Preventing ACEs Plan of Care: FAQs

Updated 10.18.2024 – will be updated monthly

PACE POC2 Implementation

When are we going to start using this Plan of Care?

> You can begin using this Plan of Care at any time, when you determine a family may benefit from the POC2.

Are we required to use this Plan of Care?

> This is a voluntary roll out. The PACE Plan of Care will be required mid-2025.

Who can use this Plan of Care?

> The PACE POC2 is designed for all MIHP home visitors to use. Other professionals, like therapists at your organization, could use these resources. For this voluntary roll out, however, we would like to receive feedback from MIHP home visitors only.

Can we use this Plan of Care with existing clients?

> Yes. You can begin using this POC2 with any families that may benefit.

Where is the Plan of Care document?

> On the MIHP Initiatives page: https://www.michigan.gov/mihp/providers/current-mihp-providers/initiatives/preventing-aces-plan-of-care-2

Where are the instructions on the Plan of Care document?

> These will not be included until this POC2 is required. Until then, please see the MIHP Initiatives page for details and resources for each intervention. If you have any questions on implementation, please contact MIHP or attend a Monthly Support Session.

In the left column of the Plan of Care document, what is the difference between Priority for Care and Opportunity for Care?

The opportunity for care and priority for care designations align with the new health assessment which is not yet in place. The POC2 was developed in alignment with how that assessment will score.

Do we need to follow these steps in order, or do we pick and choose interventions?

Home Visitors are encouraged to implement which interventions they determine are most appropriate for each family. They are not expected to use every intervention, with every family.

Are we opening a “can of worms” exploring these topics with families? Are home visitors fully equipped to address these topics?

In our pilot, home visitors experienced mostly positive feedback from families. If you determine that a topic is too large for a family you are serving, you can discontinue using this Plan of Care until other resources are engaged, like therapy.

Where should this Plan of Care be documented?

Please document use of the PACE POC2 in the “Other visit information” section of your Professional Visit Progress Notes.

Do we need to add to POC3 when utilizing PACE POC2?

During the roll out, until this becomes a required Plan of Care, it is not necessary for the nurse and social worker to re-sign the POC3. Please note that this is not documented in the domain section of the Professional Visit Progress Notes. It will be documented in the “Other visit information” section during this soft rollout.

Should we start using the PACE POC2 at the admit visit or wait until we have established a good relationship with the family?

In our pilot, home visitors found success with waiting until they had established a strong rapport with the family before starting. Many prioritized immediate needs and saved the PACE POC2 for a visit where there was more time to discuss this potentially heavy topic. They also paid close attention to family reactions to decide how to introduce the topic and whether continued engagement was beneficial.

The PACE POC2 evaluation currently underway will help us further answer this question and updates will be provided.

Using a multidisciplinary team, do you have an idea of best practice as to the frequency of visits to address the issues? Is it usually one person or do all the team members utilize this? Is it ok to

time the PACE POC2 with a visit by our Social Worker or home visitor who is most comfortable talking about ACEs with families?

> In our pilot, home visitors typically used the PACE POC2 during one to three visits. Like other Plans of Care, any home visiting team member may use this POC2. During the pilot, we heard that home visitors gained comfort and confidence using the PACE POC2 with families as they got familiar with materials and recognized that the positive and HOPE-based framing of the materials allowed for a supportive and strengths-based conversation.
>
> The PACE POC2 evaluation currently underway will help us further answer this question and updates will be provided.

Does this POC2 have to be discussed at every visit?

> This POC2 does not have to be discussed every visit. Home Visitors can re-visit the PACE POC2 as they see fit.

Will we be able to bill for complex visits with the PACE POC2?

> Yes. There is a new policy beginning October 1, 2024 that allows for a longer visit for any beneficiary in the program. The complex visit and other enhanced services will be billed through the health plan or fee for service.

For families who are hesitant to seek out treatment, are they more likely to seek treatment after completing this POC2 and receiving education on ACEs?

> Our team is currently conducting an evaluation study of the PACE POC2. We are hoping to help answer this question through our study. Results and recommendations will be shared when the evaluation is complete.

Many of the clients who could benefit from the PACE POC2 already have abuse, stress/depression, and substance misuse/SEI POC2s, as well as other POC2s. The PACE POC2 is an extra thing to fit in. Is it possible to eliminate other POC2s (like Abuse, Stress/Depression, and Substance Misuse/SEI POC2s) since there is overlap?

> The decision not to eliminate these other POC2s was based on program and MIHP feedback. While there is overlap, there is still value in keeping them all. Home Visitors can pick and choose strategies from the PACE POC2 to use alongside other interventions.

Why was the PACE POC2 created as a separate Plan of Care, rather than being supplemental to other Plans of Care?

The decision to keep the PACE Plan of Care as a stand-alone POC was made after much thought, debate, and feedback from subject experts as well as pilot participants about the universal nature of the PACE POC as potentially beneficial to the vast majority of MIHP families on balance with the overlap felt with other existing Plans of Care. In the end the decision was made that it was important and unique enough to warrant a separate POC. While the PACE POC is a stand-alone, you can always use professional judgement in utilizing any of the resources provided with the PACE POC in support of work with families who are prioritizing other POCs.

Are any other Home Visiting models in Michigan incorporating the Preventing ACEs Plan of Care into their programs?

Yes! The MPHI team is currently working with PAT and HFA to integrate the PACE Plan of Care into their models.

Can MIHP provide printed handouts in color?

MIHP is exploring the idea and budget for making full-color handouts available to order on the clearinghouse. Stay tuned for more information.

Can the handouts be uploaded to our own agency sites?

All PACE POC2 resources are available to the public. You can upload any of these materials and resources to your own agency site.

The Childhood Experiences Worksheet (Intervention 1)

Will the Childhood Experience Worksheet items be included as part of the new Health Assessment in the future?

No. MIHP families have so many different experiences, our new Health Assessment will contain one broad question to indicate need for this POC2.

The ChEW is a conversational tool. It is not intended to be a screener or provide a “score” for ACEs. We invite you to use this tool to explore a family’s history, strengths, and how they can promote positive childhood experiences.

The Childhood Experiences Worksheet (ChEW) is very long. Is it recommended to do it with the family or leave it for them to fill out and discuss at the next visit?

Home visitors are encouraged to use the ChEW however it works best for each individual family. For example, it may be broken down into sections at multiple visits, or you may choose to only discuss one or two sections total.

Could the Childhood Experiences Worksheet be documented as the Action Plan, since there are similarities?

Yes. The Childhood Experiences Worksheet can be used for the Action Plan.

Monthly Support Sessions (3rd Friday of every month at 9:00am EST)

What is the Zoom link?

Zoom link: https://us06web.zoom.us/j/85952743626 Meeting ID: 859 5274 3626

When is the final Monthly Support Session?

Our last Support Session is scheduled for December 20th, 2024.

Implementation Strategies from the Field

Advice your MIHP colleagues have shared about preparing for and implementing the PACE POC2:

- **Use staff meeting time to review** the PACE POC2 orientation training, Companion Guide, and resource materials. Discuss the plan of care with colleagues, how you might implement with your families, and role-play what a session might look like. Continue to check in on implementation progress at weekly team meetings.

- **Identify a staff champion** who is enthusiastic about the new PACE POC2 and can encourage others to implement. While this champion could be anyone on your team, MIHP staff have shared that social workers may already be more comfortable with the topic of ACEs.

- **Encourage staff to take time to train** and increase ACEs knowledge. Remind staff to review the PACE POC2 materials, resources for home visitors, and available online trainings. All resources can be accessed on the MIHP Initiatives website, along with a recording of the PACE POC2 Orientation Training. The Institute for the Advancement of Family Support also has an ACEs 101 Training that is recommended as an introduction to ACEs research and prevention strategies.

- **Focus on a couple of topics or interventions at a time** as your team reviews materials together. This may help your team get to know all of the materials and resources in more manageable bites. The Companion Guide is a great resource for orienting you to the different topics.

- **Supervisors can utilize Reflective Supervision to build staff skills and relationships**. Use supervision time to check in on one another and reflect on your experiences implementing the PACE POC2.

- **Attend Monthly Support Sessions**. These technical assistance sessions occur the third Friday of every month at 9am EST. Bring your questions related to implementing the PACE POC2. The same Zoom link will be used for each meeting: https://us06web.zoom.us/j/85952743626 (Meeting ID: 859 5274 3626).

- **Take time to prepare and practice now** for implementing new PACE POC2 so you are ready for the required roll-out in Cycle 10!