



APPLY TODAY!

Infant/Early Childhood Mental Health Consultation Learning Collaborative

Applications Due August 25, 2016

Intensive Training and 12 Months of Coaching From
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Georgetown University Center for Child and Human Development

Infant/Early Childhood Mental Health Consultation (I/ECMHC) is emerging as an effective strategy for supporting young children's social and emotional development and addressing challenging behaviors in early care and education, home visiting, primary care, and other settings. As a result, more and more states and communities are investing in I/ECMHC programs. Neal Horen, Ph.D and Amy Hunter, LICSW are nationally-recognized leaders in the field of early childhood mental health consultation, and have drawn on their expertise to help states and programs across the country build their capacity for delivering and evaluating ECMHC services for young children and their caregivers.

How Can I/ECMHC Improve Outcomes? Consultants can provide clinical expertise to support improved outcomes in a variety of settings, including:

- Early Care and Education
- Home Visiting
- Primary Care
- Schools

Child Outcomes

- Decreased expulsion rates
- Increased numbers of children in least-restrictive placements
- Decreased problematic behavior
- Increased pro-social behavior
- Improved school readiness

Learning Collaborative Benefits

At no cost to clinicians and supporting agencies, Project LAUNCH will provide:

1. On-site training in Tampa Bay, Florida for a select cohort of mental health clinicians (travel expenses not reimbursed);
2. Follow-up support through a distance-facilitated learning community, including monthly group reflective sessions; and
3. Monthly scheduled and ad hoc technical assistance on system development for sustainable mental health consultation.

The initial on-site training is scheduled for **September 26-27, 8a-5p at USF St. Petersburg**. The clinical cohort will accept no more than 50 applicants. Clinicians must submit a letter of support from a partnering agency, not required to be the clinicians' employer. To best balance agency and clinician team participation and representation, we encourage agencies to support applications from up to five clinicians. Please rank preference for each clinicians' participation on their application. For more information, including assistance finding a partnering agency, please contact Lisa Negrini at lnegrini@usfsp.edu.

Caregiver and Provider Outcomes

- Enhanced sense of self-efficacy
- Increased knowledge (e.g., greater understanding of underlying reasons for certain behaviors)
- Strong provider, caregiver, and consultant collaboration
- More positive attitude toward mental health services
- Increased ability to identify and address social and emotional concerns early
- Implementation of techniques and strategies recommended by the consultant
- Improved interaction with child
- Follow-through with referrals
- Satisfaction with services
- Reduced stress





What is Infant/Early Childhood Mental Health Consultation?

I/ECMHC involves a professional consultant with mental health expertise working collaboratively with early care and education staff, programs, and families to improve their ability to prevent, identify, and respond to mental health issues among children in their care. In contrast to direct therapeutic services, I/ECMHC offers an indirect approach to reducing problem behaviors in young children and, more broadly, promoting positive social and emotional development. Through principles of cultural and linguistic competence, I/ECMHC also helps providers address disproportionate disciplinary practices, implicit bias, and health inequities.

What Are the Skills, Competencies, and Credentials of Effective Consultants?

Education: master's degree in a mental health field (e.g., social work, psychology, marriage and family therapy).

Credentials: licensed or seeking licensure in a mental health field.

Core Knowledge: child development, infant and early childhood mental health, early childhood settings, best/evidence-based practices related to infant and early childhood mental health, child/family/early childhood service systems, and community resources.

Key Skills: relationship-building, communication, able to work with infants/young children in group settings, and able to motivate parents/providers to try new strategies.

Key Attributes/Characteristics: respectful, trustworthy, open-minded/non-judgmental, reflective, approachable, good listener, compassionate, team player, flexible, and patient.

How Can I Learn More Before I Apply?

What Works? A Study of Effective Early Childhood Mental Health Consultation Programs
http://gucchtdcenter.georgetown.edu/publications/ECMHCStudy_Report.pdf (Flyer source)

Tutorial 1: Strengthening Early Childhood Mental Health Consultation in Head Start and Early Head Start Programs
<http://www.ecmhc.org/tutorials/strengthening/index.html>

Tutorial 2: Defining Early Childhood Mental Health Consultation and the Consultant Role
<http://www.ecmhc.org/tutorials/defining/index.html>

Tutorial 8: Developing a Vision and Strategic Planning for Early Childhood Mental Health Consultation Services
<http://www.ecmhc.org/tutorials/developing/index.html>

Tutorial 9: Implementing and Evaluating ECMHC Services
<http://www.ecmhc.org/tutorials/effective-consultation/index.html>

Tutorial 10: Cultural and Linguistic Competence in Early Childhood Mental Health Consultation
<http://www.ecmhc.org/tutorials/competence/index.html>

What Are the Training, Supervision and Support Needs of Consultants?

Training Needs of Consultants: opportunities for standardized curriculum, pre-service and in-service training, mentoring and/or shadowing with a senior consultant, and ongoing professional development through internal and/or external trainings and seminars.

Supervision: clinical and administrative supervision, regular and ongoing, and reflective in nature (i.e., provides support and knowledge to guide decision-making and offers empathy to help supervisees explore their reactions to the work and manage stress).

Support: reflective supervision, formal and informal opportunities to network with peers in order to share resources and discuss challenges.

Enrolled consultants need support from a child-serving agency where they can provide consultation services. The coaching provided will aid fidelity I/ECMHC provision. Clinicians need not be employed by their partnering agency.

