

# Building a better trauma informed clinic in San Mateo County



San Mateo County Health Team

Team: Guillermo Vasquez, Ivonne Garcia, Krissandra Rivera, Janet Chaikind, Kathleen Cooke Harris, Hedwig de Ocampo, Ivette Huerta

November 4, 2021



**COUNTY OF SAN MATEO**  
HEALTH SYSTEM

# Our Ideal Future

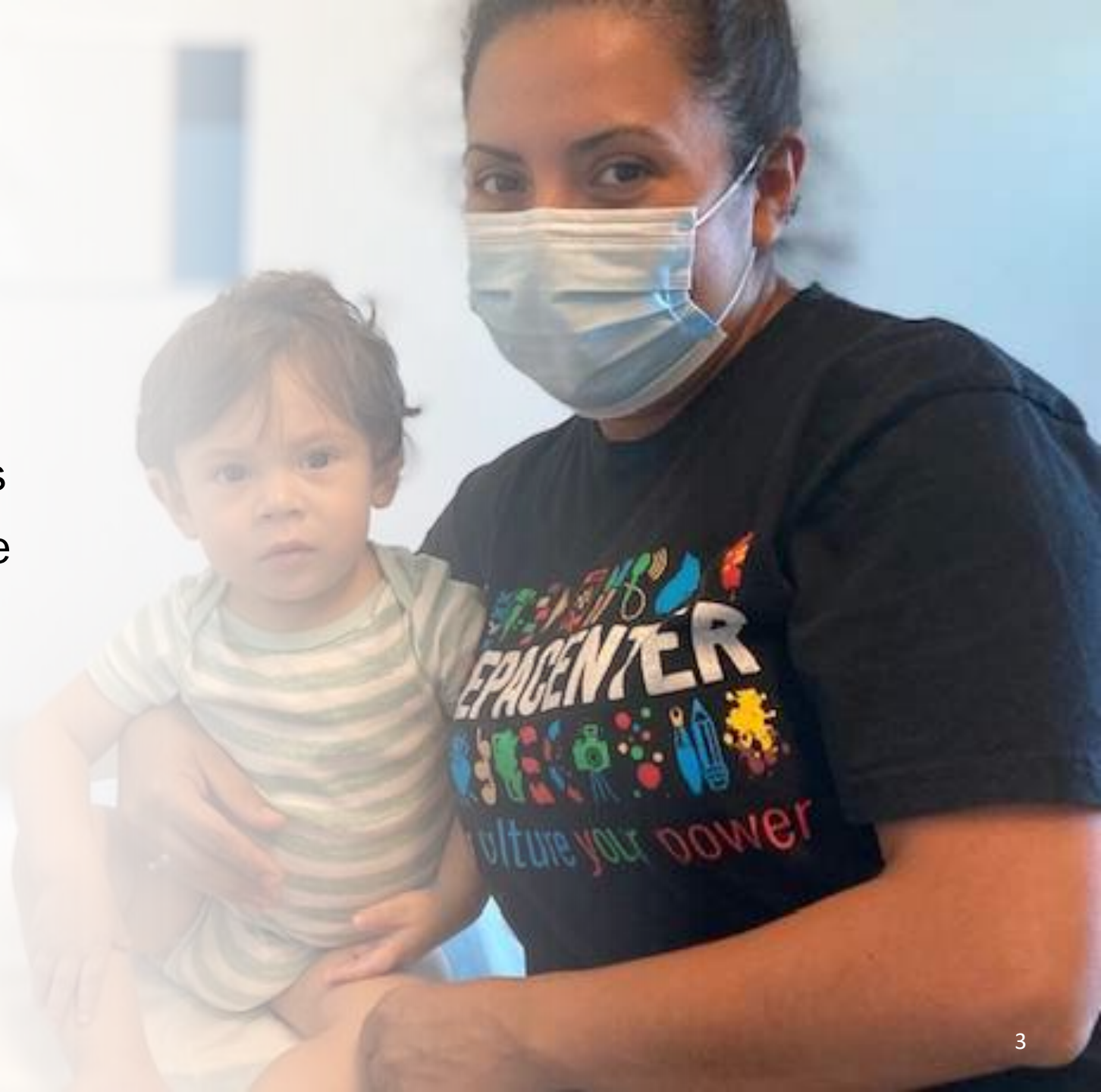
- Ryan – 11 years old, complaints of headache and abdominal pain.
  - Chart shows several interventions with no improvement.
  - Provider noticed several Ryan has history of ACEs.
  - Family chose several protective actions to take, including dedicated family walks.
  - Family reports improved symptoms.
- **Goal:** Fair Oaks Health Center seen as a Healing Organization: a Trauma Informed clinical environment where staff are better equipped to assess and support patients who may have experienced trauma in some way.

---

# Challenges and Barriers

---

- Training for all staff is still in progress
- FOHC is a busy clinic and limited time with patients
- A standard work is still not fully developed
- Ongoing COVID-19 pandemic





# Key Insights about our Current State

- Interviews of providers, nursing staff, PSAs and patients
- "I wish I had this information when I was growing up. It would have helped so much"
- We are not starting at zero. These changes are already happening across County Health.



## Our 2 Year Plan:

1. Implement an annual ACES screening for all pediatric patients at FOHC
2. Establish clear referral systems
3. Improve availability and access to self-care resources onsite for clinic staff





# Why this is important

---

Improves patient health and satisfaction

Improves job satisfaction and reduces burnout in clinic staff

Reimbursement from MediCal for ACES screening



# What If We Don't Move Forward with This Work?

- Patients will remain untreated and continue to suffer from problems that we know we can address to reduce the effects of toxic stress.
- Missed opportunity to improve job satisfaction and decrease the risk of staff burnout
- Miss out on reimbursement revenue by not screening for ACEs

# What We Need to Make This Happen

---

- Identify 1-2 nursing staff with designated time to work with Kathy in rolling initiative out at FOHC:
  - Logistics
  - Workflows
  - Overall Nursing perspective
- Community Health Worker that is trained and given designated time to provide support and education/referrals to patients who identified positive for ACES





# Thank you for your time

---

- San Mateo County Health Team
- Team: Guillermo Vasquez, Ivonne Garcia, Krissandra Rivera, Janet Chaikind, Kathleen Cooke Harris, Patty Castillo, Hedwig de Ocampo, Ivette Huerta
- Primary Contact: [gvasquez@smcgov.org](mailto:gvasquez@smcgov.org)



# Children's Health Center

Showcase  
Nov 2021

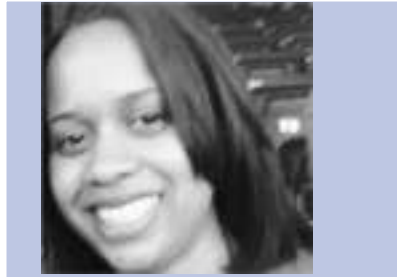
UCKERBERG SAN FRANCISCO  
HOSPITAL AND TRAUMA CENTER

# Our RBN Team!

---



Maité Garcia  
Bridges, Family Resource  
Navigator



Dominique Nash  
Front Desk Supervisor



Dannielle McBride  
Provider/Pediatrician



Maggie Gilbreth  
Associate Medical Director,  
Provider/Pediatrician



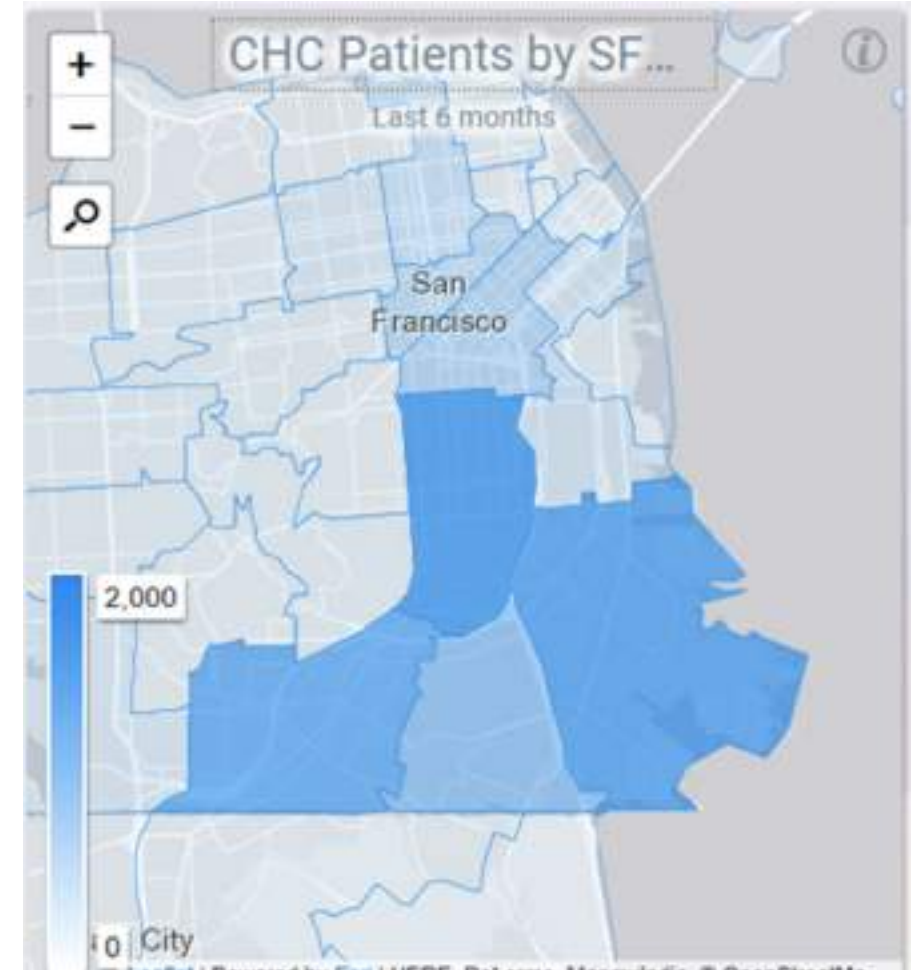
Kathryn Hallinan  
Healthy Steps Specialist



# Children's Health Center (CHC)



CHC provides Primary Care, Urgent Care, and Pediatric Specialty Care services with over 30k visits per year to over 10k unique patients per year, including our >8,000 primary care patients



# Our Vision

---

Children's Health Center becomes a healing organization with a trauma-and-resilience based care model for patients and environment for team members

# Challenges and Barriers

---

1. We have a trauma-organized clinical environment for patients and team members
2. We lack the routine inclusion and elevation of patient voice in operational decisions and strategy
3. Our patients experience variability in the approach and efficacy of SDOH screening and resource navigation



# Accomplishments in Year One (Nov 2021-22)

---

1. Learning from and building on successes of others
  - a. Hold listening sessions with existing programs and leaders working in CHC in our thematic and operational areas
  - b. Building from existing “wins/successes” like the Health Advocates, Bridges Family Navigator, and Journey-Mapping programs
2. Supporting intentional collaboration across disciplines and programs
  - a. Pilot new approach to cross-discipline communication with regular meetings that include Front Desk and Nursing
  - b. Hosted training for all programs and people who provide SDOH screening and resource connection, ongoing email communication across teams
3. Supporting well being and resilience of team members
  - a. Hosted Spring 2021 clinic-wide retreat, with additional support from the CHC Leadership Team
  - b. Supported STEP survey roll-out, with huge increase in participation in 2021 compared to 2020

## Our Goals in Year 2 (Nov 2022-2023)

---

1. Continue and deepen collaboration across programs and people who provide SDOH screening and support in CHC (2 Additional Shared Trainings)
2. Pilot a sustainable program for collecting and incorporating patient/caregiver voices into CHC operational decisions
3. Present proposed clinic-based innovations/changes based on patient input to 6M multi-disciplinary leadership team for discussion and approval
4. Review CHC's STEP survey data, with an eye toward burnout, sense of community, and building team member resilience
5. Continue cross-disciplinary gatherings, like meetings, retreats and celebrations

# Our Asks for Institutional Leadership

---

- Provide support across the DPH/UCSF relationship for our vision and goals
- Specifically:
  - Advocate for staffing, resources and support for SDOH screening and resource connection and across disciplines for CHC
  - Support ideas and asks that stem from CHC patients and their families
- Continue to provide the flexibility and support for our RBN team, financial structure, and reporting requirements - THANK YOU!



# Resilient Beginnings Network

Alameda Health System – Highland Pediatrics

Parish Ford, RN

Robert Savio, MD

Sam Singer, MD

Bretsy Valadez, CMA

Karen Wise, PsyD



**ALAMEDA**  
**HEALTH SYSTEM**

November 4, 2021

# Towards More Trauma-informed Care

## “What happened to you?”

- ▶ Baby boy born to mother recently arrived from Mexico
- ▶ Four siblings also began to receive primary care, but services were very difficult to coordinate
- ▶ Referred to DULCE medical–legal partnership with East Bay Community Law Center
- ▶ Referred to Human Rights Clinic
- ▶ Terrible trauma and tremendous resilience revealed

# Our patients and families have high needs

- ▶ More than 80% of parents bringing newborns to Highland Pediatrics have at least one adverse childhood experience. More than 43% have 4+ ACEs (more than twice the statewide average).
- ▶ These ACEs and the surrounding toxic stress have significant effects on patients' health as children and into adulthood.
- ▶ We are only beginning to ask families about trauma. When we do, our responses are not well coordinated.





# Assessing the current state at AHS

- ▶ AHS has several areas striving for more trauma-informed care
- ▶ There is limited communication among these programs
- ▶ There is little engagement with patients and families to make their experiences more healing, relational, and equitable



# RBN Year 2 Plan:

## Alameda Health System – Highland Pediatrics



- ▶ Training in trauma–informed care for all staff and providers at Highland Pediatrics.
- ▶ Expand screening for Adverse Childhood Experiences
- ▶ Develop trauma– and resilience–informed interventions in partnership with Behavioral Health



# Why is Trauma-informed care so important?

- ▶ If we focus only on what we see, instead of what is important to patients, we miss chances to address serious—and costly—health risks
- ▶ Acknowledging our patients' trauma helps us to shape a more healing experience for them
- ▶ Identifying traumatic experiences in our patients will help us to mitigate downstream health affects



# There's something different in the "Thank you"

- ▶ Understanding how healthcare personnel manage our personal and vicarious trauma makes us better caregivers
- ▶ This will strengthen our resilience and prevent burnout
  - *Help us be the best caregivers we can be*
- ▶ Coordinate our system's response to families, becoming a more healing organization



# How can AHS leadership help?

- ▶ Provide time for staff training in trauma-informed care
- ▶ Support personal and team-based reflection on working with traumatized families
- ▶ Add ACEs Screening to Pediatric Department quality metrics
- ▶ Spread our practices – trauma-informed care, ACEs screening, and intervention throughout the health system







Alameda Health System

Highland Pediatrics

Contact: Sam Singer - [ssinger@alamedahealthsystem.org](mailto:ssinger@alamedahealthsystem.org)