Pennsylvania's Infant and Early Childhood Mental Health Consultation Program 2019-2021[i] Annual Report

Director: Brandy Fox, LCSW, IECMH-E®
Program Manager: Jennifer Murphy, MS, ECMH-E®

Through a reflective, collaborative, problem-solving and capacity building relationship, mental health consultation encourages adults to build strong relationships with infants and young children, so they feel safe, supported, and valued.

bright start.
bright kids. bright future.

IECMH Consultation in Pennsylvania

Infant and Early Childhood Mental Health Consultation (IECMHC) is an evidence-informed intervention designed to build the capacity of early childhood professionals' ability to nurture social and emotional development in infants and young children.

The Office of Child Development and Early Learning (OCDEL) has supported access to mental health consultation for early childhood education programs since 2006. The goals of the Pennsylvania IECMHC program are to:

- reduce the number of children expelled from child care due to behavior concerns,
- increase caregiver 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.
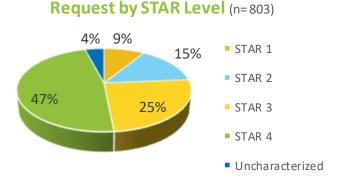
The IECMHC team consists of 28 consultants as of June 30, 2021, and will expand to 30 staff in the 2021-22 fiscal year. Consultants are regionally based across the commonwealth to serve and support child care programs participating in Keystone STARS and PA Pre-K Counts, including center, family, and group-based care.
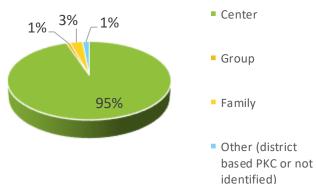
Program Reach

- 875 child-specific cases[ii]
- At least 1250 educators impacted[iii]
- 8,363 children impacted in classrooms where IECMH consultation occurred[iv]
- 463 Early Learning programs in 48 out of 67 counties

Request by STAR Level (n= 803)

- STAR 1
- STAR 2
- STAR 3
- STAR 4
- Uncharacterized

4%   9%   15%   25%   47%

Demographics of Programs Served

Over the course of several program years, the IECMHC program historically receives more requests for support from STAR 3 and 4 programs. Pennsylvania has over 7,000 licensed child care programs and sixty-seven percent of those programs at the STAR 1 and 2 level. Program leadership has identified the need to engage more of these programs in mental health consultation supports by strategically messaging to communities where STAR 1 and 2 providers operate.

Early Learning Program Type

- Center
- Group
- Family
- Other (district based PKC or not identified)

1%   3%   1%   95%

Educator Perception of Expulsion Risk

The practice of expulsion and suspension from early learning settings negatively impacts both children and families. Children lose chances to learn, develop relationships with peers and adults, and practice the very skills they may most need, including social and emotional skills. When children experience expulsion or suspension, they experience harmful effects on development, education and health and tend to view themselves, and the school environment, in a negative way[v]. Families, whose child(ren) are expelled or suspended, lose access to supports for their child, feel increased stress, including financial challenges, as they search for alternative care, and in some cases, may even lose their job.
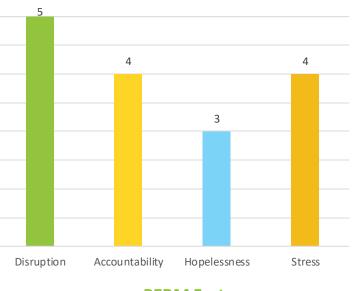
Early childhood programs provide a variety of reasons for expelling a child. A child may be removed from a program because of challenging behavior and/or staff are concerned about the safety of the child and other children in the program.

Key research has discovered four factors may be related to teacher perceptions of preschoolers' challenging behaviors that may impact teachers' beliefs regarding the suitability of expulsion as a viable disciplinary option. These four factors encompass:

- the degree to which a child's behaviors create disruptions in the classroom
- the degree to which those behaviors may pose a risk of injury for which the teacher might be accountable,
- the degree to which these behaviors are associated with increased teacher stress, and
- the degree to which the teacher may feel hopeless that anything can be done to improve the behaviors.[vi]

The IECMHC program began implementing the Preschool Expulsion Risk Measure (PERM) in 2017. The PERM is used as a screener for determining expulsion risk and the need for prevention services, such as

IECMHC, as well as a tool that consultants can use to better understand decision factors that influence expulsion and suspension practices in the early learning environment. The chart provides the median PERM scores for each factor as indicated on the Request for Service form (scale: 1 [low] to 5 [high]). Pennsylvania educators are, on average, perceiving a moderate to high degree of expulsion risk across the PERM factors when requesting consultation services. Educator's perception of expulsion risk as related to classroom disruption aligns with the number of requests made for externalizing behavior concerns, such as aggression (27%) and self-regulation (54%) across the 2019-2021 program years.
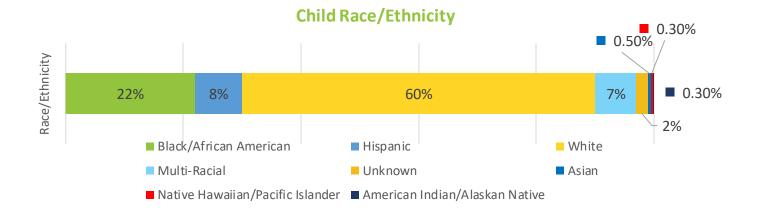
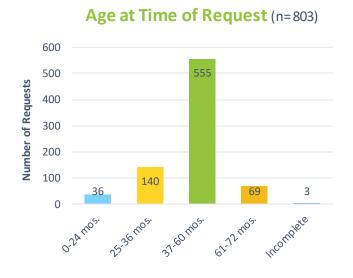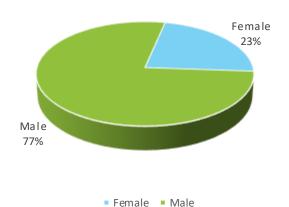| Disruption	Accountability	Hopelessness	Stress
5	4	3	4

PERM Factors

Demographics of Children Served

The race/ethnicity breakdown of children served through consultation services is comparable to the overall racial makeup of Pennsylvania's children under five years of age.[vii] However, research tells us that young children of color, primarily male children of color, are disproportionately expelled or suspended[viii]. OCDEL and program leadership recognize the need to expand the reach of our consultation services to additional early childhood education settings because African American or biracial families who partially identify as African American are disproportionally served in low-quality child care[ix]. It is also a goal of OCDEL to increase quality of child care at STAR 1 and 2.

Child Race/Ethnicity

Age at Time of Request (n=803)

Gender of Children Referred

> *"I think just meeting has been good for our social emotional health, even if there isn't a topic. So many of the web meetings have so many people on them that you don't get a chance to actually talk to another ECE worker, that's what I've liked about this group."*

IECMH Consultation During a Global Pandemic

Beginning on March 13, 2020, in response to Governor Wolf's COVID-19 mitigation orders, many Pennsylvania child care programs closed and communities throughout the state began to shelter in place. The IECMHC team was innovative in the landscape of a global pandemic in their efforts to support children, families, and the early learning professionals that serve them. Sheltering in place meant that on site consultation was no longer a viable option, therefore the team collectively pivoted the consultation approach to include:

Reaching over 750+ individuals with *Holding Space: Let's talk about: Reassurance, Regulation, Relationships, Resilience*, a series of online discussion groups to allow early childhood education professionals and families to connect and gain new insights about how to support ourselves and our children. Over 95 percent of directors and educators indicated that their discussion group was helpful. 100 percent of families who participated indicated that the discussion groups were helpful. Following the initial roll out, consultants **partnered with more than ten ELRC's and child care program groups** to offer smaller, regional Holding Space events.

Teleconsultation was offered for child care programs who were engaged in consultation or needed general support during this critical time, as a way to continue support without increased risk of exposure. At the time of the shelter in place order, 185 child care programs, children and families were actively receiving IECMHC Services. Staff shifted to virtual support and connection with program staff and families through phone, email, and virtual platforms. New requests for consultation significantly reduced from March through June 2020.

Performed 360+ hours of outreach across two fiscal years with child care programs, early childhood system partners and families around IECMHC related topics, resource and referral, program promotion and professional development connections. **Participated in 19 Health and Safety Task Force** stakeholder groups and **responded to 57** Expulsion/Suspension Help Requests.

Programmatic Communication Strategies were enhanced to include a single point of referral through the Pennsylvania Key, new program branding, a new IECMHC Brochure, the launch of *A Focus on Infant/Early Childhood Mental Health* newsletter, meet our team page, launched an Office Hours pilot in the Southeast region, and much, much more. During the month of June 2021, there were **587 subscribers to the newsletter.**

Impact of Consultation on Early Childhood Environments

The ability to evaluate the outcomes of IECMHC during the 2019-2021 fiscal years was significantly impacted by the COVID-19 pandemic shelter in place and subsequent mitigation orders. Typically, pre and post consultation outcomes are collected to measure the following:

- Scientifically anchored practices that support children's social emotional development[x],
- Changes in perceived child strengths and difficulties[xi], and
- Job stress of early childhood professionals[xii]

While the program cannot report a change in pre/post outcome measures across 2019-2021, the IECMHC Program can provide an update on progress toward the program goals set forth by OCDEL.

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

Over the course of the past two program years (2019-2021), only 4 percent (n= 23) of children supported through consultation services were formally reported as expelled by the program or parent following the initiation of IECMHC. Thirteen additional children (2 percent) were expelled; however consultants were able to assist child/family in a transition to a new early learning program to better meet their needs. While the rate of expulsion after initiation of consultation is low, it is not known how many children are suspended or expelled before consultation is sought across the early childhood system globally. However, in 2013 the program began collecting expulsion data for children who were waiting for consultation, as demand is often larger than the supply of staff. During the years of 2019-2021, 20 children were expelled from their early learning program before consultation could begin. Additionally, there is high likelihood that many soft expulsions are occurring, where exclusionary practices create an environment that is no longer welcoming to a child/family.
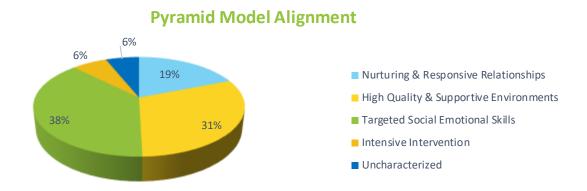
A 'soft' expulsion could look like…

Asking a family to pick their child up early because of behavior issues, requiring them to leave or miss work frequently.

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

Consultation is driven by collaborative action plans and strategies grounded in The Pyramid Model[xiii], a conceptual framework of evidence-based practices for promoting young children's healthy social and emotional development. Eighty-eight percent of IECMHC action plan strategies aligned with the promotion and prevention tiers of the framework and focused on nurturing and responsive relationships, high quality and supportive environments, and targeted social emotional skill building. Historical program evaluation efforts have illustrated that following consultation services, early childhood educators show an increase in Pyramid Model practices that support healthy social and emotional development.[xiv] These evaluation efforts will resume following a full return to the provision of onsite consultation services across the commonwealth.

Pyramid Model Alignment

- Nurturing & Responsive Relationships — 19%
- High Quality & Supportive Environments — 31%
- Targeted Social Emotional Skills — 38%
- Intensive Intervention — 6%
- Uncharacterized — 6%

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

IECMH consultants help facilitate links to appropriate services for children who need them and provide information to practitioners and families about community resources. Of the 875 children provided IECMH consultation during 2019-2021:

- 196 referrals for children and their families to community-based resources for more intensive services
- Of those referred, 41 percent of referrals were accepted for service, with 14 percent pending approval as of June 30, 2021, and 15 percent were not pursued due to parent/guardian decision
- 45 percent of referrals were for children's mental health services
- 35 percent of referrals were to Early Intervention (15 to EI 0-3 and 52 to EI 3-5)

Opportunities for Program Growth and Informed Decision Making

As Pennsylvania communities recover from the impact of the COVID-19 pandemic, the IECMHC Program leadership, in collaboration with OCDEL, has identified the following opportunities to increase the reach of consultation services throughout Pennsylvania to better serve and support early childhood system partners and the children and families the serve:

- Offer Universal Consultation approaches to reach additional early childhood system partners, including statewide expansion of Office Hours and the continuation of Holding Space events.
- Prioritize STAR 1 and STAR 2 programs with Program/Classroom Consultation to assess of social/emotional climate, nurturing and responsive relationships, classroom environment, targeted social emotional strategies, family engagement, linkage to community supports and provide onsite support to teachers and program leadership to increase inclusionary practices.
- Continue the provision of Child-Specific Consultation as currently implemented
- Program model and staff capacity building on IECMHC as a disruptor of inequity and disparities based on adults' various "isms"—from racism to sexism to classism—as well as implicit bias and as a service that promotes fair, positive, and equitable learning experiences for children and families.

[i]Given the impact of the 2020 Global Pandemic and its span across two state fiscal years, this report includes two years of programmatic updates and outcomes.

[ii] Includes cases considered active any time between July 2019 and June 2021.

[iii] Based on a minimum of a 2-person teaching team in each classroom.

[iv] Based on maximum number of children in each classroom as noted by provider.

[v] "Understanding and Eliminating Expulsion in Early Childhood Programs" from the National Center on Early Childhood Health and Wellness

[vi] Gilliam, W. & Reyes, C. (2018). Teacher Decision Factors That Lead to Preschool Expulsion: Scale Development and Preliminary Validation of the Preschool Expulsion Risk Measure. *Infants & Young Children. 31*(2), 93–108.

[vii] Annie E. Casey Kids Count Data Child population by race and age group in Pennsylvania, 2019

[viii] Gilliam, W., Maupin, A., Reyes, C., Accavitti, M., & Shic, F. (2016). Do Early Educators' Implicit Biases Regarding Sex and Race Relate to Behavior Expectations and Recommendations of Preschool Expulsions and Suspensions?. Yale Child Study Center.

[ix] Pennsylvania Department of Human Services "Racial Equity Report 2021: Leading the Fight for Justice, Equity and Opportunity for All People".

[x] Kaufman, R. & Perry, D. (2009). Issue Brief: Integrating Early Childhood Mental Health Consultation with the Pyramid Model. Technical Assistance Center for Social Emotional Interventions. University of South Florida.

[xi] Goodman, R. (1997). Strengths and Difficulties Questionnaire (SDQ) [Database record].

[xii] Curbow, B., Spratt, K., Ungaretti, A., McDonnell, K., & Breckler, S. (2000). Development of the child care worker job stress inventory. Early Childhood Research Quarterly, 15(4), 515–536.

[xiii] Hemmeter, M.L., Ostrosky, M., & Fox, L. (2006). *Social and emotional foundations for early learning: A conceptual model for intervention*. School Psychology Review, 35, 583-601.

[xiv] Davis, A. & Perry, D. (2016). Pennsylvania Early Childhood Mental Health Consultation Project: External Evaluation Report. Georgetown University Center for Child and Human Development. Washington D.C.