

Early Childhood Meeting 3/21/07

The meeting started with some updates:

DECA Trainings: Infant and Toddler: April 21st. Full
June 9th: a repeat: still some slots left

True Colors: May 9th

MH Providers and EC: Children's Home Society has been the main player. At present, a question is: Can we do more? Are we addressing EC MH with preventive measures? The MH therapists now have training in the DECA Clinical, and so we need to learn how to connect with the therapists to get children into a position to have the DECA C done when appropriate.

Children's Home Society is focusing on partnerships with child care centers. They have 11 MA level interns and are attempting to integrate all services with MH. Thus far, transportation and no shows are huge barriers to children receiving services. They are trying to get to non-medicaid services and are trying to access some \$\$'s available through the RSN for non-medicaid children.

Children's Home Society has learned some things through their efforts to offer MH to children:

- * There are some families who are eligible but that won't go through the hassles involved with accessing services
- * Some families want to pay, but the system is set up to Medicaid, not payment.
- * Very few providers serve children under 5 - they send to their physician instead
- * CHS often has to open a case on an older child to get into the door to serve a younger child

St. Anne's reported that they have used consultant \$\$'s through FCR to connect consultants to teachers around MH needs

WSU would like to apply for a new EC grant and invited partners to meet with Pat and others to discuss the grant.

The meeting concluded by having groups address this questions: How can we sustain this work around the DECA?

Group 1

What	How
Use LPM (to train and consult)	Director/ provider contact
Training and consultation would happen directly in the classroom of FCC home	release from current employment train new staff/providers in DECA and how to use

Whole center training would be followed by consultation to a specific child	classroom support apply for other grant sources or partner in some other way. set up a centralized pool to fund consultants establish eligibility criteria for consulting, such as using the DECA
Use RNS \$\$'s to access Medicaid eligible children and use area resources to this to fit	CHS can send trained DECA C therapists to CC centers/homes

Group 2: How to sustain the DECA?

LPM's

Other initiatives (grants): Inland NW Alliance for Early learning

Partner with local businesses (CIS model)

Early childhood as an investment

Boeing 4/13 lunch opportunity

"Demystifying the DECA and promoting its use

Deca used as a measurement tool (Quality ratings - potential for State \$\$

Deca used as a strategy that matches the areas of focus for the Inland NW Alliance:

- Quality EL environments

- Access to quality learning

- Quality of Resources

- Understand needs of "at risk kids"

- Parent resources

Group 3

Money, money, money

Find ways to support the mentoring program: respite for teacher/staff to free up their time

ID people who have been trained:

- Where are they?

- Create mentorship group and maintain regular schedule

- Create a Deca C group and maintain; how do the LPM's and Deca C persons interface?

Find ways to connect Deca and Deca C trained persons

ID process for implementing Deca through the Deca C: what's the process, who and when do you call upon each person in each role?

Funding/funding/funding: 0-3 public Ed. And spec. ed \$\$

Next meeting: April 17th, 12:00-1:00 Family Care Resources