

Child Care Provider Documentation Packet for *Every Child Belongs* services

You have requested support through Every Child Belongs (ECB) for help to prevent suspension or expulsion of a child age 0-5 years old in your care. An integral part of ECB services is Infant and Early Childhood Mental Health Consultation (IECMHC). Services are provided to you free by the Department of Early Learning and Care (DELIC) and administered by NeighborImpact Child Care Resources (CCR).

The first five years of a child's life are very important. These early years help shape how healthy they'll be, how well they'll do in school, and how they'll get along with others. Young children often show their feelings through their actions, which can be hard to understand and manage. IECMHC increases your capacity to serve children through social-emotional support.

IECMHC is a prevention-based approach that connects you with a Mental Health Consultant who will work in collaboration with. IECMHC has been shown to improve children's social skills and emotional functioning, promote healthy relationships, reduce challenging behaviors, reduce the number of suspensions and expulsions, improve classroom quality, and reduce provider stress, burnout, and turnover.

IECMH Consultants are professionals with specialized knowledge in childhood development, the effects of stress and trauma on families, the importance of attachment for young children, and the impacts of adult mental health on developing children. Unlike other mental health professionals, IECMH Consultants do *not* provide direct mental health treatment to young children or caregivers. IECMHC is nationally recognized by the Association of Maternal and Child Health Programs as a best practice in caregiving.

This packet includes the following documentation:

- Child Care Provider Agreement to Participate in IECMHC
- Child Care Director Consent of Program Data Entry into PIDS
- Child Care Provider Consent of Data Entry into PIDS
- NeighborImpact Policy for Community and Client Complaints

Your IECMH Consultant is **Corinne Johns** at corinnej@neighborimpact.org or **458/315-2719**.

Child Care Provider Agreement to Participate in *Infant and Early Childhood Mental Health Consultation*

Purpose:

This agreement is for understanding of a child care provider's participation in Infant and Early Childhood Mental Health Consultation (IECMHC) through NeighborImpact Child Care Resources (CCR). These services are designed to support providers, promote social-emotional development and mental well-being of young children, reduce suspension/expulsion, and improve quality of care.

Scope of Services:

IECMH Consultant will provide the following services:

- Classroom observations and feedback
- Child developmental screening guidance
- Support for providers' wellness, compassion fatigue, and reflective practice
- Support in managing challenging behaviors
- Social-emotional support planning
- Recommendations for classroom strategies and environmental modifications
- Referrals to outside services when necessary
- Staff training and professional development
- Support for family engagement and communication
- Participation in case planning and team meetings when appropriate
- Program consultation including support for positive and open communication among program staff (including administration and teachers)

Roles and Responsibilities of IECMH Consultant:

- Maintain communication with the child care provider, center director or designated liaison
- Provide timely, respectful, and culturally responsive consultation
- Document consultation activities and maintain confidentiality
- Obtain necessary consent for individual child-focused consultation

Roles and Responsibilities of Child Care Program:

- Designate a staff liaison to coordinate services with IECMH Consultant
- Provide access to classrooms, staff, and, when appropriate, families
- Encourage and coordinate staff participation in activities. This may include collaborating, attending professional development training, and ensuring coverage in a classroom so provider can speak with the Consultant privately
- Ensure appropriate confidentiality for all consultation processes

Confidentiality:

IECMH Consultant will maintain confidentiality of all children, families, and staff, in accordance with applicable state and federal laws, including the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA), where applicable. An example is if staff disclose to the consultant about a health concern or medical condition.

Information that a provider or other program staff shares with the Consultant helps to inform the Consultant's service delivery. Comprehensive services involve communicating information that impacts the well-being of the children and the staff. Consultant provides coaching, guidance, and facilitation of conversations between staff, as necessary and helpful.

All Consultants receive professional support to maintain quality practices through supervision from CCR, and reflective consultation from Oregon Infant Mental Health Association (ORIMHA). Information about services may be shared for purposes of learning, informing future service delivery, and growing Consultant's skills.

IECMH Consultants are mandated reporters of suspected abuse or neglect of a child, elder, or person with disabilities.

Consent for Child-Specific Services:

Child-specific services may include child observation, individual consultation with families, and/or referrals to additional services. If child-specific consultation is requested, **written consent** from the child's parent/legal guardian will be obtained by IECMH Consultant before services are initiated.

☐ I acknowledge parent/guardian consent will be obtained prior to any child-specific consultation.

Duration:

IECMHC services are most beneficial following a 6-12 month timeline. Duration will be determined in collaboration with provider. This Agreement shall begin on _____ and continue until _____, or until terminated by provider. Immediate termination may occur if confidentiality or ethical standards are violated.

Signatures:

By signing this agreement, you agree to the terms, and commit to working collaboratively with your IECMH Consultant to support the mental health and well-being of young children in your care.

Program Name: _____

Provider Name: _____

Provider Signature: _____ Date: _____

Program Director Name: _____

Program Director Signature: _____ Date: _____

Pyramid Model Implementation Data System (PIDS)

The Pyramid Model Implementation Data System (PIDS) is a secure web application that allows data entry, reporting, and administrative functions to be used by early childhood programs implementing the Pyramid Model in Oregon. Relevant data collection includes:

- child demographics
- social/emotional assessments
- behavior incident reporting
- classroom coaching logs
- Benchmarks of Quality (BOQ)
- Teaching Pyramid Observation Tool (TPOT)
- Teaching Pyramid Infant-Toddler Observation Scale (TPITOS)
- employee demographics
- employee training

Some data collection tools in PIDS require entry of a person's name for purposes of documenting the coach, coachee, observer, or observee. Data collected in PIDS will be used to evaluate and assess implementation of the Pyramid Model and impact on children. The primary goal of data collection is to inform our decision-making processes and to strategically support early childhood educators and support staff. Data is NOT collected as a means to evaluate an individual employee or program's performance. Rather, the emphasis is on understanding how we can best enhance program and classroom climate through systems support and professional development. Your participation in data collection is an important part of our success and your partnership is greatly appreciated.

In the use of PIDS for Every Child Belongs services, CCR staff providing data entry into PIDS include your Infant and Early Childhood Mental Health Consultant, Inclusive Partners Specialist, and Pyramid Model Coach as part of their work providing support for children, classrooms, and programs. Access to PIDS is based on current job functions related to Pyramid Model implementation. No employee will be granted access to PIDS who does not need to see or enter associated data.

In addition to program employees having access to employee data, other professional supporting Pyramid Model work may have limited access to this data. This may include community and state partners, the national Pyramid Model Consortium, evaluation agencies, and higher education institutions. Access is provided for the monitoring of Pyramid Model practices. This level of data access hides or de-identifies employee names, ensuring employee confidentiality.

The information provided will be used as part of the state's commitment to continuous quality improvement, and it may also be combined with other data for broader research purposes. In any case, identifiers will be removed from the information for these uses.

If at any time you wish to learn more about our data collection policies, please contact elsi-inclusion@oregonstate.edu.

Child Care Director Consent of Program Data Entry into *Pyramid Model Implementation Data System (PIDS)*

By signing this form, you are consenting to the entry of your program's zip code, county, and funding type into PIDS. You have the right to request copies of this data at any time. You may change this consent at any time by reaching out to elsi-inclusion@oregonstate.edu.

☐ Please check this box if you do NOT want your program name included in PIDS. Your program will be entered with an assigned number instead.

Program Name: _____

Program Director Name: _____

Program Director Signature: _____ Date: _____

Child Care Provider Consent of Data Entry into Pyramid Model Implementation Data System (PIDS)

By signing this form, you consent to allowing data entry into PIDS for the duration of your current employment to include the following information and training records. You recognize that in providing your name, it may be used with Pyramid Model documentation tools such as TPOT/TPIOS and classroom coaching logs. You have the right to request copies of this data at any time. You may change this consent at any time by reaching out to elsi-inclusion@oregonstate.edu.

Please provide the following information:

1. Name: _____
2. Hire Date: _____
3. Work Email: _____
4. Gender:
 - ☐ Female
 - ☐ Male
 - ☐ Non-binary/Other
 - ☐ Prefer not to say
5. Race (check all that apply):
 - ☐ American Indian or Alaska Native
 - ☐ Asian
 - ☐ Black or African American
 - ☐ Native Hawaiian or Other Pacific Islander
 - ☐ White
 - ☐ Other:
6. Ethnicity:
 - ☐ Hispanic or Latino
 - ☐ Not Hispanic or Latino

Please check for any information you **do NOT want included in PIDS**. Identifying details will be replaced with assigned numbers.

- ☐ Name
- ☐ Race
- ☐ Ethnicity
- ☐ Gender Identity

Program Name: _____

Provider Name: _____

Provider Signature: _____ Date: _____

NeighborImpact Policy for Community and Client Complaints

Policy:

The NeighborImpact Board of Directors and the Head Start Policy Council will establish and maintain procedures for working to resolve community complaints about the programs. It is the desire of NeighborImpact to encourage communication with and between parents, clients, community members, partners and staff. It is important that individuals know the procedure for expressing concerns or dealing with complaints so that questions, concerns, ideas and problems can be dealt with in a positive manner. Below is a step-by-step outline of the procedure for expressing concerns or working through complaints about programs.

Informal Procedure:

1. Clients/parents/community members/partners are encouraged to express their concerns directly to the individual staff member.
2. If the concern does not involve an individual staff member, the concern may be directed to the appropriate supervisor.
3. Every attempt is made to handle the situation respectfully and directly with confidentiality.

Formal Procedure:

Step 1

1. If the concern is not resolved through the informal process, the concerned party may file a formal concern using the "Written Concern Form."
2. A "Written Concern Form" may be obtained at any NeighborImpact location, via the NeighborImpact website or at the administration office, 548-2380 ext. 100.
3. The form is completed by the concerned party. Staff members can assist with completion of the form for non-personnel concerns. Concerns regarding personnel must be directed to the person's supervisor.
4. The completed form can be submitted to any staff member, who then provides it to the coordinator/supervisor.

Step 2

1. The Supervisor contacts the concerned party and tries to resolve program concerns over the phone. If the concern is a personnel issue, the supervisor confirms they have received the concern and will review it. If the concerned party has future concerns regarding the staff member they may submit their concern to the next supervisory level for review.
2. If the concern is not resolved over the phone, the supervisor contacts the concerned party and schedules a meeting within five working days if possible to discuss the situation. Any exceptions to this time frame must be documented by the supervisor.
3. The staff member (if applicable) and supervisor attends the meeting. The concerned party does not have to attend the meeting if they do not wish to.
4. The goal of the meeting is to bring resolution to the concern or complaint by reaching consensus in a positive manner about:

- the most appropriate form of action to take,
 - what the implementation of that action would look like,
 - by whom the action should be taken, and
 - by when the action should be completed.
5. The supervisor prepares a written response within three days of the meeting and sends the response by certified mail to the concerned party who filed the concern. Any exceptions to this time frame must be documented by the supervisor.

Step 3

1. If the concerned party does not feel the issue has been resolved, they may bring it to the next supervisory level.
2. The process outlined in Step #2 continues until it reaches the program director.

Step 4

1. If a concern reaches the Program Director, the Director reviews the concern and schedules a meeting. The following individuals may be invited to a meeting: person filing the concern (if they feel comfortable), individual staff person addressed in the concern, and appropriate supervisor. If the concern is regarding the Head Start program, the Head Start Policy Council chairperson and/or representative (as applicable) may be invited to attend. The Head Start Policy Council chair is also informed of all concerns reaching this level.
2. The program director prepares a written response outlining action taken and mails it by certified mail to the concerned party who filed the grievance within fifteen working days of the meeting/decision. The Director's response is final.