



Tommy's Story

Tommy is a bright and engaging preschooler who gets along well with his teachers and peers. When Tommy is doing something he enjoys, he is purposeful and productive. However, sometimes he gets physical with other children and his teachers and uses threats to get what he wants. When the director reached out to the Early Childhood Mental Health Consultation program for help, she said, "Ignoring him doesn't always work because it's not safe for other children. Time-outs don't seem to affect him either positively or negatively."

As the ECMH consultant worked with Tommy, one goal was to increase his problem-solving skills to reduce times when he was unproductive. She and Tommy's teachers hoped he would learn skills for using his free time so he would be less likely to get physical with his friends and destroy their play projects. They created a "center choice board" that visually helped him plan where he would spend his day and with which friends. He learned to tell his teachers and friends what was bothering him instead of threatening to hurt them to get their attention. The consultant also referred Tommy's teachers to various helpful resources. They used these resources to give Tommy ideas for how to solve his problems.

Working with Tommy on his specific issues also helps improve the total classroom environment. He has learned how to ask teachers for help if he has a conflict with a friend. Teachers know how to redirect him when he becomes angry. Focusing more on Tommy's emotional literacy helps not only him but all the children in the center.



Early Childhood Mental Health Consultation Project

Annual Report Summary
July 1, 2011 to June 30, 2012

Report Overview

This report details the work of the Early Childhood Mental Health Consultation Project for the 2011-2012 fiscal year, based on three established goals: reduce the number of children expelled from child care due to behavior issues, increase the understanding of social and emotional development and its impact on educational success, and link and bridge systems and services on behalf of a child, family and program. Information in this report was obtained from

case data collected by Early Childhood Mental Health consultants in all six Regional Keys and the program feedback surveys distributed to early learning center directors and teachers at the end of each case.

"Our consultant was very understanding and supportive of all involved. Her expertise and rapport especially with the parents helped bridge and strengthen the teacher-family relationship."

(Program)

Project At-a-Glance

Who Provided and Received Services?

- 13.5 ECMH consultants provided services (13 full-time, 1 half-time)
- 664 individual children received ECMH consultation services (480 were new cases this year)
- 5% of the requests for service were for children ages 0-24 months, 22% were for children ages 25-36 months, and 73% were for children ages 37-60 months
- An average of 321 early childhood educators received on-site ECMH consultation each month
- An average of 2344 children were impacted each month by consultation services delivered in their early care and education programs

Where Were Services Provided?

- In 59 counties (88% of all Pennsylvania counties)
- In 338 early learning facilities across the commonwealth
- In all levels of Keystone STARS facilities, with more than 63% being STARS 1 or 2

Why Were Services Provided?

- 30% of requests for services were for aggression
- Other reasons included self-regulation (49%), interaction (6%), communication (10%), and attachment (6%)

What Linkages Were Made to Other Services?

- 426 children were referred to community agencies for more intensive services
- Of the cases referred:
 - 34% were referred to early intervention (31% to EI 0-3 and 69% to EI 3-5)
 - 48% were referred to child mental health (8% of these were referred specifically for Parent-Child Interaction Therapy)

"The recommendations
were focused on how the environment of the center can change to support my son rather than focusing only
on what my son has to change."

(Parent)

Achieving the Early Childhood Mental Health Project's Goals

Goal 1: Reduce the number of children expelled from child care due to behavior issues

ECMH consultants work collaboratively with early childhood education and parents to understand the nature of children's behavior. With this understanding, adults in the child's life can identify strengths that can be built on and help everyone feel more capable of meeting children's needs and teaching social and emotional competence. According to the research, teachers who receive this kind of support are far less likely to expel a child



How We're Doing

- 58% of cases were closed with positive outcomes (defined as successful referral to another level of service or meeting goals).
- 36% of cases were closed for neutral reasons, including the child/family moving, child changing program, or child moving to kindergarten.
- The percentage of children receiving ECMH consultation services who were expelled from childcare facilities decreased from 3.7% to 1.1%.
- 95% of directors and teachers reported that increased understanding of behavior within the context of a child's family and school environment helped them respond to behavioral challenges in ways that support the child's social and emotional needs.

Goal 2: Increase the understanding of social and emotional development and its impact on educational success

The ECMH consultants provide targeted professional development sessions on a variety of topics related to increased understanding of social and emotional development. The consultants also provide training on administering the Ages and Stages Questionnaire (ASQ) and its social-emotional component (ASQ-SE), screening tools that help to identify children with developmental delays.

How We're Doing

- 335 hours of professional development were offered to the early care and education community.
- 267 participants benefitted from 16 sessions on using the Ages and Stages Questionnaire screening tool.
- 39 facilities participated in Mind in the Making training.

Goal 3: Link and bridge systems and services on behalf of a child, family and program

ECMH consultants help facilitate links to appropriate services for children who require a higher level of intervention and provide information to practitioners about community resources. ECMH consultants are able to consider the many factors that may impede a family's ability to access services. They often advocate on behalf of families and practitioners and facilitate linkages to overcome barriers.

How We're Doing

- ECMH consultants offered 220 hours of resource and referral, such as fielding calls from parents and providers.
- 87.2% of teachers and directors indicated that the resources identified by the ECMH consultant were very helpful, and 80.7% indicated they had an excellent or understanding of the resources in the community following ECMH services.

Additional Early Childhood Mental Health Supports

In addition to the ECMH Consultation Project, several other initiatives in Pennsylvania are working to increase the coordination and accessibility of services to promote early childhood mental health:

- Expansion of Parent-Child Interaction Therapy services to 45 agencies in 23 counties
- Collaborative professional development to promote the expansion and use of Positive Behavior Supports in early care and education
- Cross-system collaboration with the Office of Mental Health and Substance Abuse Services, including a program liaison and clinical consultation



"Our consultant is very
helpful, kind and insightful. She
helps bring out the best in the teachers
when she works with them. The mental
health component of Keystone STARS
is a great asset to our program."

(Program)

The consultant "was absolutely wonderful.. She was very nice, easy to talk to, and was a great resource. She believed that our son could be successful in a daycare and was absolutely correct. Her calm, supportive nature was extremely helpful in this difficult situation." (Parent)

