Child Care Expulsion Prevention

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Mental Health Services to Children and Families
Child Care Expulsion Prevention (CCEP) History

- Child Care Expulsion Prevention (CCEP)
  - 1999- the Department of Human Services made an interdepartmental agreement with the Michigan Department of Community Health, to establish one CCEP project to support the mental health needs of young children (0-5) in child care.
  
  - Now- There are 16 projects in 31 of Michigan’s 83 counties-funded with federal Child Care Development Fund dollars (through DHS) targeted for 0-3 child care quality improvement. DHS has an interdepartmental agreement with the Michigan Department of Community Health to administer the projects.
  
  - CCEP projects are administered through local level Community Mental Health Services Programs.
CCEP Organizational Structure

**Michigan Department of Human Services**
(Child Care Development Fund dollars)
Grant Manager

**Michigan Department of Community Health**
Mental Health Services to Children and Families
State Administrator

**Community Mental Health Services Programs**
16 across the state that employ 30 mental health consultants

**Child Care Expulsion Prevention State Level Staff**
- Program and Training Director
- State Coordinator
- Part-time TA Consultant
CCEP Program Goal

To support families and child care providers in successfully nurturing the social and emotional development of infants, toddlers and young children (birth up to age 5) who are in child care.
Supporting Early Childhood Mental Health

Intervention

Prevention

Promotion
The Cornerstones of CCEP

1. Child-family Centered Consultation
2. Programmatic Consultation
3. Skilled consultants
4. Reflective supervision
5. Technical assistance
6. Collaboration
7. Evidence-based practice
Cornerstone Five: State-Level Technical Assistance

- Quarterly meetings in two regional locations
- Monthly Training and Evaluation meetings for administrators of CCEP programs
- On-site visits from State TA staff
- Uniform forms and materials
- Email group: (over 300 ECMH members!)
Cornerstone Six: Collaboration
CCEP Collaboration

- CCEP, 4C and MSUE Collaboration Agreement
- CCEP State Partners Social and Emotional Health Training Committee
- CCEP Collaboration with Head Start-State Collaboration Office
- ECIC Social-Emotional Health External Board Advisory Committee
CCEP, 4C and MSUE Collaboration Agreement

- Agreed to use common social and emotional health definition across trainings:

  Within the context of one’s family, community and cultural background it is the child’s developing capacity to:

  Experience and regulate emotions,
  Form secure relationships and
  Explore and learn (adapted from 0-3)

- Agreed to create an expanded state-level social and emotional health training committee and to involve all early childhood partners, e.g. Part C, Head Start

  - Provide referral information for partners at trainings
CCEP State Partners Social and Emotional Health Training Committee

Members from:

- Michigan Association for Infant Mental Health
- Head Start-State Collaboration Office
- Head Start Technical Assistance
- Early On
- Great Start School Readiness
- MI4C
- MSUE Better Kid Care
- Department of Human Services (Parent Liaison)
Social and Emotional Health Training Committee Activities

• Developed 7 recommendations for use in all social and emotional training efforts:
  • Use the same definition for social-emotional health
  • Use the same definition and source for the topic of temperament
  • Emphasize the importance of the caregiver’s emotional health
  • Emphasize the importance of relationships and caregiver responsiveness, especially in infant-toddler caregiving
  • Chose a common source for social and emotional milestones
  • Ensure all trainings stress the importance of true family-provider partnerships within caregiving and impact on social and emotional health

• Developed resources to support each recommendation.
Social and Emotional Definition:

Within the context of one’s family, community and cultural background it is the child’s developing capacity to:

- Experience and regulate emotions.
- Form secure relationships and
- Explore and learn

Resources for: Social and Emotional Milestones of Infants, Toddlers and Preschoolers


Michigan Association for Infant Mental Health Baby Stages: A Parent’s and Caregiver’s Guide to the Social and Emotional Development of Infants and Toddlers (Birth to Three years) and Michigan Association for Infant Mental Health Preschool Stages: A Parent’s and Caregiver’s Guide to Social and Emotional Development in the Preschool Years (2-5 years). http://www.mi-amih.org/products.php?id=1. ($1.00 each in Michigan, $2.00 each out of state)


Social and Emotional Milestones for Infants, Toddlers and Preschoolers

Within the context of one’s family, community and cultural background, social and emotional health is the child’s developing capacity to: experience and regulate emotions, form secure relationships and explore and learn.

The chart below lists some of the social and emotional behaviors that you may see developing in infants, toddlers and preschoolers.

<table>
<thead>
<tr>
<th>Developmental Age Range</th>
<th>Emotions</th>
<th>Relationships</th>
<th>Explore and Learn</th>
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</thead>
<tbody>
<tr>
<td><strong>Young Infant (0-6 months)</strong></td>
<td>Cries when upset</td>
<td>Smiles at and back to familiar adult(s)</td>
<td>Observes own hands</td>
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<tr>
<td></td>
<td>Can usually be comforted by a familiar adult</td>
<td>Anticipates being held or fed</td>
<td>Reaches for and grabs things</td>
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<tr>
<td></td>
<td>Smiles and reacts with pleasure to social play with a familiar adult</td>
<td>Prefers parent or caregivers face and voice</td>
<td>Claps hands together</td>
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<td></td>
<td>Shows excitement (i.e waving arms, legs, cooing)</td>
<td>Responds to own name</td>
<td>Enjoys simple games like patty cake and peek-a-boo</td>
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</tbody>
</table>

| **Infant (6-18 months)** | Accepts comfort from a familiar adult | Engages in eye contact | Enjoys simple games like patty cake and peek-a-boo |
| | Cries when upset | Smiles at and back to others | Reaches for and grabs playthings |
| | Shows excitement (i.e waving arms, legs, cooing) | Stretches arms up to be held | Smiles or plays with self in mirror |
| | May comfort self by sucking thumb or holding a special toy or blanket | Likes to look at and be near to familiar caregiver(s) | Imitates others actions |
| | Laughs out loud | Shows preference for parent or caregivers face and voice | Enjoys looking at picture books with a caregiver |
| | Smiles | Shows preference for being held by familiar adults | |
| | | May be unsure of unfamiliar people | |
| | | | |

| **Toddler (18-36 months)** | May show increased fearfulness | Explores but checks in with familiar caregiver | Keeps looking for a toy hidden from view |
| | Aware of own feelings and those of others | Makes needs known to a familiar caregiver | Show interest in other people and playthings |
| | Shows pride in accomplishments | Respond to his/her name | Plays alongside peers |
| | Communicates feelings more often | Shows affection for familiar adults | May initiate some play with peers |
| | May protest and say, “No,” more often | | Engages in make believe play |
| | Laughs out loud | | May enjoy repetition (i.e., rereading a familiar story) |
| | Smiles | | |

| **Preschooler (37-60 months)** | Adjusts to new situations | Enjoys playing with other children | Initiates activities based on own needs and wants |
| | Separates from familiar caregiver more easily | Demonstrates a sense of humor | Evaluates accomplishments, “I built a big tower!” |
| | Expresses feelings using words or gestures (“I am mad.”) | May have a “best” friend | |
| | Recognizes feelings of others | | |

*Milestone categories coincide with the accepted SE definition milestones were adopted from several resources to include: CCEP milestonse grid, CSEFEL Developmental Continuum SE indicators, MDCH SE Development in Young Children Guide and Baby Stages and Preschool Stages Wheels (MIAMH)*
CCEP Collaboration with Head Start-State Collaboration Office

Interagency Agreement with CCEP March 1 - February 28, 2009

1. Held 6 infant and early childhood meetings for early care and education staff in the Upper Peninsula
2. Facilitated 28 hours of professional development training in the UP on:
   - Infant attachment
   - Trauma
   - Relationship based practice
   - Cultural diversity
   - Infant mental health case review
3. Trained 38 professionals on infant and toddler social and emotional strategies in Lansing and shared research-based resources
4. Created a survey for ECIC Great Start Collaborative on development of their social and emotional health component
5. CCEP/Head Start Mental Health e-mail group
ECIC Social-Emotional Health External Board Advisory Committee
ECIC Social-Emotional Health External Board Advisory Committee Activities

- Social and Emotional Health Strategic Priorities
- *Social and Emotional Health and School Readiness: A Guide for Parents with Children Birth to Five Years*
- Great Start Collaborative conference call on developing local social and emotional health component
- CCEP/Head Start Mental Health e-mail group
Cornerstone Seven: Evidence-Based Practice

- 2006- began a three year evaluation study. Expanded to include a fourth year. Study concludes September 30, 2010.
Evaluation Project 1:
Online Consultant Survey

- Looking at CCEP model fidelity
- Developed and administered via www.surveymonkey.com
- 8 reports:
  - Integrity of approach and practices
  - Building Awareness of CCEP
  - Reflective Supervision
  - Training and TA
  - Job Satisfaction and Supervisor Support
  - Collaboration
  - Access to Resources and Referrals
  - Consultant Demographics, Experience and Training
Evaluation Project 2: Child/Family and Programmatic Consultation

• Data collection October 1, 2007-September 30, 2009

• Collecting data at three points:
  – Intake
  – Close of Services
  – 6 months after close of services

• Collecting data from:
  – Families
  – Providers (Formal and Informal)
  – CCEP Consultants
Evaluation Project 3: Comparison Group

- Recruiting 100 families and their child care providers where CCEP is not available
- Matched to CCEP children on age, gender, and type of target behaviors
- Will collect same child data using the same measures
Evaluation Project 4: Case Studies

- 2 CCEP programs will be studied qualitatively (4 cases per program)
- Interviews and audio recordings
- Child specific data collected
- Child care quality collected (ECERS, ITERS)
For More Information on MSU Evaluation of CCEP:

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CCEP Recommendations

1. Learn from others - contact other states that have been doing this work
2. Infuse ECMH into systems level planning
3. Investigate what types of infant and early childhood mental health training is available for new consultants
4. Collaborate, collaborate, collaborate!
CCEP Lessons Learned

1. Know your model & have process guidelines.
2. Build in ongoing, rigorous evaluation as part of the overall program structure.
3. Have Technical Assistance built in to support program fidelity and quality.
4. Ensure local level supervisors of the ECMH programs are actively involved and knowledgeable about ECMH services.
5. Hire consultants that are well trained and have a mental health background (Masters level)
6. Provide support to consultants through ongoing administrative and reflective supervision
7. Collaborate at both the state and local level for ECMH services
8. Find ways to get infants and toddlers the help that they need.
9. Don’t stop talking about the importance of social and emotional health!
Supporting Factors for Sustainability

- Hire and support qualified consultants
- Keep funders involved
- Report ongoing data to the field
- Have clear subcontract language on outcomes and requirements for projects
- Provide regular state level support and oversight
- Work across early care and education systems
- Have representation from ECMH on state level committees
Questions and Answers
For More Information

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