

IECMHC Survey for OCC Administrators
Audience: Child Care Development Funds State Leads

For the purposes of the scan, Infant and Early Childhood Mental Health Consultation (IECMHC) is defined as a prevention-based service that pairs a mental health consultant with families and adults who work with infants and young children in the different settings where they learn and grow, such as child care, preschool, and their home. The aim of IECMHC is to build adults' capacity to strengthen and support the healthy social and emotional development of children – early and before intervention is needed. IECMHC improves children's lives by supporting their social, emotional and behavioral health and development. (Center of Excellence for IECMHC, SAMHSA). IECMHC programs can be funded in a variety of ways, including through state, federal or local governments, and private non-profits, or a combination of these sources. We are interested in how the child care system is supported by IECMHC funded through any of these sources.

The project team would love your feedback on this survey in order to obtain input about availability, awareness, and understanding of services, and to identify key points of contact in this area. The results and feedback from this survey will be analyzed and consolidated into a document meant to inform ACF activities, and may be incorporated into documents and presentations that are made public.

This survey is estimated to take 30 minutes or less to complete. Please remember that your participation is voluntary, and all information you provide will be kept private.

Identifying Question: What is your current title and role, and which agency do you work for?

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Add Comment Box:

Q1: Using the definition provided above, are IECMHC services available for child care programs in your state or territory? Note: Please answer 'yes' if IECMHC services are available to only a subset of child care programs.

☐ Yes

☐ No

☐ I don't know

Add Comment box:

****Only those answering Yes to Question 1 will be prompted to answer questions 2-9

Q2: We know that the provision of infant and early childhood mental health consultation (IECMHC) differs across states and territories. We're interested in knowing how the services are provided in your state or territory. Please identify which entities provide IECMHC within your state or territory. For purposes of this question, "entity" refers to the organization or agency that is employing an IECMH consultant. (check all that apply)

☐ State-wide or territory-wide government department

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- ☐ Regional or county government department
- ☐ Mental health agency (non-governmental)
- ☐ Non-profit organization
- ☐ Child Care Resource and Referral agency
- ☐ Independent Contractor
- ☐ Other (Please describe in comment box)

Add Comment Box:

Q3: Does your state or territory have an IECMHC lead contact person?

- ☐ Yes
- ☐ No
- ☐ I don't know

****Only those answering Yes to Question 3 will be prompted to answer Question 3a.

Q3a: If yes, please provide contact info.

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Q4: Which child care settings are eligible for IECMHC services?

Child care type (check all that apply):

- ☐ Child care centers (licensed)
- ☐ Child Care centers (license-exempt)
- ☐ Family child care homes (licensed)
- ☐ Family child care homes (license-exempt)
- ☐ In-home child care (licensed)
- ☐ In-home child care (license-exempt)
- ☐ Other (Please describe in Comment Box)
- ☐ I don't know

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Q5: Are IECMHC services offered to children in child care based on their eligibility for another program, such as child welfare, Part C, or Part B? (check all that apply):

- ☐ Yes
- ☐ No
- ☐ I don't know

****Only those answering Yes to Question 5 will be prompted to answer Question 5a.

Q5a: If yes, please choose all that apply:

- ☐ Involvement with child welfare
- ☐ Involvement with Part B
- ☐ Involvement with Part C
- ☐ Other (Please describe in Comment Box)

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Add Comment Box:

Q6: Are IECMHC services available within child care settings that accept Child Care and Development Fund (CCDF) Subsidies?:

- ☐ Yes
- ☐ No
- ☐ I don't know

Add Comment Box:

Q7: Is there a tracking system in place of how many child care programs are actively receiving/ not receiving IECMHC services?

- ☐ Yes
- ☐ No
- ☐ I don't know

Add Comment box:

****Only those answering Yes to Question 7 will be prompted to answer Question 7a.

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Q7a. If yes, what is the tracking system and who maintains it?

(Please describe in the comment box)

Add Comment Box:

Q8: How are IECMHC services funded for the child care programs in your region? (check all that apply)

- ☐ State/Territory funded initiative
- ☐ Grant funded
- ☐ Funded directly with CCDF funds
- ☐ Funded directly by Head Start/Early Head Start agency
- ☐ Funded directly with Preschool Development Grant Birth through Five funds
- ☐ Mental health agency
- ☐ Other (Please describe in comment box)

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Q9: What types of activities do you offer to child care programs to increase knowledge of IECMHC services? (check all that apply)

- ☐ Provide informational materials on IECMHC services and contact information for IECMHC programs in your state via email or other distribution method (website, listserv, etc.)
- ☐ Informational webinars or trainings on IECMHC services
- ☐ Provide opportunities for child care providers to engage with IECMHC partners
- ☐ None, but I would like to learn more (Please describe in comment box)
- ☐ Other (Please describe in comment box)
- ☐ I don't know

Add Comment Box:

*****All are prompted to answer questions 10 and 11*****

Q10: Are any of the following social-emotional supports/curricula offered in child care programs in your state or territory?

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- ☐ Social-emotional curriculum
- ☐ Conscious Discipline
- ☐ Teaching Pyramid model
- ☐ Positive Behavioral Interventions and Supports (PBIS) coaching
- ☐ Trauma-Informed early childhood education practices
- ☐ Coaching on other social-emotional curricula/evidence-based practices
- ☐ Other (Please describe in comment box)
- ☐ I don't know

Add Comment Box:

Q11: Would you be willing to be contacted for a follow-up interview?

- ☐ Yes (provide name, email, and title/agency)
- ☐ No

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