

# Child Care Provider Capacity Building & Family Engagement Proposal

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## Vision

All children experiencing behavioral/mental health challenges have access to child care/early learning setting that will meet their individualized needs.

## Objectives

- Child Care and Early Learning Providers have increased level of skills and expertise in providing care that is inclusive, recognizes special/behavioral care needs, and able to make appropriate referrals when needed
- Child Care and Early Learning Providers have access to resources to be able to provide a level of care, including coaching, technical assistance, and mentoring.
- Families have access to child care/early learning environments that meet child’s special/behavioral care needs; families are a part of the planning.
- There is less stigmatism of behavioral/child mental health issues.

## Issue

Child Care/Early Learning Providers (CC/ELP) often lack skills needed to deal with the multiple behavioral needs of children in their care. CC/ELP are also articulating an increase in the number of children who are experiencing/exhibiting challenging behaviors. Providers are often uncertain where to refer parents or seek help form themselves as providers of care.

## Population(s) Served

- Child Care providers – Family and Center based
- Head Start/Early Head Start providers
- Parents with children experiencing mental health concerns
- Foster Parents with foster children experience mental health/behavioral health concerns

## Needs/Gaps

Child Care/Early Learning Providers	Families
<ul style="list-style-type: none"> <li>- CC/ELP environments not set up in a way that supports children</li> <li>- multiple caretakers for children who are at different levels of recognizing issues/not recognizing issues</li> <li>- Mental health support for providers working with children</li> <li>- Lack of direct service and support for providers</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of understanding of early intervention</li> <li>- Parents may assume child will grow out of it behaviors</li> <li>- Lack of early intervention/recognition of behaviors, especially those that if caught early could be mitigated</li> <li>- Lack of support for pregnant moms, lack of support for moms with</li> </ul>

<ul style="list-style-type: none"> <li>- Lack of specialty training for child care providers and families</li> <li>- No or not enough learning labs for providers</li> <li>- Training and education in languages other than English</li> </ul>	<ul style="list-style-type: none"> <li>own mental health challenges</li> <li>- Children/families that do not qualify for services are not served</li> <li>- Families are unclear how to navigate services</li> <li>- Quality emergency childcare; respite care are hard to find</li> </ul>
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**Outcomes/Metrics:**

- Increase in capacity/understanding of special needs:
- Increase in willingness to service children with mental head and/or special needs.
- Improvement in Approaches to Learning in the Kindergarten Assessment scores.
- Increase in home services (baseline with FBB, Marion County CBH)
- Increase in provider’s ability to provide setting that meets special needs of foster children.
- Decrease in child being expelled or excluded from care

**Philosophic Approach**

- Trauma informed care and trauma informed practices are a foundational tenant and principle for this work.
- Building capacity of CC/ELP in the Hub region. The intent is to work with the communities in a way that will best meet needs of children and families.
- Promote of, referral and resource connection to mental, behavioral and emotional wellness for families.

**Target Population**

- CC/ELP working with the highest risk populations (Head Start, Early Head Start, Child Care providers working with DHS).
  - Registered and certified family child care providers
  - Child Care Centers
  - Early learning organizations: focus on Preschool Promise Providers, - 19 Providers including Head Start, School Districts, Centers, and family child care
- Families with children experiencing mental or behavioral health challenges

### **Anecdotal data**

- According to Willamette Education Service District, 16 children were asked to leave from care or asked to reduce their time at school due to challenging behaviors.
- The Care survey (CCRR) is launching the annual survey in August 3027. In this survey there are specific questions designed to get a sense of the child care providers comfort and ability to provide services to children experiencing behavioral challenges and how many children have been dismissed from care or asked to leave.

Willamette Education Service District across Marion and Polk staff reported the following:

The Early Intervention (EI) population across the hub region is around 300 children. For evaluations approximately 55 families are seen each week and approximately 35% of families are demonstrating other needs. The Early Child Special Education program has about 970 children in the 2 county area.

- Evaluation team sees an average of 10 families each week who qualify for our program but have more than special education needs
- Evaluation team sees an average of 10 families each week where the child does not qualify but the child and family have significant needs (includes behavior and parental mental health)

### **Early Intervention staff:**

#### *South Marion County*

- 5-6 families who are in our services but family has significant mental health needs
- Barriers include transportation and parental mental health

#### *Salem*

- 30-60 families where there were significant mental health needs
- Barriers included families not having documentation needed or understanding to complete forms needed to access services and being overwhelmed with daily life and not able to do the things that need to be done in order to access services

#### *North Marion County*

- 10-12 families with significant mental health needs

- Barriers included transportation and work schedules

*Polk County*

- 15 families were reported to have significant mental health needs
- Barriers included not being eligible for OHP but not able to afford the copays for services and a lack of available services in their area

### Approaches

Focus	Strategies	Objective
Child Care/Early Learning Skill Development	<b>Capacity Building</b> <ul style="list-style-type: none"> <li>• Implement evidence based curriculum**through training of trainers/facilitators; providing training across hub region to child care and early learning providers.</li> <li>• Provide training for CC/ELPs in the curriculum(s).</li> <li>• Training in Trauma Informed Care principles and practices through workshops; trauma informed principles will be woven into all training.</li> </ul>	<ul style="list-style-type: none"> <li>• CC/ELP have increased level of skills and expertise in providing care that is inclusive, recognizes special/behavioral care needs, and able to make appropriate referrals when needed</li> <li>• Families have access to child care/early learning environments that meet child’s special/behavioral care needs; families are a part of the planning.</li> </ul>
	<b>Technical Assistance and Consultation</b> <ul style="list-style-type: none"> <li>• Contracted technical assistance, coaching and mentoring to child care/early learning providers in dealing with specific behaviors and environment supports. Provide infant toddler mental health supports.</li> <li>• Consultation for staff, including home visitors, to work with specific issues in working with children and families.</li> </ul>	<ul style="list-style-type: none"> <li>• CC/ELPs have access to resources to be able to provide a level of care, including coaching, technical assistance, and mentoring.</li> </ul>
	<b>Classroom supplies</b> <ul style="list-style-type: none"> <li>• Provide lending library (or augment other resources such as CCR&amp;R or City Libraries) of manipulative and toys for use in child care settings</li> <li>• Invest in physical supports for child care environments</li> </ul>	<ul style="list-style-type: none"> <li>• CC/ELPs have access to resources to be able to provide a level of care, including coaching, technical assistance, and mentoring.</li> </ul>
Family	<b>Parent Education</b>	<ul style="list-style-type: none"> <li>• Families have increased level of skills that meet</li> </ul>

Focus	Strategies	Objective
Engagement	<ul style="list-style-type: none"> <li>• Provide training of trainers in selected curriculum(s); work with Parenting Hubs (Mid-Valley Parenting and MPELH Parenting Hub) for facilitator identification and coordination.</li> <li>• Provide parent education opportunities to parents to participate in curriculums that will offer skill development and networking opportunities.</li> <li>• Work with medical providers to refer or “prescribe parent education” as a part of the normal routine.</li> </ul>	<p>child’s special/behavioral care needs; families are a part of the planning.</p> <ul style="list-style-type: none"> <li>• Families have access to child care/early learning environments that meet child’s special/behavioral care needs; families are a part of the planning.</li> </ul>
	<p><b>Mental Health Navigation/Peer Support</b></p> <ul style="list-style-type: none"> <li>• Utilize peer support services through contracted organizations, such as Oregon Family Support Network, Options, FACT, Creating Opportunities, etc. to provide specific supports.</li> <li>• Navigation support materials for families for behavioral health supports.</li> <li>• Work with referring bodies, such as Family Link, OPIP project, to ensure coordination and access to resources.</li> <li>• Provide CC/ELP with information and materials to share with families as needed.</li> </ul>	<ul style="list-style-type: none"> <li>• Families have access to child care/early learning environments and resources that meet child’s special/behavioral care needs; families are a part of the planning.</li> </ul>
	<p><b>Transportation and child care</b></p> <ul style="list-style-type: none"> <li>• Provide transportation and child care for families participating in parent education, other supports for families and providers participating in training and activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Families have access to parent education.</li> </ul>
Community Supports/Community Communications	<p><b>Communications</b></p> <ul style="list-style-type: none"> <li>• Provide families a trusted resource to go to for more information (web/social media).</li> <li>• Update 211 information and Marion County “Network of Care” and/or 1Degree and/or other online resources for the community (once up and running).</li> <li>• Promote usage of those resources across community to providers and families.</li> </ul>	<ul style="list-style-type: none"> <li>• Information for families and providers is clear and available</li> </ul>

### Coordinator Role

The Coordinator’s role will be to work with the community to:

- Coordinate professional development/training for child care and early learning partners across the hub region. This will be done over the course of the year.
- Facilitate the process to link child care and early learning partners with coaching and technical assistance to meet specific needs of child, environment, and or provider. The technical assistance will be provided by partners who have a children’s mental health background.
- Coordinate family engagement activities to
- Work with referring partners to ensure there is referral coordination from the early learning provider to appropriate supportive resources.
- Develop materials for providers and for families regarding activities and opportunities.

The ideal candidate will have a solid background in the community resources, including a strong understanding of the mental health resources. This individual should be a systems thinker and able to advocate on behalf of individuals and the early learning, family, and mental health system.

### Partial list of partners

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| <ul style="list-style-type: none"> <li>• Marion &amp; Polk Early Learning Hub</li> <li>• Willamette Education Service District</li> <li>• Family Building Blocks</li> <li>• Head Start and Early Head Start programs</li> <li>• Polk County Family and Community Outreach</li> <li>• Marion County Children’s Behavioral Health, Children’s Crisis Team</li> <li>• Marion County – Network of Care</li> </ul> | <ul style="list-style-type: none"> <li>• Polk County Mental Health</li> <li>• Child Care Resource &amp; Referral</li> <li>• Creating Opportunities</li> <li>• RISE Services</li> <li>• Oregon Family Support Network</li> <li>• Options Counseling</li> <li>• Fostering Hope</li> <li>• School Districts</li> <li>• FACT</li> </ul> | <ul style="list-style-type: none"> <li>• Marion County Public Health</li> <li>• Medical providers</li> <li>• Parenting Hubs: Mid-Valley Parenting, and MPELH Parenting Hub</li> <li>• Parent Educators</li> <li>• Salem Hospital</li> <li>• Liberty House Family Support</li> </ul> |
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### Budget

Personnel		
Coordinator	1 FTE, including benefits & OPE	70,000
Contracted MH Services	Contracted through multiple organizations, provide technical consultation, support to providers to meet specific needs of children	100,000

<b>Service and Supply</b>		
	Navigation and peer support for families experiencing special needs, especially in rural areas. This includes peer support and training (not to replace OFSN services), resources to meet needs of family.	45,000
Curriculum	Curriculum, to be decided, for CC/ELP to utilize in program	15,000
Training	<ul style="list-style-type: none"> <li>• Build capacity in selected curriculum. MH professionals, parent educators would participate in program.</li> <li>• Training for parent educators in parent education</li> </ul>	10,000
Mileage	For staff and families attending event/meetings to remove barriers	5,000
Communication	Revisions to website, printed materials, social media to support program, interlink with Marion County tool and/or 211	5,000

**\*\*Curriculum to be explored**

*Second Step*

Help your littlest learners harness their energy and potential by teaching them to listen, pay attention, control their behavior, and get along with others. When students enter kindergarten with the self-regulation and social-emotional skills taught in the research-based *Second Step* program, they're set up for success. Classroom kit \$439. WESD doing a full roll out now with staff; report easy to roll out

*Conscious Discipline*

The methodology of Conscious Discipline is based in scientific and developmental research. It is recognized by SAMHSA's National Registry of Evidence-Based Programs and Practices (NREPP).

Conscious Discipline creates a compassionate culture and facilitates an intentional shift in adult understanding of behavior via the Conscious Discipline Brain State Model. It then provides specific brain-friendly, research-backed strategies for responding to each child's individual needs with wisdom. This highly effective approach is proven to increase self-regulation, sense of safety, connection, empathy and intrinsic motivation in both children and adults.

*Kalaidascope*

The curriculum offered at Kaleidoscope Pre-School is drawn from the Early Years Foundation Stage and encourages the children to develop positive attitudes to people who might be different from ourselves, to empathize with and think about the needs of others. The Curriculum does this by:

- Making the children feel valued and confident in who they are as individuals
- Ensuring the children have equal access to learning with curriculum that is inclusive of children with Special Educational Needs and disabilities
- Reflecting the widest possible range of different communities in the choice of resources used
- Avoiding stereotyping when selecting activities
- Encouraging the children to become familiar with a range of cultures, festivals, clothes and foods from different countries around the world
- Teaching the children that there are many different languages and ensures opportunities are given to listen to stories and music in different tongues
- Ensuring that children with a language other than English as their first have full access to the curriculum and supported in their learning
- Helping the children to understand that discriminatory remarks or behavior are unacceptable at Pre-school.

### *Collaborative Problem Solving*

WESD uses. Parent mentor component, which is being researched in Boston. Challenges in implementation.