

Frequently Asked Questions about the ACES questionnaire

What is this questionnaire all about?

Research has shown us that childhood events, specifically abuse and emotional trauma, have strong and long-lasting effects on our bodies, behavior, and minds. As a result, this questionnaire was developed to help doctors better understand their patients and prevent the development of long-term problems.

Why are you asking me so many personal questions?

We are aware that this questionnaire asks about experiences that you might not want to talk about or have never told anyone about. The reason the questionnaire asks about those types of experiences is because studies have shown us that often what we go through as kids and teenagers can affect us as adults, both in positive and negative ways. We want to know about your child's experiences because we want to be able to provide your child the best treatment possible that's tailored to who they are and what they've been through.

Who will see my answers?

The questionnaire will potentially be seen by a nurse, your child's primary care provider, and a behavioral health provider.

How will this help my child?

Studies have shown that the more stressful events you experience as a child the more likely you are to have long-term physical health problems as an adult such as diabetes, high blood pressure, heart disease, etc. As the number of the stressful events your child is exposed to increases, your child's risk for these health problems increases as well. At Montefiore, we have the opportunity to identify these risks so that we can help prevent or lower the risk for health problems for your child.

Some quick facts about ACEs:

- ❖ ACEs are common...nearly two-thirds (64%) of adults have at least one.
- ❖ ACEs don't occur alone....if you have one, there's an 87% chance that you have two or more.

Pediatric Guide to Administering the ACEs Screening

(For patients ages 1- 17 years)

Step 1: Administering the ACEs Screening

Instructions:

The ACEs screening will be administered to the child's parent (patients under the age of 18 can only fill out the ACEs if they are legally emancipated) annually at each Well Child Visit.

Sample script to use when administering the ACEs Questionnaire:

“ We are asking you to fill out this questionnaire because we care about your child's physical and emotional health. Studies have shown that the more stressful events you experience as a kid the more likely you are to have long-term physical health problems as an adult. That's why it's so important to answer this questionnaire honestly, even though these are personal questions. Answering this questionnaire is completely **optional**. Please read the questions and just indicate the total number of ACEs your child has experienced here (*point out where to put total*). Your answers will be kept confidential.”

Step 2: Collecting and Entering the Total Score:

Instructions:

The ACEs screening will be collected from the parent. Only the **total** number of ACEs endorsed will be documented in EPIC. If the patient declines to answer the form, document in EPIC. If the patient has a score of 4 or more ACEs, or if the patient is distressed, please communicate this to the PCP before they enter the exam room.

Sample language to use when collecting the ACEs Questionnaire:

If form is completed:

“Thank you for completing the questionnaire. If you have any questions, the doctor will be with you in just a few minutes.”

If patient declines to complete form:

“The form is optional, and it is your choice if you would like to share this information with the doctor. Please know that in pediatrics, you will be asked to fill out this form yearly at your child's annual physical, just as we have you complete other questionnaires about behavioral health.”

Step 3: Follow-up with Patient regarding ACEs Score:

Instructions:

The total score will be recorded in Epic. Staff will try to communicate with the PCP the patient's total score and level of distress.

Sample language to use for following up with patients:

If score is 0-3, and parent is not showing signs of distress:
No follow up necessary.

If score is 4+, and parent is displaying distress or asks for assistance:

Thank you for completing the ACEs questionnaire. I notice from your answers that your child has been exposed to stressful situations during his/her lifetime that may have been traumatic. Many of my patients have experienced extremely distressing events at some time in their lives. We ask about these experiences in an effort to provide more comprehensive health care because we know that the more stressful events you experience as a child, the more likely you are to have long-term physical health problems as an adult. We have a provider here at (*MMG Practice*), who I would like for you to meet with. (*Name of BHIP Provider*), specializes in working with children, adolescents and their families. Would you like for me to see if he/she is available now to meet you quickly? (If yes- attempt to arrange a warm hand off with BHIP provider).

If parent talks about specifics of ACEs, you can say:

Thank you for sharing with me that your child has been exposed to situations that may have very stressful and perhaps traumatic. This information is very important, and I want to make sure your child receive the most comprehensive care possible. It is generally better to wait to describe the details of a traumatic experience until you have established a relationship with a counselor. That allows you to work through all the feelings associated with those memories in a step-by-step manner, at a pace that is most comfortable to you, with the help of someone who, unlike me, is an expert in this area. I collaborate with some excellent providers right here in this office, and many of my patients with similar experiences have found it really helpful to work with one. Would you like to meet (BHIP Provider) to talk about this further?

How to respond to a distressed patient:

Try to approach the patient in a calm way, using an empathic tone of voice.

Helpful Tips to Remember:

- **Avoid assumptions.** It is also important to make no assumptions about the meaning or impact of traumatic events for an individual; any assumptions you might make about the impact of the trauma may be inconsistent with the patient's feelings and experience.
- **Address Barriers.** You can explain to patients that treatment to address exposure to chronic stress and trauma can reduce psychological distress and improves overall functioning, and improve physical health problems. Even if patients state they have been able to "manage," tell them you don't want them to just manage, but to have the best health and emotional outcome possible.

Adult Guide to Administering the ACEs Screening

(for patients 18+ and emancipated minors)

Step 1: Administering the ACEs Screening

Instructions:

The ACEs screening will be administered to patients ages 18 and older once in their lifetime. Once the screener is completed, it does not need to be given to that patient again.

Sample script to use when administering the ACEs Questionnaire:

“ We are asking you to fill out this questionnaire because we care about your physical and emotional health. Studies have shown that the more stressful events you experience as a child the more likely you are to have long-term physical health problems as an adult. That’s why it’s so important to answer this questionnaire honestly, even though these are personal questions. Answering this questionnaire is completely **optional**. Please read the questions and just indicate the total number of ACEs you’ve experienced prior to the age of 18 here (*point out where to put total*). Your answers will be kept confidential.”

Step 2: Collecting and Entering the Total Score:

Instructions:

The ACEs screening form will be collected from the patient. Only the **total** number of ACEs endorsed will be documented in EPIC. If the patient has a score of 4 or more ACEs, or if the patient is distressed, please communicate this to the PCP before they enter the exam room.

Sample language to use when collecting the ACEs Questionnaire:

If form is completed:

“Thank you for completing the questionnaire. If you have any questions, the doctor will be with you in just a few minutes.”

If patient declines to complete form:

“The form is optional, and it is your choice if you would like to share this information with the doctor. Please know that you may be given this form again at your next physical.”

Step 3: Follow-up with Patient regarding ACEs Score:

Instructions:

The total score will be recorded in Epic. Staff will try to communicate with the PCP the patient’s total score and level of distress.

Sample language to use for following up with patients:

If score is 0-3, and patient is not showing signs of distress:

No follow up necessary.

If score is 4+, and parent is displaying distress or asks for assistance:

Thank you for completing the ACEs questionnaire. I notice from your answers that you have been exposed to stressful situations during your lifetime that may have been traumatic. Many of my patients have experienced extremely distressing events at some time in their lives. We ask about these experiences in an effort to provide more comprehensive health care because we know that the more stressful events you experience as a child, the more likely you are to have long-term physical health problems as an adult. We have a provider here at (*MMG Practice*), who I would like for you to meet with. (*Name of BHIP Provider*), specializes in working with individuals who have experienced chronic stress and trauma. Would you like for me to see if he/she is available now to meet you quickly? (If yes- attempt to arrange a warm hand off with BHIP provider).

If parent talks about specifics of ACEs, you can say:

Thank you for sharing with me that you have been exposed to situations that may have very stressful and perhaps traumatic. This information is very important, and I want to make sure you receive the most comprehensive care possible. It is generally better to wait to describe the details of a traumatic experience until you have established a relationship with a counselor. That allows you to work through all the feelings associated with those memories in a step-by-step manner, at a pace that is most comfortable to you, with the help of someone who, unlike me, is an expert in this area. I collaborate with some excellent providers right here in this office, and many of my patients with similar experiences have found it really helpful to work with one. Would you like to meet (BHIP Provider) to talk about this further?

Helpful Tips to Remember:

- **Avoid assumptions.** It is also important to make no assumptions about the meaning or impact of traumatic events for an individual; any assumptions you might make about the impact of the trauma may be inconsistent with the patient's feelings and experience.
- **Address Barriers.** You can explain to patients that treatment to address exposure to chronic stress and trauma can reduce psychological distress and improves overall functioning, and improve physical health problems. Even if patients state they have been able to "manage," tell them you don't want them to just manage, but to have the best health and emotional outcome possible.