

# ILLINOIS INFANT/EARLY CHILDHOOD MENTAL HEALTH CONSULTATION MODEL PILOT PROGRAM

## Evaluation Overview

### What is the purpose of the study?

1. To find out how the I/ECMHC Pilot Program is being implemented
2. To learn whether it is helping to support early childhood providers in their work with families
3. To understand how the consultation is affecting the programs, providers, and children and families

The goal is to evaluate both the implementation and the outcomes of the IL model.

### What are the outcomes?

Short-term:

- Improved provider practice 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:

- Strengthened ECE workforce
- Improved provider and parent well-being
- Improved child social and emotional development, reduced challenging behavior
- Decreased child expulsions from ECE programs

Infant and Early Childhood Mental Health Consultation (I/ECMHC) is a multi-level, proactive approach that focuses on supporting and enhancing children's social emotional development and overall health and well-being. I/ECMHC teams multi-disciplinary infant/early childhood mental health professionals with those who work with young children and their families in a wide variety of settings.



A growing body of research indicates that I/ECMHC is valuable for early childhood education programs, providers, and the families with whom they work in that it has been shown to increase teachers' ability to understand and respond to children's challenging behaviors, reduce staff stress, and increase staff job satisfaction. However, there is less evidence about the effects of I/ECMHC on providers in other child-and family-serving organizations, and even less published evidence on the impacts on parents and children in these other settings.

The Illinois Children's Mental Health Partnership is working closely with numerous public and private stakeholders to design a multi-year expansion initiative that advances the goal of a universal, effective, and sustainable I/ECMHC model in Illinois, with an expanded qualified workforce. A consultation model and workforce development plan were created in Phases 1 and 2 of the Initiative and in the current Phase 3, these will be piloted and evaluated.

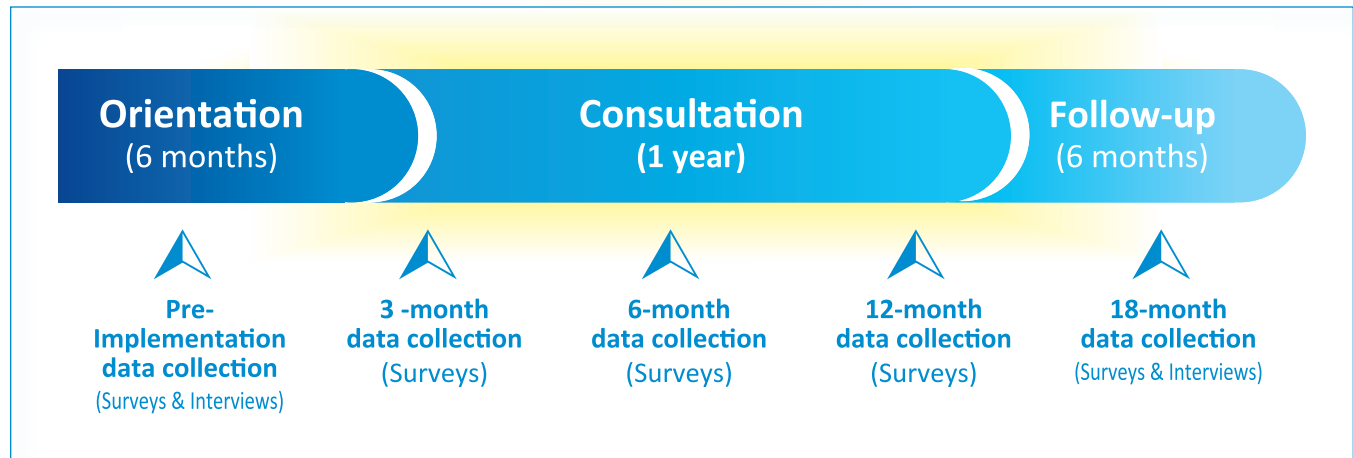


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### What is the timeline?

The total implementation period for the pilot and evaluation will be 30 months (October 2017 to October 2019). Data will be collected from providers every 6 months (5 data collection points):



### What are the expectations?

- Supervisor and staff: Completion of surveys, interviews, and observations
- Collection of child and family data: assessments, observations, or surveys  
*If available, existing data will be used to reduce the data collection burden on providers.*

### Confidentiality/Privacy

Research participants will be protected in many ways:

- Key informants who participate in interviews or focus groups will be asked to give informed consent to participate.
- The evaluator will be expected to provide sufficient protections to ensure client anonymity by not disseminating any data or analyses that will describe or identify an individual client, including names, addresses, or other information.
- Only aggregate data will be reported unless individual respondents have provided permission.

### What are the benefits?

By participating in the pilot study, programs will be contributing to unique and potentially seminal research on the field. Programs will benefit from an enhanced service (consultation) and will be able to use the data to evaluate their effectiveness and to tailor services to staff and clients.