<u>PERFORMANCE OBJECTIVE</u>: MENTAL HEALTH SERVICES 1304.24(a)

PERSON RESPONSIBLE: ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

DISABILITIES ASSISTANT FAMILY ADVOCATE

TEACHER

HOME VISITOR

TIME LINE: June1 – May 31

RATIONALE: Understanding a child's behavior and development will help parents and

staff respond in a manner more likely to enhance the child's development

RESOURCES: Dickenson County Behavioral Health, Frontier Health

OPERATIONAL PROCEDURE:

Grantee and delegate agencies must work collaboratively with parents (see 45 CFR 1304.40(f) for issues related to parent education) by:

- a. Communication about a child's mental health will occur through formal and informal opportunities; during home visits, staff-parent conferences, parent meetings and individual counseling with mental health professionals.
 - b. Staff will respect parenting strengths, values, culture, and child rearing approach.
 - c. Staff will enhance awareness and understanding of mental wellness and the contribution that mental health information and services can make to the wellness of all children and families by providing wellness activities for families and opportunities for parents to attend trainings by mental health professionals.

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<u>PERFORMANCE OBJECTIVE</u>: MENTAL HEALTH SERVICE SOLICITING PARENTAL INFORMATION 1304.24(i)

PERSON RESPONSIBLE: HEALTH SERVICES MANAGER

DISABILITIES ASST. FAMILY ADVOCATE

TEACHER

HOME VISITOR

EDUCATION SUPERVISOR

ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

TIME LINE: Within 45 days of enrollment

RATIONALE: Understanding a child's behavior and development helps parents and staff

respond in a manner more likely to enhance the child's development.

RESOURCES Dickenson County Behavioral Health, Wise County Behavioral Health,

Parents and Performance Standards

OPERATIONAL PROCEDURE:

(i) Soliciting parental information, observations, and concerns about their child's mental health;

a. At the time of enrollment, Family Advocate, Teacher, or Home Visitor will gather the following forms:

Blue School Physical Form

Health History Form

Any agency referral forms for on- going health/mental health concerns

- b. Staff will establish rapport and build trusting relationships with parents during the Family Partnership Agreement process and gather information from the child's health records.
- c. The Health Service Manager, Disabilities Coordinator, Education Supervisor, and Family Service Manager will review and consult with the family on any mental health

concerns obtained from the Family Partnership Agreement and Health History form that the parents completes with Family Advocate or Teacher

- d. Parents are asked to give (or deny) written permission for their child to undergo developmental (including social/emotional) screening that is administered to all Head Start children within the first 45 calendar days of enrollment.
 Parents are informed concerning the results including any re-screening that may need to be done. Parents are also informed of any referral needed and permission is obtained.
- e. Parents and classroom staff complete the TABS behavioral screening also within the first 45 days of enrollment. Results of Temperament and Atypical Behavior Scale are discussed with parents and then with parents permission are referred to a local mental health agency, if needed.
- f. Parents may also ask for mental health services for their child.

<u>PERFORMANCE OBJECTIVE</u>: MENTAL HEALTH SHARING OBSERVATIONS 1304.24(a)(1)(ii)

PERSON RESPONSIBLE: HEALTH SERVICE MANAGER

TEACHER

HOME VISITOR

EDUCATION SUPERVISOR

FAMILY ADVOCATE DISABILITIES ASST.

ASSISTANT DIRECTOR OF CHILD & FAMIY SERVICES

TIME LINE: June 1- May 31

<u>RATIONALE</u>: Anticipating and understanding a child's behavior and development helps parents and staff responds in a manner more likely to enhance the child development.

<u>RESOURCES</u>: Dickenson County Behavioral Health, Frontier Health,

Parents, Health Advisory and Performance Standards.

OPERATIONAL PROCEDURE:

1304.24(a)(1)(ii) Sharing staff observations of their child and discussing and anticipating with parents their child's behavior and development, including separation and attachment issues;

Individual child's mental health concerns are discussed with the parents:

- a. During home visits made by classroom teacher or Home Visitor
- b. During discussion of progress reports by classroom teacher.
- c. During completion of family partnership agreements by Family Advocate or Teacher that is working with the family.
- d. Staffing will be held on each enrolled child with teacher, parent, education

supervisor, family advocate, health services manager and disabilities coordinator.

e. Parents are given appropriate handouts on separation from their child and classroom staff incorporate in their lesson plan discussions with the children about separating from their parents.

<u>PERFORMANCE OBJECTIVE</u>: SUPPORTIVE ENVIRONMENT AND RELATIONSHIPS 1304.24(a)(1)(iv)

PERSON RESPONSIBLE: TEACHER AND CLASSROOM ASSISTANTS

HOME VISITOR BUS DRIVER BUS MONITOR

TIME LINE: June 1 –May 31

<u>RATIONALE</u>: Establishing a supportive environment and interacting with children.

<u>RESOURCES</u>: High Scope Curriculum, Agencies in community, Parents, First Step

Violence Prevention Curriculum

OPERATIONAL PROCEDURE:

1304.24(a)(1)(iv) Discussing how to strengthen nurturing, supportive environments and relationships in the home and at the program.

- a. A better understanding and positive attitude toward mental health will be fostered among staff and parents
- b. Mental Health component will be outlined during Parent Orientation.
- c. The opportunity for parents to obtain individual assistance will be emphasized.
- d. Teachers informed regularly, consulted with and provided information on establishing supportive relationships with parents.
- e. All staff will create a supportive environment for children and parents by demonstrating a responsiveness to each individuals ideas, experiences, and feelings by modeling, coaching, and encouraging.

<u>PERFORMANCE OBJECTIVE</u>: PARENTS UNDERSTANDING MENTAL HEALTH 1304.24(a)(1)(v)

PERSON RESPONSIBLE: DISABILITIES ASST.

ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

FAMILY ADVOCATES

TEACHER or HOME VISITOR

TIME LINE: June 1- May 31

RATIONALE: Better understanding of mental health issues increases the likelihood that

parents value and use the mental health information and services

available to them.

RESOURCES: Dickenson County Behavioral Health, Wise County Behavioral Health, and

Performance Standards

OPERATIONAL PROCEDURE:

130.24(a)(1)(v) Helping parents to better understand mental health issues

- a. Parents will be assisted with accessing community mental health resources as they request .
- b. Assisting parents to break down barriers to services including:
 - 1.Orientation with mental health provider during parent meetings and classroom consultations.
 - 2. Provide parents with activities that promote mental health well being.
 - 3. Providing transportation or childcare
 - 4. Protecting confidentiality of shared information
 - 5. Help with finding local funding to pay for interventions

<u>PERFORMANCE OBJECTIVE</u>: SUPPORTING PARENTS

1304.24(a)(1)(vi)

PERSON RESPONSIBLE: FAMILY ADVOCATE

HOME VISITOR or TEACHER

TIME LINE: June 1- May 31

<u>RATIONALE</u>: Better understanding and supporting parents with mental health issues

Or wellness.

RESOURCES: Dickenson Behavioral Health and Frontier Health

OPERATIONAL PROCEDURE:

1304.24(a)(1)(vi) Supporting parents participation in any needed mental health interventions.

Assisting parents to break down barriers to services, including:

Attending orientation meeting with mental health provider Locating the transportation or childcare needed to participate in services Finding assistance to pay for interventions Discussing the important of interventions for mental health with the entire family.

PERFORMANCE OBJECTIVE: SECURING MENTAL HEALTH

PROFESSIONAL 1304.24(a)(2)

PERSON RESPONSIBLE: FAMILY ADVOCATE

DISABILITIES ASST

ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

TEACHER or HOME VISITOR

TIME LINE: June 1 – May 31

<u>RATIONALE</u>: Grantee and delegate agencies will have an ongoing relationship with a

Mental health provider, or with a group of providers to ensure appropriate

services in a regular and timely manner.

RESOURCES: Dickenson Behavioral Health, Frontier Health and Health

Advisory

OPERATIONAL PROCEDURES:

1304.24(a)(2) Grantee and delegate agency must secure the services of mental health professionals on a schedule of sufficient frequency to enable the timely and effective identification of and intervention in family and staff concerns about a child's mental health.

Kids Central, Inc. has secured written contracts with mental health professionals To provide services to our children, parents and staff.

Frontier Health, Inc. has assigned a case manager to our program in Wise County and the City of Norton. Dickenson County Behavioral Health Services furnishes a case manager for the Dickenson County children, staff, and families. The contracts state that mental health professionals will provide these services:

Classroom observations
Planning implementation
Program Mental Health Orientation
Staff and parent training
Staffings
Individual Counseling
Professional Consultant

PERFORMANCE OBJECTIVE: MENTAL HEALTH SERVICES 130424(a)(3)

PERSON RESPONSIBLE: DISABILITIES ASST.

ASSISTAN T DIRECTOR OF CHILD & FAMILY SERVICES

FAMILY ADVOCATE

TEACHER or HOME VISITOR

TIME LINE.: June 1 – May 31

RATIONALE: Regularly schedule mental health services help to ensure that

day-to-day program practices promote mental health.

<u>RESOURCES</u> Dickenson Behavioral Health, Frontier Health, Health Advisory and

Parents.

OPERATIONAL PROCEDURES:

11304.24(a)(3) Mental health program services must include a regular schedule of on-site mental health consultation involving the mental health professional, program staff, and parents on how to:

- a. Design and implement program practices responsive to the identified behavioral And mental health concerns of an individual child or group of children.
- b. Mental Health consultant will work with other program staff to ensure the delivery of corresponding interventions that enable the early prevention, identification and treatment of any problem that could hinder the child's healthy mental development.
- c. Mental Health Curriculum: Second Step Violence Prevention Curricula and Family-Education Materials to Prevent Youth Violence and promote social Emotional skills, and build self-esteem. This step teaches empathy, impulse control, Problems-solving and anger management. This would introduce the parents to the same skills children learn at school.
- d. Pregnant mothers enrolled in Early Head Start will complete an Edinburgh Depression Screening with the home visitor. This will be completed during the third trimester of pregnancy and two weeks after delivery of the baby. A mother showing that she is depressed will be offered a referral to the appropriate mental health professional. If a mother is borderline depressed she will be re-screened within one month and closely monitored by home visitor. No follow up will be needed if mother shows no signs of depression unless home visitor notices change in behavior.

<u>PERFORMANCE OBJECTIVE</u>: PROGRAM PRACTICES

1324.(a)(3)(i)

PERSON RESPONSIBLE: DISABILITIES ASSISTANT

ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

FAMILY ADVOCATE

TEACHER or HOME VISITOR EDUCATION SUPERVISOR

TIME LINE: June 1- May31

<u>RATIONALE</u>: Through a combination of planned activities and interventions, mental health professionals assists staff and parents to help children practice skills that foster mentally healthy development.

<u>RESOURCES:</u> Mental Health Consultants, Health Advisory and Performance Standards

OPERATIONAL PROCEDURES:

1304.24(a)(3)(i) Design and implement program practices responsive to the identified behavioral and mental health concerns of an individual child or group of children.

- a. The consultant will work with other program staff to ensure the delivery of corresponding interventions that enable the early prevention, identification and treatment of any problem that could hinder the child's healthy mental development.
- b. Training on how to assess the child's strengths and needs, and on how to plan Developmentally appropriate activities that are based upon valid findings
- c. Make curricula enhancements. For many topics, such as reducing stress, resolving conflicts, and coping with violence.
- d. Make recommendations on resources that would be helpful to home visitors.
- e. Hold periodic conferences with parents and staff to share ideas.

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<u>PERFORMANCE OBJECTIVE</u>: INDIVIDUAL STAFF AND PARENT EDUCATION ON MENTAL HEALTH

1304.24(a)(3)(ii)

PERSON RESPONSIBLE: HEALTH SPECIALIST

DISABILITIES ASSISTANT

ASSISTANT DIRECTOR OF CHILD & FAMIY SERVICES

EDUCATION SUPERVISOR

FAMILY ADVOCATE

TIME LINE: June 1- May 31

<u>RATIONALE:</u> A well-planned education program on mental health issues enable parents and staff to be supportive of children's mental wellness.

<u>RESOURCES</u>: Dickenson Co. Behavioral Health, Frontier Health, Part C and Health

Advisory

OPERATIONAL PROCEDURES:

1304.24(a)(3)(ii) Promote children's mental wellness by providing group and individual staff and parent education on mental health.

- a. Training will be provided on topics including child growth and development, Abuse and neglect, substance abuse, ways to foster positive self-esteem and positive behavior and additional mental health topics of interest to parents and staff. The family advocate at family days will schedule these trainings.
- b. Children's mental health wellness will be addressed in the classroom.
- c. Literature and staff development will be provided throughout the school year

<u>PERFORMANCE OBJECTIVE:</u> SPECIAL HELP FOR CHILDREN WITH ATYPICAL BEHAVIOR 1304.24(a)(3)(iii)

<u>PERSON RESPONSIBLE</u>: EDUCATION SUPERVISOR DISABILITIES ASSISTANT

ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

TIME LINE: June 1- May 31

RATIONALE: Children with atypical development may present unfamiliar behaviors,

Parents and staff benefit from opportunities to discuss with the mental

Health professional ways of structuring the child's program and

implementing strategies that will foster development.

RESOURCES Dickenson Behavioral Health and Frontier Health

OPERATIONAL PROCEDURE:

1304.24(a)(3)(iii) Assist in providing special help for children with atypical behavior or development;

Mental Health professionals provide information on and assistance with identifying situations that require treatment. Professionals also help make appropriate referrals, visit homes, observe classroom or group socialization experiences and support parents and staff in their efforts to help the child.

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<u>PERFORMANCE OBJECTIVE</u>: OTHER COMMUNITY MENTAL HEALTH

1304.24(a)(3)(iv)

<u>PERSON RESPONSIBLE</u>: DISABILITIES ASSISTANT

FAMILY ADVOCATES

ASSISTANT DIRECTOR OF CHILD & FAMILY SERVICES

TIME LINE: June 1 – May 31

RATIONALE: The mental health professional assists staff and families to make

contact with and to take advantage of any and all existing resources

that promotes the healthy development of children.

RESOURCES: Mental Health Consultants

OPERATIONAL PROCEDURES:

1304.24(a)(3)(iv) Utilize other community mental health resources, as needed.

The mental health professional assists staff and families to make contact with and to take advantage of any and all existing resources that promotes the healthy development of children. They also train staff in the referral process and how to link with other community partners and the Health Advisory Committee.

KIDS CENTRAL, INC MENTAL HEALTH WRITTEN PLAN 2012-2013

Terry Gentry

May 9, 2012