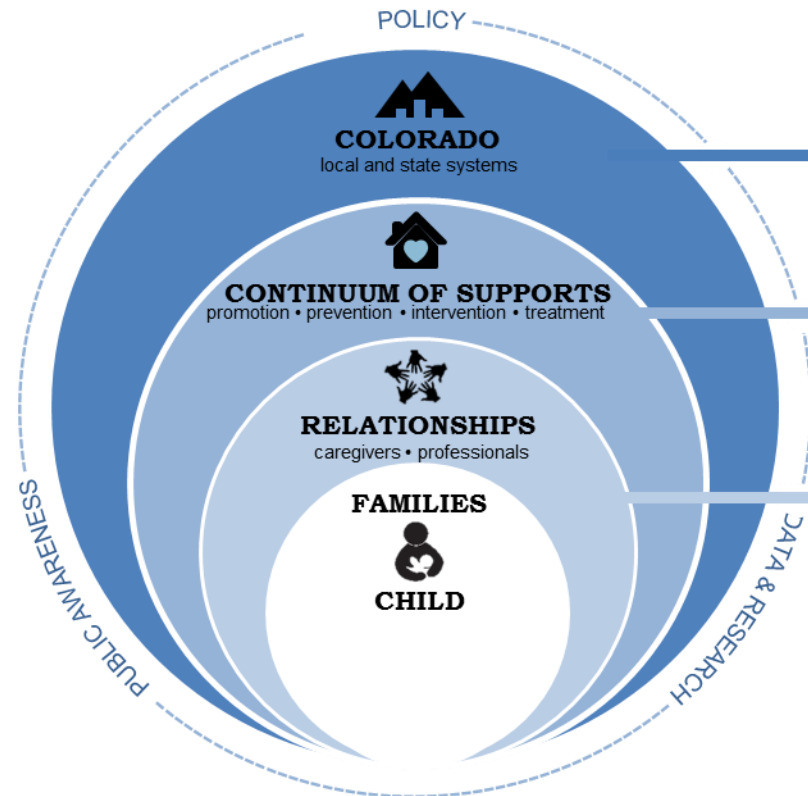


## VISION

all children and families are **valued**, socially and emotionally **healthy**, and their relationships are **thriving**



## Colorado's Early Childhood Mental Health Strategic Plan: An Innovative Portfolio of Solutions

*Endorsed by the Colorado Early Childhood Leadership Commission 9/15*

## STRATEGIC PLAN PRIORITIES

A long-term sustainable financing approach exists for Colorado's early childhood mental health system.

Coordination and alignment exists across systems that promotes and extends collaboration and integration.

Colorado's early childhood workforce has the capacity and expertise defined through knowledge, skills, experiences, and the support necessary to promote child and family mental health and well-being.

## RESULTS



Young children develop to their fullest social–emotional potential; form close and secure interpersonal relationships; and are ready to explore the environment and learn.



Adults are knowledgeable about early childhood mental health and development and have the skills and mental well-being necessary to engage in responsive, supportive relationships with and on behalf of young children.



The continuum of supports and services including promotion, prevention, intervention, and treatment promotes early childhood mental health by building safe and healthy relationships and environments.



Local and state systems and the people of Colorado recognize the importance of early relationships and prioritize and support early childhood mental health in young children and families.

 **A long-term sustainable financing approach exists for Colorado’s early childhood mental health system**

★ GOALS	↻ STRATEGIES	✔ OUTCOMES
<p>Decision makers and stakeholders have access to timely data that informs policy and funding investment opportunities for early childhood mental health</p>	<ul style="list-style-type: none"> <li>➔ Identify a framework that results in the development of a comprehensive, integrated early childhood budget</li> <li>➔ Develop initial baseline budget that examines, analyzes, and incorporates public and private investments</li> <li>➔ Explore innovative financing models (e.g., pay-for-success)</li> <li>➔ Communicate financial analysis findings broadly to inform, inspire, and innovate</li> </ul>	<ul style="list-style-type: none"> <li>✔ Early childhood mental health services are robustly represented in state and local budgets</li> <li>✔ Return-on-investment cost-savings are evident</li> <li>✔ Additional funding opportunities that support the vision of the early childhood mental health strategic plan are identified</li> <li>✔ Existing funding is used to maximum potential through efficient, effective, innovative financing in which duplicative efforts are reduced</li> </ul>
<p>State policies regarding payer reform, parity, and reimbursement for services address early childhood mental health needs across the continuum</p>	<ul style="list-style-type: none"> <li>➔ Contribute to and collaborate with existing efforts to address insurance and payer systems issues</li> <li>➔ Develop and present options for covered service delivery in settings appropriate for young children such as health settings, home-based services, child care settings, in the community, etc.</li> <li>➔ Determine Early and Periodic Screening, Diagnostic and Treatment (EPSDT) utilization and gaps</li> </ul>	<ul style="list-style-type: none"> <li>✔ Reimbursements for the continuum of early childhood mental health services are maximized</li> <li>✔ Colorado’s payer system covers costs related to promotion, prevention, intervention, and treatment services for children and their caregivers</li> <li>✔ Federal and philanthropic funds are fully leveraged and expended</li> <li>✔ A reformed, inclusive payment system exists that is responsive to environments, based on individual needs, and reflects best practice and the science of health and well-being</li> </ul>
<p>Appropriate tools that allow providers and families to understand and respond to the needs of young children in their caregiving contexts are available and reimbursable</p>	<ul style="list-style-type: none"> <li>➔ Utilize findings of Office of Early Childhood Adverse Childhood Experiences (ACEs) study to highlight the influence of early childhood experiences on adult well-being and make recommendations for timely interventions that will improve these</li> </ul>	<ul style="list-style-type: none"> <li>✔ Reductions in risk and adversity and improvements in resilience is seen for young children and families</li> <li>✔ Data-informed decision making is utilized across the child-serving system</li> </ul>

#### outcomes

- ➔ Scan state and national trends and solutions to inform approach
- ➔ Identify, develop, and employ tools to quantify and communicate the needs of young children and families
- ➔ Inform current and future integrated data system efforts to improve opportunities for real-time data sharing and delivery of appropriate and effective support and services



## Coordination and alignment exists across systems that promotes and extends collaboration and integration

★ GOALS	↻ STRATEGIES	✔ OUTCOMES
<p>Early childhood mental health consultation is available in every region of the state and is accessible to a wide range of professionals who work with children and families in a variety of settings</p>	<ul style="list-style-type: none"> <li>➔ Create a statewide early childhood mental health consultation infrastructure</li> <li>➔ Expand the reach of early childhood mental health consultation in existing settings such as early care and learning, home visiting, health settings, and child welfare</li> <li>➔ Build collaborative relationships with other entities that support child and family well-being to infuse mental health consultation (e.g. the justice system, adult behavioral health, and the Office of Economic Security)</li> <li>➔ Ensure that mental health consultation is embedded in existing state plans related to early childhood (e.g. Child Care Development Block Grant, Early Intervention, Community-Based Child Abuse Prevention, Home Visiting, Child Care Rules)</li> </ul>	<ul style="list-style-type: none"> <li>✔ Increased number of mental health consultants working within early care and learning, health settings, home visiting programs, and child welfare</li> <li>✔ Early childhood mental health consultation services are provided in new settings that allow a range of professionals to access these services</li> <li>✔ Caregivers have the capacity to understand and respond to children’s developmental, mental, and behavioral needs</li> <li>✔ Expulsions and suspensions from early care programs are eliminated</li> </ul>
<p>A universal and coordinated screening to surveillance system is supported across sectors</p>	<ul style="list-style-type: none"> <li>➔ Contribute to ongoing efforts addressing payment issues for comprehensive developmental and family screening</li> <li>➔ Collaborate with others advancing the screening to surveillance system to infuse an early childhood mental health perspective to this work</li> </ul>	<ul style="list-style-type: none"> <li>✔ Identification rates in Colorado are consistent with national trends</li> <li>✔ Young children and families have access to the right care at the right time by the right provider</li> <li>✔ A comprehensive, coordinated response system of resources exists for families and providers</li> </ul>
<p>Physical and behavioral health services are integrated within primary and pediatric care settings to support early childhood mental health and well-being</p>	<ul style="list-style-type: none"> <li>➔ Identify and promote existing local knowledge and expertise in integrated physical and behavioral health care services</li> <li>➔ Provide early childhood mental health expertise and input to Colorado’s</li> </ul>	<ul style="list-style-type: none"> <li>✔ Investments and resources are directed to integrated physical and behavioral health services to meet the needs of the early childhood population</li> <li>✔ Increased access to and availability of high-quality integrated physical and</li> </ul>

	<p>developing integrated physical and behavioral health care system through participation and partnership</p>	<p>behavioral health care services for young children and families</p>
<p>Best practices and effective clinical diagnosis, intervention, and treatment are expanded for those needing services at this level</p>	<ul style="list-style-type: none"> <li>➔ Encourage all programs, professionals, and agencies who diagnose mental health conditions in young children to adopt the <i>Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood-Revised (DC:0–3R)</i> and support use of the tool in the field</li> <li>➔ Increase collaboration among child- and adult-serving behavioral health agencies to address the mental health needs of all partners in the parent–child relationship</li> <li>➔ Coursework and training content is aligned with Infant Mental Health Endorsement (IMH-E) Competencies®</li> </ul>	<ul style="list-style-type: none"> <li>✔ Increased use of the <i>DC:0–3R</i> for appropriate diagnosis and treatment planning</li> <li>✔ Parent–child therapies and other effective practices are provided to increase the capacity of families, particularly when a parent is diagnosed with a mental health or substance abuse disorder and there is a high risk of attachment disturbances in the young child</li> <li>✔ Treatment services are provided by a professional workforce endorsed at appropriate levels.</li> </ul>
<p>Barriers to access, utilization, and expected outcomes across the continuum of supports (i.e., promotion, prevention, intervention, and treatment) are identified and reduced</p>	<ul style="list-style-type: none"> <li>➔ Utilize ongoing gap analyses to monitor progress and identify barriers and provide recommendations that promote seamless transitions across service levels</li> <li>➔ Target opportunities to reduce stigma regarding mental health problems and accessing care</li> <li>➔ Explore innovative ways to support access to and delivery of services such as shared services models, integrated care, and tele-health models</li> <li>➔ Gather and incorporate input from providers and families to design effective programming</li> <li>➔ Collaborate across other state agencies to ensure state resources for early childhood mental health are used in ways that reflect equity in access and availability</li> <li>➔ Contribute to ongoing public awareness and messaging efforts by providing an early childhood mental health perspective to the work</li> </ul>	<ul style="list-style-type: none"> <li>✔ Progress is made towards health equity for underserved populations</li> <li>✔ All families know about and have access to a wide array of high-quality mental health services and supports, offered in multiple settings</li> <li>✔ Cross-system partnerships support early childhood mental health from a variety of approaches, increasing the level and range of support available to families</li> <li>✔ Models of early childhood mental health services are culturally and linguistically responsive to the diverse needs of families and increase utilization of services</li> </ul>

 **Colorado’s early childhood workforce has the capacity and expertise defined through knowledge, skills, experiences, and the support necessary to promote child and family mental health and well-being**

★ GOALS	➔ STRATEGIES	✔ OUTCOMES
<p>Post-secondary education experiences across disciplines incorporate social–emotional development and mental health awareness into curricula</p>	<ul style="list-style-type: none"> <li>➔ Collaborate with Colorado’s system of higher education to infuse the IMH-E Competencies® into coursework and training</li> <li>➔ Promote professional standards, especially in the domains of social–emotional health and well-being</li> <li>➔ Extend advanced educational opportunities to build capacity of practitioners and providers of clinical and treatment services (e.g. Harris program, advanced certificates, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>✔ Greater number of professionals in the field with the knowledge, skills, and experience to support young child and family well-being</li> <li>✔ Post-secondary experiences that address social–emotional development and promote early childhood mental health are offered across a range of disciplines (e.g., education, social work, nursing, psychiatry, psychology)</li> <li>✔ All professionals who work with or on behalf of young children and their families have a depth of knowledge and experience in the area of early childhood mental health</li> </ul>
<p>Professional development opportunities target social–emotional development and mental health awareness</p>	<ul style="list-style-type: none"> <li>➔ Ensure that consistent, best practice knowledge in social–emotional promotion and family well-being is incorporated in all training for early childhood professionals</li> <li>➔ Explore technology solutions to interface between the Professional Development Information System (PDIS) and other professional registries</li> <li>➔ Professional development content is aligned with IMH-E Competencies®</li> </ul>	<ul style="list-style-type: none"> <li>✔ Early childhood professionals are provided with sufficient supports to access ongoing professional development opportunities that focus on early childhood mental health</li> <li>✔ Meaningful changes in the knowledge and behaviors of those who work with or on behalf of young children and their families</li> <li>✔ Early childhood professionals across Colorado are recognized as competent to promote early childhood mental health</li> </ul>
<p>Supports and resources are provided to promote the mental health and well-being of those who work with children and families</p>	<ul style="list-style-type: none"> <li>➔ Identify and disseminate best practices in supporting caregiver well-being</li> <li>➔ Build the capacity of reflective supervision and consultation through improving access, availability, and adherence to standards of practice</li> <li>➔ Support policies that can facilitate the reduction of job-related stressors (e.g.,</li> </ul>	<ul style="list-style-type: none"> <li>✔ Those who work with children and families have access to supports for their own mental health and well-being</li> <li>✔ Those who work with children and families have the supports needed to manage job-related stress and avoid burnout, allowing them to engage in positive interactions with young children and their families</li> </ul>

lower adult–child ratios, increased wages and benefits, access to reflective consultation, access to professional development and higher education)

✔ Increased retention, greater continuity, and higher quality of care in early care and learning facilities

The Infant Mental Health Endorsement is used to inform consumers, employers, and institutions about competency in the early childhood workforce

- ➔ Identify sustainable funding for IMH-E coordination and administration
- ➔ Develop differential reimbursement scheme for providers at all levels who have achieved the Endorsement
- ➔ Identify and support adherence to standards of practice for reflective supervision support
- ➔ Pilot a differential reimbursement plan for Endorsed practitioners to investigate the impact of Endorsement

- ✔ A common set of competencies for promoting young child and family well-being is recognized across the early childhood system
- ✔ Practice transformation is achieved across settings that serve young children and families