

Performance Standard	Action Steps	Person / Team Responsible	Time Frame	Documentation and *Resources
<p>1304.24 CHILD MENTAL HEALTH (a) Mental Health Services</p> <p>(1) Grantee and delegate agencies must work collaboratively with parents (see 45 CFR 1304.40(f) for issues related to parent education) by:</p> <p>(i) Soliciting parental information, observations, and concerns about their child's mental health;</p> <p>(ii) Sharing staff observations of their child and discussing and anticipating with parents their child's behavior and development, including separation and attachment issues;</p> <p>(iii) Discussing and identifying with parents appropriate responses to their child's behaviors;</p>	<p>(1) Grantee and delegate agencies must work collaboratively with parents by</p> <p>Parents will be informed about the mental health program and available services at the beginning of the program year. Information is decimated by the Family Service and Education staff utilizing the Directory of Community Resources</p> <p>(i) Parents will have an opportunity to share with staff information about their child, such as their strengths, needs and interest. The information may also contain findings of health conditions, which the child has or has had. In addition, parents share any changes, circumstances or experiences that may be influencing their child's behavior. Parents share this information by means of a completed Family Partnership Agreement, Dial Parent Questionnaires, home visits and conferences with teaching staff and/or program managers.</p> <p>(ii) All children are observed on a regular basis by unit staff. Through meetings with parents, staff has the opportunity to share with parents, information on their child's development, helping them to understand that some behaviors are the child's response to a change in their situation or a stressful event.</p> <p>Parents have the opportunity to listen to guest speakers at their parent meetings addressing various topics regarding child development, discipline and behavior management. Parents may also request information on specific behaviors</p> <p>Staff provides children with a safe, nurturing environment where schedules and limits are consistent. Children are offered choices and helped to learn about natural and logical consequences. Staff has realistic expectations for children's behaviors and use positive guidance keeping in mind that consistency is the key to changing behaviors. There is communication between parents and staff in order that both can work together on which behaviors can be ignored, which can be redirected and which will need to be discussed with a professional for guidance and assistance.</p> <p>A daily schedule is used which provides the children with a feeling of security. They remain flexible, however, in order to respond to a child's individual need or a situational change.</p>	<p>Education Team</p> <p>Family Service Team</p> <p>Teaching Staff</p> <p>Family Service Coordinators</p> <p>Education Staff</p>	<p>Yearly</p> <p>3 times yearly</p> <p>Ongoing</p> <p>Ongoing</p>	<p>Mental Health Contract</p> <p>Education Meeting Minutes</p> <p>Family Service Meeting Minutes</p> <p>Community Resource Directory</p> <p>Dial 4 Parent Questionnaire Teaching Strategies GOLD</p> <p>Training Needs Assessment</p> <p>Resource Folders</p> <p>Daily Schedules</p>

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<p>(i) Design and implement program practices responsive to the identified behavioral and mental health concerns of an individual child or group of children;</p> <p>(ii) Promote children's mental wellness by providing group and individual staff and parent education on mental health issues;</p> <p>(iii) Assist in providing special help for children with atypical behavior or development; and</p> <p>(iv) Utilize other community mental health resources, as needed.</p>	<p>(i) The program has in place a set of steps to assess and assist in identifying children with behavioral and/or mental health concerns and how to best respond through referral, modified classroom set-up, routines and teacher-child interactions.</p> <ol style="list-style-type: none"> 1) A Dial 4 – Behavioral Observation and Dial 4 Social – Emotional Development Parent Questionnaire screening is completed on all children. All screenings are completed within the child’s first 45 days in the Program. The screenings are used to identify children with social / emotional concerns. Teachers/Home Visitors fill out a Behavior Scales Checklist for any children with heightened social/emotional concerns after the first 45 days. Suggestions for modifications are made and shared with parents and staff. 2) Specific classroom/child concerns that arise throughout the year are addressed through: <ol style="list-style-type: none"> a) Observation by the Teacher/Home Visitor/Education Coordinator to obtain specific data about how classroom set-up and teacher-child interaction affect children’s behavior b) Planning by the Teacher/Home Visitor/Education Coordinator (and parents, if possible) to plan for adaptations needed to assist in promoting appropriate behavior and social/emotional development. c) Follow-up Tracking to assess the success of the Classroom Behavior Plan 3) The program also uses the Second Step Social Emotional Curriculum with all children. The <i>Second Step</i> early learning program teaches self-regulation and executive-function skills that help children learn and skills to manage their feelings, make friends, and solve problems. <p>(ii) The mental health professional and appropriate Head Start staff will orient and work with parents to achieve the objectives of the mental health services. The professional may assist with arrangements for other community based mental health professionals to assist parents on an individual basis. The mental health professional will assist the Education Coordinators in developing on-going education in mental health services</p>			<p>Dial 4 Behavior Observations</p> <p>Dial 4 Social Emotional Parent Questionnaire</p> <p>Behavior Scales Checklist</p> <p>1 - Behavior Tracking Form 2 – Classroom Behavior Instruction Plan Form 3 - Classroom Behavior Record – Target Behavior Form</p>

Mental Health Written Service Plan

Policy Council Approval:

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	<p>(iii) The mental health professional will advise and assist, the Education Coordinators in collaboration with the Disabilities Manager, in provision of services for children with atypical behavior or development. The mental health professional will provide recommendations for children and families with a special need and/or will facilitate other community based mental health professionals to provide recommendations for children and families with special needs.</p> <p>(iv) The mental health professional and appropriate Head Start staff will work together in identifying and contacting resources in the local communities throughout the program service area.</p> <p>After classroom observations, the mental health specialist works with classroom personnel to provide information and assistance and ideas to use in providing services to children. Specific information is also sent home to parents on ways they can assist their child in developing appropriate reactions and skills.</p>			<p>Social/Emotional Development— Classroom Observation Form</p>