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Cross-System Collaboration to Better Support Babies in Illinois: Developing a Unified Model for Infant and Early Childhood Mental Health Consultation

Decades of Collaborative Work Set the Stage for Illinois to Develop a Unified Model for Infant and Early Childhood Mental Health Consultation

In 2015, the Illinois Children’s Mental Health Partnership (ICMHP) launched a five-year [initiative](#) to advance a universal infant and early childhood mental health (IECMH) consultation model in Illinois. The initiative’s goal is to strengthen the capacity of early childhood professionals, families, programs, and systems to prevent, identify, treat, and reduce the impact of mental health problems among infants and young children. The project came about in large part due to the state’s long history of collaboration to promote children’s mental health, which was initiated by passage of the 2003 Children’s Mental Health Act and creation of the ICMHP. The ICMHP formally brought together child-serving state agencies, parents, youth, policymakers, providers, and advocates to develop and oversee implementation of a Children’s Mental Health Plan. Since its creation, the group has provided

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a venue for state leaders and other stakeholders to build relationships, share information, and think collectively about how systems can work together to better serve children and families. Together, they have made progress on several of their goals, including implementation of social and emotional standards, statewide expansion of screening and support services, and increased public awareness of the importance of mental health.

One of the key motivators for the IECMH consultation initiative was a two-year effort initiated by the Irving Harris Foundation in 2014 to assess how well the state was supporting IECMH. After reviewing comprehensive data from relevant reports and engaging more than 600 stakeholders through interviews, focus groups, and strategy sessions, they released an action plan to support the intentional integration of IECMH promotion, prevention, intervention, and treatment into child- and family-serving systems. A key area explored in the action plan was how Illinois could systematize implementation of IECMH consultation across systems. At the time, some state systems were offering some form of IECMH consultation, but there was great variation in approaches. The action plan called for development of a consistent model that would incorporate best practices while also allowing for variations to accommodate the needs and practices of different sectors. Building on its strong cross-agency relationships and previous work related to IECMH consultation in home visiting, the ICMHP decided to take on this project.

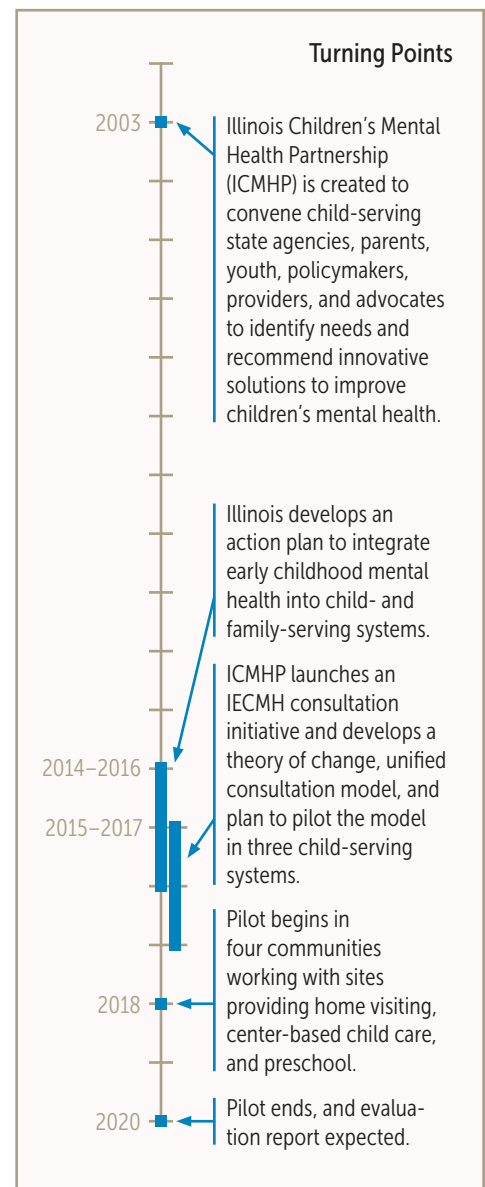
Coming to Agreement on The Consistent Elements of an IECMH Consultation Model

The ICMHP brought together leadership from state agencies supporting IECMH consultation (including the Department of Human Services, the Governor’s Office of Early Childhood Development, the Department of Public Health, the Illinois State Board of Education, the Department of Children and Family Services, and the Illinois Head Start Association); IECMH consultation staff working in different programs (such as home visiting, Early Head Start/Head Start, early intervention, child care, and preschool); members of the Illinois Association for Infant Mental Health (ILAIMH); and early childhood advocates to develop a theory of change, a unified model, and a framework for piloting the model in different systems. In addition to a leadership advisory group, two workgroups were formed to develop the model and craft a workforce development plan.

Creation of the unified model took a year of collaborative work. The workgroup examined commonalities and differences across current approaches being implemented in the state and researched best practices to inform their decision-making about which elements of the model should be consistent across environments

IECMH consultation is a multi-level, proactive approach that pairs multi-disciplinary IECMH professionals with individuals who work with young children and their families to support and enhance children’s social and emotional development, health, and well-being. As part of their work, IECMH consultants may provide:

- Reflective consultation to program staff individually or in groups
- Support with observation, screening, and assessment of children
- Training on topics such as social and emotional development, the impact of trauma, or parental depression
- Co-facilitation of peer-support groups for program staff and/or caregivers



“The vision is that every adult and every early childhood system knows how to support children’s social and emotional development and what to do if children are off track. In order to achieve that vision, we need to embed within systems the supports necessary for the adults working directly with children.”

— Colette Lueck, Director and Chair of the Illinois Children’s Mental Health Policy Partnership

and which should allow for flexibility. They also looked at lessons learned by states working with the federally funded Center of Excellence for IECMH Consultation and relied on previous work done by the ILAIMH related to infant mental health competencies. It took time and intentional effort for consultants to shift away from loyalty to the version of IECMH consultation they were already implementing to explore what they could build together that would lead to better outcomes for children. After much internal debate and discussion with the leadership team, the group agreed on a model that describes the core components of IECMH consultation and the competencies and skills consultants need to deliver them. Recognizing that consultation must be responsive to recipients’ needs, the model does not dictate specific activities or

duration and frequency of services, but instead describes several variations of how consultation could be delivered. It is meant to identify best practices; define the specific nature of IECMH consultation; help coordinate consultation across the state; and describe the infrastructure needed to support consultants and build an adequate workforce to support expansion.¹

Creation of the IECMH consultation model was a significant achievement for Illinois, but having it outlined on paper was not enough. Members of the ICMHP recognized that to learn what it would take to implement the model, and what difference using it would make for children, they would need to test it. For that reason, phase two of the IECMH consultation initiative focused on design of an implementation pilot and evaluation.

Piloting the IECMH Consultation Model in Home Visiting, Child Care, and Preschool

The IECMH consultation model workgroup and leadership team worked closely with an evaluation team to design a pilot of the new IECMH consultation model. The pilot is implementing the model in four communities across the state (two urban and two rural). In each, consultation is provided in three systems: home visiting programs that do not already receive IECMH consultation, center-based child care, and preschool. In addition to 16 sites receiving the intervention, the pilot also includes eight control sites that do not, so evaluators can assess how outcomes differ. Sites were randomly assigned to the intervention or control groups. One complicating factor for the evaluation is that sites in the control groups may or may not be receiving a different form of IECMH consultation, so the comparison is not necessarily looking at the difference between receiving IECMH consultation or not, but instead whether the impact of IECMH consultation is greater when consultants are trained and supported in the ways the unified model requires. Essentially, the pilot is exploring how the unified IECMH consultation model compares to business as usual.

Coming to agreement on the duration and intensity of the pilot was difficult. Although the model itself does not define a minimum standard of service, the pilot needed to do so. The leadership group made the final determination, deciding that consultants must meet with program staff and supervisors at least two times per month. The pilot includes a 15-month implementation period and an additional six months for the evaluation team to write their report. As outlined in the model, the specific activities of the consultants are driven by the sites’ needs, but all of them received the same training, meet the required qualifications/experience, and regularly receive individual and group reflective supervision. Consultants are keeping logs of all their interactions with sites, which will give evaluators a sense of the primary activities consultants engage in, and whether there is consistency within or across systems.

The pilot is being funded by seven private foundations, and some state systems are absorbing the

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Specific Outcomes Being Examined in the IECMH Consultation Pilot

Short-term Outcomes:

- Improved provider practices in supporting children's social and emotional development and managing challenging behavior
- Improved provider-child and parent-child relationships
- Increased staff reflective capacity, mindfulness, and job satisfaction
- Improved supervisory relationships

Long-term Outcomes:

- Strengthened early care and education workforce
- Improved provider and parent well-being
- Improved child social and emotional development; reduced challenging behavior
- Decreased child expulsions from early care and education programs

cost for existing IECMH consultants to participate in the pilot. Approximately one-third of the pilot funding is dedicated to evaluation. The ICMHP made the decision to invest in a serious evaluation of their model because of the need for more data to move IECMH consultation forward substantially. In addition to exploring how the IECMH consultation model is implemented in different communities and systems, the evaluation will explore the impact of consultation on: frontline staff (home visitors, teachers, etc.) and supervisors' knowledge and practices; children's behavior and wellbeing; and early childhood systems. Although the intervention period may be too short to show significant effects on child- and family-level outcomes, Illinois is confident they will learn a lot through the evaluation that can inform future efforts.

Looking Ahead to 2020—What Impact Will the IECMH Consultation Initiative Have on Illinois Systems?

The IECMH consultation pilot will end in 2020. If the evaluation results support the hypothesis that the unified model is an impactful intervention, will it be adopted by all Illinois systems? That is not an easy question to answer. Even if interested in doing so, some systems' current IECMH consultation approaches are so different from the unified model that it would take increases in funding to shift them. There

are also serious gaps in state infrastructure, which the leadership team is currently considering how to address. They are exploring strategies to sustain the pilot after completion, expand the workforce, and build on the existing efforts in individual systems. The second IECMH consultation initiative workgroup

Illinois' Keys to Success

- **Build relationships across systems.** Most of the people involved in the IECMH have known and worked with each other for a long time. Those trusting relationships made it possible for them to have difficult conversations and compromise to come to agreement on a unified model.
- **Engage leadership.** Convening state system leaders to look collaboratively at IECMH consultation was critical. Without leadership support, there wouldn't have been a commitment to implement the unified model.
- **Rely on the expertise of professionals doing the work.** The model was developed by IECMH consultants and then presented to the leadership team for approval. Though the groups worked closely together in the final stages, it was essential that professionals doing the work on the ground led the process. Their experience made them best-suited to think through how the model would work in different systems.
- **Hire a project director to oversee the cross-system work.** Collaboration takes time and intentional effort. Funding a position explicitly charged with overseeing the IECMH consultation initiative has been essential.
- **Get local sites interested and excited early.** Illinois did not engage sites in development of the model or pilot until they asked them to participate. Staff identified this as a missed opportunity and recommended that other states involve local programs earlier if they do something similar.
- **Invest in evaluation.** Illinois decided to invest significant funding toward an evaluation of their model in hopes that what they learn will help them better serve children and families. Without data, decisions are made based on assumptions that may or may not be true.

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developed a workforce development plan with several recommendations, such as standardizing orientation and training, expanding reflective learning opportunities, and increasing support for consultant credentialing and certification. They are now working on an implementation plan that details how those goals can be achieved and will submit a proposal to the leadership team in early 2019. Expansion will likely happen incrementally as programs and systems build on their current capacities.



Resources

- Illinois Action Plan to Integrate Early Childhood Mental Health into Child- and Family-Serving Systems, Prenatal through Age Five—www.buildinitiative.org/Portals/0/Uploads/Documents/IllinoisReport2016.pdf
- For more information about the Illinois IECMH consultation model and pilot, visit <http://icmhp.org/icmhp-in-action/projects/mentalhealthconsultationinitiative/>
- For more information about IECMH consultation in general, read ZERO TO THREE's briefing paper, *Infant and Early Childhood Mental Health Consultation* at www.zerotothree.org/resources/1952-infant-and-early-childhood-mental-health-consultation-a-briefing-paper

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For more information about the *Building Strong Foundations* project, and to see other case studies in this series, please visit www.zerotothree.org/resources/series/building-strong-foundations.

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Endnotes

- 1 Illinois Model for Infant/Early Childhood Mental Health Consultation, Illinois Children's Mental Health Partnership, 2017, accessed at <http://icmhp.org/icmhp-in-action/projects/mentalhealthconsultationinitiative/>