

Meeting Colorado Families and Early Childhood Professionals where they are:

Mental Health Consultation Across Settings



COLORADO
Department of Early Childhood

Equity from the Start Conference
November 7, 2023

A photograph of three young children in a playroom, viewed from behind. They are standing at a white table, looking at something on the table. The child on the left is a young boy with curly hair, wearing a white shirt and denim overalls. The child in the middle is a young girl with long hair, wearing a white shirt and denim overalls with a pineapple patch. The child on the right is a young boy with short hair, wearing a red shirt and striped overalls. In the background, there are shelves with various toys, including alphabet blocks, an abacus, and a fruit basket. The text "Equity from the Start Conference November 7, 2023" is overlaid in a white box in the center of the image.

Equity from the Start Conference November 7, 2023



COLORADO
Department of Early Childhood

Today's Presenters

Lisa Schlueter, PhD

Early Childhood Mental Health Unit Manager, Colorado Department of Early Childhood

Christine O'Brien

Director of Workforce Development and Training, Parent Possible

Ashley Sward, Psy.D., IMH-E® (III-C)

Associate Director, Warm Connections Program, University of Colorado School of Medicine





CDEC Administered ECMH Consultation Program



COLORADO
Department of Early Childhood

Early Childhood Mental Health Consultation

NO COST



No cost, voluntary program supported by state and federal funds.

Accessible to all adults caring for children birth (including prenatal) to 6-years, regardless of setting.



ADULT FOCUSED

3 SERVICE LEVELS



Supports mental health and well-being of adults (directly) *and* children (indirectly) through three levels of service (child, classroom, program)

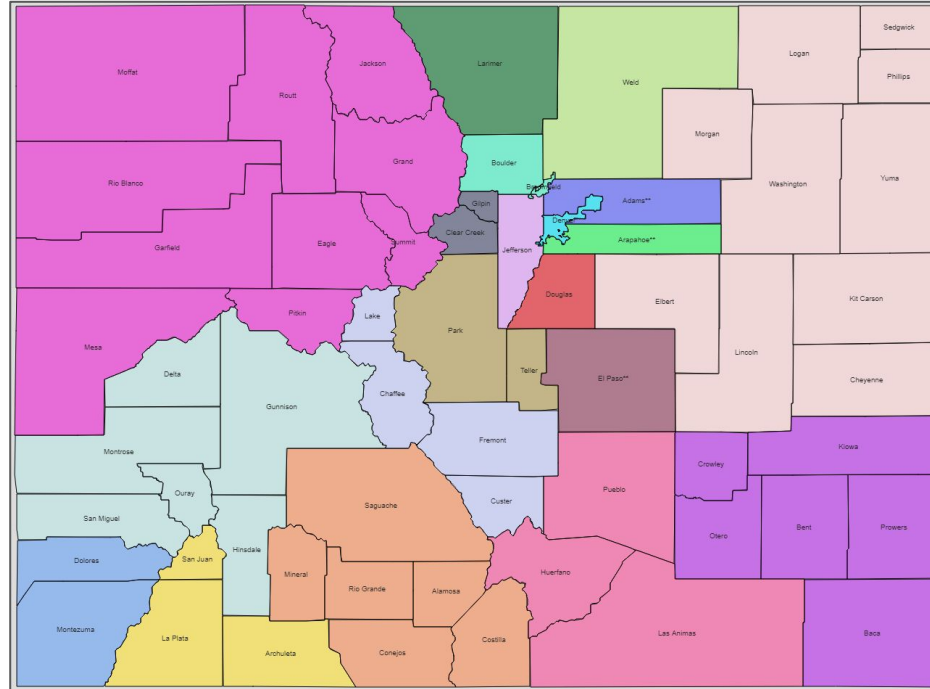
Emphasis on relationship-based, reflective, and culturally competent practices



QUALIFIED WORKFORCE

Where Services are Available

52 FTE ACROSS 21 TEAMS / AVAILABLE IN ALL 64 COUNTIES



Service Area Map

ECMH Consultation Legislation

[HB20-1053: Supports for Early Childhood Educator Workforce \(Part 4\)](#)

Design, implement, and operate a statewide voluntary program of early childhood mental health consultation

[SB21-137: Behavioral Recovery Act](#)

Evaluate the impact and efficacy of the statewide ECMHC Program on or before August 2026.



COLORADO

Department of Early Childhood

Expanding Access & Equity in Colorado

1998: Colorado Pilots an ECMH Program



10 Years

2008: ECMHC System Building Collaborative



10 Years

2018: Risk, Reach, and Resources report released



10 Years

2028:





Home Visiting



COLORADO
Department of Early Childhood

Enhanced Home Visiting Project: Strengthening Mental Health And Wellness Through Consultation And Education



STRONGER FAMILIES, TODAY & TOMORROW.

Project Overview

Goal: To improve the social/emotional well-being and behavioral health of home visitors and supervisors.

Components:

- Reflective Consultation
- Wellness Consultation & Training
- Professional Development & Endorsement for Infant & Early Childhood Mental Health

The Need

Research suggests that home visitors are not equipped to address the complex mental health needs of under-resourced families

Home visitors need support around wellness activities and coping with secondary traumatic stress

History

- 2017 we launched a 3-year grant initiative with 7 Metro Denver home visiting program sites
- Inspired by Project Launch and Launch Together

Current

- Serving 29 early childhood home visiting program sites across Colorado
- Approximately 150 home visitors (HV's) and 32 supervisors
- 18+ Mental Health Consultants (MHC), adding 7 new sites
- Using 3 different funding streams (two local and one state)

Enhanced Home Visiting Goals

Increase ability to identify and support social emotional concerns

Increase self awareness and reflective capacity

Enhanced self-efficacy

Decrease stigma and create shared language around mental health and trauma

Increase ability to recognize and respond to trauma

Increase knowledge and practice of mindfulness strategies and tools

Reduce stress and burnout

Home Visitor Reflective Consultation

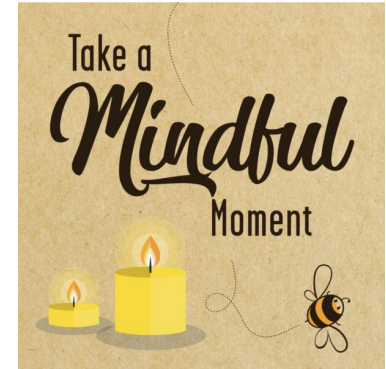
- Home visitor group led by a Mental Health Professional
 - Each program site chooses their own consultant, or we introduce them to a consultant.
 - The Mental Health Consultant (MHC) must be licensed or hold an endorsement

Supervisor Reflective Consultation

- Supervisor/coordinator group is led by a licensed MHC.
- Supervisors are placed in a group with other supervisors (6-7) and meet for 90 minutes monthly.

Wellness Consultation & Training

- Quarterly meetings with entire team (HVs and supervisors)
 - Focus on wellness and mindfulness
 - Learn and practice skills to use in professional and personal lives
 - Conducted by Bilingual Licensed Mental Health Consultant



Trauma Responsiveness Survey



- Completion of a one-time Trauma Responsiveness Survey
- Examine organization's:
 - Staff training on trauma
 - Staff supervision, support and self-care
 - Information sharing, privacy and confidentiality
 - Cultural responsiveness
 - Communication and consistency
 - Racial justice and resilience
 - Trauma specific interventions and services

Evaluation Process



Enhanced Home Visiting Project

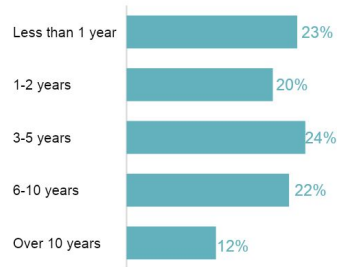
Tools Used:

- Post Retrospective Survey administered to Home Visitors and Supervisors
- Questions from ProQOL (Professional Quality of Life Scale)
- Questions from CAMS-R (Cognitive and Affective Mindfulness Scale-Revised)
- Interviews and Focus Groups
- Mental Health Consultant Reports
- Post Training Evaluations

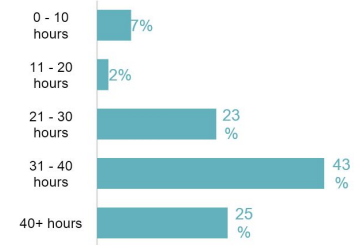
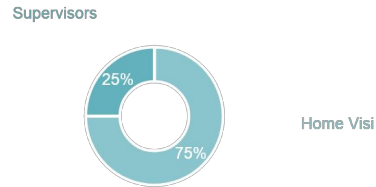
Participant Demographics

Demographics are based on self-report survey responses collected from 92 participants in program, April 2023.

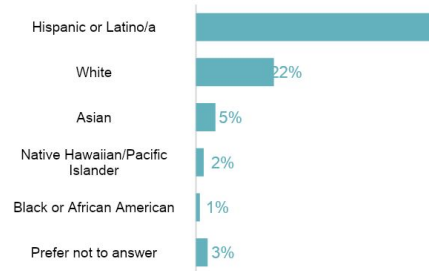
TIME IN HOME VISITING (N=92)



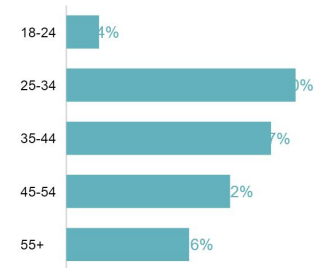
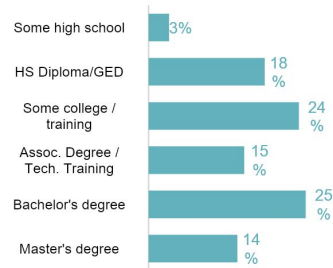
PARTICIPANT ROLE (N=92)



PARTICIPANT RACE / ETHNICITY (N=92)



EDUCATIONAL ATTAINMENT (N=92)



Most home visitors rated the EHV project as “very helpful” in improving their effectiveness and helping them support families.

% Reporting EHV was “Very helpful” in...

Improving your effectiveness in working with families?

67%

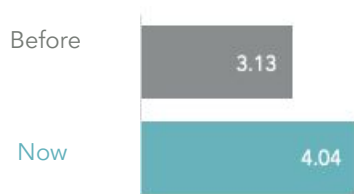
Helping you support the families that you work with

73%

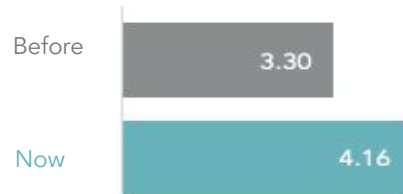
Self Awareness and Reflective Capacity

On average, participants reported stronger self-awareness and reflective capacity, with end-of-year scores averaging over 4 on a 5-point scale.

How well did/do you know your strengths and areas for growth?

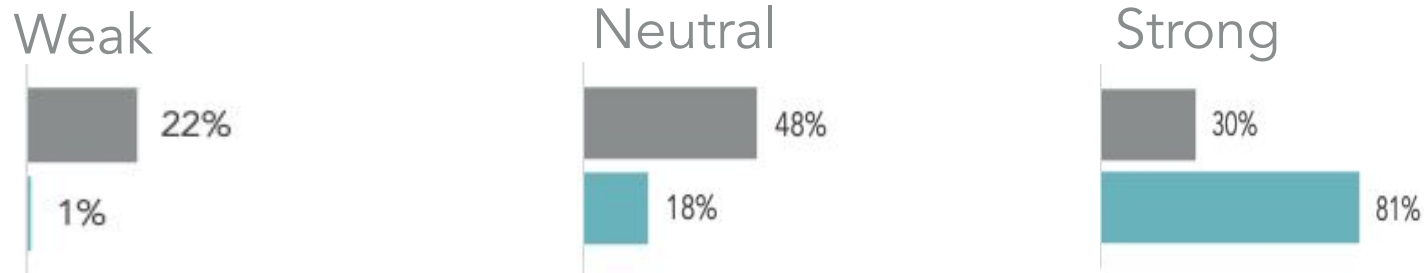


How would you rate your ability to reflect on your work?



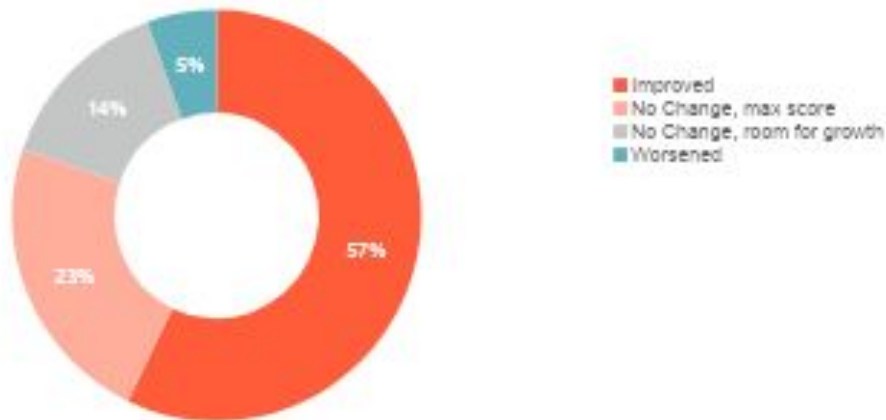
Ability to Navigate Job Stress

Participants reported stronger abilities to navigate job stress as a result of this project. At the end of the year, **81%** of participants rated themselves as strong or very strong at navigating job stress.



Compassion Satisfaction

EHV uses the Professional Quality of Life Scale (ProQOL) to understand the satisfaction a participant gets from working in home visiting. We saw that **57%** of participants report higher levels of compassion satisfaction, and an additional **23%** reported no change but had the highest possible scores for this area.





82% of participants reported
higher levels of mindfulness

“I’ve used it not only for my work purposes, but also for my home life. I mean, its just really changed the way I think and the way I reflect on things. I really appreciate it.” – Home visitor

Key Findings Overall

- EHV continues to be received extremely well. Participants value their participation once established in the program.

“It’s actually helped to build a better rapport with a couple of my families. Personally, I have a couple that are quite difficult, so it helped me to calm down.” – Home visitor

Challenges

- Site staff turnover
- Finding Bilingual Mental Health Consultants (MHC)
- Time for check ins with sites and MHC's
- Mental Health Consultant support/training
- Funding for MHC's

Lessons Learned

- Establishing trust is key
- Quantitative data doesn't tell the full story
- Importance of agency support
- Importance of supporting supervisors
- Rural area challenges – virtual consultation is a good option
- Serving small sites by combining teams into one group for Mental Health Consultation
- Importance of flexibility

Glossary

- PAT - Parents as Teachers is an evidence-based parent education and family support program that serves families throughout pregnancy until their child's kindergarten completion. Certified parent educators visit families at least once a month and share age-appropriate child development information to engage families in activities that provide meaningful parent-child interaction.
- HIPPY - Home Instruction for Parents of Preschool Youngsters is an evidence-based school-readiness and parent involvement program for families of children ages two through kindergarten. HIPPY is a peer-delivered home visitation model, with trained home visitors providing weekly visits to share carefully-developed curriculum, books, and materials to prepare children for success in school and beyond.
- Colorado Project LAUNCH improves and strengthens the early childhood system by increasing the coordination of key child-serving systems, the expertise of behavioral health providers in primary care and other local programs, and access to and availability of evidence-based prevention and wellness promotion practices that support young children from birth to age 8 and their families.
- MIECHV - Maternal, Infant, and Early Childhood Home Visiting Program - The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program supports pregnant people and parents with young children who live in communities that face greater risks and barriers to achieving positive maternal and child health outcomes. Families choose to participate in home visiting programs, and partner with health, social service, and child development professionals to set and achieve goals that improve their health and well-being.
- MHC – Mental Health Consultant
- ProQOL (Professional Quality of Life Scale) - The ProQOL is the most commonly used measure on the negative and positive affects of helping others who experience suffering and trauma. The ProQOL has sub-scales for compassion satisfaction, burnout and compassion fatigue.
- CAMS-R (Cognitive and Affective Mindfulness Scale-Revised) - A 12-item scale that measures everyday mindfulness and focuses on the degree to which respondents experience their thoughts and feelings (31). Items are rated on a 4-point Likert scale from 1 (rarely/not at all) to 4 (almost always). Scores on the scale are summed. Higher scores reflect greater mindfulness.



Warm Connections Overview



COLORADO
Department of Early Childhood

WIC Participants



COLORADO
Department of Early Childhood

WIC Income Eligibility Guidelines: July 1, 2022 - June 30, 2023

Household Size	Gross Income				
	Yearly	Monthly	Twice Monthly	Bi-weekly	Weekly
1	\$25,142	\$2,096	\$1,048	\$967	\$484
2	\$33,874	\$2,823	\$1,412	\$1,303	\$652
3	\$42,606	\$3,551	\$1,776	\$1,639	\$820
4	\$51,338	\$4,279	\$2,140	\$1,975	\$988
5	\$60,070	\$5,006	\$2,503	\$2,311	\$1,156
6	\$68,802	\$5,734	\$2,867	\$2,647	\$1,324
7	\$77,534	\$6,462	\$3,231	\$2,983	\$1,492
8	\$86,266	\$7,189	\$3,595	\$3,318	\$1,659
For each additional family member:	+\$8,732	+\$728	+\$364	+\$336	+\$168

If you are pregnant, count yourself as two. To find out if you are eligible, please contact your local WIC clinic.

Families receiving these benefits are automatically eligible:

- Temporary Assistance for Needy Families (TANF).
- Health First Colorado (Colorado's Medicaid Program).
- Supplemental Nutrition Assistance Program (SNAP).
- Food Distribution Program on Indian Reservations (FDPIR).

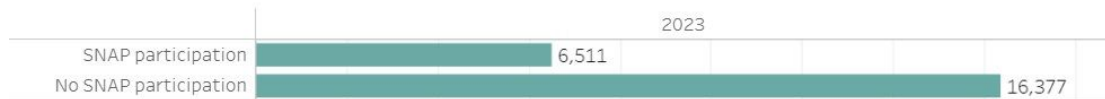
WIC Participants



COLORADO
Department of Early Childhood

Average Monthly Enrollment by Participation in Other Federal Government Programs

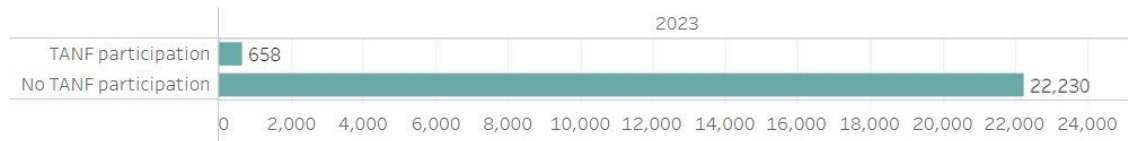
SNAP



Medicaid



TANF

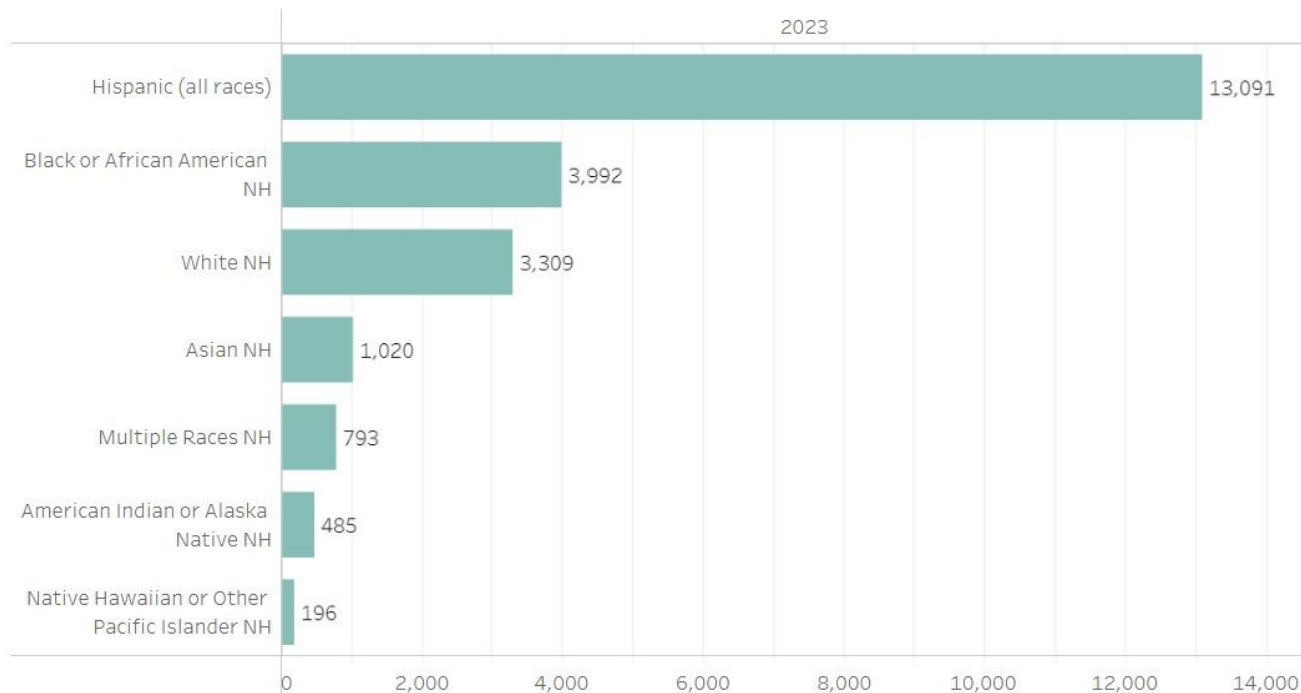


WIC Participant



COLORADO
Department of Early Childhood

Average Monthly Enrollment by Race/Ethnicity



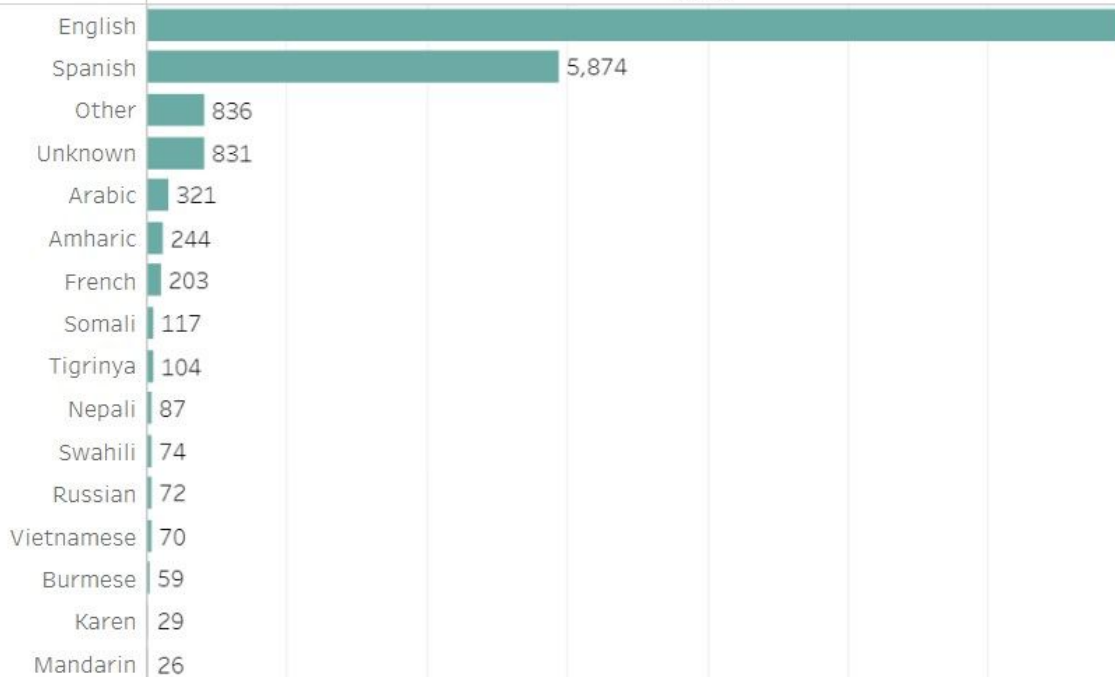
WIC Participants



COLORADO
Department of Early Childhood

Average Monthly Enrollment by Spoken Language

2023



WIC Participant Demographics



COLORADO
Department of Early Childhood

Average Monthly Enrollment by Age



WIC Staff Demographics



COLORADO
Department of Early Childhood

- Approximately 65 staff between 7 clinics
- Wide range of education level: GED/High School graduates - master's level RDs
- Wide range of tenure: <1yr - >20
- ¼ - ½ bilingual

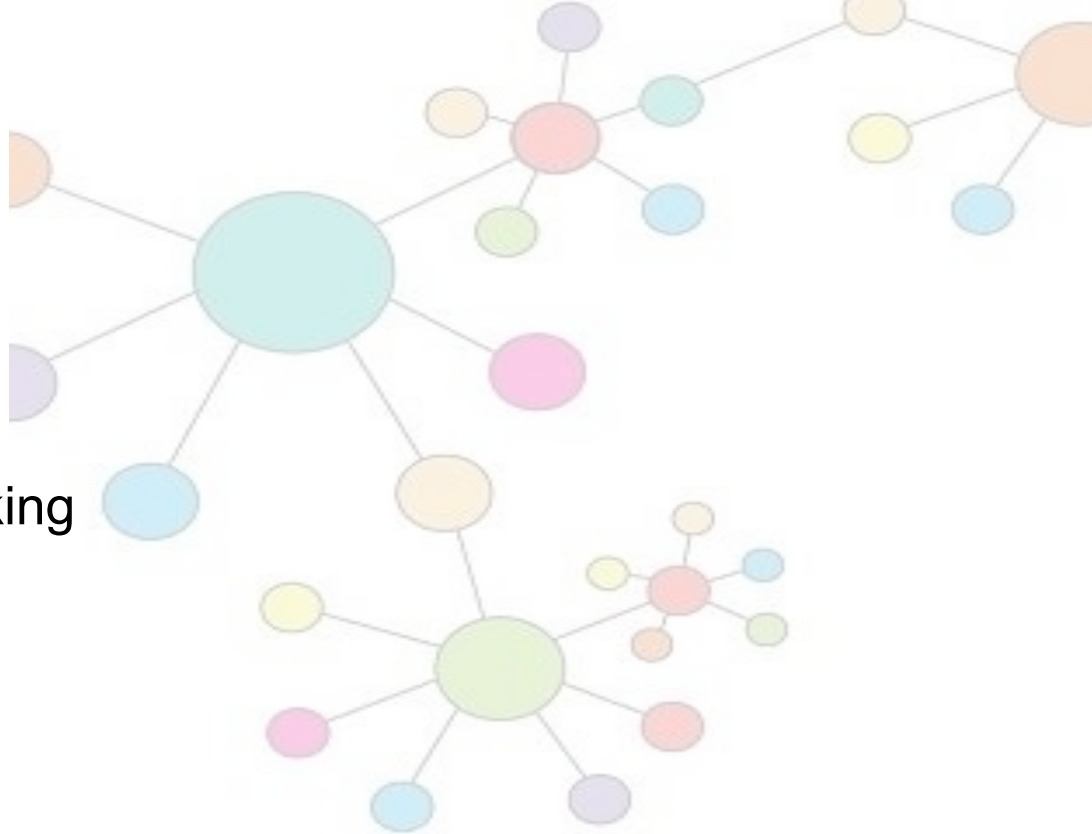


Warm Connections Specialists



COLORADO
Department of Early Childhood

- 4 staff between 7 clinics
- All IMH-trained: PHDs, PsyDs, LCSWs and Post-doc Fellow
- All monolingual, English-speaking



Why WIC?

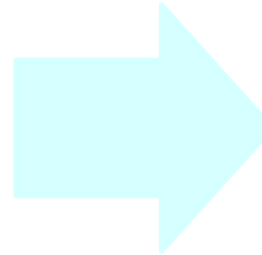
WIC serves half of all infants in U.S. and provides support for the most at-risk families

Rates of mental health problems are higher among WIC participants

Families seek help from WIC and visit regularly

Need for integrated services to provide preventive “just-in-time” support

WIC Educators don't have the time, training, or resources to address complex family needs



Goals of Warm Connections



Increased

- Caregiver confidence & competence
- Caregiver perception of support
- Educator confidence & competence
- Access to early childhood system of care



Decreased

- Caregiver distress
- Caregiver feelings of isolation
- Unsuccessful referrals to community resources
- Job stress for WIC staff & educators





Support for Families

Talk through concerns about their child's mood, behavior, or development AND develop a plan to address their concerns

Talk through concerns about their own mood, behavior, or parenting AND develop a plan to address their concerns

Connect families to resources and provide in the moment support to access resources



COLORADO
Department of Early Childhood



Support for Staff

Train staff and educators on topics related to social-emotional health of caregivers and children

Provide reflective support to WIC educators

Link educators with additional resources in the community if desired





Warm Connections Pilot Outcomes

52 WIC staff received training on topics such as compassion fatigue and perinatal mood and anxiety disorders

140 Warm Connections families served

Psychosocial needs assessments (n = 90)

- **65.5% desire assistance accessing housing, childcare and/or transportation**
- **60.7%% desire support for infant/child development**
- **60% desire support to manage infant/child mood**

Pre/post intervention results (n = 28)

- **100% report feeling satisfied or very satisfied with the program**
- **100% would recommend Warm Connections to a friend**
- **96.4% report enough support to manage their concerns following WC contact**
- **92.9% report knowing how to follow up on referrals**

Pre-Item	N	M (SD)	Post-Item	N	M (SD)	Sig.
Child mood	153	2.20 (1.971)	Child mood	153	1.21 (1.545)	.000*
Child mood efficacy+	74	2.49 (1.564)	Child mood efficacy+	74	4.30 (.872)	.000*
Resources	153	3.22 (1.744)	Resources	153	1.68 (1.604)	.000*
Resources efficacy+	93	2.05 (1.590)	Resources efficacy+	93	4.12 (1.041)	.000*
Caregiver mood	152	2.12 (1.756)	Caregiver mood	152	1.36 (1.584)	.000*
Caregiver mood efficacy+	79	2.38 (1.522)	Caregiver mood efficacy+	79	4.14 (1.059)	.000*
Good parent++	143	4.23 (1.124)	Good parent++	143	4.61 (.839)	.000*
Interaction+++	151	4.56 (.991)	Interaction+++	151	4.72 (.803)	.018*
Support++++	153	2.90 (1.535)	Support++++	153	4.23 (.877)	.000*

Post-Survey Results

Satisfaction

Item	N	M (SD)
Extent Helpful+	152	5.73 (.527)
Satisfaction++	153	5.83 (.410)
Heard+++	151	5.85 (.468)

+Items rated from 1 (not at all) to 6 (I got all the help I needed).

++Items rated from 1 (very dissatisfied) to 6 (very satisfied).

+++Items rated from 1 (not at all) to 6 (yes, absolutely).

Most Helpful

Item	N	Percentage
Talking	153	73%
Skills	153	56%
Supported	153	71%
Resources	153	69%
Answers	153	62%

Items endorsed coded as 1; Items not endorsed coded as 0

Panel Discussion Questions

Q1. Any new and ongoing initiative will experience barriers. Please provide 1-2 examples of key barriers you experienced in lifting these innovative programs and how you addressed them?

Q2. How have you intentionally embedded equity in your workforce development and program/service provision?

Q3. Now that your programs are established, what do you see as the biggest opportunity available in today's landscape and why?

Q4. I think we are all interested in hearing what is next for you and your programs. In your own words, what can we expect to see in the near term?



Expanding Access & Equity in Colorado

1998: Colorado Pilots an ECMH Program



10 Years

2008: ECMHC System Building Collaborative



10 Years

2018: Risk, Reach, and Resources report released



10 Years

2028:



Expanding Access & Equity in Colorado

We meet Colorado Families and Early Childhood Professionals where they are when we:

- **Are courageous**
 - Start small. Good ideas warrant testing
- **Build partnerships**
 - This critical work can not and should not be done alone
- **Engage others to complement our expertise**
 - Ask, listen, and respond
- **Share lessons learned**
 - We are wiser together





Thank you!

Lisa Schlueter: lisa.schlueter@state.co.us
Christine O'Brien: christine@parentpossible.org
Ashley Sward: ashley.sward@cuanschutz.edu



COLORADO
Department of Early Childhood

This product was developed [in part] under grant number 1H79SM082070-01 from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). The views, policies and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.