BUILDING IECMHC IN TEXAS

OCTOBER 2025





Learning Objectives



- 1. Overview of the IECMHC approach
- 2. Description of the IECMHC projects in Texas
- 3. Findings from national and state scan
- 4. Understanding where IECMHC implementation is happening in Texas
- 5. Understanding the Texas IECMHC model development
- 6. Review the evaluation for IECMHC
- 7. IECMH consultants and LMHAs/CMH Centers

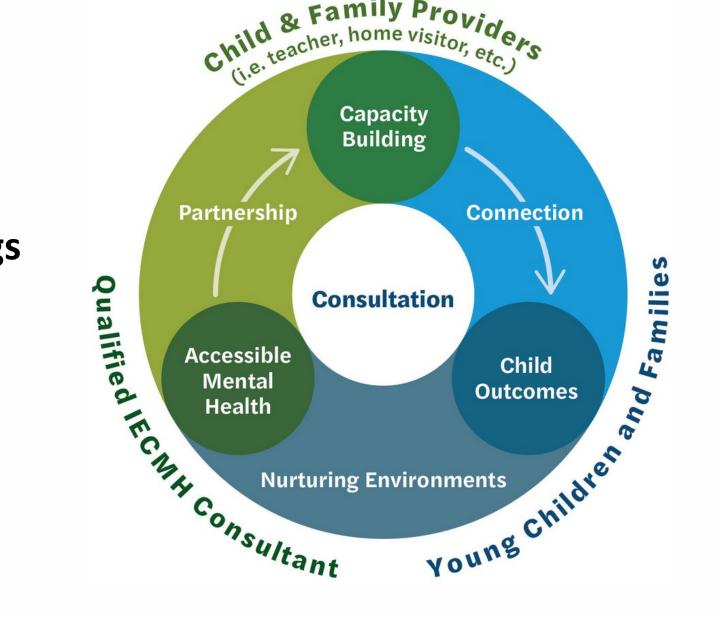
What is IECMHC?

IECMHC promotes the behavioral, social, and emotional well-being of young children through partnering with and supporting their primary caregivers and

providers.

Infant & Early Childhood Mental Health Consultation (IECMHC) is a **prevention-based** approach that **pairs a mental health professional with the adults** who work for and/or care for infants and young children in **various settings** where children learn and grow. These IECMH Consultants equip adults to facilitate children's healthy social and emotional development.

IECMHC is built on the knowledge that the relationship between adult caregiver/provider and child is central in shaping the child's health and development.



Impact of IECMHC



IECMHC has been shown to improve children's social skills and emotional functioning by:

- promoting healthy adult-child relationships
- reducing challenging behaviors
- reducing the number of suspensions/expulsions from early care/education
- reduce provider stress, burnout, and turnover
- improve school readiness
- improve adult knowledge about social-emotional development

IECMHC is NOT direct therapy. It is a prevention service offered to primarily adults (providers and caregivers) to build their understanding, capacity, and readiness to support young children.

<u>WHERE?</u> IECMHC is happening in over 20 states across the US in all child-serving sectors (early education, early intervention, home visiting and medical settings).

<u>Provider?</u> An IECMH Consultant is a masters-level licensed mental health provider specializing in child development, child and adult mental health, trauma, and reflective practices. There is an IECMHC Center of Excellence that outlines national competencies, a set of skills and knowledge consultants should have in their work. Texas has also developed a set of competencies that can be found in our <u>statewide manual</u>.

IECMHC: Core Values

• The mental health of young children is intertwined with the well-being of their caregivers.

- IECMHC services must be research informed.
- IECMHC helps to bridge gaps in Early Childhood System of Care.
- IECMHC services help to promote fairness and recognize that children have different resources and opportunities to thrive.
- Mental Health consultants need ongoing support and training.
- Family voice is an essential component of effective services.



IECMHC in Texas

Implementation Science Report
Landscape Analysis Report
2 New Implementing Sites

State Manual for IECMHC
Workforce Development
Reflective Supervision
State Sustainability Plan
1 New Implementing Site

2023

2024

2025



Texas IECMHC Resources

- IECMHC Landscape Analysis Report
- <u>IECMHC Implementation Science Report</u>
- **IECMHC Program Overview**
- **Program Brochure**
- ECCE Promo Video
- Texas IECMHC Manual Part 1 & Part 2

Items available for download here: https://www.tiemh.org/projects/preschool-development-grant-birth-through-5

Implementation Sites/Areas

- Any Baby Can (ABC) Travis County
- Champions for Children (CFC) Smith County
- Easter Seals Rio Grande Valley (ESRGV) Cameron and Hidalgo County
- Family Services of San Antonio (FSSA) Bexar County
- My Health My Resources Tarrant County (MHMR-TC) Tarrant, Parker, Hood, and Palo Pinto Counties
- Serving Children And Adults in Need (SCAN) Webb County



Research Findings and Reports

Research Takeaways (national scan of 14 states in 2023)

- *Top funding sources* PDG (short-term), State GR (stable), CCDF (stable), ARPA (short-term), Others state education (federal pass through) funding and philanthropic.
- *Medicaid* Michigan is only state billing (10% of total budget). Other states are exploring but no established program.
- Qualifications of an IECMH Consultant: 85% require mental health degree, 54% requiring licensure or provisionally licensed (aligning with national COE), 38% require IMH Endorsement, 31% of states requiring specific training in early childhood and child development. 69% of states require and provide reflective supervision to consultants.
- Service Settings: 71% in ECCE, 51% in Home Visiting via MIECHV.
- Legislation: 38% of states have legislation to support IECMHC programming.
- Return on investment: no state had an ROI calculated to date.

Statewide Model Development

I. Orientation

To set statewide standards for IECMHC services in early childhood ECCE, HV, ECI and pediatric settings, and build upon the exsiting IECMHC programs across Texas.

- Introduces IECMHC: what is it, what are the types and the core values;
- Defines IECMH Consultant qualifications and activities;
- Explains IECMHC in the Early Childhood Continuum of Care;
- Shares impacts and outcomes; and
- Shares systems building strategies using a sustainability conceptual model.

II. Competencies

To provide guiding principles for IECMHC service provision, training, and supervision. To inform guidelines for implementation and evaluation of local and statewide programs. To support building a qualified IECMHC workforce in Texas.

- Includes the necessary foundation knowledge for an IECMHC;
- Outlines the role of the IECMH consultant including core skills; and
- Shares best practices related to reflective supervision/practice.

Statewide Model Development

III. Training

To provide guidance for workforce development in alignment with foundational knowledge and competencies within the model, and recommendations for both core training requirements and ongoing professional development needs.

- Includes a set of foundational trainings related to competencies and qualifications for IECMHCs;
- Recommended trainings for evaluation measures;
- Strategies for access to foundational trainings.

IV. Evaluation

To provide guidance on assessing the effectiveness and impact of IECMHC services delivered across the state.

- Includes IECMHC model goals, key evaluation questions and objectives;
- Include a list of key outcomes related to service delivery, program implementation;
- Strategies for integrating the experience of providers and families involved;
- Recommended strategies for data collection protocols and management systems;
- Address the importance of building evaluation plans to support data-driven decision making; and
- Statewide Logic Model.

PDG Pilot & Project LAUNCH Evaluation

Slightly different evaluation tools are being used in the 2 projects. We are testing to see which tools will work best for our state long-term.

Evaluation Tools	PDG B-5	Texas LAUNCH
ASQ®-3 (Ages and Stages Questionnaire – Third Edition)	X	X
ASQ®-SE (Ages and Stages Questionnaire – Social-Emotional)	X	X
DECA Clinical (Devereux Early Childhood Assessment)	X	
DECA-IT (Devereux Early Childhood Assessment for Infants and Toddlers)	X	
ECBI (Eyberg Child Behavior Inventory) Note: ECBI does not cover ages 0-2.		X
Participant Experience Survey	X	X
ProQOL (Professional Quality of Life Health Measure)	X	
SESBI-R (Sutter-Eyberg Student Behavior Inventory – Revised)		X
TPITOS-Short Form (Teaching Pyramid Infant-Toddler Observation Scale)	X	
TPOT- Short Form (Teaching Pyramid Observation Tool)	X	

IECMHC in Schools

EARLY CHILDHOOD MENTAL HEALTH CONTINUUM OF CARE

As you move along the continuum, workforce training and education requirements increase.

Promotion

(Universal/Appropriate for all)

What is it? (Examples)

Infant and early childhood mental health consultation

- •Developmental and behavioral screening for children
- •Behavioral health screening for caregivers (depression, anxiety, substance use, domestic violence, etc.)
- •Early childhood mental health awareness and education
- •Social emotional learning (classroom or program-wide)
- Care coordination
- •Referrals and support to access a wide range of services (health care, employment, food, housing, nutrition, etc.)

Who can do it?

•IECMH consultants

- Mental health providers
- Early childhood professionals
- Childcare providers
- Nurses
- Home visitors
- •Community health workers
- Promotoras
- •WIC (Women Infant Children) workers
- •Early intervention staff
- •Peer specialists

Prevention

(Those at higher risk and/or showing early signs or symptoms)

What is it? (Examples)

Infant and early childhood mental health consultation

- •Parenting support and education groups(e.g. Incredible Years, Circle of Security, Mothers and Babies/Mamas y Bebes), etc.
- •Healthy Steps and Pediatric Triple P (Positive Parenting Program) Levels 2 and 3 (primary settings)

Who can do it?

•IECMH consultants

- Mental health providers
- •Parenting groups: early childhood professionals trained in the model, often co-facilitated with a mental health professional
- •Healthy Steps Specialists: generally, a mental health professional, early childhood educator, or nurse with IECMH training

Assessment, Diagnosis, and Treatment

(For those experiencing significant symptoms)

What is it? (Examples)

Assessments and Diagnosis: defining the nature and severity of the problem and making treatment and other support recommendations. Critical to use valid and reliable assessment tools. Diagnosis using the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-5) or the Diagnostic and Statistics Manual (DSM-V).

Treatment: evidence-based, developmentally-appropriate, and culturally-appropriate interventions, such as Attachment and Behavioral Catch-Up, Parent-Child Interaction Therapy, Child-Parent Psychotherapy, and Triple P Level 4 or 5.

Who can do it?

Assessment and Diagnosis: licensed and license-eligible mental health providers (psychiatrists, psychologists, clinical social workers), primary care physicians, psychiatrists, psychiatric nurse practitioners trained in IECMH.

Treatment: licensed and license-eligible mental health providers (psychiatrists, psychologists, clinical social workers), psychiatrists trained in evidence-based models.

An IECMHC would work in tandem with teachers, counselors, and administration to support the adults in a child's life.

Schools have organizational readiness related to infrastructure: pre-K classrooms, educators with early childhood experience, expertise regarding child development, and supports for families.

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