

South Eastern Health and Social Care Trust

Adverse Childhood Experiences Pilot

Noreen McBride, Project Lead, SET
Colum Benstead, ACE Trainer, SET
Mairead Davey, Project Team, SET
Lisa Bunting, QUB and Project Team

What are Adverse Childhood Experiences?

- Adverse Childhood Experiences (ACE) are those stressful or traumatic life events which occur prior to a person turning 18. They include multiple types of abuse such as sexual, emotional, neglect, witnessing domestic violence, or growing up with substance abuse, mental illness.
- The impact of ACEs is as much a public health issue as it is social work.
- The cumulative experience of such adversities increases the probability of poor outcomes due to the impact of Toxic Stress, particularly in the absence of any resilience factors.

SET ACE PROJECT – STRATEGIC CONTEXT

- In May, 2013, the Department of Health and Social Services and Public Safety (DHSSPS), in collaboration with the Department of Justice, initiated round table talks on the development of an Early Authoritative Intervention (EAI) Strategy in N.I. From these talks, SET agreed to pilot the ACE Project.
- In April, 2012, the DHSSPS outlined its strategy for the direction and development of social work over the next decade aimed at strengthening and supporting the profession in the discharge of its delegated statutory functions.
- EAI means that we can proactively address or prevent the impact of ACEs on children in order to promote better outcomes rather than concentrating on responding only to the consequence of ACEs later in life.

South Eastern HSC Trust Context

- The South Eastern Trust incorporates one of the most deprived council areas in Northern Ireland – Lisburn (Primarily Colin Area), which was assessed to be the 6th highest area of deprivation in Northern Ireland.
- The South Eastern Trust is currently working with approximately 3,731 children in need in 2014/15.
- SET had 377 on the CPR at 31/3/15, representing 19.1% of the total Northern Ireland CPR.
- Physical Abuse was the highest category for registration at 30%, followed by Neglect at 28%. These were also the highest multiple categories at 19%. Emotional Abuse accounted for 9% and Sexual Abuse registration was 6.4%.

ACE Project Scope

- Children's Services Directorate piloted the ACE Study/ matrix as part of the children's assessment process.
- All new referrals received into Stewartstown Road Gateway and SPOE Team from the start of October until the end of April 2016 that required an Initial Assessment had an ACE assessment completed.
- From November 15, The Family Intervention Teams conducted an ACE assessment on all cases transferring from Gateway at the point of ICC or initial LAC Review.
- The Senior Social Workers used the DHSSPS - designed ACE Matrix to help them assess the current impact on the children in the family.

ACE Project Scope Cont.

- This pilot concentrated on the process of integrating ACE assessments into the Initial UNOCINI Assessment / Pathway Assessment undertaken by the Gateway, SPOE and FIT Teams
- As a result of understanding the impact of the ACEs on a child and care giver, it was hoped that this would enable a more appropriate allocation of services for each client's unique situation and the formulation of individually tailored intervention plans.
- Ultimately, it is hoped that this will reduce the negative outcomes experienced by the child throughout their life time and reduce the need for statutory intervention by Trauma Informed Practice.

Initial Hopes and Fears for Staff and the Pilot

- Difficulties with how to address disclosures that happen through questionnaire
- Asking the Questions too early with Service Users
- Not having the services available to support issues raised
- Hostility from service users
- Potential to re-traumatise service users by opening old wounds
- Building better relationships with service users
- Better understanding of service users' lives
- Help service user make links from ACEs to current functioning
- Better outcomes for both parents and children

The ACE Questionnaire – SET / QUB Modified Version

<p>Prior to your 18th birthday:</p> <p style="text-align: center;">ACE Score Questionnaire:</p>	<p>Parent <i>(tick if yes)</i></p>	<p>Social worker <i>(tick if yes)</i></p>
1. Did a parent/other adult in your household OFTEN swear at you, insult you, put you down, humiliate or intimidate you?		
2. Did a parent/other adult in your household OFTEN push, grab, slap, throw something at you or EVER hit you hard enough to leave marks or injure you?		
3. Did an adult or a person at least 5 years older than you EVER sexually touch or fondle you, have sex with you or force you to engage in sexual acts?		
4. Did you OFTEN feel that no one in your family loved you or thought you were important OR that your family didn't look out for or support each other?		
5. Did you OFTEN feel that you didn't have enough to eat, had to wear dirty clothes, or had no-one to protect you or that your parents were too drunk or high to take care of you or take you to the doctor if you needed it?		
6. Were your parents EVER separated or divorced?		
7. Was your mother or stepmother OFTEN pushed, grabbed, slapped or hit, or EVER seriously physically assaulted or threatened with a weapon?		
8. Was your father or stepfather OFTEN pushed, grabbed, slapped or hit, or EVER seriously physically assaulted or threatened with a weapon?		
9. Did you live with anyone who was depressed or mentally ill or who attempted suicide?		
10. Did you live with anyone who was a problem drinker, alcoholic or drug user?		
11. Did a household member go to prison?		
12. Did a member of your household have a serious health problem, illness or disability?		
13. Were your parents/carers always arguing?		
14. Did adults in your household OFTEN worry about money OR have difficulty in paying for things like food, heating, housing or transport?		
15. Were you or members of your household the victims of neighbourhood crime or "troubles" related violence? (e.g. vandalism, assault, theft, murder)		
<p>Now add up the answers you have ticked: - This is your ACE score</p>	<p>Total:</p>	

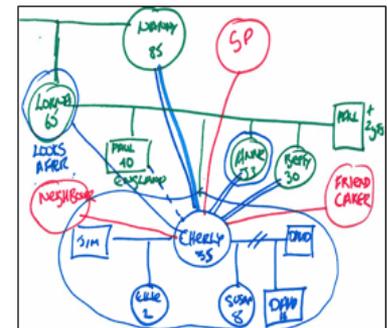
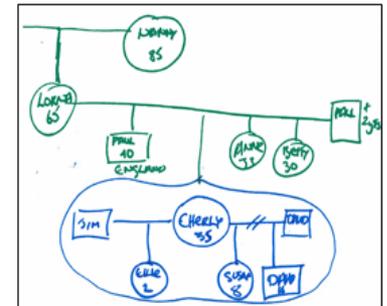
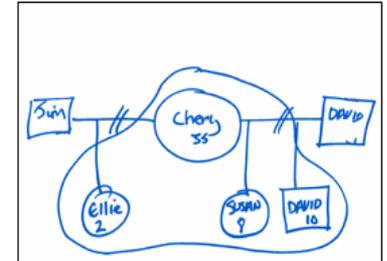
ACE Lifestory Interviews :Relationships Map

Relationships Map

- My family now → my family growing up
- Immediate family & extended family → friends & other significant people
- Who are you close to, who is important in your life → Who were you close to, who was important in your life?

SET / QUB

Example



Life maps (timeline)

My Life Road Map

Life over-time:

- Good times
- Hard times

Places I lived
/went to school

Family life &
relationships

Work/
Education

Health and
emotional well-
being

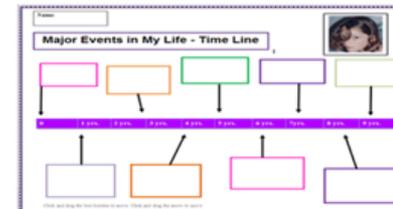
Key memories

Involvement with
agencies/services



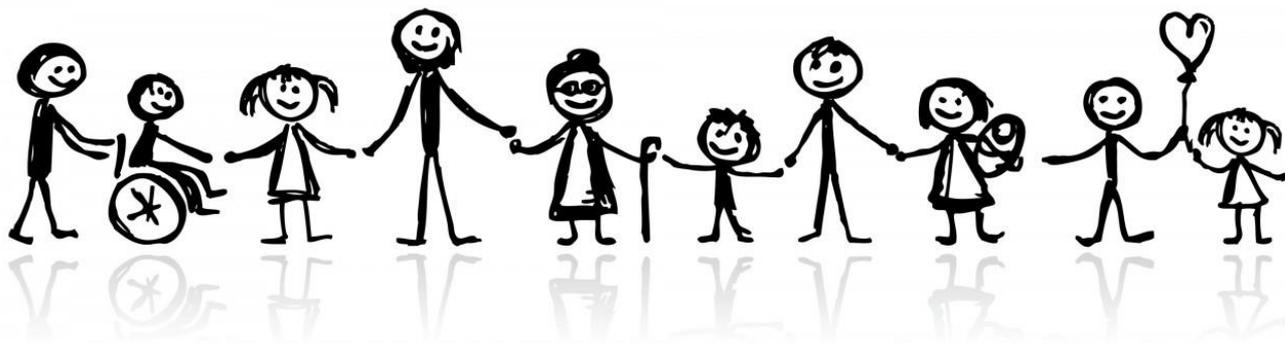
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Example



Life Stories Workbook – Future Plans

MAPPING THE FUTURE – WHERE DO YOU WANT YOU AND YOUR FAMILY TO BE IN 5 YEARS TIME?



Pilot Evaluation Statistics re Adults

- ACE questionnaires were completed in relation to approximately 270 families - 87% of the total allocated referrals sent for UNOCINI completion during the Pilot
- Of the 137 cases completed online, 15 refused to complete the ACE questionnaire (11 %). Of the 122 completed questionnaires, one in four reported no ACEs during childhood.
- The average number of ACEs per parent was 4.23 (range 0-13).
- The most common ACEs experienced were: parental separation; serious health problems in the home; mental illness; emotional abuse; parental acrimony, frequent money worries, household substance abuse and physical abuse.
- Each of these 8 ACEs was experienced by one in five, or more, of parents.

Pilot Evaluation Statistics re Children

- Out of 165 children assessed and case completed online, 28.5% were assessed to have experienced or were currently experiencing 4 or more ACEs and the average was 5.35%. This equates to 47 children out of the 165 assessed.
- The most Frequently occurring Past or Present ACEs were:
 1. Parental Mental Health
 2. Parental Separation
 3. Addiction Problems
 4. Domestic Violence towards mother
 5. Parental Acrimony
 6. Parental Physical Health / Disability

Key Evaluation Findings for Managers and Staff:

- Operational Managers report an improvement in the quality of the analysis and reflection both in reports and in formal meetings.
- Staff and Managers reported that case plans were more client-specific and therefore, more beneficial for service users in terms of meeting needs more effectively and in a more timely manner.
- It was easily incorporated into the existing UNOCINI documentation.
- The application of ACE did increase the time required for visits but not significantly and this was balanced by the increased information it provided.
- It was agreed that the ACE matrix had limited application and would not be rolled out further.

Key Evaluation Findings Continued:

- The staff received wider training than the ACE study which has improved their knowledge in this field.
- This is helping to inform decision making and interventions with children and their families.
- The implementation was hampered by the turnover of frontline staff and vacancies; this can be offset by “training up” trainers in each office to provide in-house training as required.
- The anticipated costs to the funding streams has not materialised as an issue during the pilot, identified needs were able to be met within existing resources to date.

Key Evaluation Findings Continued:

- Staff as they described it as “being able to do social work again”
- The staff involved developed an improved understanding of the impact of ACE on functioning and life outcomes as well as having a better understanding of the parent and child’s needs.
- They felt that they were able to apply research and a tool that “made sense” to them and the families they are working with.
- It gave them a constructive means of building a more positive relationship with service users, often at a point of crisis in their life that has led to statutory involvement.

Key Evaluation Findings for Parents and Children:

- It is reported that the parents found it helpful in understanding their own decisions and choices and the way forward for their families.
- They felt that it was a “kinder” approach – they knew that Social Services would still take whatever action was needed to protect the children but that they were willing to take the time to find out why the family had reached this point rather than “simply judge” them.
- This individualised assessment also provided service users with better access to the most appropriate services.

Case Example from Pilot

- Referral received in relation to a 15 year old girl who was an inpatient in an adolescent mental health unit who disclosed, Parental alcohol abuse, domestic violence and inappropriate sexual touch by her mother's partner.
- Social Services' History check identified previous referrals in relation to Domestic Violence, sexual abuse, extreme behaviours and parental alcohol misuse, financial and housing issues.
- Previous interventions addressed the presenting issues only.
- ACE informed practice provided a more holistic overview and as a result interventions were tailored to address the underlying causes and this successfully prevented the cases proceeding to Case Conference.

Roll – Out Plans

- Currently, it has been agreed that SET will roll-out the ACE Project across all 5 Trusts in Northern Ireland to all Children Services' Social Workers
- This is commencing in November, 2017 onwards.
- This roll-out will work alongside the other ACE innovations happening in the Region at this time.

Some Key Questions Still to be Answered:

- Does use of the ACE intervention lead to an increase in the range and numbers of parental and child needs identified compared to normal UNOCINI assessment alone?
- Does use of the ACE intervention lead to an increase in the number and range of referrals made to external services?
- Does use of the ACE intervention lead to a decrease in the numbers of re-referrals and length of time cases are open?
- Does use of the ACE intervention lead to changes in the designation of cases as family support or child protection and the use of associated pathways?
- Does use of the ACE intervention lead to increased engagement with parents?

Thanks for listening!



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and Social Care Trust