



CHILD CARE PLANNING COMMITTEE

January 8, 2014
12:30 p.m. – 2:30 p.m.
Children's Institute, Inc. - Otis Booth Campus
2121 West Temple Street
Los Angeles, CA 90026



AGENDA

1. Welcome and Introductions (*10 minutes*)
 - Opening Statement
 - Comments by the ChairRichard Cohen, Chair

2. Approval of Minutes (*5 minutes*) **Action Item**
 - December 9, 2013Richard Cohen

3. Report from the Joint Committee on Legislation (*15 minutes*)
 - Budget and Legislative Themes for 2014

 - Planning Council Role (Strategic Plan)Lisa Wilkin, Co-chair of Joint Committee on Legislation

Karla Pleitez Howell
Member

4. Report from the Policy Roundtable for Child Care and Development (*10 minutes*)
 - Policy Framework for Child Care
 - First 5 LA CommissionKarla Pleitez Howell

5. Early Childhood Mental Health Consultation (60 minutes)
 - Promoting children's healthy social and emotional development
 - Building professional capacities
 - Emerging collaborative systems: Next StepsNancy Ezra, Ph.D.
Nacera Bendelhoum
Aracely Gonzalez
Children's Institute, Inc.

6. Announcements and Public Comment (*5 minutes*)

7. Call to Adjourn

Richard Cohen

Next Meeting

Wednesday, February 5, 2014 ▪ 12:00 – 2:00 p.m.
Center for Healthy Communities
at The California Endowment
1000 North Alameda Street, Mojave Room
Los Angeles, CA 90012

MISSION STATEMENT

The mission of the Child Care Planning Committee is to engage parents, child care providers, allied organizations, community, and public agencies in collaborative planning efforts to improve the overall child care infrastructure of Los Angeles County, including the quality and continuity, affordability, and accessibility of child care and development services for all families.

Recommended Reading and Resources

Georgetown University Center for Child and Human Development. *Early Childhood Mental Health Consultation*. Visit <http://gucchd.georgetown.edu/67637.html> for information on their work and links to additional resources.

Inclusion Work Group of the Los Angeles County Child Care Planning Committee. *Children with Special Needs*. Visit www.childcare.lacounty.gov; click on "Resources for Parents and Communities" and then "Children with Special Needs to access a web-based directory of links to resources for identifying and intervening early with children at risk for or with developmental delays, disabilities or other special needs; includes resources for mental health and therapy services.

ZERO TO THREE. *Early Childhood Mental Health Consultation*. Journal of ZERO TO THREE: National Center for Infants, Toddlers and Families, Volume 33, No. 5, May 2013.



Los Angeles County Child Care Planning Committee

PACE Head Start Training Center
1254 Goodrich Boulevard
Commerce, CA 90022

Meeting Minutes – December 4, 2013

Members in Attendance: (24) Rachelle Pastor Arizmendi, Rocio Bach, Darlene Cabrera, Alicia Fernandez for Ana Campos, Richard Cohen, Flor Perez for Debra Colman, Teresa Figueras, La Tanga Gail Hardy, Andrea Joseph, Ritu Mahajan, Cyndi McCauley, Laurel Parker, Dianne Philibosian, Ancelma Sanchez, Judy Sanchez, Kathy Schreiner, Janet Scully, JoAnn Shalhoub-Mejia, Sarah Soriano, Fiona Stewart, Holli Tonyan, Jenny Trickey, Lisa Wilkin and Carolyn Wong

Guests and Alternates: Robert Beck, Carolyn Brennan, Tessa Charnofsky, Stephanie Cohen, Steve Erwin, Sandy Escobedo, Lorena Gallardo-Gomez, Pamela Kwok, Dr. Sandy Lee, Liliana Martinez, Flor Medrano, Sandy Mendoza, Joyce Robinson, and Ruth Tiscoreno

Staff: Michele Sartell

I. Welcome and Introductions

Richard Cohen, Chair, opened the meeting at 12:07 p.m. He read the opening statement and then welcomed members and guests by asking them to introduce themselves.

Richard made the following comments:

- Richard thanked Rachelle Pastor for arranging the meeting location and providing cookies and juice.
- He reminded members that the January meeting is scheduled for the second Wednesday of the month at 12:30 p.m. to accommodate the New Year holiday and for members who may be traveling from the Policy Roundtable for Child Care and Development's regular meeting.
- Referring to last month's meeting when Kathy Malaske-Samu and Dianne Philibosian spoke on the evolution of the Child Care Planning Committee (Planning Committee), Richard invited members and guests to help themselves to a copy of the book, *Thoughtful Reflections for Future Directions: The Los Angeles County Child Care Oral History* by Kathleen Phillips.

II. Approval of Minutes

The Chair called for a motion to approve the minutes from November 6, 2013. Holli Tonyan made the motion to approve; the motion was seconded by Ancelma Sanchez. The motion passed unanimously.

III. Subsidized Child Care Characteristics Study – California Departments of Social Services (CDSS) and Education (CDE) Technical Advisory Group

Fiona Stewart of the Child Care Alliance of Los Angeles, referred to two documents included in the meeting packets for information on the CDSS and CDE lead effort to conduct a statewide study to learn about 1) programs providing subsidized child care and development services, 2) families receiving the services, and 3) the impact of the programs on families abilities to care for their children and move to self-sufficiency. Todd Bland, Deputy Director of the Welfare to Work Division at CDSS and Debra McMannis, Director of the CDE Child Development Division are serving as co-chairs of the Technical Advisory Group (TAG), which is comprised of stakeholders and experts

within the child care community. TAG has been charged with overseeing the development of the study. The plan is to pull from existing data sources as well gather input from the field, including members of the TAG and identified key informants. The last study of this kind was completed in 2002; work on this study is expected to end with a final report in April 2017.

Members noted that some of the characteristics to be addressed by the TAG are not among the data elements currently collected by all child development programs collect. Other questions raised were around what constitutes self-sufficiency. Simply no longer receiving cash aid does not necessarily mean a family is earning enough to fully sustain a household.

IV. Federal Public Policy Update – Strong Start for America’s Children Act of 2013

Carolyn Brennan of ZERO TO THREE provided a brief overview of the Strong Start for America’s Children introduced in both the House of Representatives and the Senate. The Senate version is the stronger of the two versions as it sets a higher bar for defining high quality programs and proposes a significantly higher appropriation to Early Head Start (\$4 billion versus \$1.4 billion for Fiscal Year (FY) 2014).

The hallmark of the bill is providing universal access to prekindergarten for all four year old children up to 200 percent of the Federal Poverty Level with an annual appropriation of discretionary funds. States demonstrating that they are reaching all four years olds may expand access to three year olds. Of the funds, 20 percent of the allocation in the first four years may be set aside for quality improvements. In addition, 15 percent may be set aside for high quality infant and toddler programs that, for example, meet Early Head Start standards or are accredited. Services are expected to be provided full-day. A second pot of funds would extend partnerships between Early Head Start and center-based and family child care programs that meet Early Head Start Program Performance Standards. A third pot of funds would be allocated to States to support quality improvements, helping position their eligibility for future funding. Lastly, the bill also expresses the intent of the House and Senate to extend funding for the Maternal, Infant and Early Childhood Home Visiting Program (MIECHV). Funding for MIECHV is due to expire in FY 2014.

Synopsis of Membership Discussion:

The likelihood of the bill passing is a stretch and other factors, such as lifting sequestration, require the attention of Congress. If sequestration is lifted, elements of the bill might pass. Efforts are underway to keep attention on the issues addressed in the bill. Carolyn referred to the Rally4Babies flyer included in the meeting packets. Neither Senator Boxer nor Senator Feinstein have signed on to the bill; Representative Mike Honda representing Alameda and Santa Clara Counties is the only Californian to officially lend his signature to the bill. This is the first year that a bill introducing major change has occurred. The bill calls for creative and pragmatic efforts to build public awareness and engage others in conversation. The question is how to convince our State legislators (and the Governor!) that the issues raised by the bill should be a priority.

In closing, Richard Cohen quoted Vivian Weinstein “Have a big vision, keep it in the forefront and let’s see what we can get this time.”

V. Local Control Funding Formula (LCFF) – Opportunities for Early Care and Education and Parent Engagement

Sandy Escobedo, Senior Policy Analyst with the Advancement Project introduced the LCFF, beginning on how it is reforming financing for public education after years of an underfunded, inequitable system, particularly for districts serving high need students. School districts would be funded at a Base Grant level determined by the distribution of children across grade levels and then

school districts with large numbers of English language learners, foster children and children eligible for free and reduced lunch would be eligible for Supplemental Grants equal to 20 percent of their Base Grant. School districts with students in the high need categories above 55 percent of their enrollment would generate an additional Concentration Grant of 50 percent above the Base Grant. School districts are to adopt Local Control and Accountability Plans (LCAPs), disclosing how funds will be spent and must include input from parents, students, and employees in developing their plans. School districts are accorded a level of flexibility to develop their plans based on identified local needs while also being held to multiple areas of State priorities. Student achievement and parent involvement are key factors in accountability. Early care and education is not explicitly stated as a priority area, yet may be argued as in alignment with at least four priority areas: student achievement, parental involvement, student engagement and other student outcomes. As such, school districts should be encouraged to include funding for early care and education in their LCAPs.

Sandy Mendoza, Advocacy Manager for Families In Schools, focused on the role of parental involvement in the LCFF. School districts must present their proposed plans to a parent advisory committee and an English language parent advisory committee. The committees provide feedback on their district's LCAP and the districts must respond to the feedback in writing. Parents and others need to bring forth the message that early learning strategically supports schools and will impact student outcomes.

Synopsis of membership discussion:

Planning processes are expected to occur over the year; efforts to influence planning should focus on both short- and long-term goals. Recommendations to include early care and education are best supported with research and data. School boards are involved in the planning and have the authority to adopt their local district's plans. As such, they need to hear community voices speaking on behalf of the value of early care and education. The Strengthening Families and Protective Factors Framework provide a context for the continuum from early childhood through K-12 and involving parents in a meaningful way.

VI. Announcements and Public Comment

- **LA ECE Bridge Fund Survey** – Joyce Robinson of the Low Income Investment Fund (LIFF) announced that California Department of Education/Child Development Division (CDE/CDD)-contracted center-based and State preschool programs will receive a survey next week asking about cash flow issues. As background, the LA ECE Bridge Fund, a collaborative effort of LIIF, First 5 LA and the California Community Foundation instituted a no-interest repayable grant program two years ago to help programs experiencing cash flow issues that may occur due to delays of payments from the State. The group is exploring increasing the funds and expanding outreach efforts to programs that might benefit from the program.
- **Water Cooler Reinvestment Proposals** – Reinvestment proposals are online and constituents are invited and strongly encouraged to participate in the survey that will help narrow down the priorities in the areas of access, quality, and systems reinvestments. The final reinvestment proposals will be used to inform advocacy during the upcoming legislative session.
- **Invitation to Planning Committee Work Groups** – Andrea Joseph invited the Work Groups to bring issues of significance to the larger Planning Committee meetings for consideration.
- **State Assembly Committee Assignments** – Speaker John Pérez has appointed Assembly Member Al Muratsuchi as Chair of the Assembly Budget Subcommittee No. 2 on Education Finance. Assembly Member Muratsuchi represents a portion of Los Angeles (the South Bay), therefore more accessible to the Los Angeles county constituency.

- **Proposed Food Vending Services** – PACE (Pacific Asian Consortium in Employment) is exploring vending food services for early care and education programs. For more information, contact Rachele Pastor rpastor@pacela.org.

VII. Adjournment

The Chair called for a motion to adjourn. Rachele Pastor Arizmendi made the motion; Lisa Wilkin seconded the motion. The meeting was adjourned at 2:00 p.m.

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MEDIA ADVISORY:

Thursday, January 2, 2014

Contact: Governor's Press Office

(916) 445-4571

Governor Brown to Introduce Budget on Friday, January 10th

SACRAMENTO – Governor Edmund G. Brown Jr. will introduce his 2014-15 budget proposal on Friday, January 10, 2014 at a news conference in Sacramento.

When: Friday, January 10, 2014 at 9:00 a.m.

Where: California State Capitol, Governor's Press Conference Room, Room 1190, Sacramento, CA 95814

****NOTE:** This event is open to credentialed media only and will be webcast at: www.calchannel.com. Governor's Office Press Credentials from 2013 will be honored. Reporters may apply for a 2014 credential [here](#).

###

Governor Edmund G. Brown Jr.
State Capitol Building
Sacramento, CA 95814

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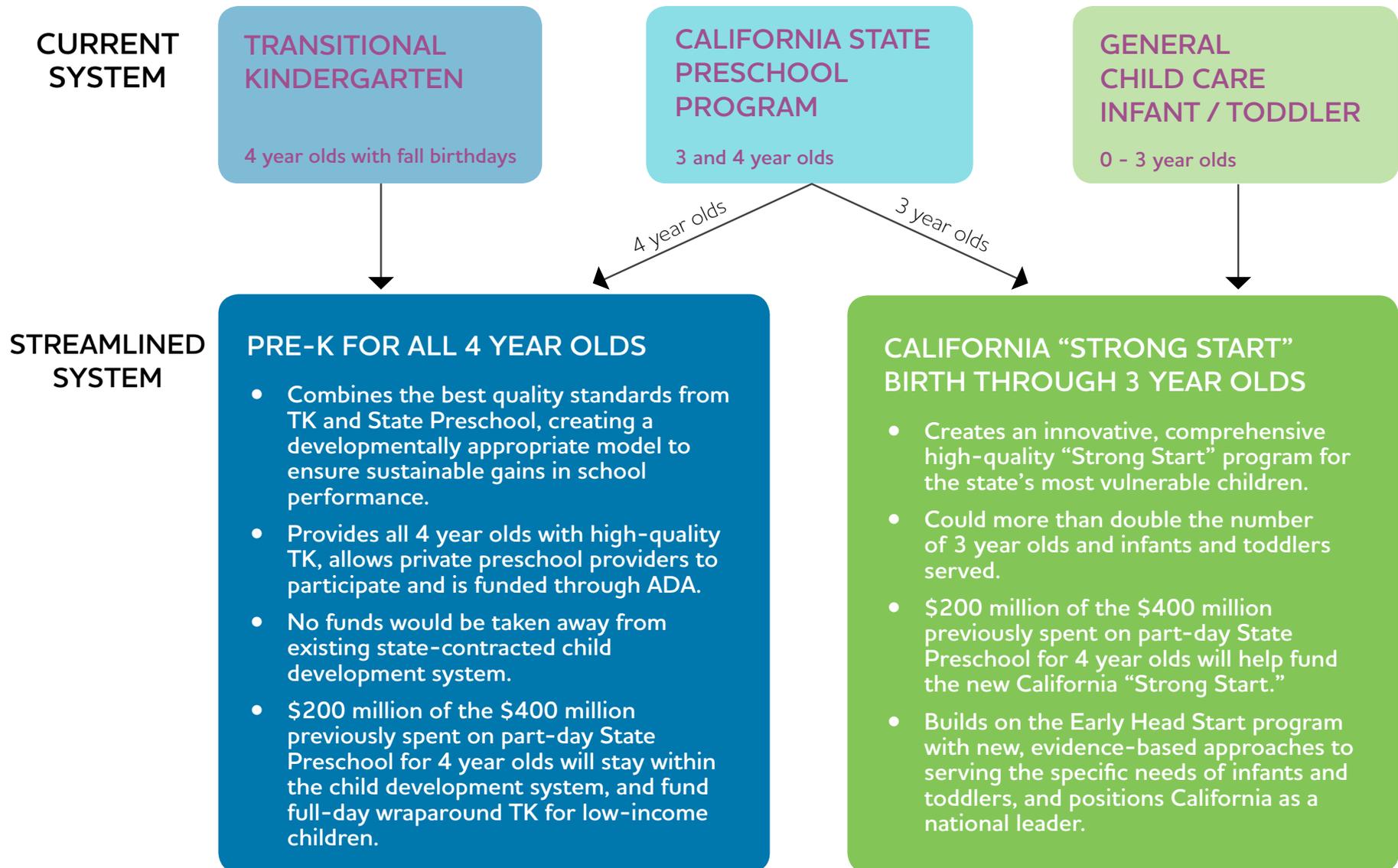
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CALIFORNIA'S EARLY CHILDHOOD EDUCATION SYSTEM

Two major policy frameworks aim to improve California's early learning system so that it serves more children, in better programs, and all children are ready for success in school.

2014 is poised to become a momentous year for early learning. Bolstered by a powerful body of research, increasing public support and a stronger economy, leaders at the state and national levels are calling for greater investment in early learning.

We have a clear path forward for our youngest learners. Now is the time to ensure all of California's young children have the strong foundation they need to succeed in school and beyond. Here's how we can do that:



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TK for All: Creating Greater Equity in School Readiness

New Model Details:

- Provides all 4 year olds with high-quality, developmentally appropriate pre-k by improving and expanding transitional kindergarten (TK).
- Combines the best quality standards from TK and State Preschool, creating a model to ensure sustainable gains in school performance.
- Allows for a mixed delivery system, while utilizing funding generated by Average Daily Attendance (ADA).
- No funds would be taken away from existing state-contracted child development system.
- Reduces the average cost per child of TK by creating a two-session model.
- Expands full-day services to the children who need it most.

Higher Quality Programs for Our Children

- Standards would be based on the Preschool Learning Foundations and aligned with the Kindergarten Common Core standards.

New TK Model	Head Teacher	Assoc. Teacher	Class Size	Teacher/Child Ratio	Length of Day
Quality Standards	Credentialed	AA Degree	20	1:10	3 to 6 hours

Five Year Phase-in

The new TK model has a five year phase-in to allow: 1) districts and providers to expand access slowly; 2) teachers and associate teachers time to obtain their education and training; and 3) a gradual implementation in line with improving state budget projections.

New TK for All	2015-16	2016-17	2017-18	2018-19	2019-20	Total
Additional 4 year olds served	56,000	56,000	56,000	56,000	56,000	400,000
Additional TK funding	\$266 million	\$1.33 billion				

New Opportunities for Teachers

- At the end of the five year phase-in, head teachers would be required to hold a credential and 24 units in early childhood education.
- At the end of the five year phase-in, associate teachers would be required to hold an Associate's degree and 24 units in early childhood education.
- An estimated 8,000 new teaching positions and 12,000 associate teaching positions would be created.

Funding is Feasible and Flexible

- The funding would be based on a two-session model (a.m./p.m.), which would allow a teacher and associate teacher to serve 20 children per session.
- Legislation would create a unique base ADA for TK, and the overall average cost would be about \$6,000 per child in each sessionⁱ.
- TK would continue to be eligible for school facilities funding.

Expanded Full-Day Services for the Families Who Need It Most

- \$200 million of the \$400 million previously spent on part-day State Preschool for 4 year olds would stay within the child development system, and fund full-day wraparound TK for low-income children.
- Local districts and providers could choose to extend TK to full-day by using wraparound State Preschool funding, Local Control Funding Formula (LCFF), and Title I.

ⁱ The existing TK receives K-3 base ADA + class size reduction + LCFF (approx. \$8,300 to \$9,800). Estimation of ADA range including full implementation of LCFF costs based on California Department of Education 2013-14 Budget Act letter, and California Department of Finance (2013), 2013-14 California State Budget

California's "Strong Start" Program: Nurturing Our Most Vulnerable Young Children

Anyone who has watched an infant or a toddler grow knows how quickly they learn and develop. Research shows that their brains are developing faster in the first three years than at any other period in their life. A recent Stanford University study found that disparities in vocabulary and language are already evident at 18 months between infants from lower- and higher-income families¹. By 24 months, there is already a six month gap in skills that are critical to language development. By age 5, there's a *two-year* gap.²

The proposed new California "Strong Start" program would create an innovative, comprehensive and high-quality program for our state's most vulnerable young children. This new program focuses on the needs of our youngest learners because we know that we must lay the foundation early, focusing on children's learning starting at birth.

Program Concept

- Through the new "Strong Start" and Head Start programs, California could more than double the number of 3 year olds and infants and toddlers served.
- This framework would combine part-day and full-day State Preschool for 3 year olds with our General Child Care for infants and toddlers program
- The "Strong Start" program would create the nation's first evidence-based, comprehensive, locally controlled birth through age 3 program.
- \$200 million of the \$400 million previously spent on part-day State Preschool will help fund the new California "Strong Start."

Developing a New California "Strong Start" Program

- A team of early childhood experts and practitioners will convene to design the "Strong Start" program during the first part of 2014.
- Through this comprehensive program design process, we can combine the best of Head Start and Early Head Start with new approaches to serving the specific needs of infants and toddlers, and position California as a national leader.

Comprehensive, High-Quality Services

"Strong Start" services could include:

- Full- and part-day State Preschool for 3 year olds
- Full- and part-day infant and toddler care
- Family engagement and support
- Voluntary home visitation
- Nutrition and other health services
- Early intervention
- Early childhood mental health

Comprehensive, High-Quality Standards

- Over a five year period, quality would be increased.
- The new program would be aligned with current quality improvement efforts such as the Race to the Top-Early Learning Challenge and First 5 California's Child Signature Program.
- The program model would be comprehensive and flexible to allow local communities to easily blend and braid with other programs such as First 5 California and federal home visitation programs, child care, CalWORKs, federal Early Head Start, early childhood mental health and health programs.

¹ Fernald, A., Marchman, V.A., Weisleder, A. (2013). SES differences in language processing skill and vocabulary are evident at 18 months. *Developmental Science*, 16(2), 234-248. Retrieved from: <http://onlinelibrary.wiley.com/doi/10.1111/desc.12019/references>

² Ibid

STATE LEGISLATIVE CALENDAR 2014 (Tentative)

Jan. 1, 2014 Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 7, 2014 Legislature reconvenes (J.R. 51(a)(1)).

Jan. 10, 2014 Budget Bill must be submitted by Governor (Art. IV, Sec. 12(a)).

Jan. 17, 2014 Last day for policy committees to meet and report bills introduced in their house in 2013 for referral to fiscal committees (J.R. 61(b)(1)).

Jan. 20, 2014 Martin Luther King, Jr. Day observed.

Jan. 24, 2014 Last day to submit bill requests to the Office of Legislative Counsel. Last day for any committee to meet and report to the Floor bills introduced in their house in 2013 (J.R. 61(b)(2)).

Jan. 31, 2014 Last day for each house to pass bills introduced in their house in 2013 (Art. IV, Sec. 10(c)) (J.R. 61(b)(3)).

Feb. 17, 2014 Presidents' Day observed.

Feb. 21, 2014 Last day for bills to be introduced (J.R. 61(a)(1), J.R. 54(a)).

March 31, 2014 Cesar Chavez Day observed.

April 10, 2014 Spring Recess begins upon adjournment (J.R. 51(a)(2)).

April 21, 2014 Legislature reconvenes from Spring Recess (J.R. 51(a)(2)).

May 2, 2014 Last day for policy committees to meet and report to fiscal committees fiscal bills introduced in their house (J.R. 61(a)(2)).

May 9, 2014 Last day for policy committees to meet and report to the floor nonfiscal bills introduced in their house (J.R. 61(a)(3)).

May 15, 2014 Last day for policy committees to meet prior to June 2 (J.R. 61(a)(4)).

May 23, 2014 Last day for fiscal committees to meet and report to the floor bills introduced in their house (J.R. 61(a)(5)). Last day for fiscal committees to meet prior to June 3 (J.R. 61(a)(6)).

May 26, 2013 Memorial Day observed.

May 27-30, 2014 Floor session only. No committee may meet for any purpose (J.R. 61(a)(7)). This deadline APPLIES TO ALL bills, constitutional amendments and bills which would go into immediate effect pursuant to Section 8 of Article IV of the Constitution (Art. IV, Sec. 8(c); J.R. 61(i)).

May 30, 2014 Last day for each house to pass bills introduced in that house (J.R. 61(a)(8)).

June 2, 2014 Committee meetings may resume (J.R. 61(a)(9)).

June 15, 2014 Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)(3)).

June 26, 2014 Last day for a legislative measure to qualify for the Nov. 4 General Election ballot (Elections Code Sec. 9040).

June 27, 2014 Last day for policy committees to meet and report bills (J.R. 61(a)(10)).

July 3, 2014 Summer recess begins at the end of this day's session, provided the Budget Bill has been passed (J.R. 51(a)(3)).

July 4, 2013 Independence Day observed.

August 4, 2014 Legislature reconvenes from Summer Recess (J.R. 51(a)(3)).

August 15, 2014 Last day for fiscal committees to meet and report bills (J.R. 61(a)(11)).

Sep. 2, 2013 Labor Day observed.

August 18-31, 2014 Floor session only. No committees, other than conference committees and Rules Committee, may meet for any purpose (J.R. 61(a)(12)). This deadline APPLIES TO ALL bills, constitutional amendments and bills which would go into immediate effect pursuant to Section 8 of Article IV of the Constitution (Art. IV, Sec. 8(c); J.R. 61(i)).

2014 Last day to amend bills on the floor (J.R. 61(a)(13)).

August 22, 2014 Last day for each house to pass bills (Art. IV, Sec. 10(c), J.R. 61(b)(17)). Final Recess begins upon adjournment (J.R. 51(b)(3)).

August 31, 2014 Last day for Governor to sign or veto bills passed by the Legislature on or before Sept. 1, 2014 and in the Governor's possession after Sept. 1 (Art. IV, Sec. 10(b)(1)).

Sept. 30, 2014

2015

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 5 Legislature reconvenes (J.R. 51 (a)(4)).

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PLANNING COUNCIL ROLE

DESIRED IMPACT: THERE IS A MORE UNIFIED VOICE ON EARLY CARE AND EDUCATION FOR LOS ANGELES COUNTY.

OUTCOME OF PLAN: The Los Angeles County Child Care Planning Committee is a forum where ECE issues and ideas are presented and discussed to build consensus that supports the efforts of many groups to improve the ECE infrastructure in the County.

GOAL: Participation in the the Planning Committee is expanded to include more stakeholders.

Strategy 1: Outreach to other groups with ECE policy agendas.

Strategy 2: Use the Joint Committee on Legislation to engage stakeholders.

Strategy 3: Plan for facilitated discussion sessions at Planning Committee meetings.

Strategy 4: Develop a tiered process that incorporates big issues, local policies, and administrative issues in discussions and in making policy recommendations.

Strategy 5: Explore the use of social media for Planning Committee purposes and to act on the policy recommendations.

LOCAL PLANNING COUNCIL ROLE

Background

- In the past decade there have been many groups with policy agendas related to ECE, but the messages and goals of these groups were not well coordinated or aligned. It is a common belief that having a unified message about what is needed and should be supported legislatively is critical to future success in State budget development and in the enactment of legislation. Ultimately the Planning Committee could, with other stakeholders, work toward agreement on the top priorities for action to improve ECE in Los Angeles County.

Implementation Issues and Options

- The goal is to extend the role of the Planning Committee into a forum for open discussion and building consensus around issues, with the possibility of developing uniform messages. To this end, the Planning Committee will develop a mechanism to ensure increased member input into agenda setting and will integrate regular reports from the Joint Committee on Legislation into the monthly meetings.
- Planning Committee meetings could be used effectively to introduce and review current issues, important topics, and new ideas raised by members and other stakeholders and to ensure room for diverse opinions. While taking on issues that have broad impact as well as county specific items, the Planning Committee will move to adopt a process in which public discussions build on one another and lead to consensus or majority approved recommendations for action.
- Interactions and activities of the Planning Committee will provide opportunities to create stronger connections among its members and other participants, and between the Planning Committee, the Roundtable, and other groups focused on child and family well-being. Toward this end, meetings may include more time for members and guests to share about program goals, missions, current initiatives, and public policy agendas.

Alignment with Child Care Policy Framework

The Planning Committee will consider alignment with the Child Care Policy Framework in issue discussions and consensus building leading to recommendations. Many of the activities listed under implementation are intended to help the Planning Committee become more strategic about making and forwarding recommendations for action to the Roundtable and ultimately to the Board of Supervisors.

Alignment with California Comprehensive Early Learning Plan (CCELP)

The strategies of this goal are focused on local action relating to statewide or national issues. A few of the potential recommendations in the draft CCELP describe issues of global concern that may well become the focus for Planning Committee discussions and work. An example would be the recommendation that all ECE programs within the state funded system are contributing to the goals of the system and if not, then replaced or redesigned.

EARLY CHILDHOOD MENTAL HEALTH CONSULTATION

Children's Institute, Inc.



Los Angeles Child Care Planning Committee Meeting
January 8, 2014
Nancy Ezra, Ph.D.

EARLY CHILDHOOD MENTAL HEALTH CONSULTATION

- What Works?
- A Road Map for Implementing
- Effective Early Childhood Mental Health Consultation



EARLY CHILDHOOD MENTAL HEALTH CONSULTATION

Goals for Today

- Understand the research base for ECMHC
- Become familiar with the core components of effective ECMHC
- Learn strategies for designing and implementing effective ECMHC
- Learn how to use evaluation to support continuous quality improvement (CQI) and promote sustainability
- Learn strategies for embedding ECMHC into a continuum of early childhood services

Who is providing ECMH Consultation?



Consultants

Who Provides EC Consultation?

- Individuals currently providing ECMHC?
 - Mental health consultants
 - Consultation program directors
 - State or local policymakers/administrators
- Individuals currently receiving ECMHC?
 - Family members
 - Early care and education staff
 - Individuals interested in bringing ECMHC to their states/communities?
- Others?
 - Indirect mental health intervention for infants, toddlers and preschoolers
 - Focused on young children in ECE



Consultants

What is Early Childhood Mental Health Consultation?

Collaboration between a professional consultant with mental health expertise and consultees and their caregivers in early childhood settings.



TYPES OF ECMHC

Types of ECMHC

- **Programmatic consultation:**
Focuses on a general program or classroom issue that impacts the mental health of staff, children and/or families (Cohen & Kaufmann, 2000)
- **Child/family-centered consultation:**
Focuses on a particular child with challenging behavior and/or the family of that child



GOALS OF ECMHC



GOALS OF ECMHC

What are the Goals of ECMHC?

- Reduce the impact of mental health problems among young children in ECE settings
- Build the capacity of ECE staff, programs, and families to promote young children's healthy social/emotional development and address challenging or troubling behaviors



ECMHC RESEARCH



ECMHC RESEARCH

What Does the Research Tell Us About ECMHC?

- * Context
 - Limited body of research
 - Systematic Review of ECMHC Research (Brennan et al., 2008; Perry et al., in press)
- Findings
 - **Staff outcomes:** improved self-efficacy and confidence, reduced stress, enhanced skill in working with children and families

ECMHC RESEARCH

What Does the Research Tell Us About ECMHC (cont'd)?

- Findings
 - **Program outcomes:** less job turnover, adoption of a consistent philosophy of mental health, inconsistent findings on impact on classroom environments
 - **Child outcomes:** greater gains on socialization, emotional competence and communication, improved social skills and peer relationships, decreased problem behaviors, decreased numbers of children expelled due to behavior



ECMHC RESEARCH

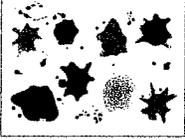
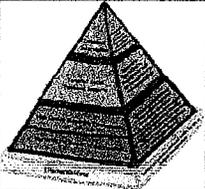
What Does the Research Tell Us About ECMHC (cont'd)?

Findings

- Family outcomes: increased access to mental health services, improved communication with early childhood staff, improved parenting skills, improved parent-child interaction, no evidence of impact on parental stress

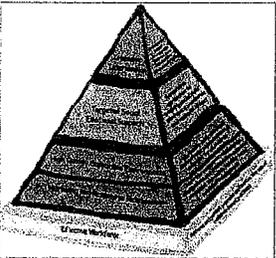


PYRAMID MODEL



PREVENTION TO INTERVENTION

1. Developing an effective workforce
2. Forming nurturing and responsive relationships
3. Providing highest quality supportive environments
4. Designing targeted social & emotional supports
5. Developing individualized interventions



EFFECTIVE ECMHC

#1: Solid Program Infrastructure

- Well-defined model
- Strong leadership
- Clear organizational structure
- Strategic partnerships
- Community outreach and engagement
- Clear communication
- Strong hiring and training component
- Supervision and support mechanisms for consultants
- Evaluation
- Financing



The graphic titled "Preschooler Activities" features a central clock face. Surrounding the clock are icons and labels for various activities: "Circle Time" (top left), "Learning" (left), "Map Time / Quiet Time" (bottom left), "Fitness & Play Gym" (top right), "Art / Crafts" (right), and "Puppet Theatre" (bottom right).

Highly-Qualified Consultants



A black and white photograph showing a diverse group of approximately ten people, including men and women of various ethnicities, standing together and smiling.

EFFECTIVE ECMHC

#2: Highly-Qualified Consultants

- ♦ Educator, collaborator, coach and cheerleader!
- ♦ Content Knowledge
 - Infant/early childhood mental health (I/ECMH)
 - Typical & atypical child development
 - Best/evidence-based practices in I/ECMH
 - Cultural and linguistic competence
 - Service systems and community resources

EFFECTIVE ECMHC

Highly-Qualified Consultants (cont'd)

Skills

- Work at multiple levels
 - Group settings and one-on-one
 - Children and adults
 - Infants, toddlers and preschoolers
- Communicate effectively
- Develop targeted & *individualized* strategies
- Build strong, healthy relationships!



EFFECTIVE ECMHC

Highly-Qualified Consultants (cont'd)

Attributes:

"Instead of [the consultant] giving us the solution... I don't know how this happens, [but] like magic, we end up with a solution when we walk out the door. And everyone feels supported and like we won."

~ ECE Director

EFFECTIVE ECMHC

#3: High-Quality Services

- Include *both* types of consultation
- Provide an array of services/activities
 - Information gathering
 - Individualized service plan development
 - Plan implementation support
 - Provider/family education
 - Provider/family emotional support
 - Linkages to services beyond consultation (e.g., direct therapy)

EFFECTIVE ECMHC

Process Components

• Catalysts for Success

#4: Positive Relationships

#5: Readiness for ECMHC

#6: Outcomes Measurement

– Continuous Quality Improvement (CQI)

– Sustainability

WHAT IS THE NEED FOR EARLY CHILDHOOD MENTAL HEALTH CONSULTATION?

• Does it meet a need of your state's/community's children, families and caregivers?

• Are challenging behaviors, social-emotional health and development, and expulsions from child care and early learning programs an issue for your state/community?

• Public health issues with implications for child and adolescent functioning

ECMHC MODEL RECOMMENDATIONS

Model Design:

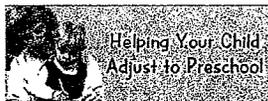
• Program level services

• Child-specific services

• Integrated health partnerships

• Intensive training and supervision for mental health consultants

• Annual program evaluation



ECMHC MODEL RECOMMENDATIONS

Model Design (cont'd):

- Relationship-based
- High dosage/high intensity
(up to 16-20 hours per center/4 hours weekly at homes)
- Long term commitment to specific setting
- Working the full continuum of promotion, prevention & intervention
- Special attention to caregiver stress & mental health

ECMHC MODEL

Promoting Fidelity to the Model:

- Development
- Testing in the Field
- Evaluation
- Technical Assistance
- Outcomes



PARTNERSHIPS

Strategic Partnerships:

- Integrated Health Partnerships
- Holistic approach
- Further developing capacity of caregivers
- Community collaborations: An investment in programming
- Access to parents

QUALIFICATIONS

Highly-Qualified Consultants:

- Master's prepared: which disciplines?
- Previous experience in a child care or preschool setting
- Elements of the consultant stance
- "Goodness of fit"
- Flexibility



ELEMENTS

MHC Training & Supervision

- Introduction to the Work
- Core Knowledge and Competencies
- Self-Evaluation Checklist
- Reflective Supervision



QUALITIES

Positive Relationships:

- Time
- Flexibility of responding
- Balance between reflective support and responding to needs of setting
- Understanding and respecting cultural aspects of relationships & interactions



QUALITIES

Readiness for ECMHC:

- Major importance to assess sites' readiness for consultation
- Early Care Site Readiness Assessment
 - Uses
 - Decision Making
 - What to do when...
- Development of Format and Topics

READINESS

Early Care Site Selection Indicators of Readiness

- Administrative Support for MH Consultation
- Current Practices including Expulsion Policies
- Flexibility in Programming to incorporate MH Consultation
- Readiness for Partnership with MH Consultation



HOW TO GET STARTED

Getting Started

- Setting the Right Tone
- Clarifying Roles
 - Examples:
 - Service Agreement
 - Mutual Goal Setting
- Administrative Consultation
 - Effective staff communication
 - Expulsion protocols
 - Leadership development



HOW TO GET STARTED

Program Level Consultation:

- Teacher/Provider Consultation
 - Classroom observation
 - Intervention & modeling
 - Teacher team meetings
 - Teacher wellness
 - Reflective Supervision



HOW TO GET STARTED

Program Level Consultation:

- Other Program Level Activities:
 - Health screenings & follow up
 - Classroom social & emotional screenings
 - Social skills groups
 - Teacher formal and informal professional development
 - Parent workshops



HOW TO GET STARTED

Child Specific Consultation:

- Concerning and/or challenging behavior
- Capacity building for providers
- Home visits: Parent/child interactions
- Family assessments
- Clinical child assessments & interventions
- Linkages to community resources



HOW TO GET STARTED

Financing the Work:

- Current landscape
- Commitment from within
- Using evaluation & outcomes to make the case
 - Cost of failure/expulsion data evidence impacting funding & policy
- What it takes to continue getting ECMHC funded

HOW TO GET STARTED

Evaluation:

- Both levels of service delivery and the elements within each are measured
- Both quantitative and qualitative measures are used whenever possible
- Process of analyzing and reviewing results with consultants and settings to lead to improvement of services is in place

HOW TO GET STARTED

Evaluation Measures

- Program Level:
 - Site Readiness Assessment (ECMHC director)
 - Classroom ECERS-R (Teacher/Provider rating)
 - Teacher Opinion Survey (Teachers/providers pre post)
 - Teacher Demographics (Teacher/provider)
 - Consultation Questionnaire (Teacher/Provider)
 - Health measures
- Child Specific:
 - Parenting Stress Index-Short (Parent, pre & post)
 - Ages & Stages III
- (Parent/Teacher, pre & post)
 - Consultation Questionnaire (Parent/Teacher)



Developing a Blueprint for Strong, Sustainable ECMHC

Theory of Change:

- A statement that links activities and outcomes to explain a causal sequence of events
 - HOW an outcome is achieved
 - WHY the desired change should result
- Necessary in designing approaches for evaluating complex interventions
 - Determine steps in sequence/timing
 - Identify what needs to be measured

Developing a Blueprint for Strong, Sustainable ECMHC

Logic Model

- Graphic depiction of aspects of a program
 - Inputs, activities, short- and longer term outcomes
- Descriptive rather than explanatory
- How are they similar/different:
 - May have elements of theory of change visible in a logic model if links between activities and outcomes are very specific

Developing a Blueprint for Strong, Sustainable ECMHC

ECMHC Logic Models

- Teacher
- Child
- ECMH Consultation
- Teacher Stress
- Locus of Control
- Interactions
- Classroom Design
- Environment
- Child Behavior
- Relationships



Developing a Blueprint for Strong, Sustainable ECMHC

ECMHC Logic Model Evaluation

- Skills and Qualifications
- Satisfaction
- Quality of Relationships
- Early Childhood Mental Health Consultation
- Early Care and Education
 - ECE Providers Attitudes/ Beliefs
 - Classroom Environment
- Parenting
 - Behavior and Attitudes
 - Stress
- Young Children
 - ↓ Challenging Behavior
 - ↑ Social Skills




EVALUATION

Measurement Issues

- Complexity of phenomenon
- Limited valid/reliable tools
- Danger of relying on child behavioral changes alone
 - Needing to measure change at multiple levels
 - Staff, family, program, and child
 - From multiple perspectives: MHC, Staff & Family
 - Missing information about implementation/fidelity

CHANGE

Theory of change: an articulation of "how" identified ECMHC activities will lead to changes in specific adult-level knowledge, attitudes or behaviors, which in turn will lead to measurable changes in child-level outcomes.



EVALUATION

Lessons Learned:

- Be clear about what questions you want to answer and who you plan to report out to
- Familiarize yourself with core measures
 - Determine what additional training you or your consultants will need in order to use core measures
 - Calculate how many of each measure your program will need and order well in advance

EVALUATION

Lessons Learned:

- Think about database management
 - It's essential and likely requires dedicated staff
 - Who do you have for data entry and record keeping?
 - Plan for analysis
 - Do you have in-house capabilities or will you need assistance?
- Use evaluation results with consultees
Use evaluation results to improve services

ECMHC AT CII 2013-14



ECMHC AT CII 2013-14

- 18 trainees
- Weekly 90-minute training & supervision
- Weekly 4-hour consultation in ECS site
- Weekly consultant/teacher meetings
- Child referrals - Initial assessment within 30 days
- Meetings with teachers and parents
- Collaborative intervention strategies
- Referral to CII Early Childhood Mental Health Services

ECMHC AT CII 2013-14

- Community Defined Evidence-based Program
The Center on the Social and Emotional Foundations for Early Learning (Vanderbilt University)



http://www.ecmhc.org/materials_consultants.html

FUTURE GOALS FOR ECMHC

Eventual rule language we'd like to see...

- All licensed child care centers/family child care homes will have access to a qualified early childhood mental health consultant.
- Qualified consultants must have a master's degree or higher in psychology, social work, counseling or related field, with demonstrated preparation, knowledge or experience in:
 - Infant and early childhood mental health
 - Infant and early childhood development, including social/emotional development
 - Child care programs and the child care industry

FUTURE GOALS

- Additional group and individual mental health interventions beyond the professional capacity of child care staff
- Specialized support in identifying and referring for consultation/mental health services
- Complementary supports provided by ECMH consultation to the Pyramid Model
- Support to child care staff concerning their own well-being and mental health
- Consistent quality Reflective Supervision
- Consultation and facilitated referrals to community resources mitigating risk factors

FUTURE GOALS

- Foundational support including observation, screening and mentoring in the context of best practices to support mental health
- Assessment of children who are experiencing social, emotional or behavioral challenges
- Encompasses a range of programs, supports and services
 - Included EC MH consultation

FUTURE GOALS

**Strategic Plan for Early Childhood Mental Health
Blue Ribbon Policy Council for Early Childhood Mental Health (Colorado, 2008)**

“Develop a statewide infrastructure to support mental health consultation as a model practice for early care and education settings, including home visitation.”

FUTURE GOALS

Vision for ECMH Consultation:

- Mental health consultation is available, accessible, affordable and equitable for all children and families in California



FUTURE GOALS

- **Successful Strategies**
 - Embedding consultation into broader system efforts (e.g., strategic plan)
 - Braiding and blending with other services/supports to prevent duplication and maximize dollars
 - Advocating for policy changes to support ECMHC in the long-term

HAPPY, HEALTHY, WELL-ADJUSTED CHILDREN & FAMILIES