

Refocusing Our Lens: Trauma-Informed Care Practices

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Disclosures

- Non-Declaration Statement: I have no relevant relationships with ineligible companies to disclose within the past 24 months. (Note: Ineligible companies are defined as those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.)



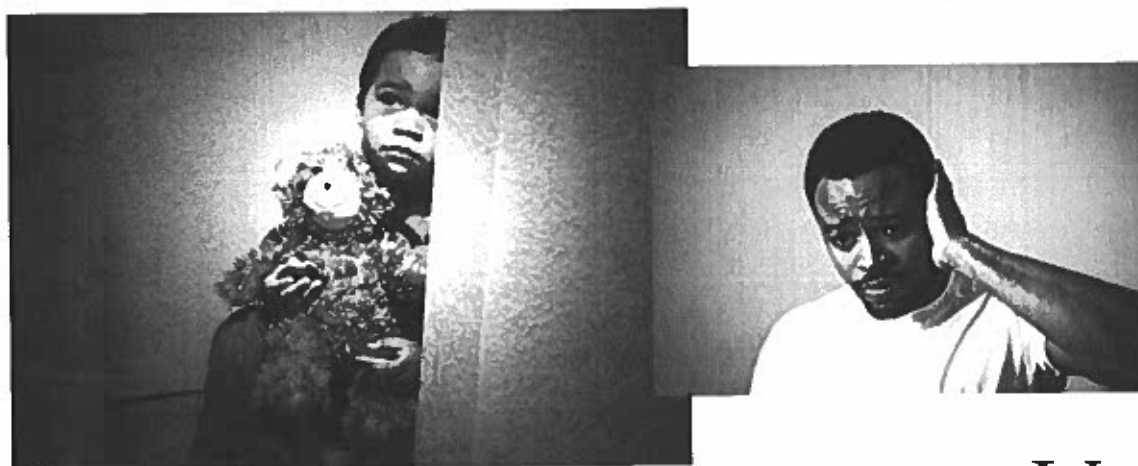
Objectives

- At the conclusion of this session, participants should be able to:
 - **Understand** the values and focus of Trauma Informed Care
 - Define Adverse Childhood Event Score (ACEs)
 - Understand the development of the ACE criteria
 - **Implement** the core Trauma Informed Care principles
 - Support screening of ACEs and trauma in clinical practice
 - Learn how to support patients with history of trauma
 - Implement best practices for supporting patients with trauma and toxic stress
 - **Construct** a plan to support patients/families with trauma and toxic stress

3

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The Who?



4

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Case Scenarios

- 23-year-old male comes into the office with recent hospitalization for suicide attempt. You notice multiple scars on his upper extremities

5

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Case Scenarios

- 74-year-old male found unconscious and unresponsive on the train tracks in cardiac arrest. History of cocaine use.

6

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Case Scenarios

- 49-year-old attorney seeking help for PTSD. Combat Veteran Operation Iraqi Freedom.

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Case Scenarios

- 36-year-old female Veteran with history of fibromyalgia, RA and obesity. She is seeking treatment for depression.

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What do you see?



Having a trauma-informed perspective

What happened to you versus what's wrong with you?

Not Trauma Informed



Trauma Informed

This child's behavior problems are secondary to their mental health condition

Patient's substance abuse is a result of their personal choices and moral failings

Patient is lazy and depressed and they don't want to do anything to help themselves

Patient just tries to commit suicide for attention

This child's behavior problems are a secondary result of difficult life events

Patient's substance abuse is a result of life experiences, underprivileged circumstances and traumatic stress

Patient is stuck in unsafe relationships with self or others which is contributing to their depressed mood

Patient feels trapped by their emotions and history of abuse/neglect

History of Trauma

It is not that something different is seen, but that one sees differently. It is as though the spatial act of seeing were changed by a new dimension.
-Carl Jung-



ACES

Adverse childhood event score



The What?

Adverse Childhood Experiences

How Knowing About ACEs HELPS

Dr. Burke Harris describes one woman's reaction to learning about ACEs:

"These are tears of pure, unadulterated joy." "Why joy?" ... "Because I understand now why I am this way. I understand why my siblings are this way. I understand why my mother raised us the way she did. I understand that I can break this cycle for my children and I understand that I'm not a victim. I'm a survivor." p. 178

Honorable Burke Harris, MD | The Despond Well | p. 178

Educate Your Doctor
Free Downloadable ACEs Fact Sheet

Chronic Illness Trauma Studies.com

The Despond Well

13

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The ACE study originated to study the obesity epidemic back in the 1980s

- In 1985 Dr. Vincent Felitti, Chief physician at Kaiser's preventative medicine task force ran an obesity clinic with more than 50,000 participants
- The clinic had about a 50% dropout rate even though clients were losing weight
- He would interview participants who had dropped out and found a common link
 - High rates of the following:
 - Sexual abuse as a child
 - Physical abuse as a child
 - Substance use disorders in the household
- **ACE Study** Divorce of parents
- From there, in collaboration with colleagues from the CDC, and Dr. Robert Anda he developed criteria for the Childhood Event Score, ACEs, to determine at risk factors for patients who may be prone to obesity
- First ACE study had 17,000 participants
- Surveys were conducted from 1995-1997 and then participants followed for 15 years

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The ACE study continued

- The study was a combined effort of both the CDC and Kaiser Permanente's Health Appraisal Clinic
- The study hoped to link the effects of adverse childhood events and chronic health throughout the patient's lifespan
- The study proved that there are definite links between childhood traumatic experiences and chronic disease and mental illness in adulthood

15



What are the ACEs?

- Experience of any of the following before your 18th birthday,
 - Abuse
 - Sexual abuse
 - Verbal abuse
 - Physical abuse
 - Household Dysfunction
 - Alcoholism/addiction in the home
 - Mental illness in the home
 - Intimate partner violence
 - Family member that was incarcerated
 - Divorce
 - Neglect
 - Emotional neglect
 - Physical neglect

16



Prevalence of ACEs

How Common are ACEs?

ACE Score Prevalence for Participants
Completing the ACE Module from the 2011-2014 BRFSS

BRFSS

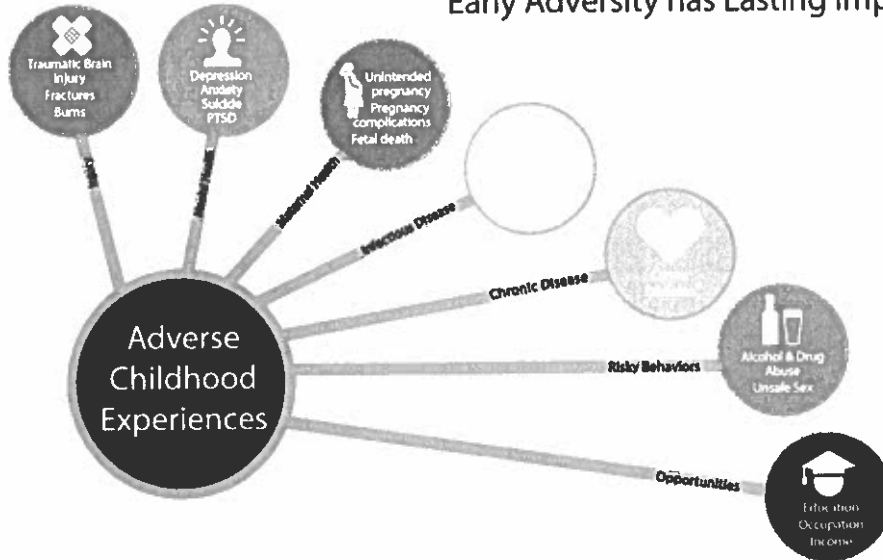


19

2



Early Adversity has Lasting Impacts



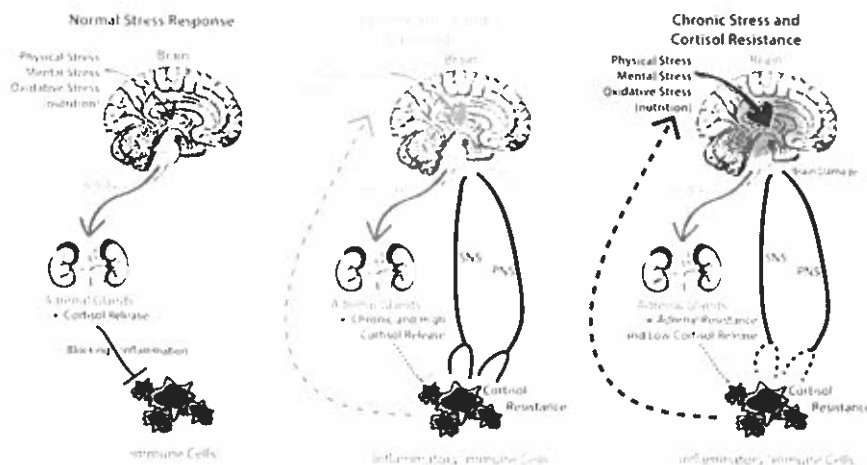
Higher ACE scores=Chronic Levels of Toxic Stress

- Higher ACEs→ lead to adults that have higher rates of
 - Mental illness
 - Chronic medical conditions
 - Increased risk of using street drugs, tobacco or ETOH
 - Higher risk of autoimmune disease
 - Chronic pain

21



Hormonal Dysregulation in Chronic Stress/Trauma



22

<https://www.thecenteredmovement.com/blog/2018/11/28/trauma-and-the-brain>



STRESS IN CHILDHOOD

Three Types

POSITIVE STRESS
Normal, typical childhood experiences

TOLERABLE STRESS
More complicated, more challenging and long-lasting

TOXIC STRESS
Severe, long-lasting, unpredictable, and/or frequent stress

Common Stressors

- Child care drop off and pick up
- Playground injuries
- Losing a game
- No buffering support necessary
- Temporary child elevation in stress hormones
- Small increase in heart rate and blood pressure
- Increased alertness and attention
- Learning skills development

Common Stressors

- Natural or manmade tragedy
- Parental divorce
- Poverty
- Death of a loved one
- Caring adult buffers stress

Common Stressors

- Physical, sexual, or mental abuse
- Neglect
- Exposure to violence
- Severe economic hardship
- No adult buffers shield from stress
- Physiological activation of stress response system
- Disrupted development of brain circuitry
- Immature coping responses
- Problems affecting attention, self-control
- Heart disease
- Asthma
- Altered learning and thinking abilities
- Depression
- Substance abuse

<https://youthtoday.org/2015/04/translating-the-science-of-childhood-stress-into-youth-service-practice/>

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Traumatic Experiences and our Senses

- Trauma not just an event of the past but the imprint left by that experience on mind, brain, body
 - Changes thought process
 - Changes what we think about
 - Changes the capacity to think
- The ability to alter these above help individuals heal from traumatic experiences
 - Not just a re-telling of the story
 - An actual ability to feel safe in one's environment



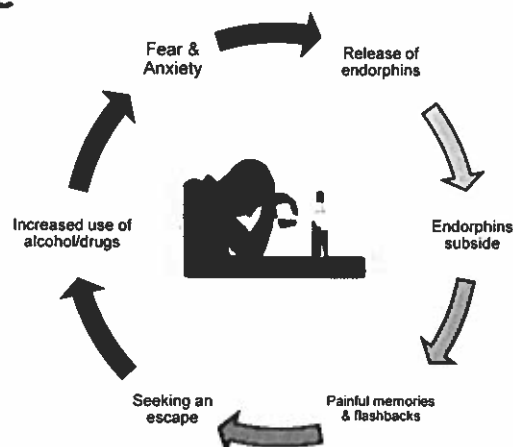
Medications to Deal w/ Traumatic Stress... a Case by Case basis

- Patients suffering from traumatic experiences, recalling events and PTSD many times are desperate to feel calmness and control
 - May turn to drugs or alcohol
 - May use prescription medications
- Psychotropic drugs are not a cure for patients experiencing traumatic events and do not cure trauma but can assist in regulation of emotions while also attending psychotherapy

25

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The Cycle of Trauma & Substance Abuse



26

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ACE Statistics

- Ace score of greater than or equal to 4→
 - 240% more likely to develop hepatitis and STI
 - 390% more likely to have COPD
 - 460% more likely to suffer from depression
 - >1000% more likely to have attempted suicide
- ACE score of 6 or more→ shortened lifespan by about 20 years versus age controls

27

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The How?



<https://www.mpc.edu/academics/academic-divisions/career-education-programs-a-z>

28

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General Screening Recommendations

- Adult screening
 - Complete once per adult per lifetime
 - Provider reviews screening with patient to determine risk stratification
 - Provider educates patient on ACE score and develops treatment plan as well as codes visit
 - G9919: ACE score greater than or equal to 4, high risk for toxic stress
 - G9920: ACE Score 0-3 and at lower risk for toxic stress
- Pediatric screening
 - Complete screening annually, but no less than every 3 years
 - Screen completed by caregiver (ages 0-19) or by child (ages 12-19)
 - Provider reviews screening with patient to determine risk stratification
 - Provider educates caregiver/child on ACE score and develops treatment plan; codes visit as above

29



General Screening Recommendations

- Other coding assistance
 - CPT Codes for ACE Screening Visits
 - 96160: Administration of patient-focused health risk assessment instrument with scoring and documentation, per standardized instrument
 - 96161: Administration of caregiver-focused assessment instrument for the benefit of the patient, with scoring and documentation, per standardized instrument
 - Other Z codes may be useful if positive on an ACE screen (ie; Z62.819: History of abuse in childhood)

30



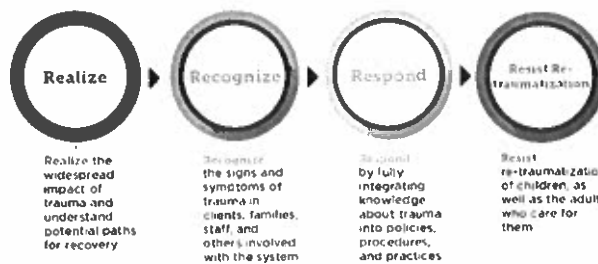
TIC-Next Steps, The 4 R's

- Realize that trauma is pervasive and that behaviors following trauma may be coping strategies AND Realize recovery is possible
- Recognize response to trauma can be immediate or delayed
- Respond using a trauma informed approach
- Resist re-traumatizing

31

The 4 R's

The Four Rs of Trauma-Informed Care



The figure is adapted from Substance Abuse and Mental Health Services Administration (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. HHS Publication (SMA) 14-4886. (https://www.samhsa.gov/trauma)

Practicing Trauma Informed Care

- Principles of TIC, Stick with STEPCC
 - Safety
 - Trustworthiness and Transparency
 - Empowerment Choice and Voice
 - Peer Support
 - Collaboration and Mutuality
 - Cultural, Historical and Gender Issues

33



TIC Principles

Safety Choice Collaboration Trustworthiness Empowerment

Definitions

Ensuring physical and emotional safety

Individual has choice and control

Making decisions with the individual and sharing power

Task clarity, consistency, and Interpersonal Boundaries

Prioritizing empowerment and skill building

Principles in Practice

Common areas are welcoming and privacy is respected

Individuals are provided a clear and appropriate message about their rights and responsibilities

Individuals are provided a significant role in planning and evaluating services

Respectful and professional boundaries are maintained

Providing an atmosphere that allows individuals to feel validated and affirmed with each and every contact at the agency

[Trauma Informed Care: What It Is and How It Can Help | Seattle Christian Counseling](#)

Clinician Resources

- ACES Aware
 - [Home | ACEs Aware – Take action. Save lives.](#)
- The Resilience Project
 - [Resilience Project \(aap.org\)](#)
- California ACES Academy
 - [Academy on Violence and Abuse \(AVA\) : OUR WORK : CALIFORNIA ACES ACADEMY : CAA Webinars \(avahealth.org\)](#)
- Centers for Disease Control
 - [Adverse Childhood Experiences Resources | Violence Prevention | Injury Center | CDC](#)

35



So Let's Refocus Our Lens...



<http://www.myhealth.gov.my/tahap-penglihatan-yang-melayakkan-seseorang-memohon-lesen-memandu-di-malaysia/>



Back to our cases

- Who do you see?
- 23-year-old male comes into the office with recent hospitalization for suicide attempt. You notice multiple scars on his upper extremities
 - ACE Score of 7
 - Stick with STEPCC
 - Clinician provided a safe environment and validated patients emotions
 - Clinician took time to establish rapport
 - Clinician and patient worked together to identify stressors and triggers and put a safety plan in place that was developed collaboratively
 - Patient felt valued and shared confidential information with the clinician allowing him to leave the appointment feeling connected and empowered



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Back To Our Cases

- 74-year-old male found unconscious and unresponsive on the train tracks in cardiac arrest. History of cocaine use.
 - ACE score of 8



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Back to Our Cases

- 49-year-old attorney seeking help for PTSD. Combat Veteran Operation Iraqi Freedom.
 - ACE score of 3
- Veteran reported history of:
 - Divorced parents
 - History of mental illness in the home
 - History of physical abuse by his father
- Using STEPCC
 - Clinician was able to establish rapport and develop a safe environment
 - Peer support was introduced into the treatment framework which helped to build trust, empowered the patient and encouraged him to continue to seek care



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39

Back to Our Cases

- 36-year-old female Veteran with history of fibromyalgia, RA and obesity. She is seeking treatment for depression.
 - ACE Score 8
- Patient discloses history of:
 - Child abuse both sexual and physical in addition to 6 other ACE criteria
 - She also endorses history of rape during military service
- Using STEPCC
 - The team valued the background of her military culture and after the client acknowledges she feels safe, a peer support specialist, also a female military Veteran is engaged in her care
 - Transparency about the role of each team member and the support they can provide builds trust with the patient
 - Collaboration between patient and peer support specialist assist in building her recovery framework, and empowers the patient to make decisions in her treatment at each level



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40

Walking a mile in someone else's shoes isn't as much about the walk or the shoes; it's to be able to think like they think, feel what they feel, and understand why they are who and where they are. Every step is about empathy.
~ Toni Sorenson

maxfamousquotes.com

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Take Home Points

- Utilize screening tools for ACEs in your practice and develop a referral plan to community resources
- Realize that trauma is pervasive, and the effects of trauma can result in lifelong difficulties
- Focus on the patient, their experiences, and their road to recovery

42

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Questions?

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