

## Trauma-Informed Primary Care (TIPC) Meeting Summary

Wednesday, June 15, 2023, 10:00 a.m. -12:00 p.m. PDT

The **Trauma-Informed Primary Care (TIPC) Implementation Advisory Committee** met virtually on **June 15, 2023**. This document summarizes the meeting and the key themes and recommendations, which will be considered in the ongoing implementation of the ACEs Aware initiative. Visit [ACEsAware.org](https://www.acesaware.org) for meeting slides and agenda.

### **TIPC Members in attendance:**

- Kim Bower, Blue Shield of California
- Armika Berkley on behalf of Kari Carlson, TPMG, Northern Cal Kaiser Permanente
- Jonathan Goldfinger, Goldfinger Health
- Kim Johnson, California Department of Social Services (CDSS)
- Cindy Keltner, California Primary Care Association (CPCA)
- Karen Larsen, Steinberg Institute
- Demetria Malloy, Anthem Blue Cross
- Julianne McCall, California Governor's Office of Planning and Research
- Connie Mitchell, California Department of Public Health (CDPH)
- Alecia Sanchez, California Medical Association (CMA)
- Jim Suennen, California Health & Human Services Agency (CalHHS)
- Brent Sugimoto, California Academy of Family Physicians (CAFP)
- Tracy L. Ward, National KP Community Health

### **TIPC members not in attendance:**

- Jack Anderson, County Health Executives Association of California (CHEAC)
- Gatanya Arnic, Center for Youth Wellness (CYW)
- Eric H. Ball, American Academy of Pediatrics (AAP) - Orange County, California
- Marti Baum, California Medical Association (CMA)
- Michael Brodsky, L.A. Care Health Plan
- Michelle D. Cabrera, California Behavioral Health Directors Association (CBHDA)
- Yvonne Choong, California Medical Association - Center for Health Care Policy
- Mercie Di Gangi, SPMG, Southern Cal Kaiser Permanente
- Lisa Folberg, California Academy of Family Physicians (CAFP)
- Carol Gallegos, California Department of Health Care Services (DHCS) - Legislative and Governmental Affairs
- Mary Ann Hansen, First 5 Humboldt
- Katherine Haynes, California Health Care Foundation (CHCF)
- Farrah McDaid-Ting, California State Association of Counties (CSAC)
- Frank Mecca, Mecca Strategies
- Pooja Mittal, Health Net
- Melissa Rolland, California Department of Health Care Services (DHCS) - Legislative and Governmental Affairs
- Kiran Savage-Sangwan, California Pan-Ethnic Health Network (CPEHN)

- Richard Thomason, Blue Shield of California Foundation

**Staff and Consultants:**

- **Department of Health Care Services (DHCS):** Thai Lee, Karen Mark
- **Office of the California Surgeon General (CA-OSG):** Diana Ramos, Berit Mansour, Julie Rooney
- **UCLA-UCSF ACEs Aware Family Resilience Network (UCAAN):** Jennifer Estrada, Dayna Long, Edward Machtinger, Brigid McCaw, Paula Murphy, Aaron Norr, Mikah Owen, Yali Bair Ruiz, Zed Santiago, Jeff Sheehy, Nina Thompson, Shannon Thyne, Emily Williams, Cheryl Wold, Stevie Youssef

**Members of the General Public: 27**

**Slides:** The presentation slide deck can be found on the [ACEs Aware website](#).

## Remarks from the Office of the California Surgeon General

After Emily Williams, UCAAN CEO, reviewed the agenda, Diana Ramos, California Surgeon General, provided welcome remarks and discussed her excitement about the opportunities for integrating ACE screening and response in reproductive health care settings. Ramos, who is an OB/GYN, also announced that her office is working to identify California leaders who can advance this work.

Staff from CA-OSG -- Julie Rooney and Berit Mansour -- provided updates on two of their workstreams related to ACEs: trauma-informed training for educators and a public awareness campaign.

The Children and Youth Behavioral Health Initiative (CYBHI) allocated \$1 million for CA-OSG to develop a trauma-informed training for early care and education personnel, called *Safe Spaces: Foundations of Trauma-Informed Practice for Educational and Care Settings*. The goals of the training are to provide greater awareness of the impact of stress and trauma on health, development, and learning and provide key mindsets and strategies to help create the conditions for safe and supportive learning environments for everyone. They announced that the training was scheduled to launch on July 12, 2023, at [osg.ca.gov/safespaces/](https://osg.ca.gov/safespaces/).

CA-OSG was allocated \$24 million through the CYBHI to develop an “ACEs and Toxic Stress Statewide Healing-Centered Campaign”. The goals of this public awareness campaign are to promote a broad understanding of ACEs, toxic stress, and their impacts; inspire healing and hope among those who have experienced ACEs; and provide support to parents and caregivers in raising resilient children and creating positive experiences for them, while also supporting older youth with the tools to enhance self-care and reduce stress.

The campaign will target communities most impacted by ACEs, including economically disadvantaged communities, LGBTQ+ communities, communities of color, immigrants, and refugees, rural communities, and justice- and system-involved youth. CA-OSG plans to soft launch the campaign in November 2023 and publicly launch it in spring 2024.

CA-OSG then answered questions that TIPC members entered in the chat.

**John Goldfinger** asked Ramos if she had “connected with FPA Women’s Health where we universalized ACEs screening?” Ramos responded that “there are MANY other partners to help promote ACEs in reproductive health. I specifically mentioned the programs that had not been previously mentioned. Family Practice physicians are another group.” Ramos invited members to reach out if they would like to assist in this effort.

**Goldfinger** asked Rooney and Mansour how the \$24 million CYBHI-funded campaign will be evaluated. Mansour responded: “We’re still discussing specific ways to measure and evaluate the impact of the campaign, but we are working with RAND on that aspect. If you have ideas for evaluation that we should consider, please feel free to email Julie and myself.”

**Brent Sugimoto** directed a comment to Ramos: “Family physicians do provide a significant portion of reproductive age care, especially to underserved patients and those in rural settings. CAFPP would love to partner on this.”

**Cynthia Keltner** commented that “Community Health Centers provide reproductive age care and CPCA would love to partner with you on this initiative.”

## Updates from the California Department of Health Care Services (DHCS)

**Karen Mark, DHCS Medical Director**, provided an update on the ACEs Aware initiative, based on data from the [most recent quarterly data report, published in May 2023](#).

Highlights from the report include:

- Medi-Cal clinicians have now conducted more than 1.5 million ACE screenings of more than one million unique Medi-Cal members.
- 83% of all screenings conducted were of members ages 0 to 20, 5% of whom had an ACE score of four or greater, indicating a high risk for toxic stress
- 17% of all screenings conducted were of members ages 21 to 64, 14% of whom had an ACE score of four or greater.
- As of March 31, 2023, more than 29,160 individuals completed the “[Becoming ACEs Aware in California](#)” online training, which educates clinicians and their teams on how to provide trauma-informed care (TIC), screen for ACEs and assess the risk of toxic stress, and use clinical protocols to develop a treatment plan to prevent and mitigate toxic stress. Among those were approximately 13,150 Medi-Cal clinicians who are eligible to receive Medi-Cal payment for conducting ACE screenings.

Dr. Mark then answered questions that TIPC members put in the chat.

**Keltner** asked what percentage of clinicians the numbers represent. Mark responded that the initiative has trained a third of Medi-Cal clinicians, which is a significant percentage. She added that they would like higher numbers but have made considerable progress.

**Goldfinger** asked how the rates of ACEs compare to prior datasets. Mark said she would need to check and would follow up offline. She also mentioned that the ACEs Aware screening data looks only at Medi-Cal members and not the general population.

## UCAAN Updates

**Edward (Eddy) Machtinger, UCSF Professor of Medicine and Co-Principal Investigator of UCAAN**, shared UCAAN's vision for how the ACEs Aware initiative, in the context of a changing health care ecosystem, can play a critical role in overcoming entrenched health disparities in California. UCAAN's vision is for "a trauma-informed health care system that partners with the community to be a powerful protective factor that prevents and interrupts the impact of adversity and toxic stress on health and well-being and achieves health equity for current and future generations."

Machtinger also introduced UCAAN's domains of work that operationalize this vision, including:

- Training clinical teams in ACE screening and clinical response.
- Transforming clinical practice by funding pilots and learning collaboratives in frontline clinics and community settings to innovate practices and develop the evidence to inform trainings.
- Developing trauma-informed networks of care so clinics can partner with communities to access protective factors, resources, and expertise to prevent and respond to ACEs and toxic stress.
- Working to align systems of care, policies, and funding streams so a new ecosystem emerges that supports clinical practice to function as a protective factor.
- Rigorously evaluating UCAAN's efforts and identifying and disseminating best practices and evidence in identifying and responding to toxic stress.

**Mikah Owen, Senior Director of Clinical and Academic Programs, Health Equity**, provided an overview of current activities related to UCAAN's domains of work. He discussed the expansion of ACEs Aware training initiatives, including the *Implementation with Intention* Webinar series, which launched in January 2023. Owen discussed additional plans for expanding online courses and webinar trainings in response to community feedback as well as in recognition that achieving long-term goals for preventing ACEs and mitigating the impact of toxic stress at scale can't be done in the clinical setting alone and requires cross-sector collaboration.

Owen also discussed several initiatives aimed at providing coaching, technical assistance, and support to clinical teams working to implement or sustain an ACE screening and response program. He shared information about ACEs Aware community councils and advisory groups that were launched to infuse the lived experience of patients, communities, and service providers into UCAAN's work.

Owen provided an update on community funding for trauma-informed networks of care across California – a major component of the ACEs Aware initiative. In the past year, most of this work has been focused on the Preventing and Responding to ACE-Associated Health Conditions and Toxic Stress in Clinics through Community Engagement (PRACTICE) Learning Collaborative, the goal of which is to increase the workforce and services need for primary care clinics to expand

and sustain ACE screening and response in local communities. He announced that a future round of community grants as well as a learning community will be launched in the fall.

**Shannon Thyne, UCLA Chief of Pediatrics and Co-Principal Investigator of UCAAN,** provided an update on the Innovation Lab, known as iLab, which leverages UCAAN's experience and expertise to support the integration of emerging best practices in ACE screening and response across California.

The iLab was launched with a particular focus on integration between the medical setting and community supports. Most of iLab's foundational work is conducted in Los Angeles County's safety net, where ACE screening and response was launched in an integrated health system, and is the second largest municipal health system in the country.

The clinics in Los Angeles County have experienced common barriers and through the iLab have developed workflows and strategies to support overcoming those barriers when they are encountered in new settings. The goal is to use this experience to support teams in other settings as they start, sustain, and improve their ACE screening and response activities.

Thyne described the goals of the new ACEs Aware Clinical Implementation Pilot program, another iLab initiative designed to help early-stage clinics overcome barriers to implementing ACE screening and response. Clinics that participate in the pilot program receive tailored coaching and technical assistance from the iLab team as well as a small amount of funding.

**Dayna Long, UCAAN Adviser,** presented information about an iLab project to evaluate the impact of ACE screening and response in Los Angeles County populations served by the ACEs-Los Angeles Network of Care. The resulting data will be used to support screening, responding, and preventing ACEs and toxic stress on a larger scale.

UCAAN then answered questions that TIPC members entered in the chat.

**Keltner** commented that "Our members, Community Health Centers, love to hear from their colleagues about how they implement initiatives and learn from staff on the ground in clinics so anytime we can include that focus in the trainings it will be highly impactful for our members."

**Owen responded:** "A lot of what we're doing is direct outreach to clinics, particularly where there isn't great uptake, especially to learn what the barriers to screening are; we are actively working on identifying what is the resistance to screening."

**Keltner** added that "any time we can include the work of others, it helps with the messaging."

**Owen** replied: "We want to include them and highlight the work they are doing. When people work to implement ACE screening and respond almost universally, they find it adds value and they see a lot of value in it; hearing it directly from the people who are doing it is a great opportunity; reps from Marin Community Clinics will do exactly that [at an [upcoming webinar referenced in the presentation](#)]; also there are a lot of opportunities for us to engage to learn about what is working, what's not working, and how the initiative can support them at scale."

**Sugimoto** asked if UCAAN has "activities for training specifically in residency programs? I don't

know of a systematic approach to training residents, but TIC-trained residents are key for disseminating and normalizing TIC in health systems, or as you say, to build capacity to do this ‘at scale’.”

**Owen** responded that UCAAN is doing a lot of work in reaching out to training programs and has already reached out to every pediatric program in California. Soon UCAAN will be reaching out to family practice programs. Owen also mentioned that UCAAN is trying to find out how to make ACEs Aware trainings more tailored to those populations as they expand focus beyond pediatrics and family practice to specialties like reproductive health.

**Goldfinger** asked if there will be “a screening of providers ourselves, to show drivers of who might resist screening, who might be traumatized by it, who might be more susceptible to burn out, and may need systematized buffers of toxic stress to truly have trauma-informed health care?”

**Machtinger** responded “The ecosystem in which folks are providing trauma-informed care is in fact traumatizing,” mentioning that people work in nearly impossible situations and sometimes racist work environments. “We have to be sober about that and not ignore that as we are doing in the rest of our educational and training program,” he said.

**Goldfinger** added that he had recently learned that an ACE score of four or more qualifies Medi-Cal members for Enhanced Care Management (ECM), one of the new benefits available under CalAIM, as well as medical necessity eligibility for specialty mental health services. He asked how UCAAN planned to measure the impact of new CalAIM benefits, including ECM, Community Health Workers, Dyadic Care, and Family Therapy.

**Thyne** responded that the Los Angeles County Department of Health Services is working on ECM and has specifically targeted the 4+ ACEs group for enrollment outreach and that this will allow UCAAN to examine the impact.

## Public Comments

Three members of the public requested to make public comments. One attendee asked that her comments be read aloud and two people read their comments themselves. (Access a [recording of the public comments](#).)

### Setareh Harsamizadeh Tehrani

*Hi. My name is Setareh Harsamizadeh Tehrani, I'm actually a student and I would like to address my comment to the Office of the California Surgeon General and the ACEs Aware leadership. I'm a patient advisor at UCAAN ACEs Aware and a public health major from Santa Clara University, graduating in two days. I've worked on mental health promotion and have served as a Student Wellness Ambassador and an Alameda County Mental Health Equity scholar in my campus community, both at Santa Clara University and also in my community college, Ohlone College, prior to me transferring. I really believe that it's essential to get student feedback. I suggest that the public health awareness campaign and the ACEs and toxic stress campaign ask for community lived experiences and feedback and include the student population in their advisory boards. Thank you.*



**Josue Pineda**

*Good morning. My name is Josue Pineda and I'm a patient advisor at UCAAN/ACEs Aware. I work with currently and formerly incarcerated youth from several counties in California. I'm a case manager, mentor, and youth reentry navigator with Hoops 4 Justice, and I appreciate the opportunities I've had to offer my lived experience at UCAAN. I'm hoping that the ACEs Aware public awareness campaign relies heavily on lived expertise as well as -- you know, it's crucial to ensure that all populations find the campaign useful and acceptable. I would love the opportunity to collaborate in the future, if possible, just to provide further support throughout everything that I've done with ACEs Aware and UCAAN. Thank you.*

**Priscila Bacio, Program Coordinator, Health Improvement Partnership of Santa Cruz County (comment read by Emily Williams)**

*This is great information. It is great to know of the ACEs work that is happening. My organization is part of the ACEs Aware PRACTICE grant and have not heard about this work. It would be really amazing to become part of the TIPC meetings. I am not a TPIC member, but it would be so helpful to have these slides to share with my PRACTICE grant team. As for the ACEs Aware public awareness campaign, it would be great to have the team promote ACEs not only in big cities, but also in rural, underserved, and under-resourced areas. I work in Santa Cruz County, but I am from Monterey County and a lot of my colleagues in this area do not know about ACEs. It would be great to also educate future physicians/clinicians who are currently in medical, nursing, and physician assistant schools. I say this because we have an intern who is in medical school and when he mentioned ACEs, a lot of students were not aware of this initiative in California.*

## Adjournment