Who We Are

• **Location:** Marin Community Clinics (MCC) is located in Marin County, California. Our clinic sites are located in Larkspur, San Rafael and Novato. In addition, we are opening a new clinic in Greenbrae.

• **Population Served:** We serve 38,500 patients and approximately one third of these patients are children. The majority of our patient population (73%) are Medi-Cal recipients. As to ethnicity, 66% are Latino, 24% Caucasian, and the other 10% mostly Asian/Pacific Islander and African American.

We are open to everyone regardless of ability to pay.

• **# of Clinic Sites:** 7

• **EHR system:** NextGen

• **Important thing to know about our organization:** We are the largest Federally Qualified Health Care Center in Marin County and serve the majority of the uninsured and underinsured patients from our community. We strive to offer a variety of medical and dental services that improve and promote health and wellbeing in a holistic manner.
Our CALQIC Team

Heyman Oo, MD, Associate Medical Director of Novato South Clinic, Project Lead

Melanie Thompson, MD, Regional Medical Director, Lead operational & clinical implementation

Caren Schmidt, PsyD, Associate Director of Behavioral Health, Behavioral Health Leadership

Erinn lance, CNM, OB Program Manager, OB Leadership

Michelle Baron, MD, Lead OB Physician, OB Leadership

Rashem Agarwal, MD, Pediatrician, Lead Clinical Implementation
Current State: ACEs Screening & Response

• **Our current strengths:** successful 2 year pilot of ACEs screening in a subset of our Pedi patients, existing ACEs screening template in our EHR, solid foundation of trauma-informed care knowledge across the organization, buy-in and motivation from our executive leadership to be successful.

• **Our biggest challenges:** rolling out ACES screening in the new world of telehealth, staff turnover and staff burn out.

• **Areas of greatest uncertainty:** how will we get our care teams to adopt and be enthusiastic about yet another workflow when they have been stretched outside their comfort areas constantly for the last 3+ months?
Our Team Has Been Wondering . . .

• We would like to learn from the other teams: how have other clinics adapted sensitive screenings with telehealth?

• One question for coaches & faculty: what technical supports are available to help with screening through telehealth? Are there best practices or resources for staff to address adversity with empathy over the phone/through telehealth?

• We need the following support: can there be an electronic version of the PEARLS that will auto-record and report the score?
Advice & Guidance For Other Teams

• Are there specific content areas your team has developed expertise or wisdom that you are willing to share more about with your peers?

It is really important to spend time building the foundation of trauma-informed care and getting buy in from all levels of leadership and staff groups before taking on a clinic-wide roll out of ACEs screening. Change fatigue is real and it can only be overcome by constantly returning to the core values of your healthcare system.

• What are you most proud of in your sites/system that others should know about?

MCC’s greatest strength is our staff, everyone is mission-driven and often go above and beyond to help our patients and our community. We have been constantly impressed by how nimble our organization has been in the face of such drastic change in how we practice medicine. We went from basically 0% telehealth to 90% telehealth in a week and have since continued to refine our workflows to meet patient needs.