project team.**

Identifying **strengths and opportunities** related to ACEs screening and response.

Understanding the **current state** of ACEs screening and response.

Developing a **roadmap** to guide your work over the next 10 months.

Session Goals

1. You will learn about a **model for making change** in order accelerate progress in implementing ACEs screening and response.

2. You will develop a **strong aim statement** to clarify what you are trying accomplish with your work in CALQIC.

3. You will start developing a **project roadmap** to guide your work as well as to measure and track your progress over the remainder of CALQIC.

Agenda

- Project Roadmap: Setting Aims & Sub-Aims
- CALQIC Team Aim Swap
- Project Roadmap: Changes & Activities
- Team Time
- Report Back
- Upcoming Dates & Opportunities
- Feedback
- Closing

Looking Toward 2021

Complete your **roadmap** and submit to CCI by February 1

Learn about **small tests of change** at our February 18 content webinar

Test and learn about the core changes needed to drive ACEs screening and response

Share back what you are testing and learning at our March 16 Peer Learning Session

CALQIC UCSF Leadership

Eddy Machtinger
MD, UCSF Co-Director

Building a Project Roadmap & Setting CALQIC Aims

CALQIC

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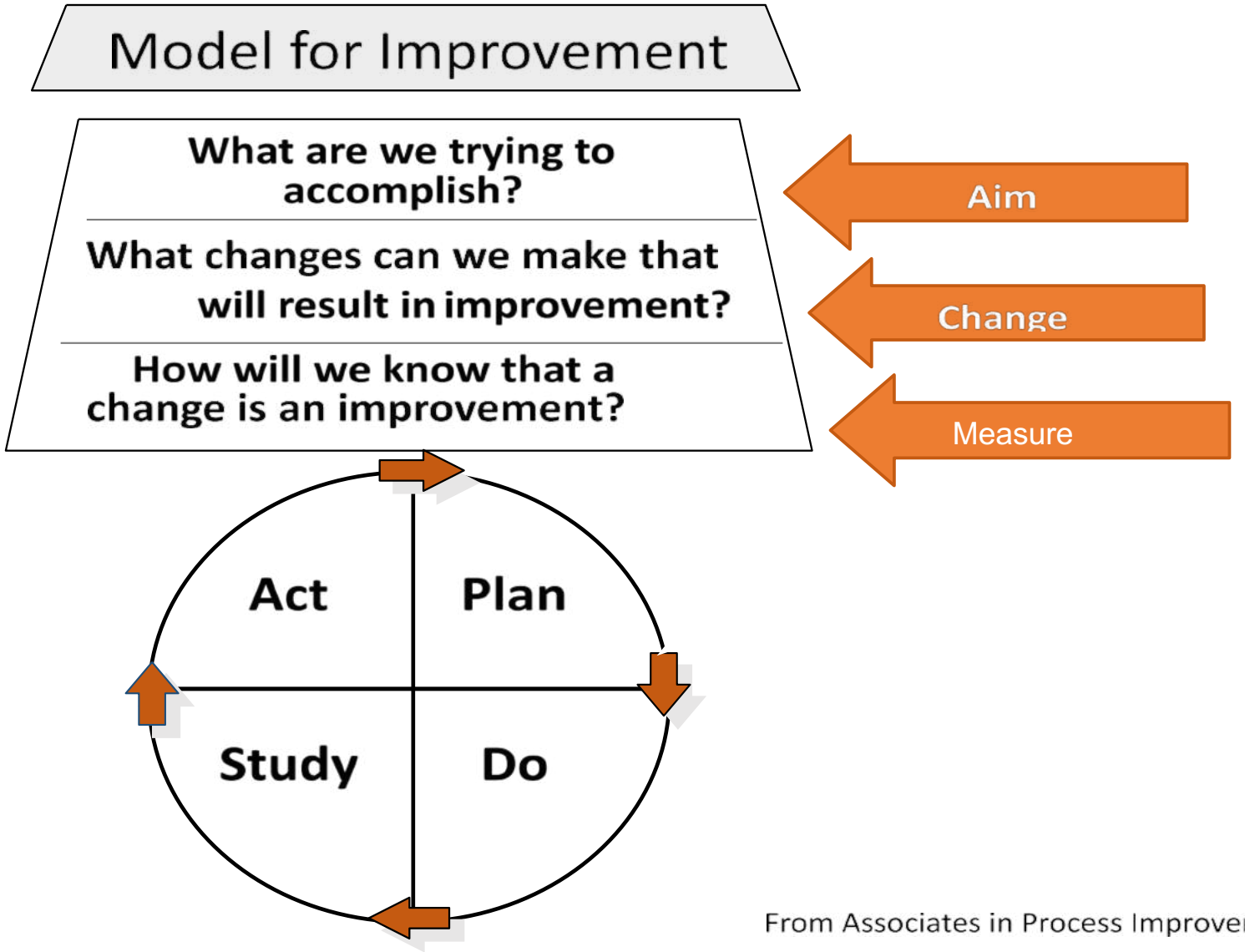
Faculty

- 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 15-year-old daughter and a 1-year-old Cavalier King Charles

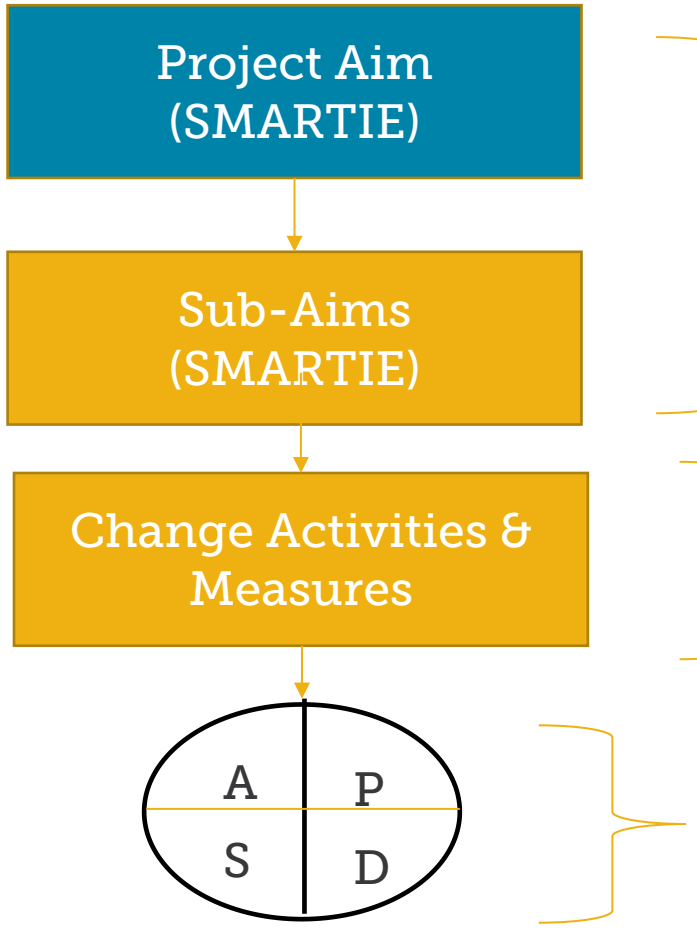
Tackling the problem:

Using Evidence-Based Improvement Methodology



From Associates in Process Improvement.

Building a Team Roadmap



Your overall project aim is the "why" and what you hope to accomplish in the program.

Your sub-aims support your overall aim and are aligned with the TRIADS Framework. There are 5 core CALQIC sub-aims. Your team will set your additional sub-aim(s) to address relational healing and equity.

These are the big changes and activities you'll make over the course of the program. TRIADS is a great source for changes/activities!

We'll break down the big changes and activities into smaller ones to test out and see what works. This isn't part of the roadmap and we'll cover it in Phase 2.

Developing an Overarching Aim Statement

Answer the question: ***What do you hope to accomplish in CALQIC by October 31, 2021?***

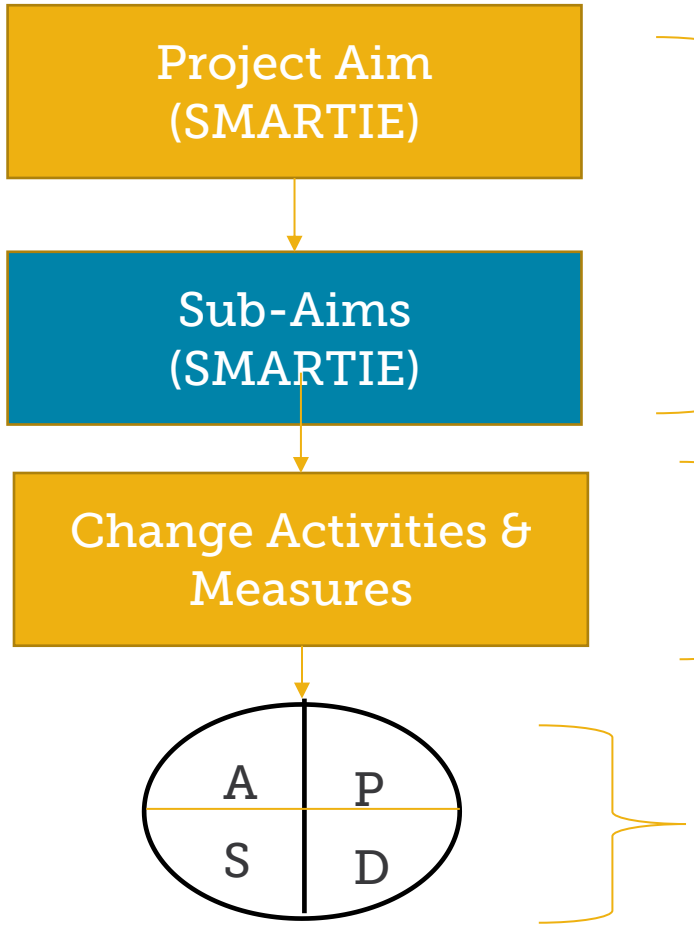
Tips for clear aim statements:

- Define the target population (who is specifically impacted by the aim?)
- Have a main measure and target (i.e., achieve a specific threshold)
- Time specific (by when?... October 31, 2021 or earlier?)
- **SMARTIE**: **S**pecific, **M**easurable, **A**mbitious, **R**elevant, **T**ime-bound, **I**nclusive, **E**quitable.

Example: Overarching Aim

Thrive organization recognizes the impact of ACEs on the health and wellbeing of our patients and staff, and believes in a healing, relational, and equity centered approach toward screening and responding to ACEs. To that end, Thrive Clinic will improve ACEs screening in all three clinic sites using the PEARLS tool for pediatric patients 0-3 in well-child visits from 20% to 60% by October 31, 2021.

Building a Team Roadmap



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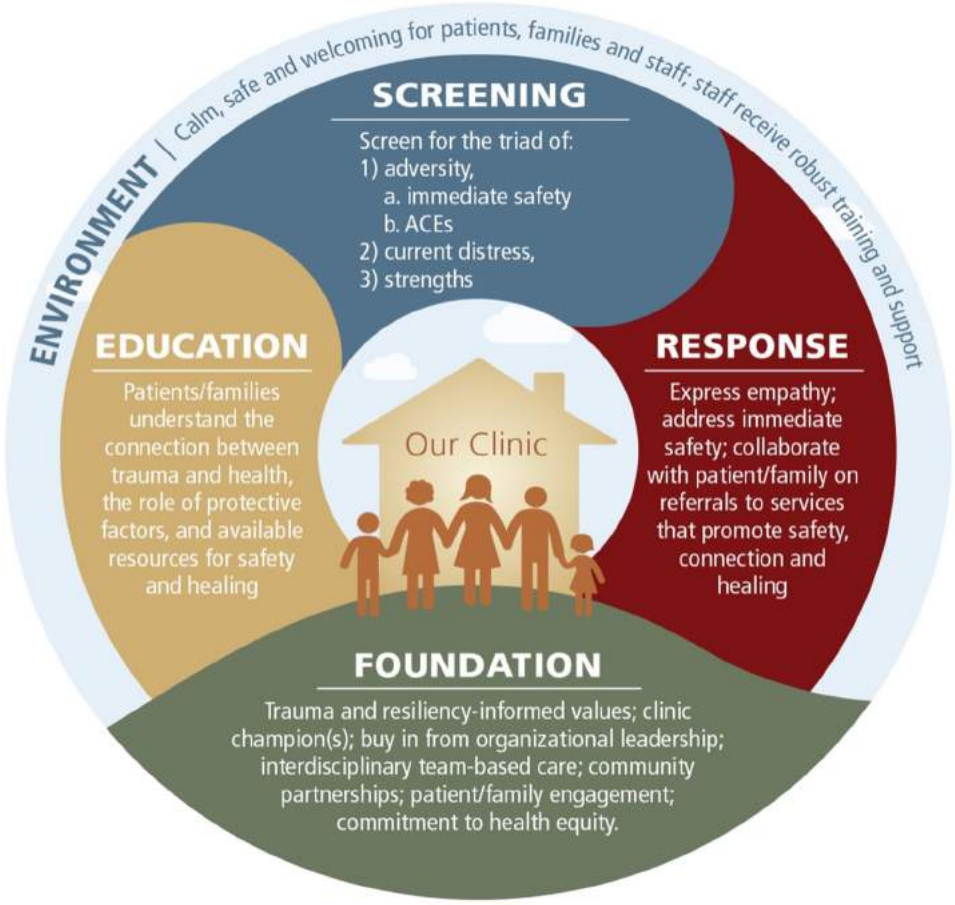
Sub-Aims for All CALQIC Teams

1. We will train and attest 100% of our eligible clinicians through ACES Aware by October 31, 2020.
2. All participating sites will be screening for ACEs by October 31, 2021 using PEARLS for pediatrics and/or an appropriate tool for adults.
3. We will be able to report screening data by participating sites by October 31, 2021.
4. We will be able to report screening data by race/ethnicity by October 31, 2021.
5. We will screen at least 50% of the patients in our target/eligible population by October 31, 2021.
6. Develop your own additional sub-aim(s) to address relational healing and equity.

Sub-Aims



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CALQIC Team Aim Swap

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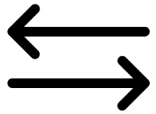
Activity Tips

The intention of the breakout session is to share your teams draft aim statement and provide feedback about how it can be stronger and ask questions of your peers about the direction that their work is headed.

Is it clear what the team is hoping to accomplish in CALQIC?



Is the Aim Statement SMARTIE? Can it be SMARTIEr?

Has the team identified their eligible/target population?

How has the team addressed racial and equity factors?

Building a Project Roadmap & Identifying CALQIC Changes

CALQIC

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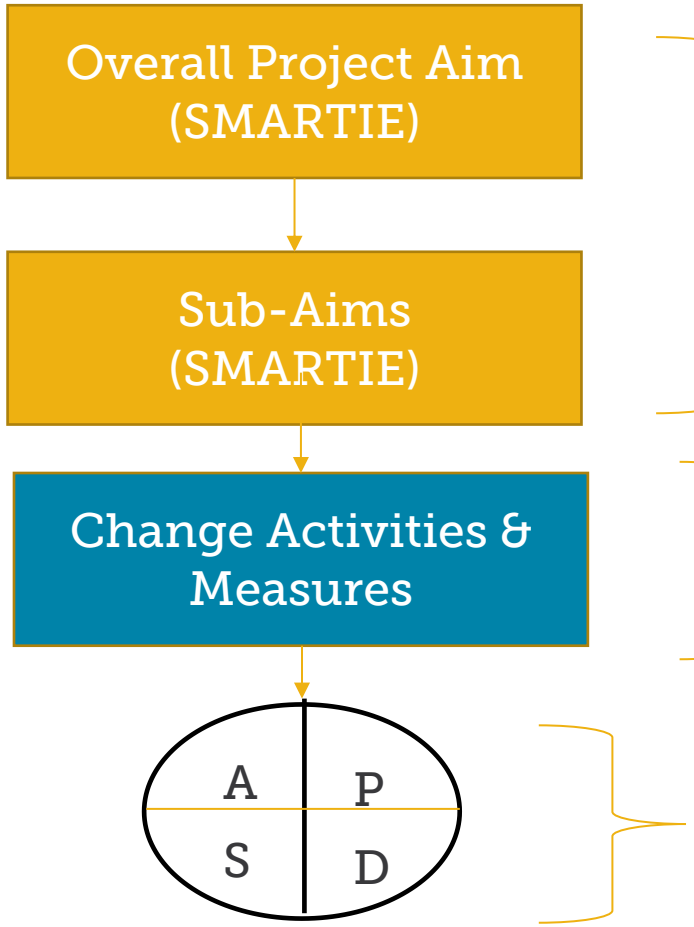
Building a Team Roadmap



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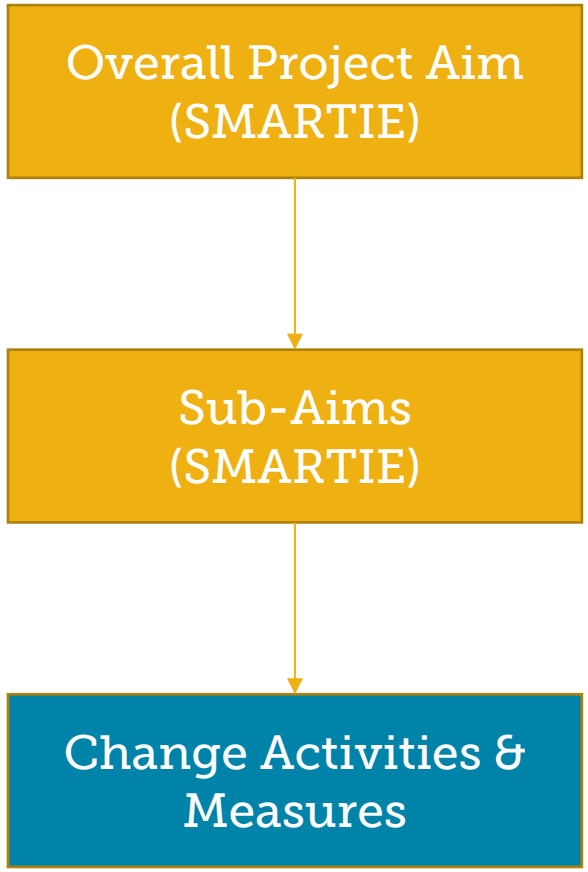
Tracking Efforts through the Roadmap



CALQIC Roadmap

This roadmap is intended to support teams in clearly defining the opportunity and importance of their project, their aims and sub-aims, as well as key activities to support meeting their aims. This roadmap can also be used to build consensus, understanding, and support the project, and to have a single, brief and descriptive document to share broadly across the organization when it is helpful.

Date Created:	Date Last Modified:
Organization:	
Project Leads:	
Project Team Members (Roles):	
Decision Making Process:	

What are we trying to accomplish?

Opportunity for Change: Background and Reason for Effort
(In the teams' own words, what's your "why"? What problem (s) are you trying to solve?)

Aim Statement
(What's your overall goal and by when? Remember SMARTIE = Specific, Measurable, Ambitious, Relevant, Timebound, Inclusive, and Equitable)

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(What's your overall goal and by when? Remember SMARTIE = Specific, Measurable, Ambitious, Relevant, Timebound, Inclusive, and Equitable)

Key Changes/Activities to support Sub-Aim: These are ideas for changes and activities that come out of brainstorms, driver diagrams, etc.	**Measures for Sub-Aim:** how will you know the change or activity you're doing is working?			
	Measures	***Data Gathering Plan***	***Baseline***	***Goal***
1. We will train and attest 100% of our eligible clinicians through ACES Aware by October 31, 2020				
• Hold a focus group with clinicians from all three sites to understand facilitators and barriers to getting certified, and to screening for ACEs by January, 2021. • Develop training strategy based on feedback from the focus group by February 2021. • Test training strategy by March 2021. • Refine, and implement training strategy beginning April, 2021.	# of clinicians that completed the ACEs Aware training	Self reported: Roberto will collect data monthly by asking for an update at monthly all clinician meetings until all clinicians have been certified.	0	20
2. All participating sites will be screening for ACEs by October 31, 2021 using PEARLS for pediatrics and/or an appropriate tool for adults.				
3. We will be able to report screening data by participating sites by October 31, 2021.				

Methods to Generate Change Ideas

Driver diagrams	Process mapping	Journey mapping	Empathy mapping
Brainstorming	Using Sticky notes	TRIADS framework	Capacity Assessment

Team Time

Team Time

Remember to designate a team member as your notetaker.

1. Reflect on your aim statement: do you need to make any modifications?
2. Good to go on your aims? Get a head start on your roadmap. Define your "why."
3. **Determine next steps:** when are you meeting next to work on your roadmap? What support do you need?

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Report Back

Team Reflection

1. What was the most difficult thing about getting started with your roadmap?
2. What other questions do you have?
3. Do you have clear next steps?

Next Steps

Set up time with your team & coach to work on your roadmap

Office hours with Karissa starting in January - virtual consults!

Submit your roadmap to CCI by February 1

Need more support? Check out CCI's QI training at https://www.careinnovations.org/cci-academy/

Feedback & Closing

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

Important Dates & Timelines

Q1 Quarterly Data

January 15

Optional Office Hours

January 21

Evaluation Interviews

January-February

Roadmap Due to CCI

February 1

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Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021	June 2021	July 2021	Aug 2021	Sept 2021	Oct 2021

Peer Learning Community

Optional Connection Call
Jan 21, 2021
(12:30-2)

Content Webinar
Feb 18. 2021
(12:30-2)

Peer Learning Session #2
Mar 16, 2021
(11-2)

Optional Connection Call
Apr 22, 2021
(12:30-2)

Content Webinar
May 20, 2021
(12:30-2)

Peer Learning Session #3
June 22, 2021
(11-2)

Optional Connection Call
July 22, 2021
(12:30-2)

Content Webinar
Aug 19, 2021
(12:30-2)

Final Peer Learning Session #4
Sept 21, 2021
(TBD)

Coaching: Monthly Team Calls

Data Reporting and Evaluation Activities

Interviews
Jan-Feb 2021

Quarterly Report #2
By Jan. 15, 2021

Quarterly Report #3
By April 15, 2021

Quarterly Report #4
By July 15, 2021

Interviews
Sept-Oct 2021

Quarterly Report #5
By Oct. 15, 2021

Endline Assessment
September 2021

Final Report to CCI
Oct 31, 2021

Surveys to gauge satisfaction with sessions, webinars, TA, etc

Program Portal

- ❑ Upcoming Events & Activities
- ❑ Who's in the Program & CALQIC Community
- ❑ Information on Evaluation & Data Reporting
- ❑ Archive of virtual events
- ❑ TRIADS Framework & Tools

www.careinnovations.org/calqic-portal

Upcoming CALQIC Opportunities

CENTER for YOUTH WELLNESS

Launch of 2-hour training for implementation teams working on ACEs screening in the pediatric setting

Call for clinic-created content so that our patient community advisory board and clinical advisory council can offer feedback.

Email Sarah Ismail, CALQIC Content Team Lead at sarah.ismail@ucsf.edu.

Upcoming External Opportunities

Dovetail Learning, CCI, and ACEs Connection Webinar

"We Are Resilient"

December 16, 2020 at 3-4pm

https://www.acesconnection.com/blog/corrected-link-we-are-resilient-strengthening-resilience-in-ourselves-and-our-patients#comments

ACES Aces Grant Opportunity to Support Networks of Care

Due: December 21, 2020

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

Chat Box: How did today go?

- I like… *(things you liked about the session including the structure and content)*
- I wish… *(things you wish had been different or included in this session, or as a part of future sessions)*
- I wonder… (*outstanding questions about the content and what comes next)*

Thank you!

For questions contact:

Megan O'Brien
(she/her/hers)
Senior Program Manager
mobrien@careinnovations.org

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

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

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