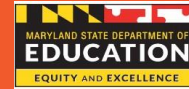




Maryland's Infant & Early Childhood Mental Health Consultation



Fiscal Year 2020 Brief

The National Model

Infant & 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. IECMHC has been shown to successfully:

- Support children's *social and emotional development*.¹
- Address *challenging behaviors* in early learning and home environments.¹
- Improve *classroom climate* and child behaviors.²
- Reduce *preschool suspensions* and expulsions,² which is triple the rate of expulsion for school-aged peers.³

At its core, IECMHC is intended to *create fundamental shifts in early childhood professionals' beliefs, attitudes, and practices* to support more effective caregiving for all children, regardless of race, gender, class, or a myriad of other factors.

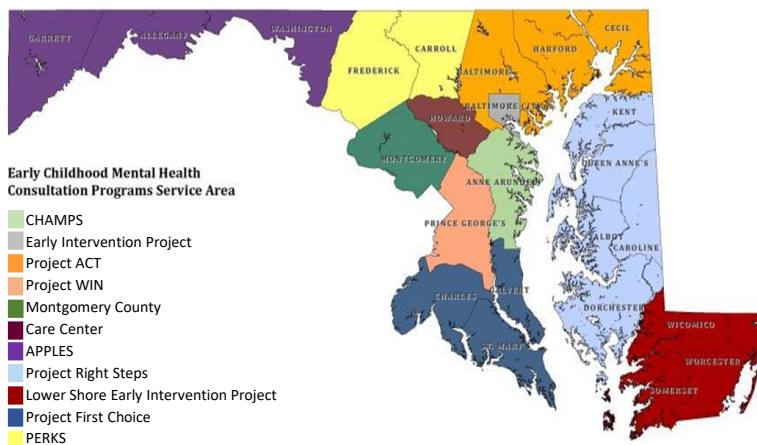
Impact of COVID-19 on IECMHC

The COVID-19 pandemic has turned the worlds of young children, their families, and child care providers upside down. With child care programs closed (full time or intermittently) for months at a time, caregivers had to navigate their own and their children's emotions about this prolonged uncertainty. All of this has led to a deepening awareness of:

- The *impact of adult stress*, both caregivers and child care providers, *on our youngest*.
- The *importance of social interactions and predictable routines* for young children.

The need for Infant & Early Childhood Mental Health Consultation has never been greater, with *consultation staff poised to support skill and capacity building* for the adults who care for infants, toddlers, and preschoolers.

Maryland's IECMHC Model



- 11 programs
- 38 consultants statewide, 18 of which are licensed
- IECMHC services were provided to 382 children and 64 classrooms/programs in FY20.
- Average case length of 4 months
- Development of Maryland IECMHC Standards

Demographics

In FY20, 446 consultation referrals were accepted and consultation services provided. Of the 446 referrals, 382 were for children exhibiting behavioral issues in the classroom, and 64 were for overall classroom/program support. Below is the demographic information for the child specific cases.

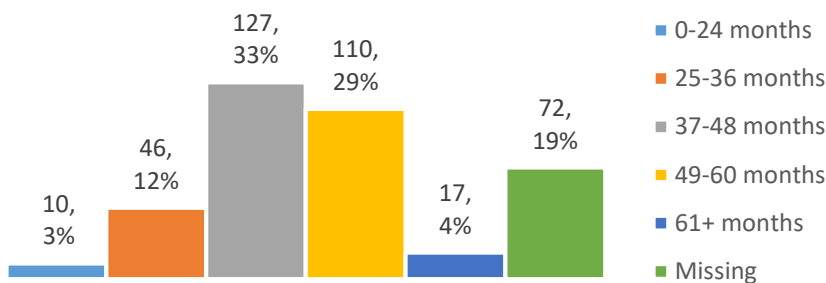
Race/Ethnicity of Children Served



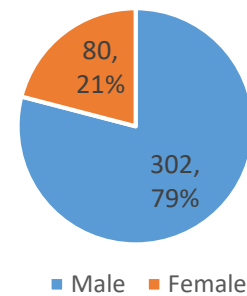
■ White ■ Black or African American ■ Multi-racial ■ Asian ■ Hispanic or Latino ■ American Indian or Alaska Native ■ Native Hawaiian/Other Pacific Islander

The race/ethnicity breakdown of children served through consultation services is comparable to the overall racial makeup of Maryland's children under 5 years of age.⁴

Child Age



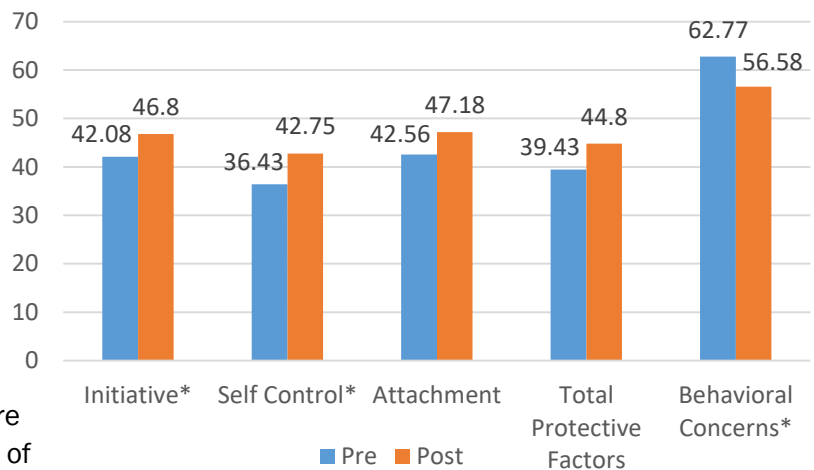
Child Gender



Impact of Consultation on Early Childhood Classrooms

Reduced Behavioral Concerns

All 5 of the indicators of child behavior improved after receiving consultation services. There was a significant decrease in teacher reported *behavioral concerns*, and *child initiative* and *self control* significantly increased post consultation.



Improved Classroom Climate

Preschool mental health climate scores were significantly higher post consultation for 10 of the 11 classroom observation scales.

Addressing Suspension & Expulsion for Infants, Toddlers and Preschoolers

Within the cohort of children served this year by the IECMHC program, only 5.7% (n=21) were formally reported as expelled after initiation of consultation services indicating that IECMHC services contributed to preventing suspensions & expulsions in the remaining 94.3% of this year's consultation cases. While the rates of expulsion after initiation of consultation is low, we do not know how many children are suspended or expelled before consultation is sought out, nor are we currently capturing how many children experience "soft expulsions", where exclusionary practices at the program make it so a family has little choice but to withdraw their child.⁵

Consultation During COVID-19

Beginning on March 16, 2020, child care programs closed, families sheltered in place, and IECMHC quickly pivoted to meet the needs of child care providers, families and children during this unprecedented time. During the first 3½ months of COVID-19, consultants in Maryland reported completing *137 separate activities related to providing direct support to providers*, and *34 activities related to providing direct support to families*. Some of the ways IECMHC offered support include:



- Hosting *virtual support groups for directors and child care providers* (using the FAN model) on managing their own stress so they can care for children and holding space for child care providers to voice their concerns about reopening

- Conducting *virtual observations* of classrooms
- *Regularly checking in* with providers to offer support



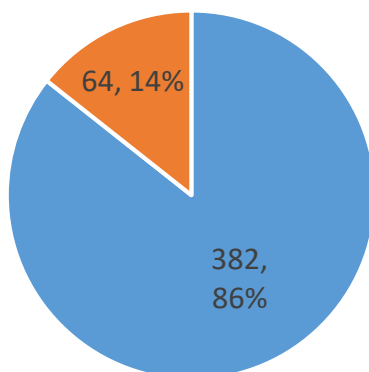
- *Supporting parents and families directly* by offering support groups or and discussing children's behavior and strategies over the phone or email

- *Development of resources* for reopening
- *Creation of social stories* for children



Maryland Needs a Larger IECMHC Workforce

Type of IECMHC Cases



■ Child-Specific ■ Classroom/Program Wide






Similar to prior years, in FY20, the vast majority of IECMHC cases (382 of 446) were child-specific, often meaning *a child's behavior had become increasingly disruptive and the child was in danger of being expelled*. Only 64 of the 446 cases (14%) were classroom-wide, often *indicating a more preventative approach*.



We are working to better market IECMHC services so that child care providers request services before a child's behavior reaches an extreme, often indicating that *the provider themselves could use support and capacity building*. Over time, we would like to see an increase in the percentage of classroom/program wide cases. These consultation cases focus on improving the overall quality of care across the program, and therefore have the potential to serve more children than are served through child-specific cases.⁶

Alignment with Maryland Ready: Maryland's Path to School Readiness and Success, Strategic Plan 2020-2025

Maryland's IECMHC is directly aligned with the statewide strategic plan for school readiness and success. In Maryland Ready, there are six goals and the second of these goals is to *improve and support program quality by increasing quality across sectors, focusing on equity, increasing kindergarten readiness for all children, and improving capacity to meet infants' and children's mental health needs.*⁷ Within Goal 2, the fourth strategy towards reaching the goal is *Enhancing Capacity to Meet Infants' and Children's Mental Health Needs.*⁷ Below are the outlined action steps and the progress thus far.

Action	Progress
Develop a statewide Infants and Early Childhood Mental Health (IECMH) Framework that provides definitions, state goals and a guide to local resources and providing feedback loops to allow for ongoing feedback about resources and services.	 <ul style="list-style-type: none"> Statewide IECMHC framework and guidelines created Multiple opportunities for feedback loops (e.g., monthly facilitated conversations, office hours, and leadership meetings)
Increase the number of licensed early childhood mental health consultants statewide.	 <ul style="list-style-type: none"> Since the release of the newly updated 2020 IECMHC Standards, there has been an intention to hire more clinically licensed staff while also working to increase workforce capacity through ongoing training and coaching activities for existing providers. Hiring new staff has been challenging with COVID and increased funding is still needed to meet this need.
Expand use of the Pyramid Model for Promoting Social Emotional Competence in Infants and Young Children to improve providers' skills with infants and toddlers.	 <ul style="list-style-type: none"> Increased dissemination of trainings <ul style="list-style-type: none"> 89 live trainings offered throughout the state 35 new trainers certified Trainings also available online Additional focus on increasing coaching and implementation support
Strengthen the IECMH professional development system and provider engagement with supports and resources.	 <ul style="list-style-type: none"> Bi-weekly office hours FAN (Facilitating Attuned iNteractions) Professional development plan for FY21
Embed IECMH goals and measures within Maryland EXCELS standards and practices.	 <ul style="list-style-type: none"> Plan to create a Maryland EXCELS Achievement Badge for IECMH

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