



# What Works?

## A Webinar Series on Effective Early Childhood Mental Health Consultation

*Presented by the Georgetown University  
Center for Child and Human Development  
with sponsorship from*

*The A.L. Mailman Family Foundation*

Moderated by Kathy Hepburn, GUCCHD  
Technical support by Kevin Enright, GUCCHD

Chat (Q & A)

Kathy PPT

What Works ?

Use the Chat (Q&A) pod to ask a question or respond to a general question to the audience.



# What Works?

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Question:

## Logistics

- ★ Close all file sharing applications and streaming music and video
- ★ Send questions during the webinar that will be held for Q&A periods
- ★ After the webinar:
  - Evaluation
  - Archives, support materials, and unanswered questions at :  
<http://gucchd.georgetown.edu/90642.html>

## Webinar Series

	Webinar	Dates in 2010
✓	An Introduction to Effective Early Childhood Mental Health Consultation	April 28
✓	Preparing and Supporting the Work Force, Part 1	May 26
✓	Preparing the Supporting the Work Force, Part 2	June 30
✓	High Quality Services	July 28
✓	Relationships and Readiness	Sept. 29
✓	Evaluating Early Childhood Mental Health Consultation	Oct. 27
	Building Capacity, Part 1:	Nov. 17
	Building Capacity, Part 2:	Dec. 16

For brief descriptions of each webinar, go to  
<http://gucchd.georgetown.edu/90642.html>

# Webinar #7

## Building Capacity 1: Program Infrastructure

### Presenters:



**Al Zachik**

Maryland Department of Health & Mental Hygiene



**Rolf Grafwallner**

Maryland State Department of Education



**Beth Green**

Portland State University, OR

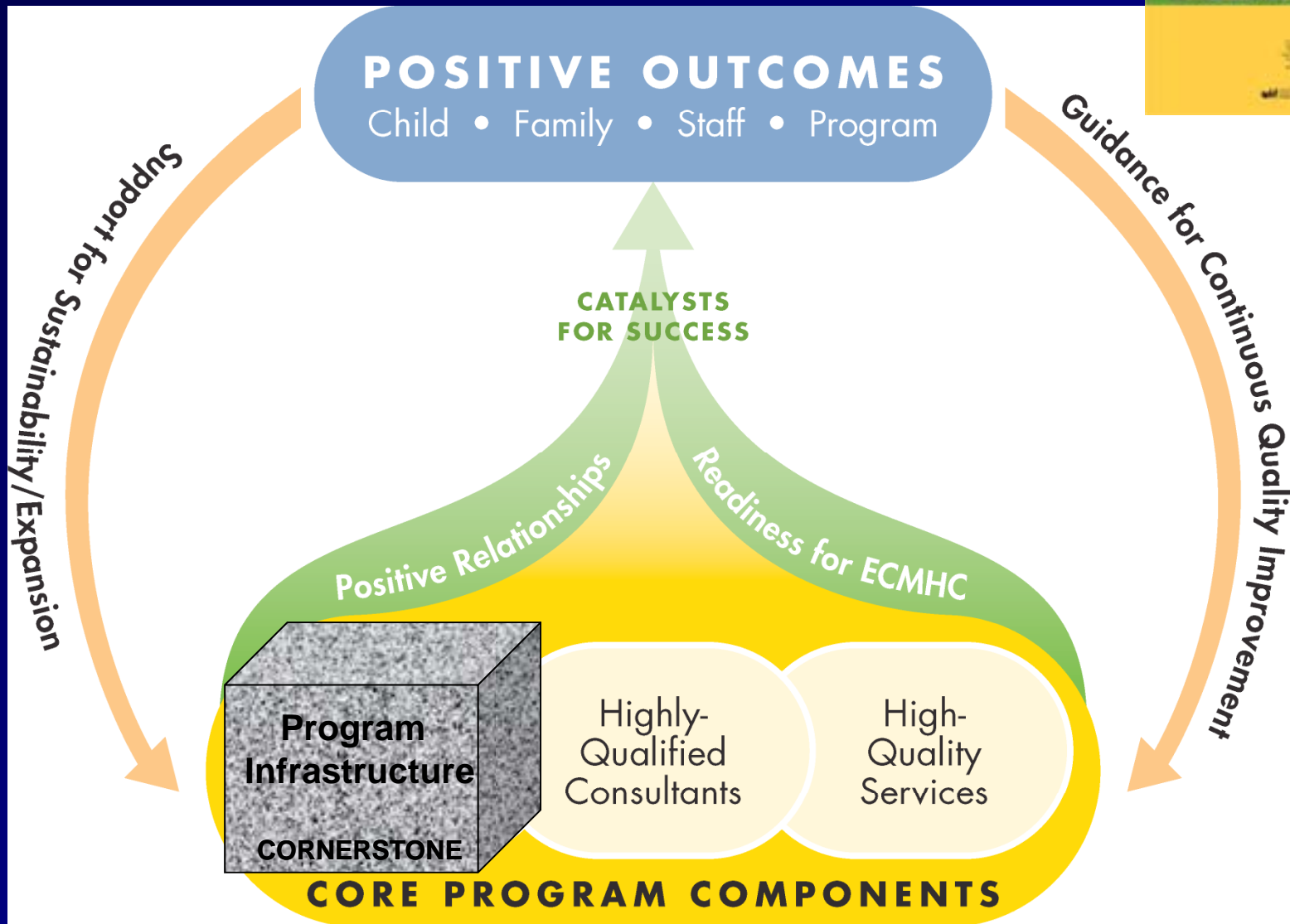
November 17, 2010

## Today's Webinar

- ★ Revisit key study findings and essential features of high quality ECMH consultation services
- ★ Identify key infrastructure elements that support effective ECMHC services from two perspectives:
  - Building an ECMHC program
  - Preparing the ECE setting for ECMHC services
- ★ Recognize the parallel perspectives of the consultation program and the early education setting
- ★ Identify strategies, tools and resources to guide infrastructure development



# An Emerging Model for ECMHC





## Program Infrastructure Elements



- ✦ Strong leadership
- ✦ Clear values and vision
- ✦ Strategic partnerships and community engagement
- ✦ A defined program model /ECMH services
- ✦ Clear organizational structure and communication
- ✦ Strong hiring/training for qualified/supported staff
- ✦ Accountability and fidelity to the model
- ✦ Evaluation
- ✦ Funding



## Early Care and Education Infrastructure Tips



- ★ “Readiness” for ECMHC (Kid Connects, CO)
- ★ Leadership that values mental health
- ★ Program-wide vision for mental health
- ★ Mental health strategic/services plan
- ★ Community, contractual partnership with “match”
- ★ Administrative policies, procedures, and oversight for implementation and support
- ★ Participatory evaluation

# Maryland's Early Childhood Mental Health System of Care

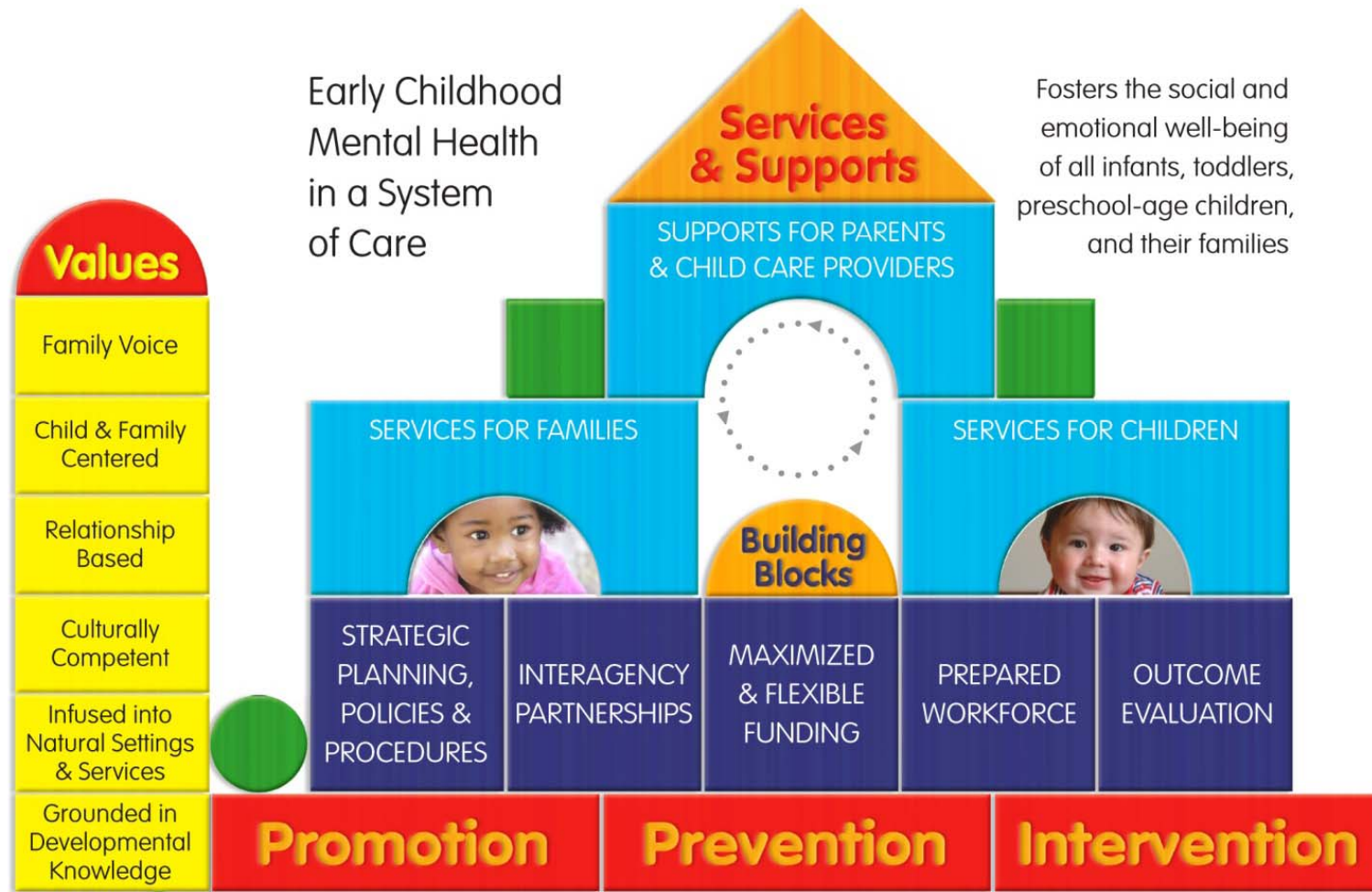


MARYLAND

ECMH Webinar  
November 17, 2010

Dr. Albert Zachik, Department of Health and Mental Hygiene  
Dr. Rolf Grafwallner, Maryland State Department of Education

# An Early Childhood Systems' Framework



Source: Developed by Roxane Kaufmann, GUCCHD; design by: Lucia Foley, Hampshire Educational Collaborative

# Strategy: Family Involvement

- Maryland Coalition of Families for Children's Mental Health – Jane Walker, LCSW-C, Executive Director
- Family Focus Groups

# Family Involvement

- Four focus groups with families of children with challenging behaviors
- Key findings:
  - Early evidence of problems
  - Wish for more support from pediatricians
  - Importance of peer-to-peer support
- Linkage with community-based providers

# History and Strategic Planning

- December 1999, with support from Georgetown University Center for Child and Human Development, convened a “search conference”
- 100 stakeholders from across state
- Developed vision for system of care for young children and families
- Formed Steering Committee

# Early Childhood Mental Health Steering Committee

- Established in 2000
- Co-chairs
  - Albert Zachik, M.D. (DHMH/MHA)
  - Carol Ann Heath, Ed.D. (MSDE)
- Multiple stakeholders including families, state and local child serving agencies, early childhood providers, advocates

# Objective: Infusing Mental Health into Early Childhood Settings

- Clear commitment **not** to establish a new “service system” to deliver early childhood mental health services and supports
- Identify where young children are spending time and bring appropriate services to them
- Continuum extends from prevention through treatment services

# Five Goals for ECMH

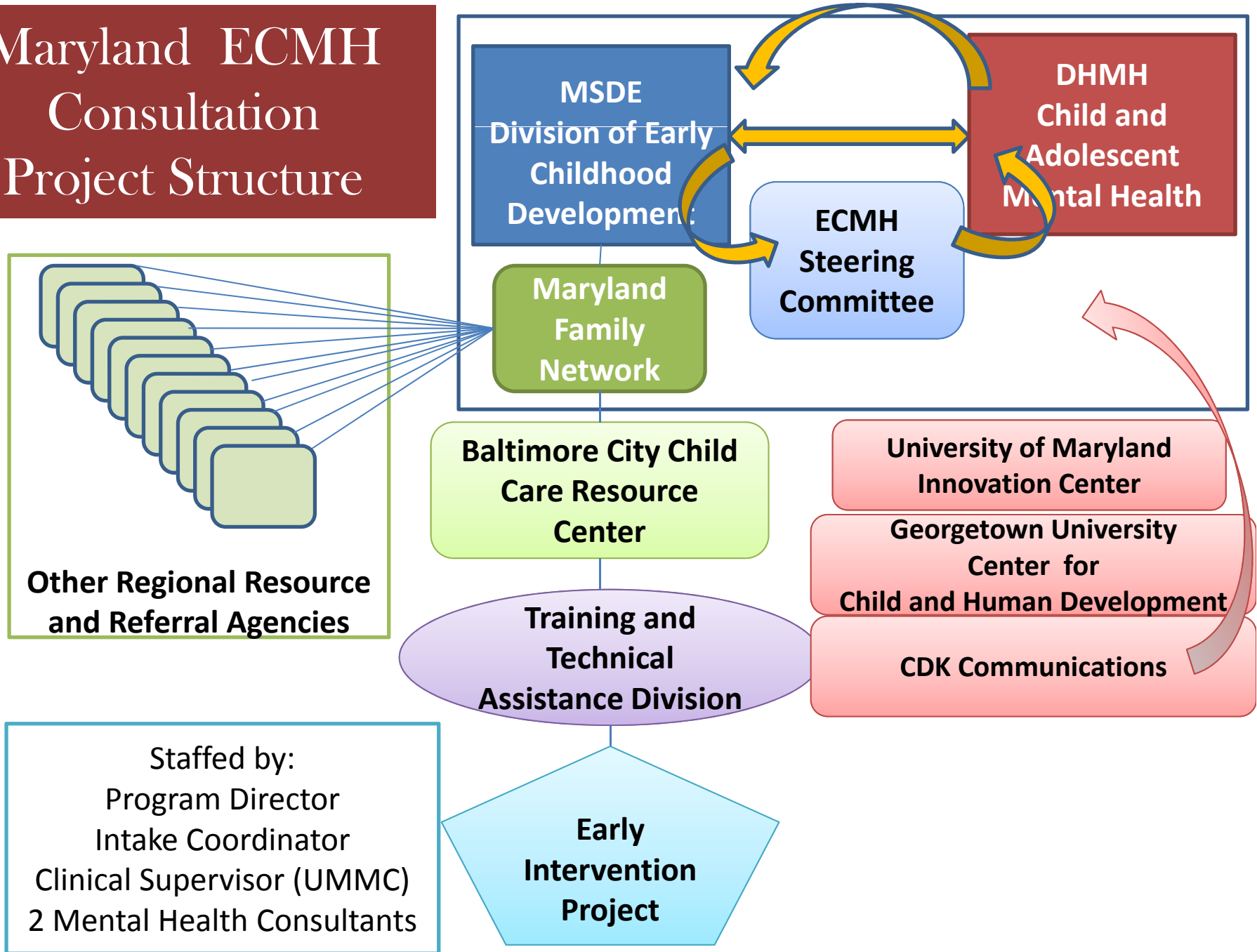
- Define the components of a “**System** of Care”
- Increase substantive family involvement in all levels of service system
- Improve pre-service and in-service training
- Increase access to mental health consultation services
- Assess current capacity to serve young children and families

# Strategy: The Early Childhood Mental Health Consultation Project

- The Consultation Project began as a three-year pilot program in Baltimore City, and on the Eastern Shore and expanded statewide in 2006 to 12 regional sites
- An evaluation of the pilot projects reveals that 90% of children at risk of expulsion were maintained in their placements



# Maryland ECMH Consultation Project Structure



# Strategy: The Early Childhood Mental Health Consultation Project

- Over the last year and a half, the Consultation Project has worked individually with 1100 children 0-5, and referred 414 children to other services including Infants and Toddlers, Child Find, etc.



# Strategy: The Early Childhood Mental Health Workforce Development Committee

- A sub-committee of the Early Childhood Mental Health Steering Committee
- To increase early care and education provider's competence and confidence in supporting early childhood social and emotional development and mental health needs

# Strategy: Social Emotional Foundations in Early Learning (SEFEL): The Teacher

- ▶ Evidence based practice designed by Vanderbilt University
- ▶ Designed for Infants, Toddlers and Preschool Children, birth – five, with and without disabilities
- ▶ Paradigm shift from traditional philosophies and attitudes regarding challenging behaviors
- ▶ Teaching not punishing
- ▶ Aligns with PBIS



# The Maryland SEFEL Partnership: Progress and Planning

- 8 out of 24 local school districts are implementing SEFEL in early childhood classrooms
- Approximately 250 professionals trained as SEFEL trainers
- 50 parent SEFEL trainers and caregivers trained and offer the SEFEL Parent Modules throughout the state
- PBIS/SEFEL collaboration established to strengthen the foundation of preventative support for children through elementary and middle school
- Four SEFEL demonstration sites include Caroline County Judy Center Partnership, Baltimore City Umoja Head Start, The Learning Child Care Center and Prince George's County Local School System

# Prince George's County 09-10

- Implements SEFEL in 28 preschool classrooms including inclusive co-taught school based pre-k and community programs
- Trained Leadership Team (Coaches), teachers, school psychologists, and families
- Embedded SEFEL into RTI
- In August, Chapel Forge Early Childhood Center & Elementary School became the first school to go program-wide in Maryland with SEFEL



# Strategy: The Early Childhood Mental Health Certificate Program

- Early Childhood Mental Health Certificate
  - Specialized training in Early Childhood Mental Health for Masters and Bachelor level clinicians



- <http://edschool.umaryland.edu/innovations>

# Strategy: The Early Childhood Mental Health Certificate Program

Master and bachelor level clinicians training program designed to advance knowledge in early childhood mental health and development (prenatal through preschool)

- Setting the Stage for Practicing in Early Childhood Mental Health (ECMH)
- Assessment and Diagnosis in ECMH
- Engaging Families and Communities
- Treatment of Parent-Child Relationship Problems, Regulation Problems, Trauma
- Early Childhood System of Care

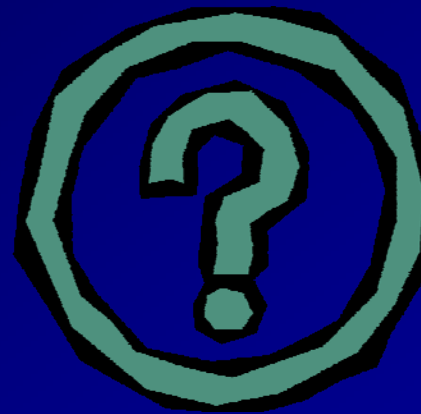
# Strategy: The Maryland Mental Health Workforce Core Competencies Modules

- Online modules developed by the Mental Health Workforce Committee to provide baseline training to assure qualified mental health professionals are available to effectively work with children with mental health needs and their families
- Modules will be launched in the Fall of 2010

# Strategy: Maryland's Blue Print for School Mental Health Umbrella

- Public Private Partnerships (LRE & ED)
- Emotional Disturbance Steering Committee
- School Psychologist Workgroup
- Foster Care School Mental Health
- MD Mental Health Workforce Committee
- Positive Behavioral Intervention Supports (PBIS)
- ECMHSC and the ECMH Initiatives

# Question Review and Response



# Setting the Stage: What Program Administrators Can Do to Support Effective Early Childhood Mental Health Consultation in Early Care and Education Settings



**Beth L. Green, Ph.D.**

*Director of Early Childhood and Family Support Research,  
Center for the Improvement of Child & Family Services  
Portland State University  
[beth.green@pdx.edu](mailto:beth.green@pdx.edu)*

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# Training Objectives

- Participants will:

- I. Understand the importance of embedding mental health consultation in the context of an ECE program's overall mission to enhance children's social-emotional development
- II. Learn about key concrete steps ECE programs can take towards establishing such a program-wide mission
- III. Learn administrative strategies for supporting positive and effective working relationships between ECE staff and ECMHC providers



# Organizational Context is Important

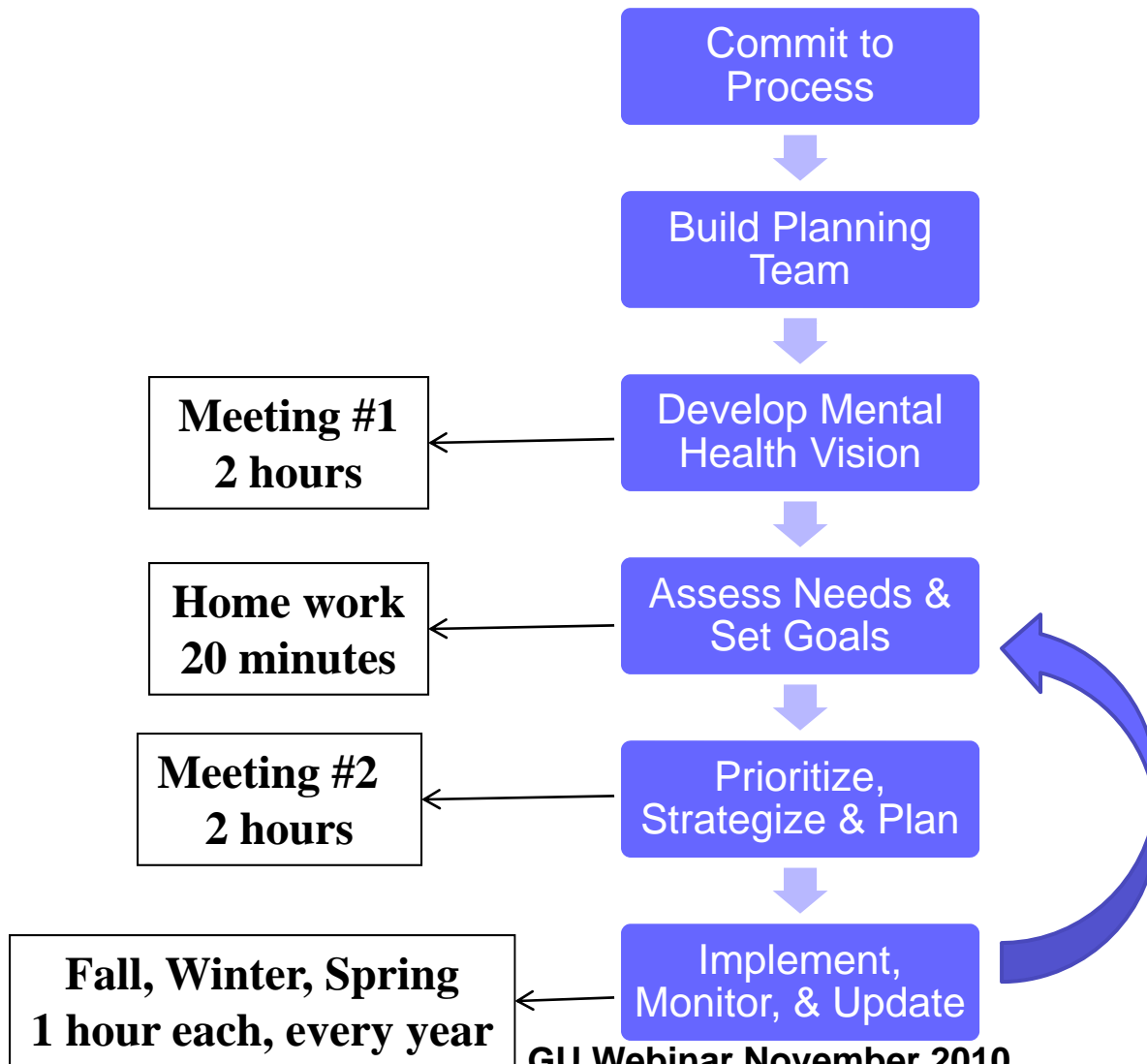
- Glissan & Green (2006)—mental health services are more effective if organizations reflect principles of positive mental health
- Green et al. (2006) -- In a survey of over 800 ECE staff, consultants, and directors, programs where leaders were seen as strong supporters of mental health were rated as more effective by staff (Green et al., 2006)
- Jane Knitzer “mental health perspective”



# **Taking a Leadership Role: Key Activities to Support Infrastructure**

1. Develop a shared vision
2. Implement & monitor a mental health strategic plan
3. Support staff and family readiness for consultation
4. Develop effective contractual relationships for consultation
5. Ensure clarity of roles and structure for ECMHC
6. Support staff wellness

# Steps in building a mental health strategic plan in ECE programs



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# Compare to national findings

“Program leadership has a clear vision of how children’s mental health issues are related to all program components”

- ✓ 53% of staff nationally “strongly agree”
- ✓ 71% of staff at the programs with the most effective mental health consultation programs



# What does a mental health vision for an ECE program look like?

- Clearly states a holistic understanding of the term “mental health”
- Includes a statement of the ECE program’s philosophy or theoretical approach to mental health consultation;
- Includes overarching strategies for MH services and supports
- States clear goals for the mental health approach—what things do you think will change, what are you trying to improve



# Example Vision Statement From A Head Start Program

Our vision is to provide culturally competent, holistic, and wellness focused services that **promote** children's social-emotional development, **prevent** development of mental health challenges, and **address** social-emotional problems that currently exist.

We will do this by using evidence-based strategies in our services to children; by supporting staff training and wellbeing; by implementing effective mental health consultation to children, families, and staff; by facilitating mental health services for parents who need them; and by continuing to strive for excellence in supporting mental health for all ECE children, families and staff.

Our goals are to ensure that all children develop the social-emotional skills they need to succeed in school and life, that parents' with mental health issues receive needed services, and that staff feel supported in their work with children.



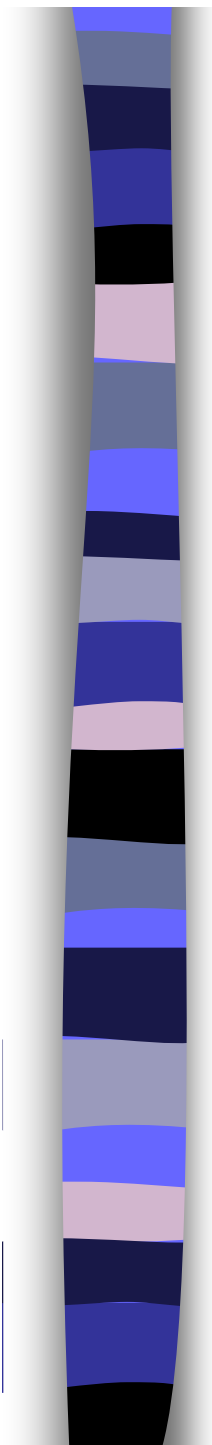
# How do you know you have a shared vision in an ECE program?

- A **written** mission or vision statement for mental health services;
- Program staff or family members who can tell you what the programs goals are for supporting mental health; and
- Program staff and families who are able to describe the program's approach to mental health in ways that are similar to each other.



# Developing and Implementing the Vision: A Strategic Plan for Mental Health

- **A strategic plan is more than a document, it is a process of:**
  - **Analysis** - identifying program strengths and weaknesses;
  - **Goal-setting** - determining what changes you would like to see in your program;
  - **Action planning** - planning specific activities to accomplish your goals; and
  - **Evaluation and review** - determining whether you have met your goals, or whether new/different goals are needed.



To see an example of a good MH  
strategic plan developed by a  
Head Start program, go to:

[http://www.ecmhc.org/tutorials/needs/mod2\\_7.html](http://www.ecmhc.org/tutorials/needs/mod2_7.html)





# Compare to national survey

“ECE program has a written strategic plan that is used to guide mental health services and supports”

35% of staff nationally strongly agree  
59% of staff at the strong programs

# Steps in building a mental health strategic plan in ECE programs





# On-Line ECMHC Program Needs Assessment

<http://www.ecmhc.org/surveys/index.html>

- ECE teachers, director and management modules
- Individualized feedback about strengths and areas that may need improvement, comparing your views of your program to what we know about ‘best practices’

# Steps in building a mental health strategic plan in ECE programs





# Readiness: Is the ECE program ready for consultation?

- **Staff who are “ready” to participate in consultation are:**
  - Not threatened by being ‘observed’
  - Open to learning new strategies
  - Collaborative
- **Families who are “ready”:**
  - See working with consultant as ‘normative’
  - Are not threatened or stigmatized
  - Are ready to accept support



# Resources to assess ECE Program readiness

- Brief checklist:

[http://www.ecmhc.org/tutorials/needs/mod3\\_2.html](http://www.ecmhc.org/tutorials/needs/mod3_2.html)

- Detailed program assessment:

<http://gucchd.georgetown.edu/products/Readiness%20Assessment.pdf>



# Things to work on to build ECE program readiness:

## **Set the Tone:**

- Make it normative
- Make it pro-active not “punitive”

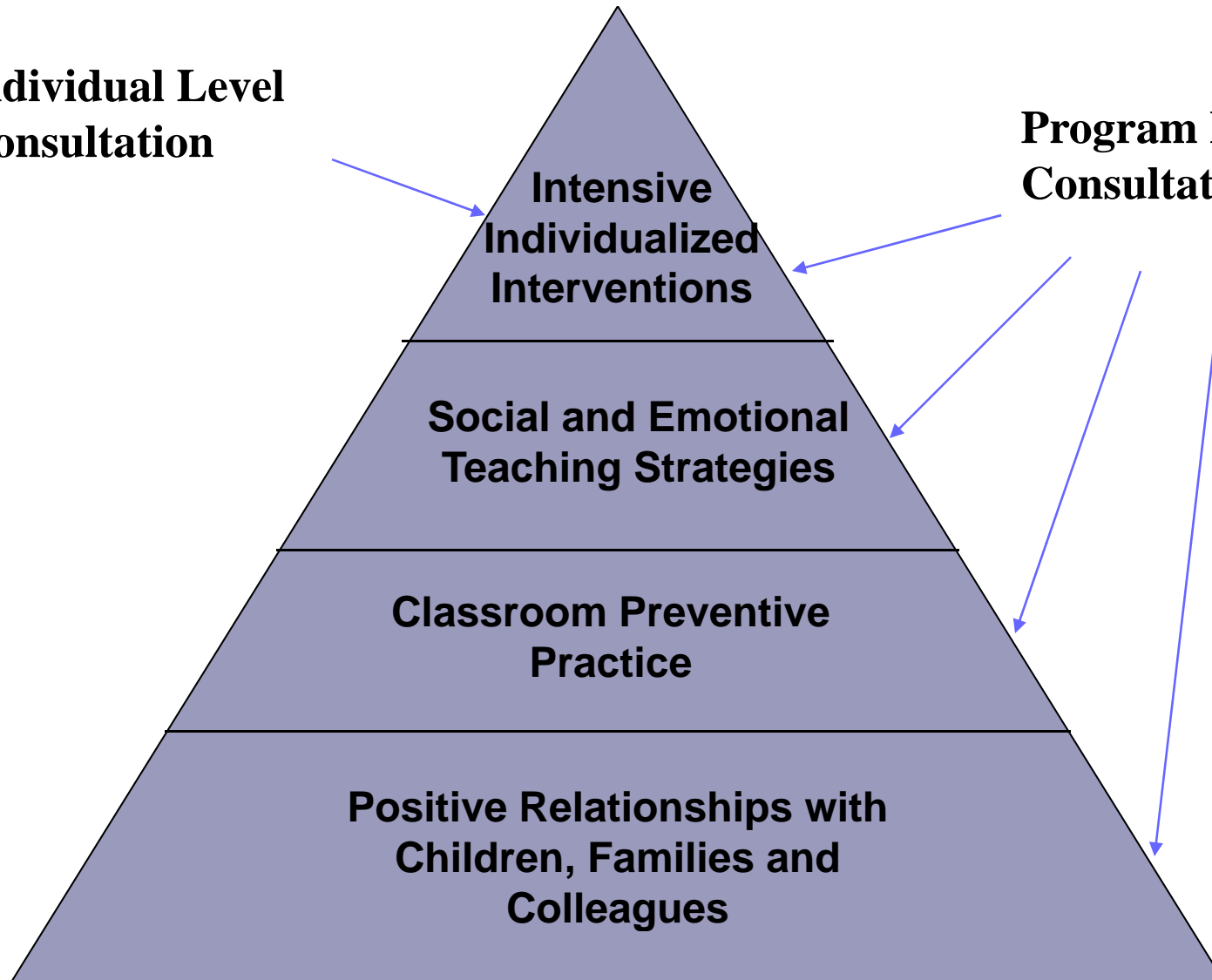
## **Establish the Relationships**

- Integrated, team-oriented model
- Consultant availability
- Collaborative model between ECE programs, consultants, and families



**Individual Level  
Consultation**

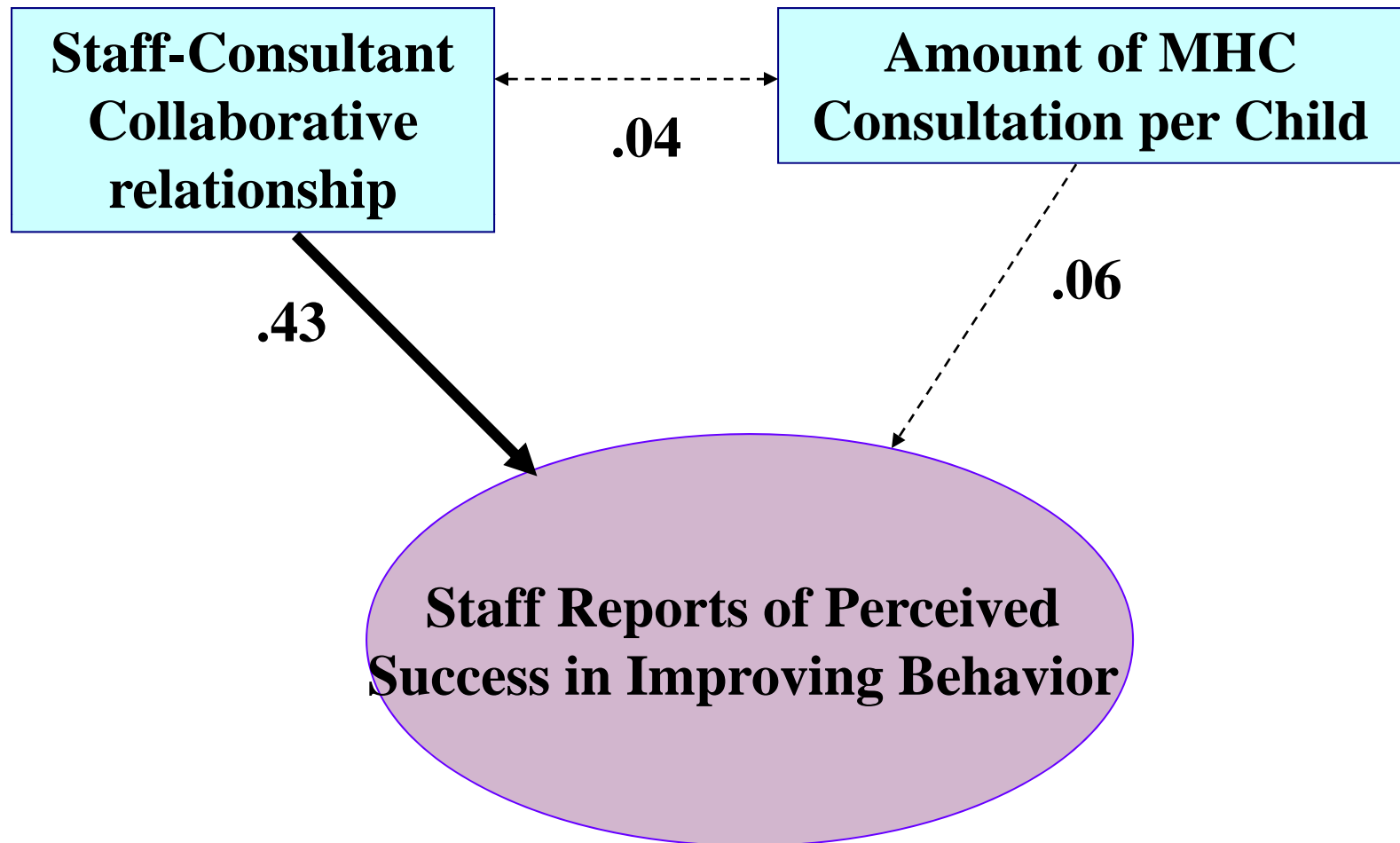
**Program Level  
Consultation**



**A model for promoting children's social-emotional development and preventing challenging behavior (adapted from the Center on the Social and Emotional Foundations for Early Learning).**

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**Quality of relationships between consultants and staff is a key predictor of staff perceptions of program effectiveness**





# Building Integrated Consultation: Clear Contracts & Job Descriptions

## ■ Clearly state:

- Philosophy of consultation provided/expected
- Frequency and duration of specific consultant activities
  - How often in the classroom?
  - How often meets with staff?
  - How often meets with parents?
  - How do staff contact consultant for questions?
- Expectations for ECE staff in receiving consultation/working with consultant



## Activities to contact for.....

- **Visit classrooms** regularly and frequently-monthly if possible
- **Provide regular training** to staff (teaching and other staff)
- **Meet with staff** both **formally** (case reviews) and **informally** to provide suggestions about particular children and general strategies for supporting children
- Participate in ECE program **management team** processes, e.g., leading MH strategic planning
- Provide staff with **guidance around how to contact** the MHC if needed (email, telephone availability)
- **Conduct staff wellness** activities (e.g., stress management, support groups)



## What to avoid in your model.....

- **“Rotating” MHCs**
- **Limiting ECMHC services to child-focused** direct service (e.g., child or family assessments, therapy).
- **Making assumptions** that the **ECMHC** knows what is expected of him/her in terms of supporting staff and parents: be clear about roles
- **Making assumptions** that **ECE staff** understand how to interact with the MHC: provide training and guidance
- **Having too many barriers** or gatekeepers to staff direct access of MHC
- **Viewing**/talking about/using the MHC as the **“fixer”** only for kids/families with intensive needs



## Contract to enhance **parent-consultant** relationships

- Provide parent trainings & orientation
- Attend ECE events, open-houses, (for Head Start, Policy Council meetings), etc.
- Be present at drop off/pick up at classrooms
- Go on home visits as needed
- Make sure the MHC has an attitude of **partnering** with staff and families



# Monitoring & Evaluating ECMHC services

- ECE program & the ECMHC provider should monitor frequency and type of services provided
- ECE program and consultants should get formal feedback from staff and parents about ECMHC services at least annually—how effective? How satisfied?
- Make sure the ECMHC gets “supervision” within ECE program—someone to check in, review progress, be a ‘program liaison’



# For some ideas about monitoring & evaluation

- See the Evaluation Toolkit,

[http://gucchd.georgetown.edu/products/ECM\\_HCToolkit.pdf](http://gucchd.georgetown.edu/products/ECM_HCToolkit.pdf)

- Webinar on evaluation-available on website (archive):

<http://gucchd.georgetown.edu/90642.html>



# Summing Up: Leadership Roles

- Build and maintain the mental health vision
- Implement & monitor a strategic plan specific to mental health
- Support relationships between consultants, staff, and families through effective contracting and decisions about key activities
- Monitor these activities and make sure the program receives/consultant provides what is needed and agreed upon.



## For More Information

- Beth Green: [beth.green@pdx.edu](mailto:beth.green@pdx.edu)
- Georgetown Website:
  - Administrator's Tutorial (example contracts, strategic plans etc.)  
<http://www.ecmhc.org/tutorials/needs/index.html>
  - On line program needs assessment survey  
<http://www.ecmhc.org/surveys/index.html>



## Research resources

- Glisson, Charles & Philip Green, "The Effects of Organizational Culture and Climate on the Access to Mental Health Care in Child Welfare and Juvenile Justice Systems," *Administration and Policy in Mental Health and Mental Health Services Research*, 33(4), 2006.
- Green, B. L., Everhart, M., Gordon, L., & Gettman, M. G. (Dec. 2006). **Characteristics of Effective Mental Health Consultation in Early Childhood Settings: Multilevel Analysis of a National Survey.** *Topics in Early Childhood Special Education*, 26(3), 142-152.  
<http://www.npcresearch.com/Files/Characteristics%20of%20Effective%20Mental%20Health%20Consultation.pdf>
- Green, B. L., Simpson, J., Everhart, M. C., Vale, E., & Gettman, M. G. (2004). **Understanding integrated mental health services in Head Start: Staff perspectives on mental health consultation.** *NHSA Dialog*, 7, pp 35-60.  
[http://www.npcresearch.com/Files/Data%20Trends%20-%20Staff%20perspectives%20%20MH%20consult%20Revised\\_bq.pdf](http://www.npcresearch.com/Files/Data%20Trends%20-%20Staff%20perspectives%20%20MH%20consult%20Revised_bq.pdf)
- **Relationship-Based Organizations**, by Judith Bertacchi. *Zero To Three Bulletin*, Oct/Nov 1996: Vol. 17(2). National Center for Infants, Toddlers, and Families.

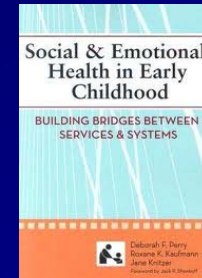
# Question Review and Response



# Resources

- ★ *Social & Emotional Health in Early Childhood: Building Bridges Between Services & Systems*

<http://www.brookespublishing.com/store/books/perry-67823/index.htm>



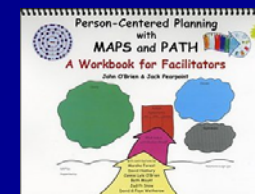
- ★ *Building Systems of Care: A Primer*

<http://gucchd.georgetown.edu/72377.html>



- ★ *Person-Centered Planning with MAPS and PATH: A workbook for facilitators*

<http://www.inclusion.com/bkpcpmapsandpath.html>



- ★ *Spending Smarter: A Funding Guide for Policy Makers, Families, Advocates, and Service Providers*

[http://nccp.org/publications/pub\\_634.html](http://nccp.org/publications/pub_634.html)



# Resources

- ★ *What Works?* study & Resource Compendium

<http://gucchd.georgetown.edu/78358.html>

<http://gucchd.georgetown.edu/products/78366.html>



- ★ *Center for Early Childhood Mental Health Consultation*

<http://www.ecmhc.org>



- ★ *Early Childhood Mental Health Consultation: An Evaluation Toolkit (2007)*

<http://gucchd.georgetown.edu/72407.html>



- ★ *Early Childhood Mental Health Consultation (2000; 2005) & A Training Guide for the Early Childhood Services Community*

<http://mentalhealth.samhsa.gov/publications/allpubs/svp05-0151/>

<http://mentalhealth.samhsa.gov/publications/allpubs/svp05-0151B/>



## For More Information

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★ Beth Green

[beth.green@pdx.edu](mailto:beth.green@pdx.edu)

# Join us for our final webinar....

## *Building Capacity, Part 2:*

### *Strategic Partnerships, Community Engagement, Funding and Impacting Policies*

Wednesday, December 15, 2010

2-3:30 PM EST, 11 AM-12:30 PM PT

#### **Presenters:**

**Marla Himmeger**

Ohio Department of Mental

**Karen Freel**

Ounce of Prevention Fund, IL

**Geoff Nagle**

Tulane University , LA

**Gaylord Gieseke**

Voices for Illinois Children

## After the Webinar

- ★ Evaluation
- ★ Unaddressed questions/archives on webpage
- ★ For any webinar connection/participation issues, contact Kathy Hepburn,

[ksh@georgetown.edu](mailto:ksh@georgetown.edu)

**Thank You**