



First 5 Tehama received an ACES Aware grant in 2021 with the primary goal of increasing ACES awareness in the County, particularly amongst agencies in early childhood systems or families with young children themselves. Part of this work included bringing together key stakeholders from different sectors of Tehama County to connect and collaborate. Three group convenings were held in 2021. First 5 Tehama sought insights from convening members regarding their experiences with the ACES Aware work and participation in the collaborative sessions. Six members provided a response. The following summarizes the experiences of those in attendance at the ACES convenings.

Overall, participants benefitted from the networking and collaboration of the ACES Aware work, as well as the availability of valuable resources to better serve families through an ACES Aware lens. Participants appreciated the networking provided by the ACES Aware initiative, viewing ACES Aware as “a thread in our common language as we build and implement additional mental health services, education, and resources for Tehama County.” They became **more aware of strategies and resources in the community** to benefit their patients/clients and identified deeper opportunities to collaborate with First 5 and other service providers.

The ACES Aware work enabled participants to form **deeper connections** with community resources and other stakeholders and introduced them to a wealth of **resources** in the community to work toward a more integrated system of support. This work helped agencies by bringing everyone together into one forum to communicate, network, and collaborate. One participant mentioned that prior to ACES, collaborations with health partners were either not happening or were splintered. Another noted that they were able to gain an understanding of how community resources provide support and interventions.

“... an ACES Aware lens has taught us a new way of seeing our work. ... it is not enough to curate and provide resources to those in need. ... our network of care can pair ACES screening with quickly accessible local information and resources.” – ACES Convening Participant

The ACES Aware work provided participants with resources needed to help target specific outcomes. Some have started **integrating ACES measures** into intake forms/assessments and establishing new ways to move the needle. For instance, participants reported working to implement and/or evolve existing services or build new partnerships for warm handoffs, and receiving training for staff to better help families navigate these processes.

“We developed a shared language and understanding of how Community and Health Care Integration is already happening in our community and ... some of the next steps that we could do to evolve what is already being done.” – ACES Convening Participant

Bringing people together in a group setting allowed ideas to flow about ways to use and improve existing systems and to stay connected to “the latest and greatest resources for our patients.” The group settings brought forth a need to consider **technology** that integrates 211 services, make calls outside regular business hours, and support more languages. One participant reported they were building on the technological resources of their client database system to auto-generate a danger assessment score as an added layer to ACE scores and expressed a **willingness to share** with other community partners once developed internally.

Currently, laws surrounding sharing client information are a barrier for providers. Participants were interested in continuing to explore HIPAA laws surrounding data sharing or referrals, as well as wanting to give clients more control of their data and how it is shared without adding burden on service providers, such as **establishing a portal with a client facing option, a data sharing agreement, or a common release of information** that meets all agencies’ needs and requirements.

For some providers, **gathering ACEs information from clients can be difficult** as questions can be triggering, “especially as the cases we are responding to are becoming more severe and complex.” For others, the COVID-19 pandemic continues to be a barrier, including limited opportunities to reach families and providers. Additionally, some participants believed that **medical doctors were missing from the leadership table**, while others viewed the group as largely inclusive.

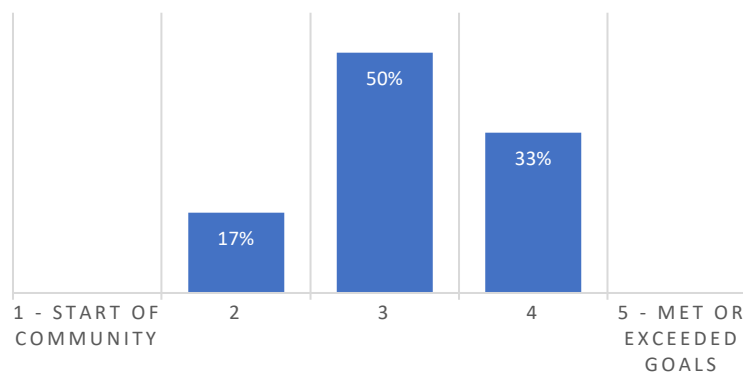
Participants reported a range of one to 32 providers/staff who are **ACES Aware trained** since participating in this work. They were also engaged in other ACEs related trainings, professional learning and webinars, including a 40-hour Domestic Violence Crisis Intervention Certification Training, a 66-hour combined Domestic Violence and Sexual Assault Certification, Trauma Informed Care and Support PD, ACEs Aware website curricula, (e.g., the Science of ACEs and Toxic Stress Part 1 & 2), and participation in an Expect More Tehama ACEs panel featuring several ACE partners from Empower Tehama and Mental Health. One participant also presented on ACEs awareness and the long-term impacts of toxic stress on children at a large event targeting the local school district. Another has since joined the P2P group that meets quarterly.



“We have a strong desire to work with the network of care on an implementation grant and hope to evolve our technology solutions along the way.” – ACEs Convening Participant

Moving beyond the grant period, participants anticipate continuing to incorporate ACEs curriculum and training for clients and the public, as well as continuing outreach, information, and referral services, and internal staff training. Participants also mentioned **needing continued support** in the form of a monthly or quarterly newsletter or correspondence, as well as more interactive training opportunities, and conferences/spaces for collaboration. Another participant mentioned that the best support they could receive is **ensuring they have the most up to date information** regarding resources in Tehama County, promoting 211 as the central access point for resources, and encouraging other partners to do the same.

Figure 1 - Perceived Progress of the ACEs Aware Work among Convening Members



Participants generally believed that the community has made moderate progress since its development. Three participants felt the community has made about 50% progress toward community goals while two felt goals were about 75% met.

Overall, the ACEs Aware group convenings provided a highly valued opportunity to bring stakeholders together in new and meaningful ways. Participants could benefit from continued support implementing strategies, improving available technologies, identifying barriers, and maintaining and strengthening emerging relationships and systems change.