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### Screening for Adverse Childhood Experiences in Primary Care.

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# Screening for Adverse Childhood Experiences in the Primary Care Setting

## A Quality Improvement Project Using 7 Dimensions of Patient- and Family-Centered Care

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### The Problem

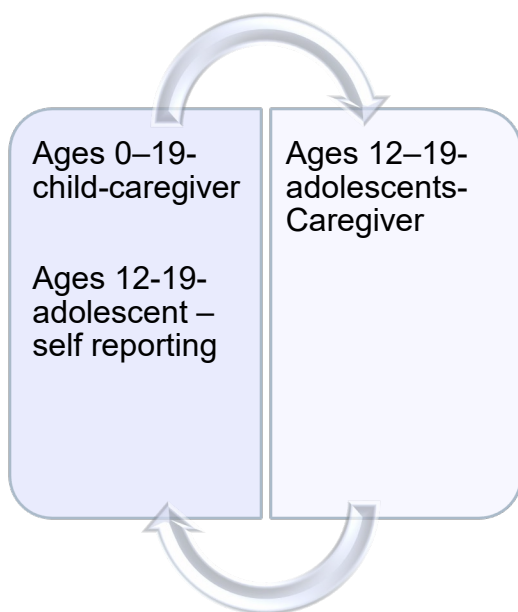
Adverse childhood experiences (ACEs) include physical, sexual or emotional abuse, parental neglect, poverty, parental loss, family dysfunction, and witnessing domestic violence. Sixty percent of adults having one or more adverse childhood experiences (Flanagan et al., 2018).

ACEs are:

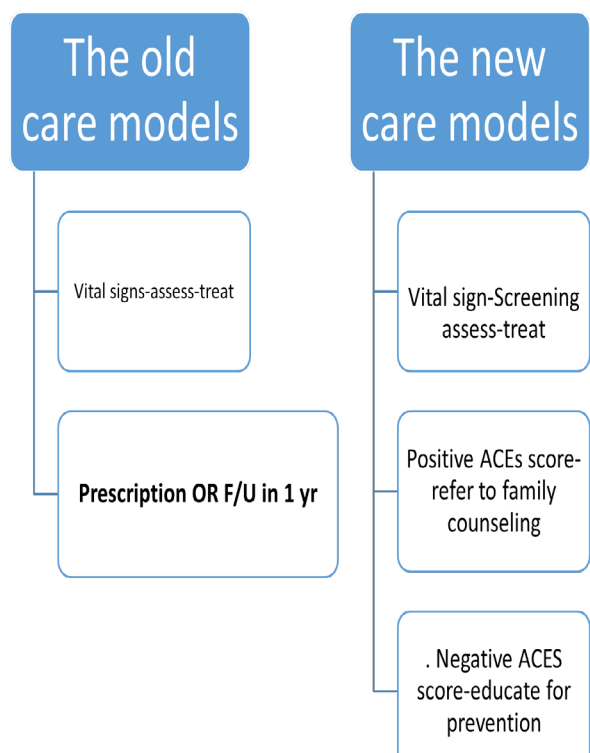
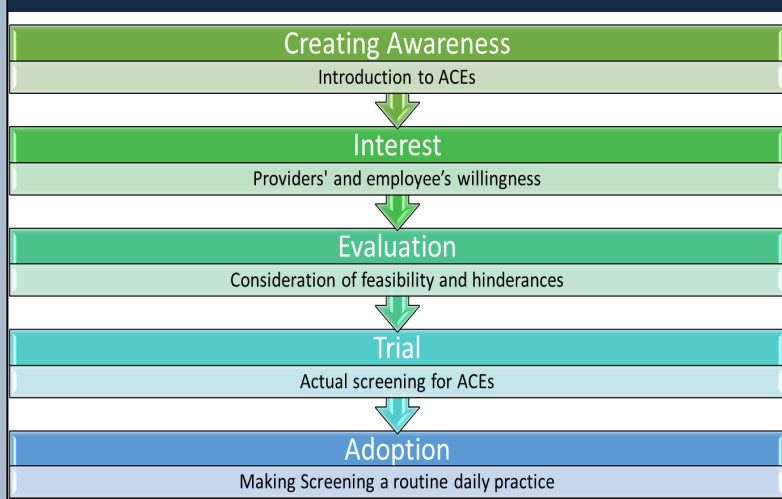
- Risk factors for negative life outcomes in juveniles and adulthood.
- Potentially traumatic events
- Occur in childhood between (0-17)
- Toxic stress from ACEs changes brain development and affects how the body responds to stress (CDC, 2019).

ACEs are precursors to multiple conditions. New complexity in practice will propose screening tool in primary care setting for early detection and prevention.

### Selecting the appropriate screening tool



### Frameworks: DOI



Linear/authoritarian

PFCC

### Dimensions of Care : 1 & 2

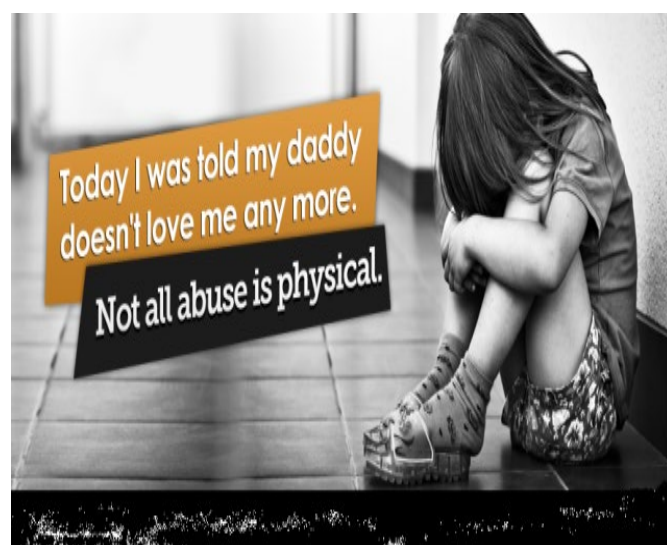
1) Respecting values, preferences, and individual need.



2) Coordinate and integrate care. ACEs scores determine direction of care e.g., referral to counseling (individual or family), anger management depending on individual need.

### Dimensions of Care : 3, 4, & 5

3) Informing, communicating, and educating. Discussing ACEs, consequences, management options and prevention.



4) Providing physical comfort through trauma care and management: medications for symptoms and counseling for both ASD and PTSD, reassurance and address coping skills

5) Providing emotional support to alleviate fear and anxiety: to show caring attitude allows for rapport and trust between patient and their providers, making focus on what is important to them easier, increasing their satisfaction and compliance (Eberts, 2019).



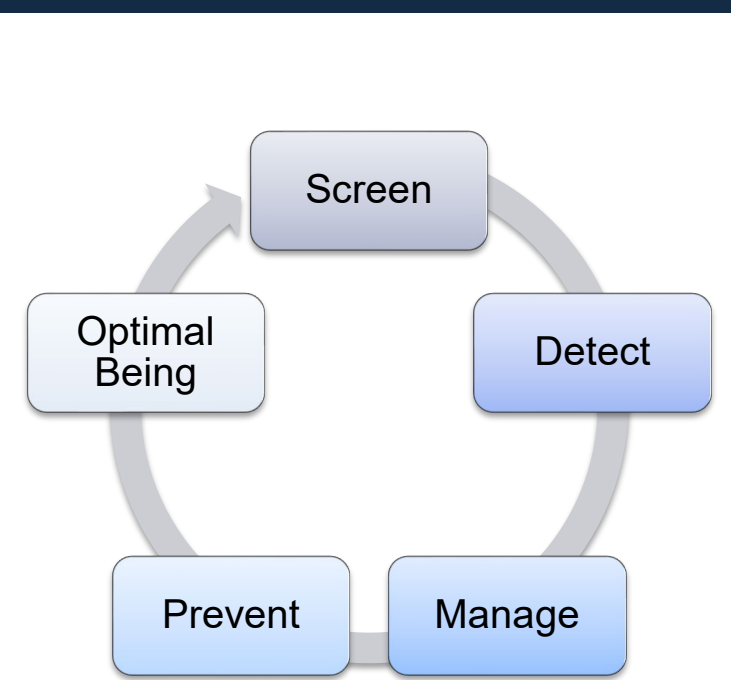
### Dimensions of Care: 6 & 7

6) Involving family and friends in care: key component of Patient Family Centered Care (PFCC) is involving families and friends in patient care, using the four fundamental principles of collaboration, demonstrating dignity and respect, sharing information, and encouraging participation in patient care (Shaibu et.al., 2019).

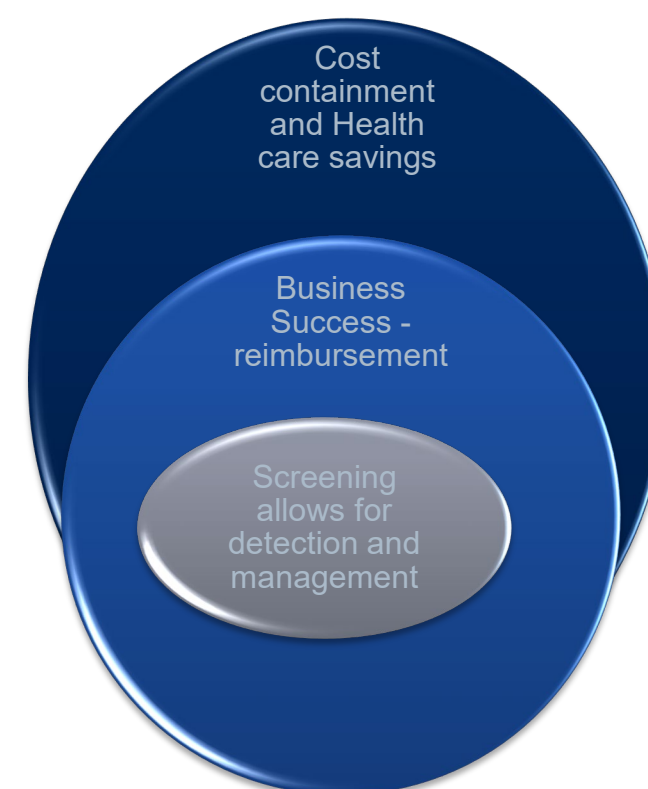


7) Fostering transition and continuity of care involves accessibility to physical, clinical, social and momentary support, it is a continual effort to: provide information e.g. about food pantry, educate on free or affordable services in places like the public health department and others.

### Patient Outcome



### Practice and National Outcome



### Diffusion of Innovation (DOI)

## Providers

Certified Medical Assistants

Front Desk Personnel

Parents, guardians, other family members

Finally, change is constant, we can influence its circumstances and consequences even if we cannot control it, we can give it direction (Crowell & Boynton, 2020, p 7).

### ACEs Screening Tool

CYW Adverse Childhood Experiences Questionnaire (ACE-Q) Child

To be completed by Parent/Caregiver

Today's Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Your Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Many children experience stressful life events that can affect their health and wellbeing. The results from this questionnaire will assist your child's doctor in assessing their health and determining guidance. Please read the statements below. Count the number of statements that apply to your child and write the total number in the box provided.

Please **DO NOT** mark or indicate which specific statements apply to your child.

1) Of the statements in Section 1, HOW MANY apply to your child? Write the total number in the

Section 1. At any point since your child was born...

1) Your child's parents or guardians were separated or divorced

2) Your child lived with a household member who served time in jail or prison

3) Your child lived with a household member who was depressed, mentally ill or attempted suicide

4) Your child saw or heard household members hurt or threaten to hurt each other

5) A household member swore at, insulted, humiliated, or put down your child in a way that scared your child OR a household member acted in a way that made your child afraid that s/he might be physically hurt

6) Someone touched your child's private parts or asked your child to touch their private parts in a sexual way

7) More than once, your child went without food, clothing, a place to live, or had no one to protect her/him

8) Someone pushed, grabbed, slapped or threw something at your child OR your child was hit so hard that your child was injured or had marks

9) Your child lived with someone who had a problem with drinking or using drugs

10) Your child often felt unsupported, unloved and/or unprotected

2) Of the statements in Section 2, HOW MANY apply to your child? Write the total number in the

Section 2. At any point since your child was born...

1) Your child was in foster care

2) Your child experienced harassment or bullying at school

3) Your child lived with a parent or guardian who died

4) Your child was separated from her/his primary caregiver through deportation or immigration

5) Your child had a serious medical procedure or life-threatening illness

6) Your child often saw or heard violence in the neighborhood or in her/his school neighborhood

7) Your child was often treated badly because of race, sexual orientation, place

CYW ACE-Q Child (6-12 yrs) © Center for Youth Wellness 2015

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