



HELP
HEALING
HOPE

A City-Wide Approach for Health Innovation

**Presentation To Three Branch Home Team Meeting
May 4th, 2015**

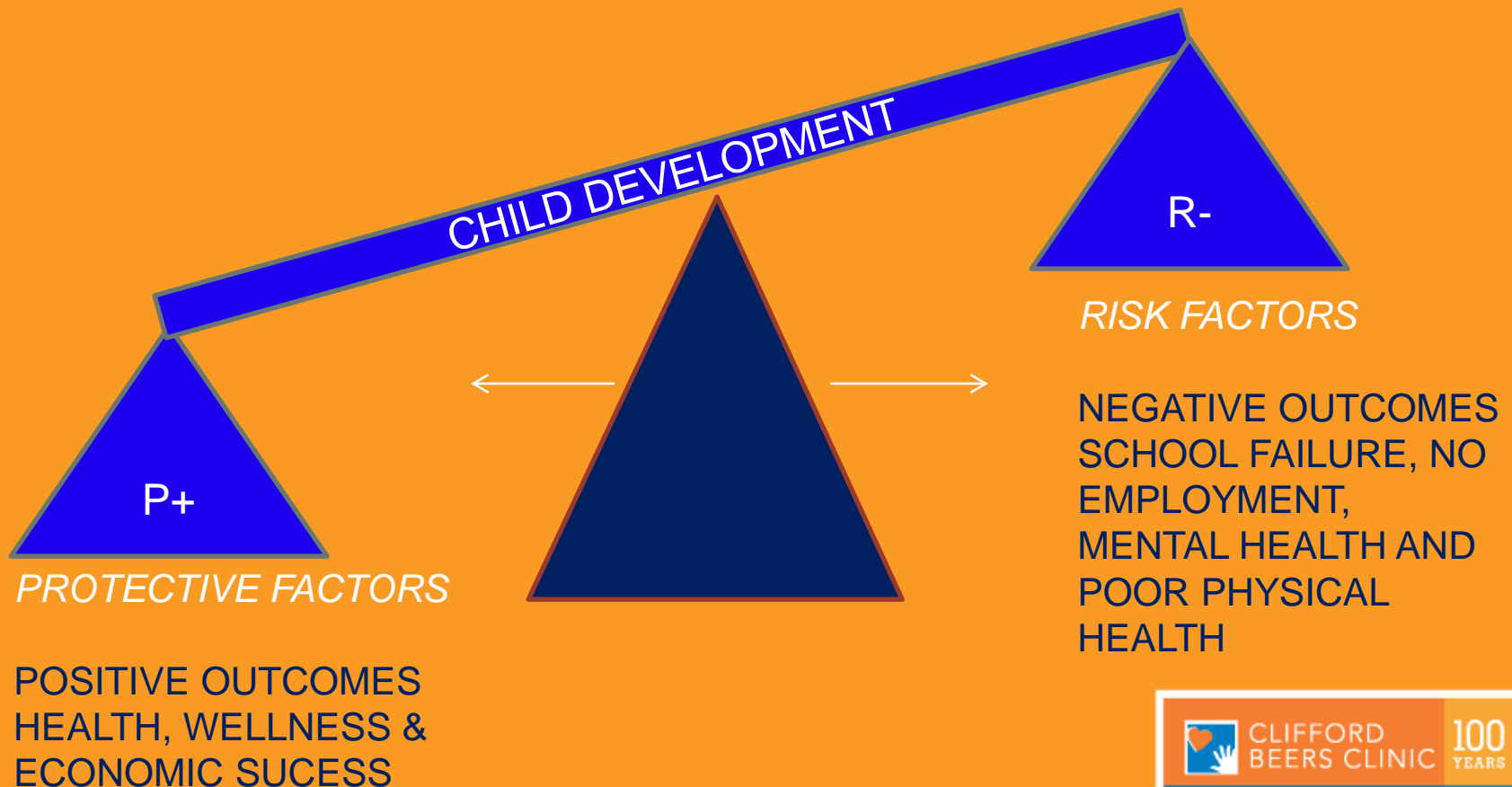
**Alice Forrester, PhD
Executive Director
Clifford Beers Clinic
New Haven, CT**



Review of Presentation

1. Opportunity for Innovation to Create Health and Prosperity
2. Core Factors for Recovery from ACES
3. Review of Some of the Recent New Haven Initiatives for Child and Family Health
4. Next Steps

Key of Success: Innovation and Collaboration



What Is the Problem We Are Trying to Solve?

Chronic
Stress?

Post
Traumatic
Stress Disorder?

Toxic Stress?

ACES?

Complex
Trauma?

Child
Traumatic
Stress?

Allostatic
load?

Complex
PTSD?

Developmental
Trauma
Disorder?

Acute
vs.
Chronic Trauma?





Adverse Childhood Experiences

- **Abuse and Neglect** (e.g., psychological, physical, sexual)
- **Household Dysfunction** (e.g., domestic violence, substance abuse, mental illness)



Impact on Child Development

- **Neurobiologic Effects** (e.g., brain abnormalities, stress hormone dysregulation)
- **Psychosocial Effects** (e.g., poor attachment, poor socialization, poor self-efficacy)
- **Health Risk Behaviors** (e.g., smoking, obesity, substance abuse, promiscuity)



Long-Term Consequences

Disease and Disability

- Major Depression, Suicide, PTSD
- Drug and Alcohol Abuse
- Heart Disease
- Cancer
- Chronic Lung Disease
- Sexually Transmitted Diseases
- Intergenerational transmission of abuse

Social Problems

- Homelessness
- Prostitution
- Criminal Behavior
- Unemployment
- Parenting problems
- High utilization of health and social services

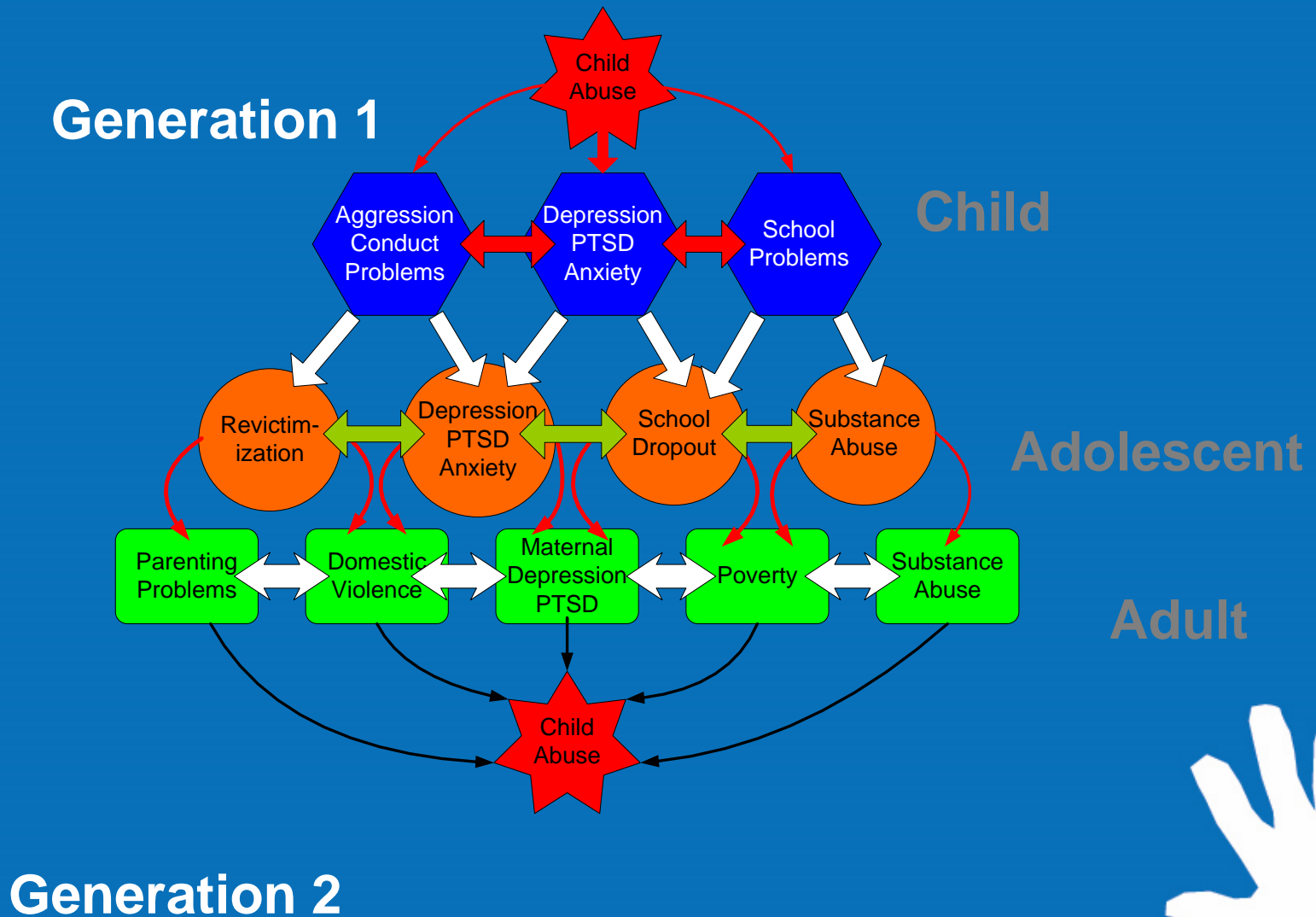


CLIFFORD
BEERS CLINIC

100
YEARS

HELP · HEALING · HOPE

How ACES Cross Generations



RISKS VS. OPPORTUNITIES

- **ACES are a significant contributor to leading causes of death (heart disease, cancer, stroke, diabetes, suicide, HIV)...and if addressed, can be extraordinarily cost effective**
- **If we prevent ACES we will have the opportunity to reduce the single most preventable cause of mental illness, incarceration, drug and alcohol abuse, child maltreatment, etc...**
- **We know early intervention and evidence based practices work**
- **CT has enormous resources and success addressing ACES already; in this time of economic crisis, lets build on this success for long term savings and child well being.**

Protective Factors



PROTECTIVE FACTORS

Recent Efforts to Reduce ACES



City of New Haven

Poverty is High**

- The overall poverty rate (26.9%) is almost three times the statewide rate (9.5%).

Domestic violence undermines the economic security and safety of many women and girls

- Between July 1, 2010 and June 30, 2011, one domestic violence agency in Greater New Haven received 2,291 calls to its 24-hour hotline and was involved with 5,788 court and 1,651 non-court cases.

New Haven children are having children

- In 2009, 73 children were born to young teens (15-17), a rate of 31.2, compared to the state rate of 10.5

Education levels are low

- In New Haven, nearly 20% of individuals 25 years and older do not have a high school degree or equivalency.

High perceptions of safety risks

- In New Haven's high-need neighborhoods, 7 in 10 residents feel unsafe to walk in their neighborhood at night; 3 in 10 feel unsafe to walk during the day.

New Haven's low-income neighborhoods contain significant disparities

- NHHS target neighborhoods suffer from higher levels of crime and violent death, poorer educational outcomes, and poorer health outcomes including low birth weight and infant mortality.

**Data from Partnership for Greater New Haven, 2015 survey



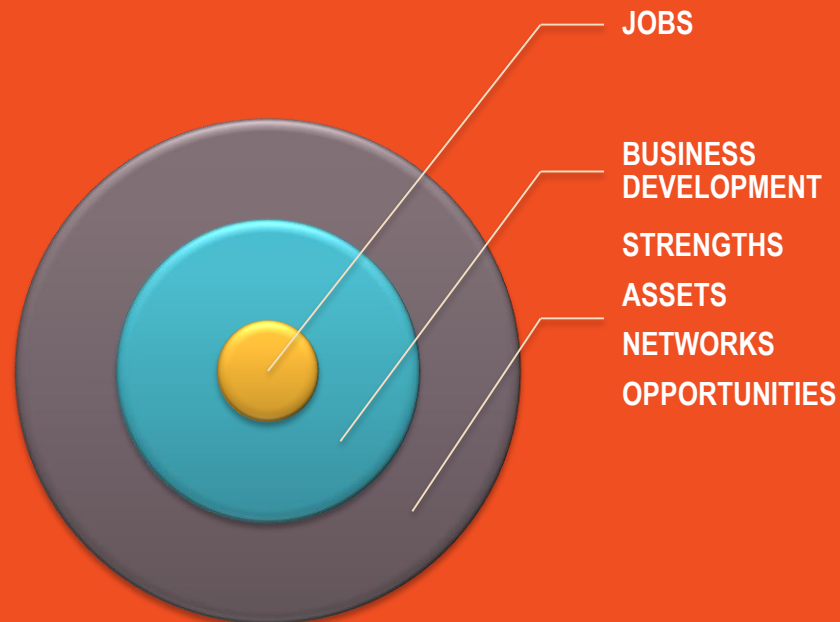


New Haven was a Finalist for Federal Promise Zone - pursuing even without funding

What are the Results City of New Haven Seeks?

Overall

- Expand economic opportunity for residents,
- Ensure that our children get an excellent education
- Create safe, healthy and vibrant neighborhoods





PZ Core Strategy: Creating a “Wellness Cluster”

A “Wellness Cluster” consists of a set of loosely or tightly connected health and wellness initiatives that work together so that, in many respects, they can be viewed as a single system all dedicated to the wellbeing and collective prosperity for our community.

How do we do this?

- **Create collective impact across all sectors-Economic, Health, Community, Transportation, Housing, etc...**
- **No “Wrong Door”**
- **Whole family Multi-Generational Services**
- **Neighborhood and Community Centered**
- **Focused on Reducing Stress and Adversity**



New Haven Trauma Coalition

Purpose: To improve outcomes for children and families by facilitating venues for collaboration, consultation, and communication between agencies and service providers across the city of New Haven.

- Funding
- Collaboration
- Inter-agency connections
- Implement services
- Logistical support
- Sustainable growth

Objectives

COALITION WORKGROUPS



Administrative and logistical support to coalition

CLIFFORD BEERS CLINIC

- Deliver CBITS and care coordination
- Provide professional development
- Marketing of Public Health Campaign
- Community Change Initiative

DCF

Funder, Connect Grant

MEDIUM-TERM OUTCOMES

Reduce the negative (a) health, (b) mental health, and (c) social effects of adversity, trauma, and toxic stress on school-age children and their families in New Haven.

Goals

- Promote safety
- Increase awareness
- Create positive community
- Strengthen families

Coalition Building

Trauma-informed Intervention

PD and Community Education

Assessment & Screening

Care Coordination

UNITED WAY / BOOST!

- Evaluate and respond to school needs through partnerships
- Facilitate sustainable school/community/agency collaboration

Foundation for Arts and Trauma

- Facilitate Animating Learning by Integrating and Validating Experience (ALIVE) program and screening

NEW HAVEN PUBLIC SCHOOLS

- Support universal screening
- Support social-emotional learning
- Collaborate on care coordination

NEW HAVEN MAYOR'S OFFICE

- Facilitate connections to other citywide initiatives

OTHER COLLABORATORS

- Yale Center for Emotional Intelligence
- The Ana Grace Project
- UConn: Neag School of Education

LONG-TERM OUTCOMES

- Improve the overall health of families in the city of New Haven.
- Create a safer and healthier community for children and families.

New Haven Trauma Coalition - Logic Model

THE CRISIS

Adverse Childhood Experiences (ACEs) are stressful and complex life events



If untreated, increased risk for negative physical and mental health outcomes



Incarceration, violence, early death, academic problems, drop-out

OUR RESPONSE

City of New Haven implements Collective Impact Initiative



Creation of New Haven Trauma Coalition



Collaborating, consulting, and supporting service providers in New Haven



To help systems become more trauma informed

INPUTS

- + Financial support
- + Time for collaboration
 - Monthly meetings
 - Workgroup meetings
- + Setting for collaboration
 - Office space
 - Meeting support
- + Staff (specific and shared)
- + Expertise across disciplines
 - Psychology
 - Education
 - Public Policy
- + Materials (e.g., protocols)
- + National and local partners

OUTPUTS

- INTER-AGENCY COLLABORATION:**
- a. Facilitate sustainable connections
 - b. Consult to support trauma-informed service delivery
- ASSESSMENT AND SCREENING:**
- a. Coordinate implementation of screening
 - b. Develop procedures for screening-based decision-making
 - c. Provide resources on implementing and understanding screening

- PROFESSIONAL DEVELOPMENT AND EDUCATION**
- a. Train on effects of trauma and trauma-informed service delivery
 - b. Develop trauma-aligned discipline policies
 - c. Train in screening and intervention practices
 - e. Implement public health campaign (social media, pamphlets)

- TRAUMA-INFORMED INTERVENTIONS**
- a. Consult with agencies to promote sustainable implementation
 - b. Support implementation of key interventions (ALIVE, CBITS, SEL curricula, PBIS, de-escalation, parent support groups)

- CARE COORDINATION**
- a. Train service providers in wrap-around service delivery
 - b. Facilitate goal-oriented multi-agency partnerships

- | | |
|-----------------------|---------------------|
| Students | Pediatricians |
| School staff | Agency staff |
| School administrators | Policy-makers |
| Parents | City administrators |
| Community members | Research partners |

Partners' willingness to collaborate
Effectiveness of practices

Local/national emphasis on importance of trauma
Funding to NHTC and partners

ASSUMPTIONS

EXTERNAL FACTORS

OUTCOMES

Short-term

- + School staff and community members learn about trauma-sensitive practices
- + Students are identified who require trauma-informed support
- + Schools implement systems to provide trauma-informed services to students
- + Students learn skills in how to respond to past and future traumatic stress
- + Partners connect in Networks of Care for service planning and delivery
- + Community agencies increase their use of trauma-informed practices
- + School-based discipline policies are aligned to trauma-informed framework
- + Parents and community members learn about trauma, screening, and intervention

Medium-term

- + Students with ACEs demonstrate less negative physical/mental health outcomes
- + Students demonstrate higher levels of resiliency and coping skills
- + Parents and community members seek out trauma-informed support more often
- + Trauma-informed initiatives are sustained with fidelity across collaborators
- + Systems and agencies establish plans to sustain Networks of Care for trauma

Long-term

- + Community violence decreases
- + Prevalence of ACEs decreases
- + Child, family, and community well-being increases
- + School dropout rates decrease
- + Academic achievement increases

Lack of understanding of traumatic experiences and stress

Confusion surrounding resource allocation and competing initiatives

what we do

who we reach



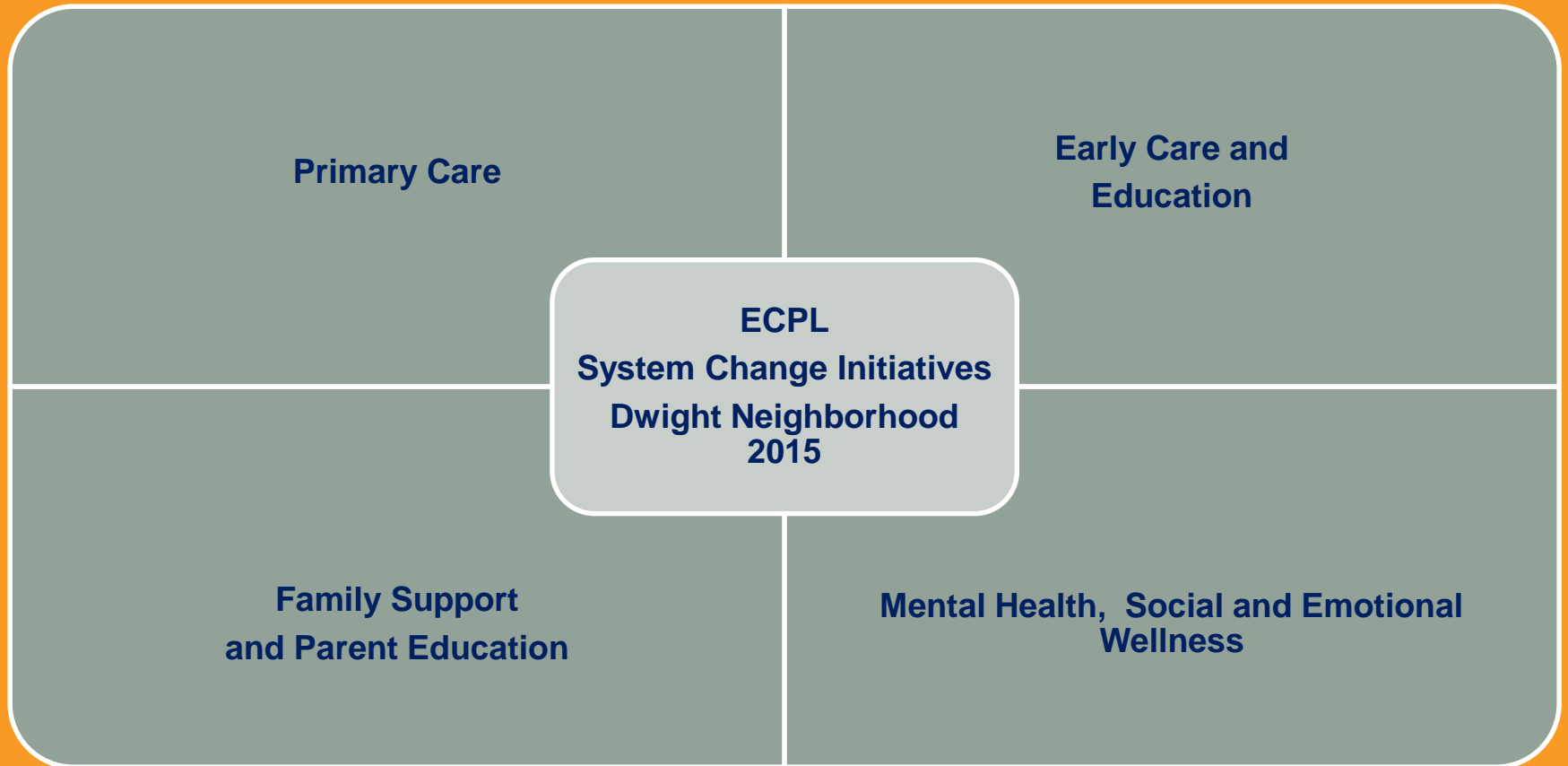
Every New Haven child must be
SAFE,
HEARD,
ENCOURAGED,
SUPPORTED and
VALUED.



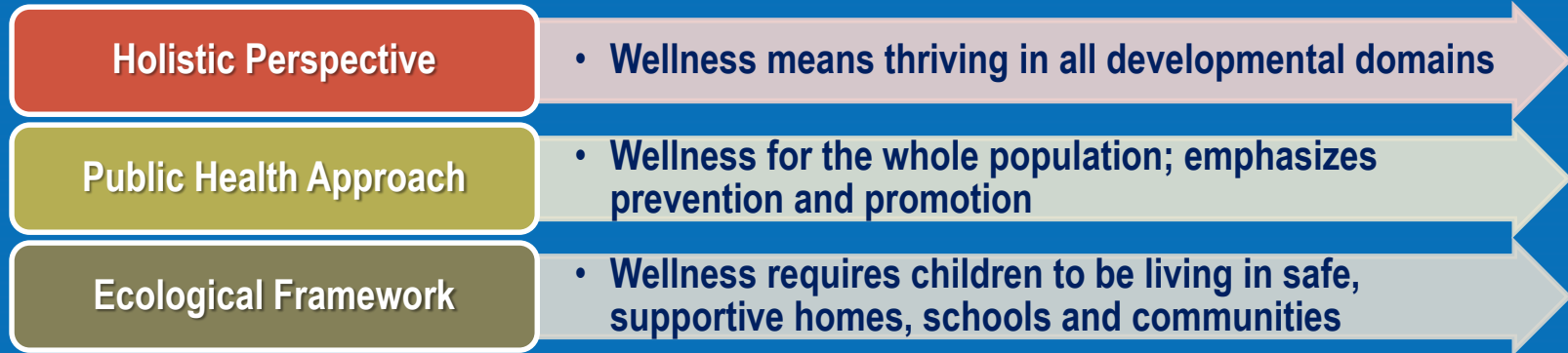
NEW HAVEN
TRAUMA
COALITION



Elm City Project Launch/SAMHSA Partnership DCF, DPH, CBC, NHPS, Wheeler Clinic, City of New Haven, ABH/ECCP



ECPL Using Three Guiding Principles



Prevention and Promotion Strategies:

Screening and assessment in a range of child-serving settings

Integration of behavioral health into primary care

Mental health consultation in early care and education

Enhanced home visiting through focus on social and emotional well-being

Family strengthening and parent skills training



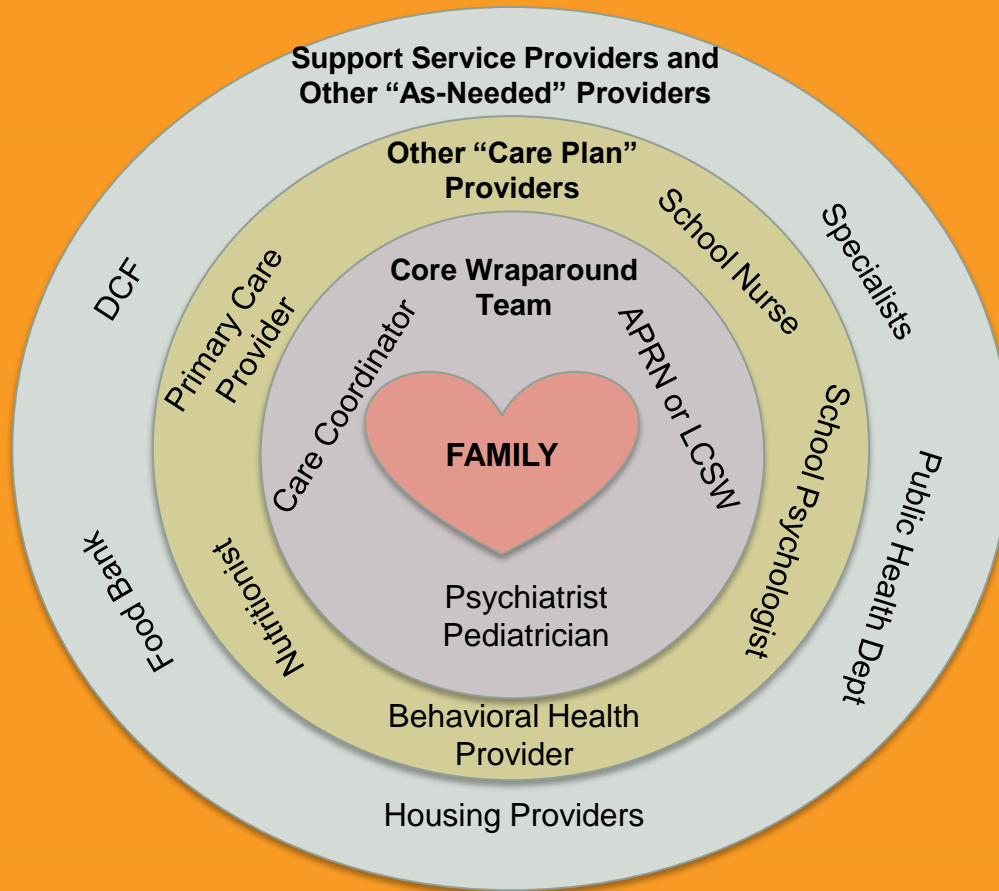
THE NEW HAVEN MOMS PARTNERSHIP

Stop and Shop, Whalley Ave



CMS Healthcare Innovations Award 2015

WRAP AROUND NEW HAVEN



Proposed Model of Care: Recruit 500 high-needs Medicaid families per year into "Wraparound New Haven" for intensive care coordination for chronic health and mental health problems. Care provided by a team of community health workers, care coordinators, APRNs and LCSWs.

The core teams will integrate services across all our partner healthcare providers: Fair Haven Community Health Center, Clifford Beers Clinic, Yale New Haven Children's Hospital, DCF, NHPS

Financial Plan: Wraparound New Haven is projected to reduce medical cost trend for the target population by reducing inpatient and ED utilization, thereby achieving a net savings over 3 years, representing a positive Return on Investment of 20%. These savings are net of the project cost of nearly \$10 million for the care coordination wraparound teams.

Family Process



Wrap Around New Haven: Delivery Model Services

Services	Details
Family engagement, recruitment, and education	Provided by trained community health workers in community-based settings
Multidisciplinary triage, screening, and assessment	Conducted by the Wraparound Team and including assessments of each family's physical, behavioral, and psychosocial risks, needs, and strengths
Family-focused care plan	Developed with the family, family supports, and Wraparound Team and used to guide care and interventions; will include each family's goals, preferences, and priorities for improving or maintaining their health functioning, recovery, and wellness
Care coordination	Provided by a Wraparound Team and focused on coordinating the provision of appropriate care across multiple care settings; managing care transitions; reconciling and managing medications, coordinating access to crisis support and wellness and social support services
Wellness and social support services	Provided at the hubs and at community-based organizations to address chronic and toxic stress (e.g., smoking cessation, parenting courses, healthy cooking classes, diabetes prevention, and meditation classes)



A Whole City Approach

Promise Neighborhood

- Whole City-- High Need Neighborhoods of the City Of New Haven
- All Sectors

New Haven Trauma Coalition

- NHPS, CBC, United Way/Boost, City of NH; Whole City Approach, 6 Pilot Schools

MOMS Partnership

- Whole City: Neighborhood Based Hubs, First three sites are Dwight, West Rock, Hill Neighborhood Grass Roots

Project Launch

- Dwight Neighborhood
- Focused on Primary Care and Early Childhood

Wrap Around New Haven

- City Wide Whole Population Management/Families with Complex Mental & Physical Health, Basic Needs

Networks of Care

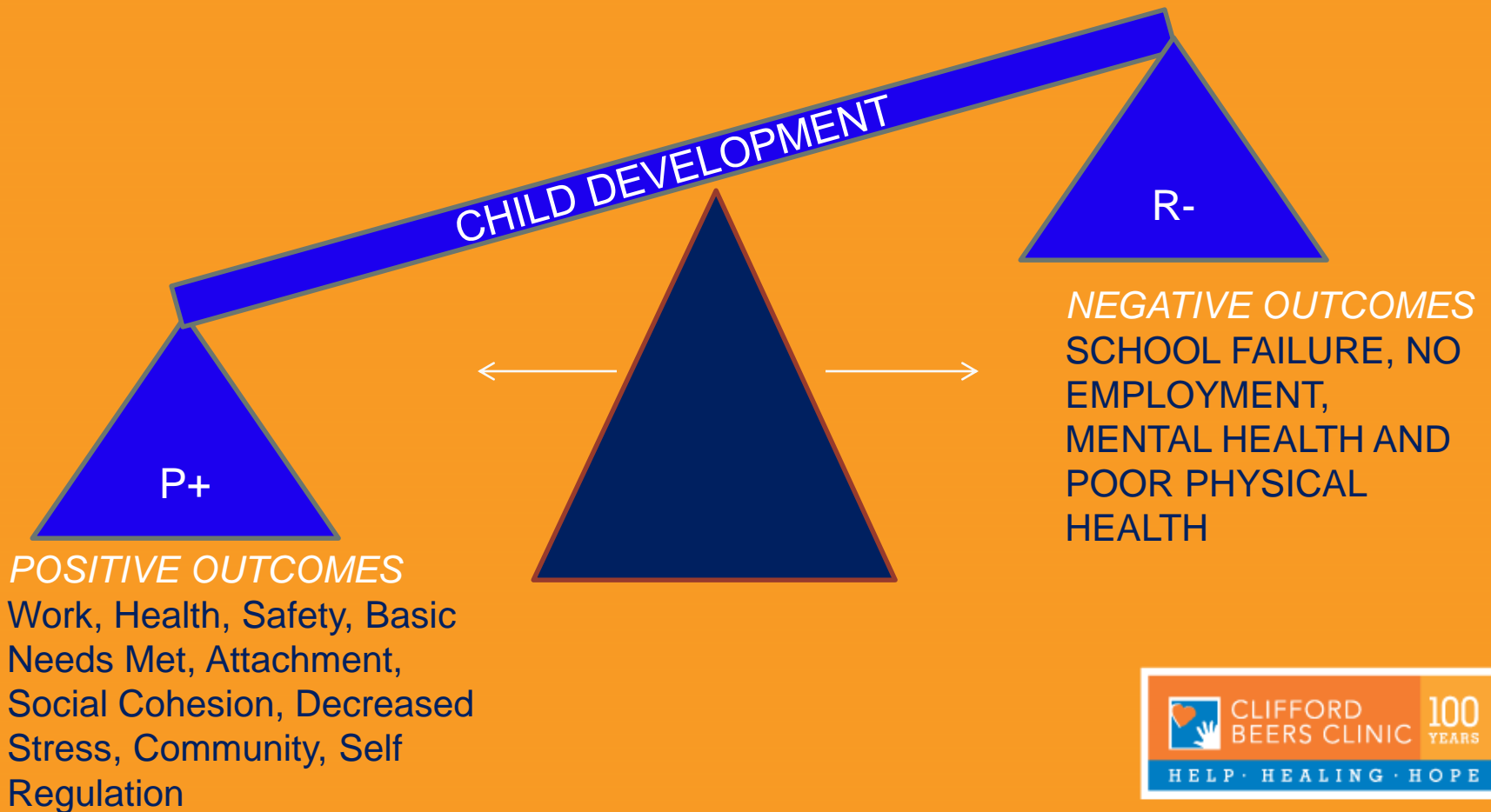


CLIFFORD
BEERS CLINIC

100
YEARS

HELP · HEALING · HOPE

Key of Success: Innovation and Collaboration





Connecticut Will Take the Lead

We will build a comprehensive and multidisciplinary public health approach that is **family focused** and dedicated to decreasing children's exposure to stress and adversity through promotion of **positive attachment, self regulation and creation of resilient family environments**





New Haven is currently such an incubator to test ways to reduce ACES and:

- Achieve better health outcomes
- Increase access to healthcare
- Lower costs of care

Lets do this across the State!





HELP

HEAL
ING

For More Information:
Alice Forrester, PhD
Executive Director
Clifford Beers Clinic
5 Science Park
New Haven, CT 06511
203-777-8648
aforrester@cliffordbeers.org

HOPE

