

Adverse Childhood Experiences (ACE) Action Plan

Background

The Health and Well-being Board has identified tackling Adverse Childhood Experiences (ACEs) as a priority to improve outcomes and that a joint systems approach would be required. On behalf of the Board a multiagency ACE workshop was held in January 2018. The purpose of the event was to create a shared understanding of the evidence around ACEs, to consider the ACE informed examples in practice that were presented across the system and to work together to identify further opportunities for action. This summary and action plan has been developed using the learning and the facilitated table work by partners.

Summary

What do we know?

- Adverse Childhood Experiences (ACEs) are highly stressful, and potentially traumatic, events or situations that occur during childhood and/or adolescence
- Studies demonstrate that around half of all adults have experienced at least 1 ACE and 9% have experienced 4 or more ACEs
- The more adversity or ACEs a child experiences the more likely it is to impact upon their mental and physical health and risk taking behaviours across the life course
- An accumulation of ACEs can have a negative impact on child development, relationships with others, engagement in health-harming behaviours, and can lead to poorer mental and physical health and social outcomes in adulthood. This in turn, can represent ACE risk for the next generation
- Not all young people who experience adversity or trauma go on to develop mental or physical health and social problems
- There are personal, structural and environmental factors that can repair and protect against adverse outcomes – safe, stable and nurturing relationships and environments at any age, supportive family relationships, resilience building, ACE and trauma informed responses, and early intervention
- Routine enquiry could help to identify those that may be at risk and those that have already experienced ACEs giving an opportunity to develop appropriate care plans as required
- There are opportunities for services to become ACE aware and develop trauma and resilience informed responses

What can we do?

- Make childhood adversity, trauma and resilience a priority and anticipate need in commissioning and service pathways
- Create a common identification and enquiry framework for identifying need
- Develop and implement adversity and trauma informed models of care across the life course
- Prevent ACEs occurring – promote early attachment, support parents, build resilience in schools, increase community capacity
- Identify ACEs early and act to reduce impact (Early Intervention)
- Ensure mitigation for those with ACEs including past ACEs by providing support or therapeutic care to enable change

Action Plan

- Develop an ACEs briefing as part of the JSNA to help understand and quantify the impact of ACEs in Worcestershire
- Map/scope current services and programmes where an ACE approach may be beneficial for service users and may require a change of professional practice
- Agree and roll out routine enquiry in some services (police, drug and alcohol services, mental health, domestic violence services, health visiting)
- Develop a common identification framework of need (risk assessments)
- Incorporate ACE framework in workforce development – awareness training, routine enquiry training, delivery of trauma informed care
- Share good practice across the system – develop a repository for professionals, further events
- To support prevention of ACEs place the emphasis on building resilience, promoting good mental health and wellbeing, prevention and early intervention within local service offers

Next steps

- Set up a multiagency ACE working group from across all agencies to further develop and implement the action plan
- Identify appropriate review and evaluation of action