ACE ROUTINE ENQUIRY IN HEALTH VISITING: IMPLEMENTING THE ANGLESEY PILOT

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INTRODUCTION

- BACKGROUND TO THE ACE ROUTINE ENQUIRY
- > PLANNING AND CONSULTATION
- > TOOLKIT GUIDANCE AND APPROACH
- ➤ CONCERNS REALISED?
- > RECOMMENDATIONS
- > CONCLUSION

BACKGROUND

- GROWING RECOGNITION OF THE LONG TERM IMPACT OF ACES ON CHILDREN'S LIFE OUTCOMES
- Public Health Wales undertaken studies into aces- publishing reports on the impact of aces on health harming behaviours
- TACKLING ACES IS A PRIORITY FOR WELSH GOVERNMENT (TAKING WALES FORWARD / PROSPERITY FOR ALL) COMMITTED TO CREATING ACE AWARE PUBLIC SERVICES WHICH TAKES A MORE PREVENTATIVE APPROACH TO AVOID ACES AND IMPROVE THE RESILIENCE AND LIFE OUTCOMES OF CHILDREN AND YOUNG PEOPLE.

HTTP://GOV.WALES/DOCS/STRATEGIES/1060920-TAKING-WALES-FORWARD-EN.PDF

HTTP://GOV.WALES/DOCS/STRATEGIES/170919-PROSPERITY-FOR-ALL-EN.PDF

INITIAL DRIVE

- Anglesey county council's drive towards an ace aware community on the island
- CHILDREN'S PARTNERSHIP ASSISTANT AREA DIRECTOR OF CHILDREN'S SERVICES
 WANTED TO EXPLORE THE FEASIBILITY OF AN ACE ENQUIRY WITHIN HEALTH VISITING.
- HEALTH VISITORS BEST PLACED TO RAISE PARENTAL AWARENESS OF ACES, THEIR
 PREVALENCE, IMPACT AND PREVENT THE INTERGENERATIONAL TRANSMISSION OF ACES
- AIM TO EXPLORE THE ACCEPTABILITY OF AN ACE ROUTINE ENQUIRY WITH SERVICE
 USERS AND HEALTH VISITORS.

PLANNING

- Consultation meetings between the health visitor managers and Andrew Bennett Public health consultant for the local authority
- Public health wales were asked to provide an independent evaluation of the work
- Design and delivery was driven by Anglesey County Council and BCUHB Health Board
- Advice on appropriate research processes BCUHB research & development and clinical effectiveness departments.
- ETHICAL APPROVAL SERVICE IMPROVEMENT PROCESS AND SERVICE EVALUATION.
- Data collection It database and process established for questionnaire submission







CONSULTATION

- Involved all Health Visitors across Anglesey (Generic and Flying Start) from September 1st 2017
- Draft supporting Materials were designed between Health Visitor managers and Andrew Bennett
- ACE TRAINING SESSIONS- PURPOSE AND RATIONALE OF ACE ROUTINE ENQUIRY
- HEALTH VISITOR RESOURCE CONSULTATION SESSIONS
- IMPLEMENTATION APPROACH AND KEY STEPS / FINAL TOOLKIT AND TRAINING
- MID IMPLEMENTATION SUPPORT / FEEDBACK SESSION
- FINAL FEEDBACK SESSION



TOOLKIT

- ACES CLIENT INFORMATION LEAFLET
- HEALTH VISITOR'S GUIDE- 4 STAGES : EXPLAIN, ASK, LISTEN AND CLOSE
- APPROACH DIARY PROMPT CARD SUMMARY OF 4 STAGES
- ACE QUESTIONNAIRE
- DIRECTORY OF LOCAL AND NATIONAL SUPPORT SERVICES
- SHORT (5 MINUTE) ANIMATED FILM

WWW.ACES.ME.UK/IN-WALES

Your ACE

The questionnaire involve

While you were growing

- Did you live with a pa household who was
- Did you live with a pa household who was
- 3 Did you live with a pa household who used prescription medicati
- Did you live with a pa household who servi offenders institution?
- Were your parents e
- 6 Did your parents or c hit, kick, punch or be
- Did a parent or other you, insult you, put y in a way that made y
- Did a parent or other grab, slap, or throw s so hard that you had
- Did an adult or other touch their body in a have oral, anal, or va

Your ACE sco

Adverse childhood

Routine enquiry progr Health visitor's guide

Family Support Organisations

Local Support Organisations

Teulu Mon: 01248 725888 between the hours of 8:45am - 5:00pm Monday - Friday

Email: teulumon@anglesey.gov.uk

It acts as the first point of contact for all Children, Families and Professionals in accessing information, advice and assistance relating to Children or the families of children, aged 0-25 years.

We also keep our website www don't forget to add us on faceb outreach events within the con

Anglesey Social Services:

Support and advice for any issu

ACEs: staff prompt card



4. CLOSE

A(Es

Adverse childhood experiences

The term Adverse Childhood Experiences (ACEs) is used to describe a wide range of stressful or traumatic experiences that children can be exposed to whilst growing up. ACEs include being physically, emotionally or sexually abused as a child and growing up in a house with domestic violence, mental illness, alcohol and drug abuse or criminal problems.

www.aces.me.uk/in-wales

BILINGUAL **TOOLKIT**

APPROACH

- 1. EXPLAIN
- 2. Ask
- 3. LISTEN
- 4. CLOSE

ACEs: staff prompt card



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Why we are asking all our patients

'Adverse Childhood Experiences or ACES are stressful events that happen to us when you are young. They can have a negative, lasting effect on health and behaviour."

"Our brains are affected by what happens to us, especially when we are young and when our brains are growing and changing."

2. ASK

Complete the ACE questionnaire

"Knowing about ACEs can help parents give their children the best start in live."

"The ACE questionnaire will help me understand how to support you better."

"We ask all our patients these questions."

3. LISTEN

Ask reflective questions

Respect the patient's willingness to share only what they feel is safe. Good practice not to probe

"I see you have had some difficult childhood experiences. How have these experiences affected you? How do you think they might affect your parenting?"

Patient might not feel ready to disclose her ACEs

"It is hard to think about all this right now. We can talk another time if you want."

Patient with ACEs (high score) might say they are fine

"How do you think you have protected yourself? Did you have help through the hard times?"

4. CLOSE

Thank patient, offer support "Thanks for taking the time to speak with me today."

"If this has affected you, please call me or"

"Who can you talk to tonight ... who will support you?"

WHEN DID THE ROUTINE ENQUIRY TAKE PLACE?

- 6 WEEK CONTACT ROUTINE ENQUIRY ALL CLIENTS
- 8.12.16 WEEK CONTACT FOLLOW UP DEPENDING ON ROUTINE ENQUIRY AND PROFESSIONAL JUDGEMENT
- 6 MONTH CONTACT ROUTINE ENQUIRY COMPARISON GROUP AND OUTCOME QUESTIONNAIRES. CLIENTS THAT DECLINED THE 6 WEEK ROUTINE ENQUIRY MAY BE OFFERED IT AGAIN.

RECORD KEEPING

AT THE 6 WEEK OR RELEVANT CONTACT, STAFF WERE TO RECORD IN THE HEALTH RECORDS:

- ROUTINE ENQUIRY OFFERED
- MOTHER AGREED OR DECLINED TO UNDERTAKE THE ROUTINE ENQUIRY
- THE ACE SCORE
- Any additional information would be recorded as per nmc and all wales record keeping guidance
- THE COMPLETED ACE QUESTIONNAIRE WAS FILED IN THE FAMILY SECTION OF THE HEALTH RECORDS

INITIAL HEALTH VISITOR RESPONSE

MANY CONCERNS WERE RAISED WITHIN THE INITIAL CONSULTATION MEETINGS:

- EMOTIONAL IMPACT PRACTITIONER AND SERVICE USERS
- Workload impact on contact time, documenting, listening & signposting
- CHILD PROTECTION CONCERNS
- MPACT ON HEALTH VISITOR AND CLIENT RELATIONSHIP
- HOW ACE'S COULD BE DISCUSSED WITHOUT MAKING CLIENTS FEEL THAT THEIR ACE HISTORY WOULD MAKE THEM A BAD PARENT

UNREALISED CONCERNS

- NO SERVICE USER SHOWED DISTRESS THROUGHOUT THE PILOT.
- OVERWHELMING POSITIVE CLIENT VIEW OF THE ACE ENQUIRY
- 68% SAID THE SUPPORT RECEIVED FROM THEIR HEALTH VISITOR
 IMPROVED FOLLOWING THE ENQUIRY
- OPPORTUNITY TO DISCUSS ACES WITH A PROFESSIONAL FOR THE FIRST TIME

HEALTH VISITOR CONCERNS WERE NOT REALISED DURING THE PILOT

- Practitioners were happier once training, resources and feedback sessions were provided and they became more skilled.
- DID NOT DEVIATE FROM NORMAL PRACTICE
- ROUTINE ENQUIRY SIGNIFICANT FOR CLIENT ENGAGEMENT.
- QUESTIONNAIRE WAS QUICK AND EFFICIENT DISCURSIVE TOOL
- IMPROVED UNDERSTANDING OF THE FAMILIES FRAMED AS AN INVESTMENT FOR THE FUTURE
- Informed the all Wales FRAIT tool in assessing family resilience not a burden on time
- CHALLENGED HEALTH VISITOR ASSUMPTIONS
- GREATER OPENNESS
- NO INCREASED SIGNPOSTING
- Service users understood the link and how they wanted to parent differently

HEALTH VISITOR RECOMMENDED IMPROVEMENTS

- NEFFICIENT PROCESS FOR DATA COLLECTION
- LACK OF FLEXIBILITY IN WHEN TO ADMINISTER THE QUESTIONNAIRE
- INCLUDE MOTHERS UNDER 18
- INCLUDE FATHERS / PARTNERS

CONCLUSION

- ACE AWARE WORKFORCE AIM TO IMPROVE RESILIENCE AND LIFE OUTCOMES OF CHILDREN
- DISCURSIVE TOOL THAT OPENS UP IMPORTANT CONVERSATIONS
- MPROVED UNDERSTANDING OF FAMILIES
- Assists individuals to reflect on their childhood and understand the potential positive impact of discussing their current circumstances or lifestyle
- ENABLES FOCUSED INTERVENTION WHEN REQUIRED
- Health visitors well placed- to raise parental awareness of aces, their prevalence, impact and prevent the intergenerational transmission of aces
- HEALTH VISITORS REMAIN A ROUTINE FAMILY CENTRED SERVICE WITH REGULAR FAMILY CONTACT IN THE PRE
 SCHOOL PERIOD ALLOWS FOR ONGOING SUPPORT OR FOLLOW UP IF NEEDED
- POSITIVE FINDINGS EXTENDED TO ASSESS TRANSFERABILITY AND SUCCESS IN OTHER HEALTH VISITING SERVICES
 ACROSS WALES, LARGER SCALE RESEARCH ADDRESSING THE RECOMMENDATIONS

ASKING ABOUT
ACES IN HEALTH
SETTINGS-

KATIE HARDCASTLE





Adverse childhood experiences