



# Ravenswood Family Health Center

# Who We Are: RFHC



- Location: East Palo Alto
- Population Served: Largely immigrant community. Pediatric population is largely Hispanic (~75-80%), followed by Pacific Islander (~10-15%) and African American (~5-10%)
- # of Clinic Sites: 1
- EHR system: NextGen
  - Plan to switch to EPIC Summer 2020.

# PICC Element: Assess Health

- Huge focus so far on WHAT we really want to assess.
- What we assess for will have a direct impact on WHAT WE DO with those screening results.
- We wanted something **more encompassing than ACES** alone.
- We include many of the components of the ACES/PEARLS screen, but also focus on:
  - **Parent-child attachment** → plan to promote positive parenting, consistent daily routines
  - **Parental depression / anxiety** → plan to address parental mental health

**As**

*Assess Health*

4. Assess Whole Family Health and Resilience



# Ravenswood Pediatric Social Screen

Initially developed in 2016 as a supplement to the Staying Healthy Assessment (physical abuse, sexual abuse, witness to violence / bullying)

- Food insecurity
- Housing insecurity
- Neighborhood safety
- Domestic safety / IPV
- Parent depression (one question)
- Alcohol/drug use in home
- Early childhood literacy (reading at home)

## ADDITIONAL COMPONENTS 2019

- Parent-child attachment
- Parental depression screen (PHQ-2)
- Parental anxiety screen (GAD-2)
- Daily routines, separation from parent
- HOPE
  - Stolen from The Children's Clinic in Long Beach 😊
  - *"What are your dreams for your child?"*
  - *"Que tenga una buena calidad de vida – educacion, buena alimentacion, amor, estabilidad emocional, salud, etc"*
  - *"bright future, good education"*

1	Has your child traveled outside of the country for more than 1 month?	Yes	No	Skip	
2	Has your child had close contact with anyone that has infectious tuberculosis disease?	Yes	No	Skip	
3	How many days during a typical week do you read books to your child or does your child read books?	Every day	4-5 days	2-3 days	0-1 days
4	Do you feel that you are able to comfort your child when he/she is upset?	Most of the time	Sometimes	Rarely	
5	Do you enjoy playing or cuddling with your child?	Most of the time	Sometimes	Rarely	
6	Does your child have consistent routines at home in regards to bedtime, mealtimes, etc?	Most of the time	Sometimes	Rarely	
7	How often do you feel irritated by your child?	Most of the time	Sometimes	Rarely	
8	Do you worry that food will run out before you have money to buy more?	Yes	No	Skip	
9	Do you have concerns about the condition of your home?	Yes	No	Skip	
10	Do you think you might become homeless?	Yes	No	Skip	
11	Do you feel safe in your neighborhood?	No	Yes	Skip	
12	Do you feel safe at home?	No	Yes	Skip	
13	Does your partner or anyone else hit or yell at you?	Yes	No	Skip	

14	Over the last 2 weeks, how often have you had little interest or pleasure in doing things?	Not at all	Several days	More than half the time	Nearly every day
15	Over the last 2 weeks, how often have you felt down, depressed, or hopeless?	Not at all	Several days	More than half the time	Nearly every day
16	Over the last 2 weeks, how often have you felt nervous, anxious, or on edge?	Not at all	Several days	More than half the time	Nearly every day
17	Over the last 2 weeks, how often have you not been able to stop or control your worrying?	Not at all	Several days	More than half the time	Nearly every day
18	Has your child ever been separated from a parent due to divorce, immigration, or death?	Yes	No	Skip	
19	Has anything scary or upsetting happened to your child or your family since the last time I saw you?	Yes	No	Skip	
20	Would you like more information on any of the following resources? <input type="checkbox"/> Food <input type="checkbox"/> Housing <input type="checkbox"/> Financial assistance <input type="checkbox"/> Counseling services <input type="checkbox"/> Parenting classes/support				
21	Is anything going on in your life that is worrying you, or affecting you and your family, that you would like us to know?				
22	What are your dreams for your child?				

# Ravenswood Pediatric Social Screen: The Plan

- Improve anticipatory guidance
  - Positive parenting
  - Routines
- Possible IBHS referral if significant concerns for parent-child attachment
- Possible community referrals to parenting classes
- Positive screens for parental depression / anxiety – refer to IBHS
  - Individual counseling
  - Group counseling – “mothers support group”
- CENTERING PARENTING



**Ad**

*Address Health*

5. Address Whole Family Health and Resilience

# HOW TO CONNECT WITH YOUR KIDS TO RAISE RESILIENT ADULTS

*Research shows that kids who have a strong connection to a loving and supportive adult can better handle the stress that they will face throughout life. The connection that you create with your kids **TODAY** will hopefully give them the start to a healthy and happy future. It's never too late to start.*

<p><b>NURTURE &amp; PROTECT KIDS AS MUCH AS POSSIBLE</b></p>  <p>Be a source of safety and support.</p>	<p><b>MAKE EYE CONTACT</b></p> <p>Look at kids (babies, too). It says, "I see you. I value you. You matter. You're not alone."</p> <p><b>SAY, "SORRY"</b></p> <p>We all lose our patience and make mistakes. Acknowledge it, apologize, and repair relationships. It's up to us to show kids we're responsible for our moods and mistakes.</p> 	<p><b>GIVE 20-SECOND HUGS</b></p> <p>There's a reason we hug when things are hard. Safe touch is healing. Longer hugs are most helpful.</p> 	<p><b>HUNT FOR THE GOOD</b></p>  <p>When there's pain or trauma, we look for danger. We can practice looking for joy and good stuff, too.</p>	<p><b>HELP KIDS TO EXPRESS MAD, SAD &amp; HARD FEELINGS</b></p> <p>Hard stuff happens. But helping kids find ways to share, talk, and process helps. Our kids learn from us.</p>	<p><b>BE THERE FOR KIDS</b></p> <p>It's hard to see our kids in pain. We can feel helpless. Simply being present with our kids is doing something. It shows them we are in their corner.</p>	<p><b>ROUTINES</b></p> <p>Kids feel calmer when they know what to expect. Create daily routines so they can better handle their day.</p> 
<p><b>MOVE AND PLAY</b></p> <p>Drum. Stretch. Throw a ball. Dance. Move inside or outside for fun, togetherness and to ease stress.</p>	<p><b>SLOW DOWN OR STOP</b></p> <p>Rest. Take breaks. Take a walk or a few moments to reset or relax.</p>	<p><b>HUNT FOR THE GOOD</b></p> <p>When there's pain or trauma, we look for danger. We can practice looking for joy and good stuff, too.</p>	<p><b>HELP KIDS TO EXPRESS MAD, SAD &amp; HARD FEELINGS</b></p> <p>Hard stuff happens. But helping kids find ways to share, talk, and process helps. Our kids learn from us.</p>	<p><b>ROUTINES</b></p> <p>Kids feel calmer when they know what to expect. Create daily routines so they can better handle their day.</p>	<p><b>BE THERE FOR KIDS</b></p> <p>It's hard to see our kids in pain. We can feel helpless. Simply being present with our kids is doing something. It shows them we are in their corner.</p>	<p><b>ROUTINES</b></p> <p>Kids feel calmer when they know what to expect. Create daily routines so they can better handle their day.</p>

# Lessons Learned

- Our biggest surprise working on Assessing Health is...
  - Our move away from the focus on ACES alone. Yes, we ask about them, but...
  - Focus on things we can do in the clinic to foster resiliency
    - Promote positive parenting
    - Promote consistent daily routines for kids
    - **Assess and address parental / maternal depression and anxiety**
  - We feel strongly that if we can do these things for all our families, we can increase the chance of raising resilient kids regardless of their ACE "score"



# Lessons Learned

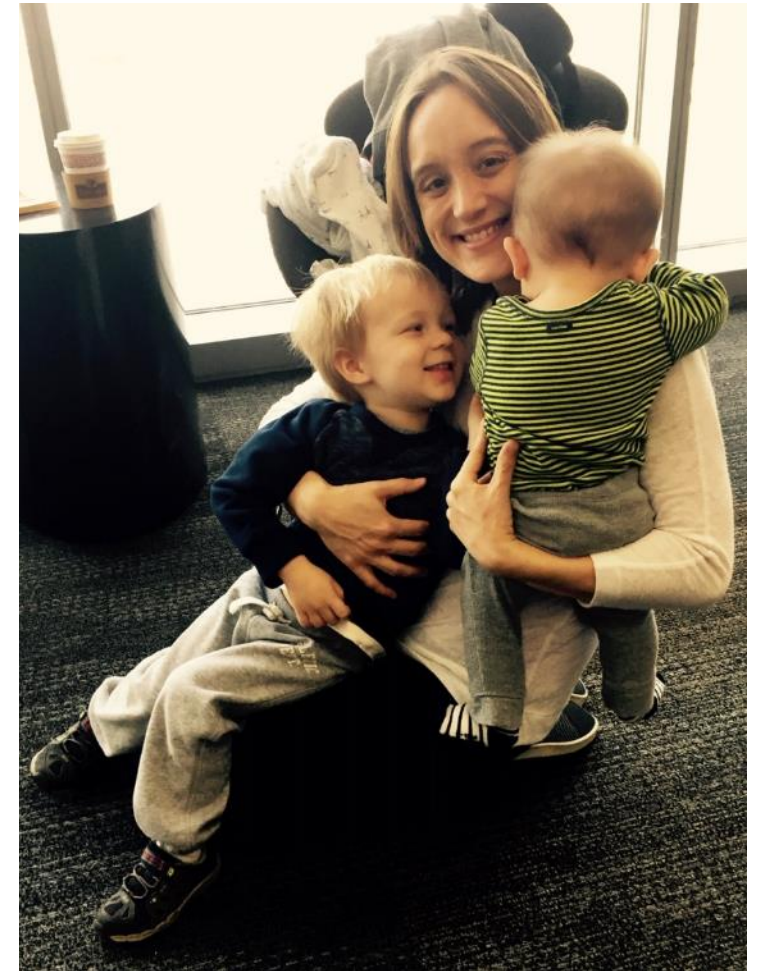
- If we could go back and do one thing different, it would be....
  - Maybe stop “thinking” so much and just do!
  - Slow to start screening (Pilot started April 2019)



# Gratitude

Thankful for lessons learned...

- It's not even about the screen – it's about your relationships with your patients.
- Use the screen as a tool to promote discussion and ensure universal catchment – then move on and get to know your patients as people. A screening form won't solve the problems – human connection will. It's a journey, not a quick fix.



# Next Steps

- In an ideal world one year from now, our Ravenswood Pediatric Social Screen will be used in the entire department and it will trigger a shift to focusing on the positive – positive parenting, hope, building resiliency. We will also better screen for and address maternal depression / anxiety.
- In an ideal world 3-5 years from now, our screening would actually be fully incorporated into Centering Parenting, which we see as the more ideal model of care to holistically address these issues and support our families.



# Discussion Questions

- Now that we've spent all this time crafting our "ideal" tool to explore ACEs, to promote positive parenting, to screen for and address maternal depression, and to promote resiliency... what do we do about the PEARLS tool just approved by CA state??!!

