

Early Childhood Mental Health CCO 2.0: Foundations and Expectations

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My Role

- **Support Children's System of Care Development (CSAC)**
- **Promote expansion of, and increased access to Evidence-based Practices (EBP) to children, additional expertise in ages birth to 8 years**
- **Coordinate with other OHA Divisions**
- **Provide Technical Assistance to Stakeholders regarding Infant and Early Childhood Mental Health (ECMH) services and program development**

Experiences Build Brain Architecture

Harvard University Center on the Developing Child



[Video link: https://developingchild.harvard.edu/resources/experiences-build-brain-architecture/](https://developingchild.harvard.edu/resources/experiences-build-brain-architecture/)

HEALTH SYSTEMS DIVISION

Child and Family Behavioral Health

Oregon
Health
Authority

An Effective Early Childhood System is:

- **Coordinated, research-based services**
- **Across systems in all communities**
- **Across all intensity levels**
- **Understanding of the cultural, socioeconomic and environmental contexts in which families function**
- **Meaningful Parent Voice**
- **Trauma Informed**



System of Care
for Early Childhood
(simplified)

Treatment

Targeted
Supports

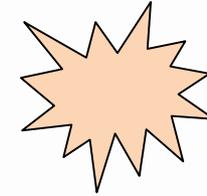
Universal Needs

Connected and Integrated

Guiding Principles of Early Childhood Mental Health

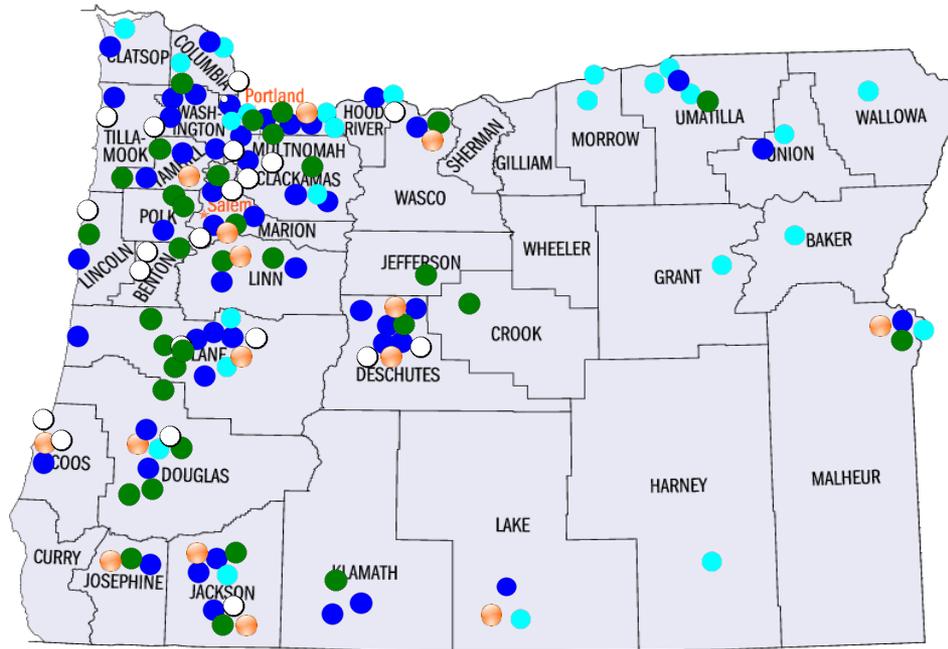
- **Relationships**- key to emotional, social, cognitive, and physical health
- **Specialized** training needed to assess and treat children younger than 5 years of age.
- **Dyadic** therapies should be prioritized over individual work
- **Cultural, socioeconomic and environmental** family factors are essential to understanding how to assist the family

Myth Buster!



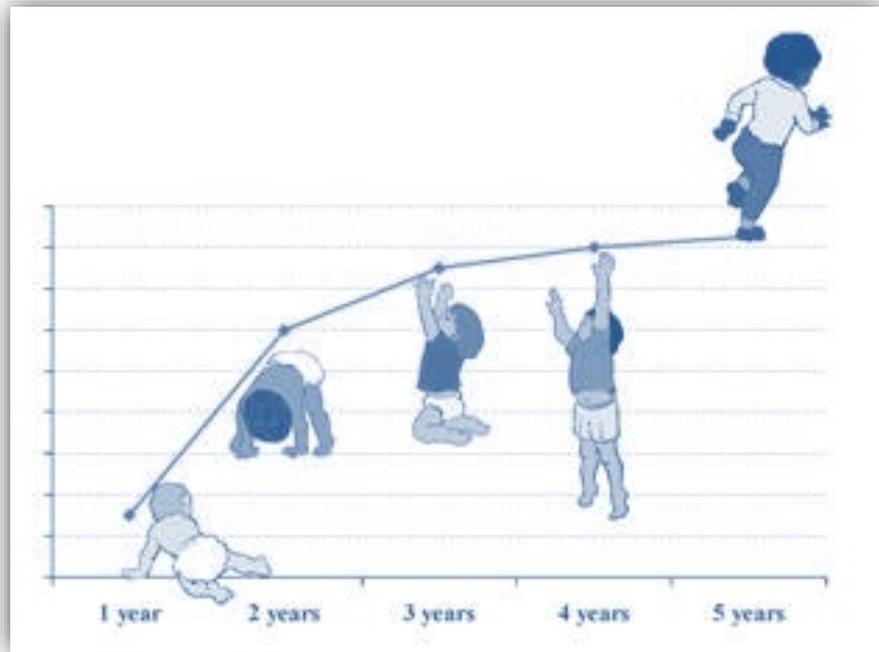
- “Wait and Watch” is often not an appropriate strategy
- Infants and young children do experience significant mental health disorders
- Children birth- 5 yrs. can be accurately diagnosed
- Oregon Health Plan will reimburse for mental health treatment for children birth to 5 yrs.
- Effective treatment is available for very young children

Early Childhood Social Emotional Health Services- staff trained through Oregon System Development Efforts



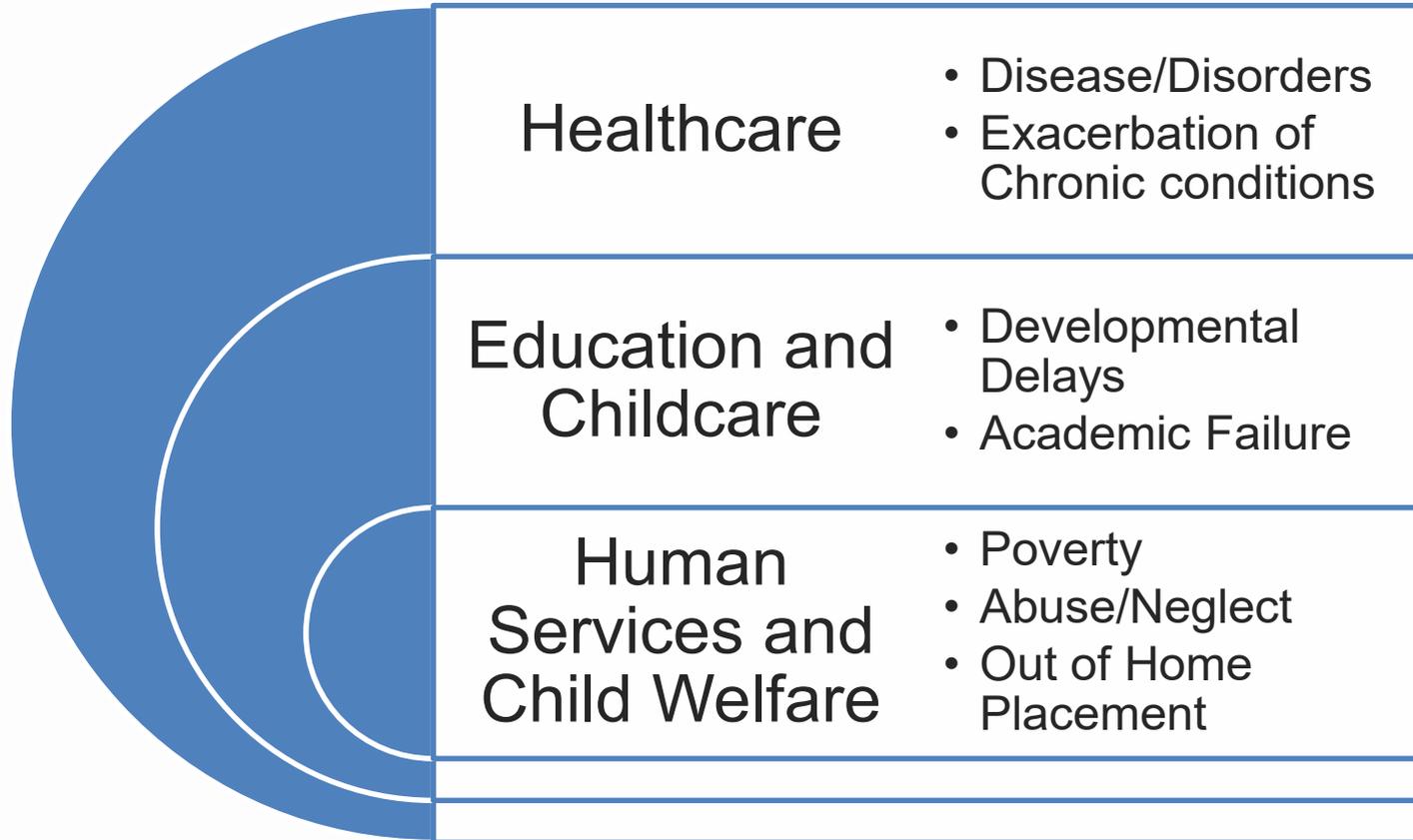
- Parent-Child Interaction Therapy (PCIT)
- Child Parent Psychotherapy (CPP)
- Relief Nursery
- Portland State U. Infant Toddler Mental Health Program
- Oregon Infant Mental Health Endorsement-Clinical (ORIMHA)

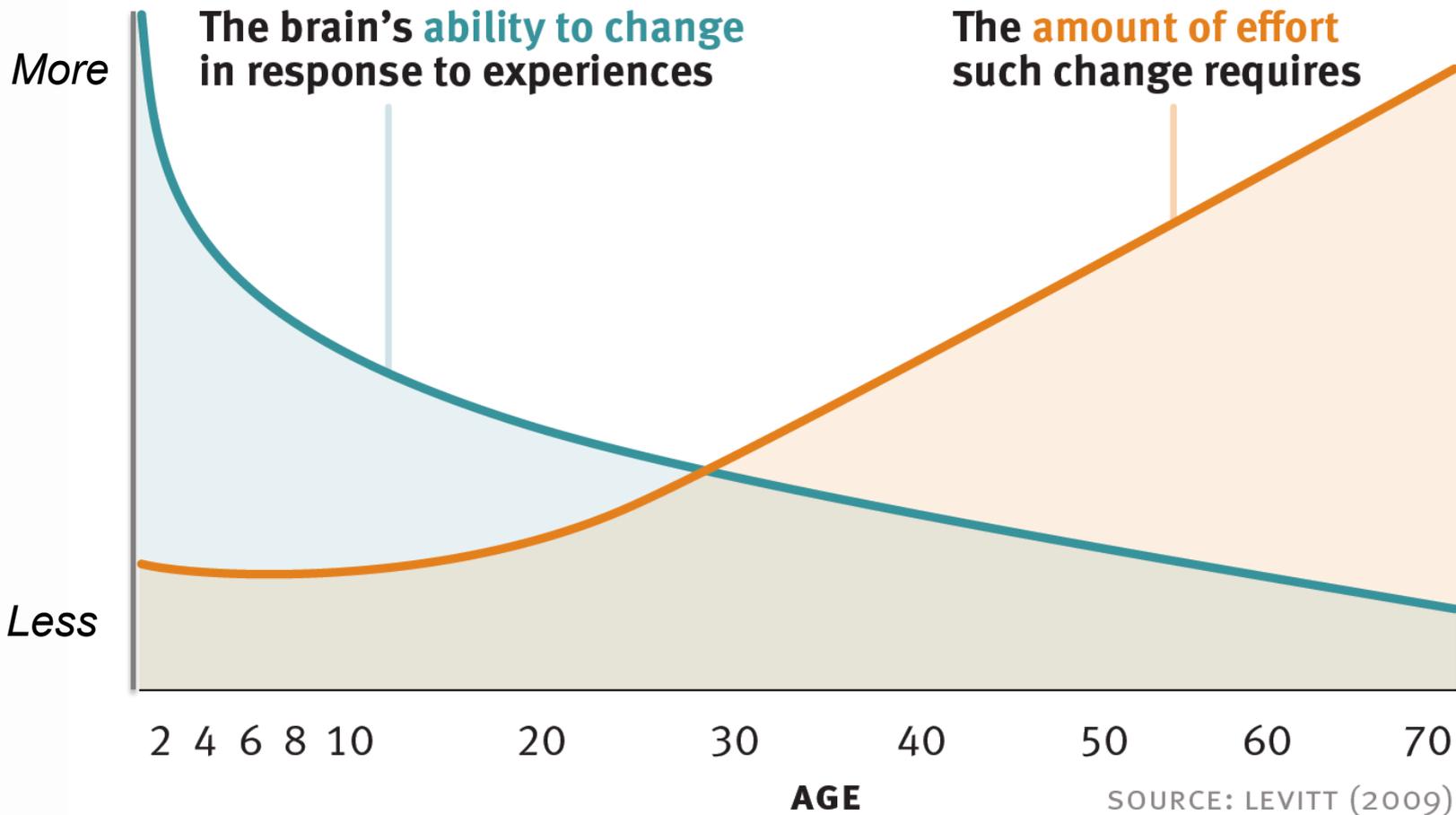
Definitions of Early Childhood



- General: Birth- 5 years
- Federal: 0-8 years
- Infant Mental Health: Prenatal- 3 years

Different Views of “Prevention”

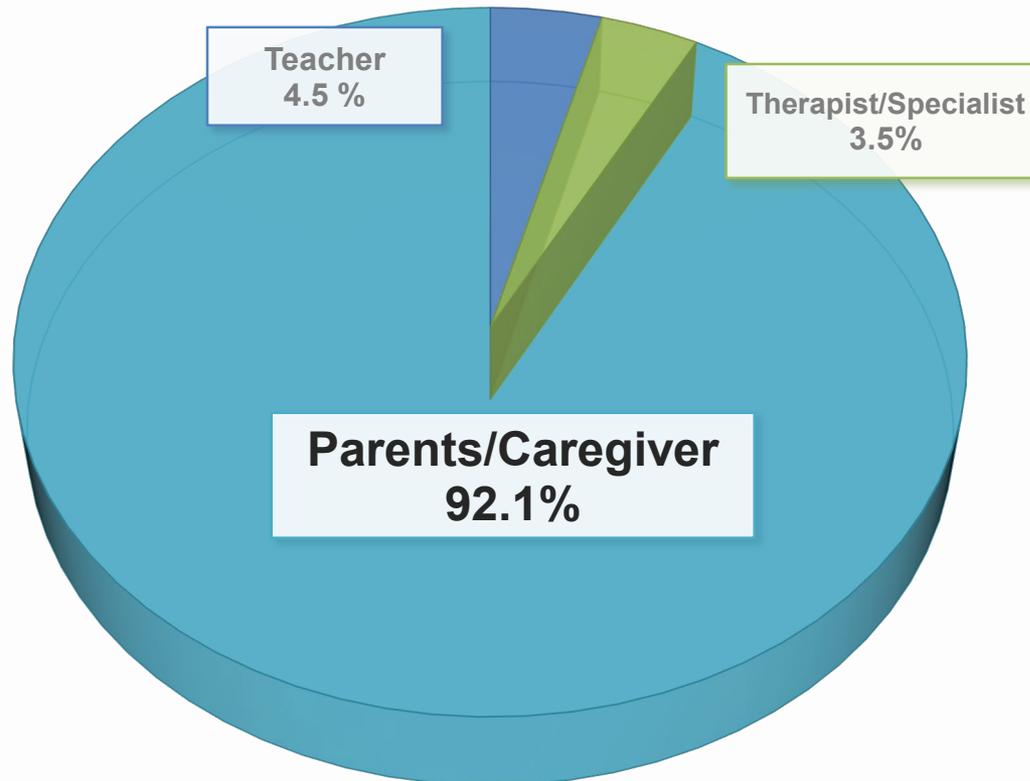




Center on the Developing Child  HARVARD UNIVERSITY

www.developingchild.harvard.edu

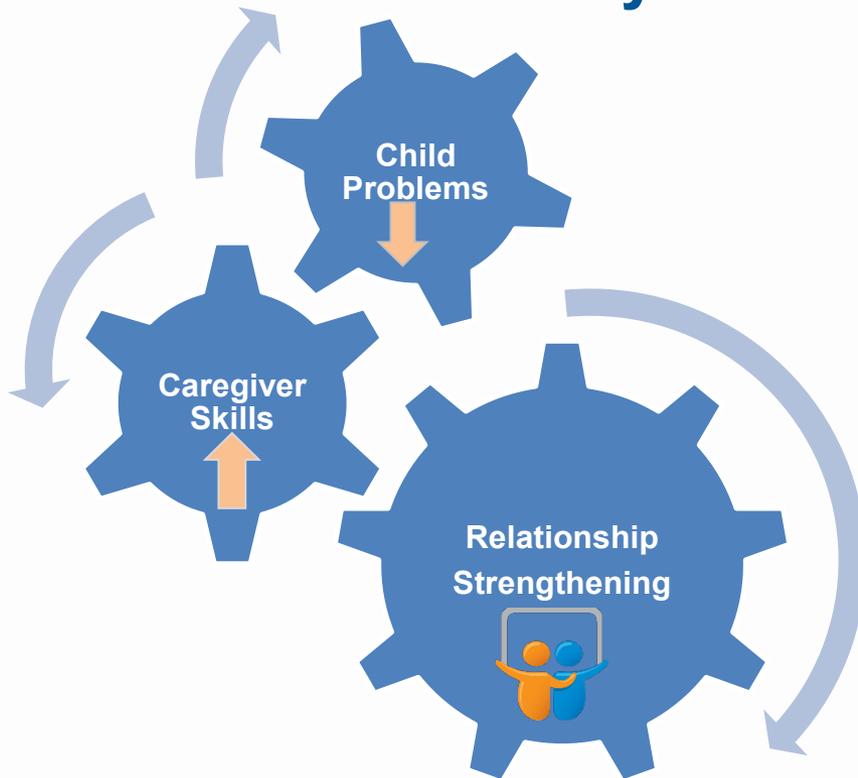
GREATEST IMPACT ON CHILD'S DEVELOPMENT



Gerald Mahoney, 2005

What does Early Childhood Mental Health look like?

Includes Caregiver, Child and Play!



Not Individual Therapy:





Dyadic Treatment

- Evidence supported therapeutic interventions
- Developmentally appropriate
- Actively engage one caregiver and one child during the intervention
- Reduce symptomology in one or both participants
- Improve the caregiver-child relationship

“Extensive literatures in economics, neuroscience and psychology all conclude that early childhood investments can benefit children, parents and society”

- Return of \$8.60 for every \$1 spent
- Lower criminal justice involvement
- Reduced remedial education

- Increased academic achievement
- Greater lifetime earnings
- Increased maternal employment

Economic Benefits of Early Childhood Investments; Executive Office of the President of the United States, 2014

Exhibit M. 19. Children and Youth Behavioral Health Services:

- a.** Contractor shall provide services to children, young adults and families that are sufficient in frequency, duration, location, and type that are convenient to the youth and family. Services should alleviate crisis while allowing for the development of natural supports, skill development, normative activities and therapeutic resolution to Behavioral Health disorders and environmental conditions that may impact the remediation of a Behavioral Health disorder.
- b.** Contractor shall ensure women with children, unpaid caregivers, families and children ages birth through five (5) years, receive immediate intake and assessment in accordance with timely access standards in OAR 410-141-3220.
- c.** Contractor shall maintain an intensive and flexible service continuum for children and youth who are at risk of placement disruption, school failure, criminal involvement, becoming Homeless or other undesirable outcomes due a Behavioral Health disorder.
- d.** Contractor shall utilize Evidence-Based Behavioral Health interventions for the Behavioral Health needs of Members who are children and youth.
- e.** Contractor shall ensure Members have access to Evidence-Based Dyadic Treatment and treatment that allows children to remain living with their primary parent or guardian.
- f.** Contractor shall ensure that children in the highest levels of care (subacute, residential or day treatment) continue Dyadic Treatment with their caregivers whenever possible, and have a full psychological evaluation and child psychiatric consultation.

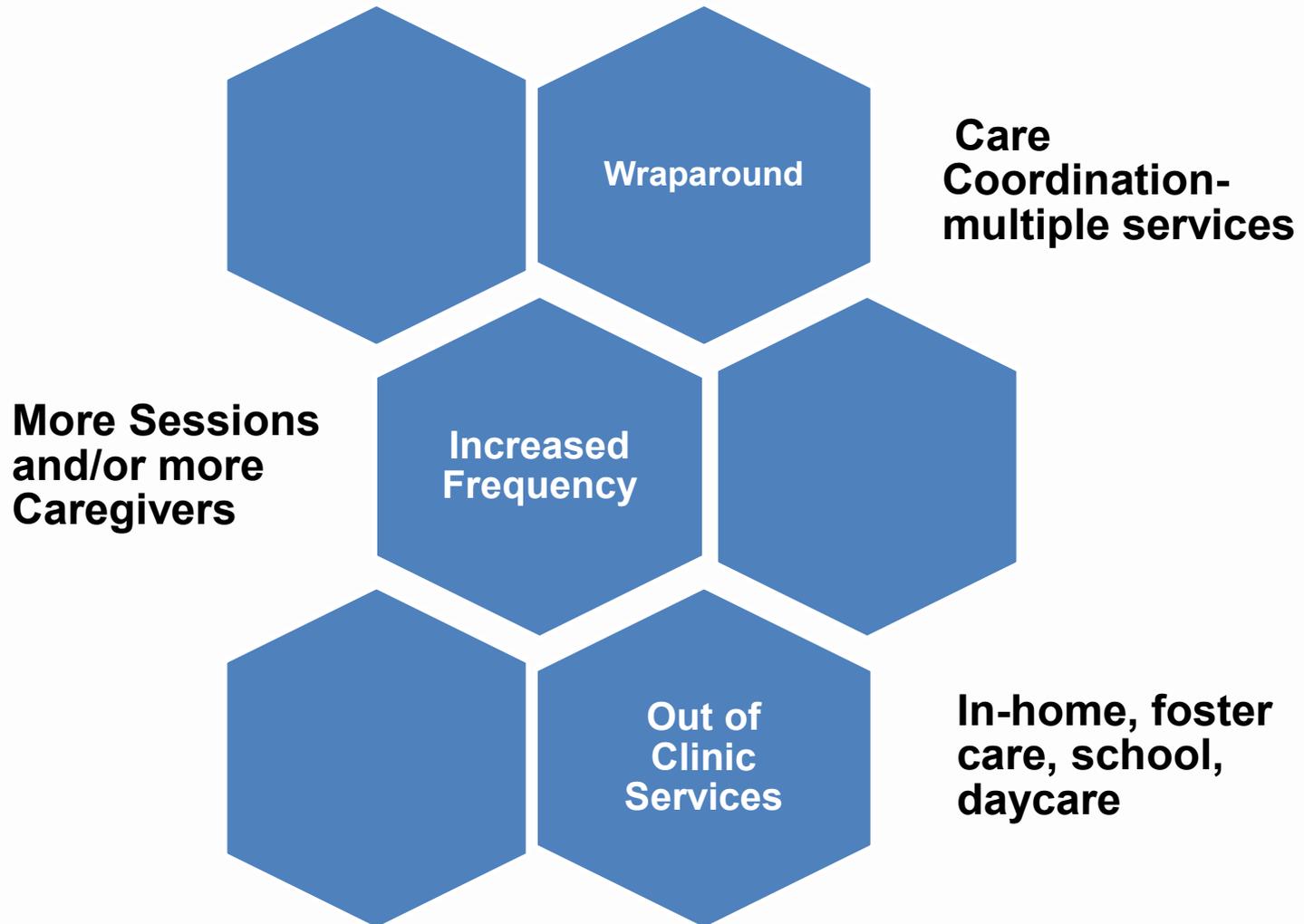
Brief Overview

CCO Early Childhood Behavioral Health Requirements

- Behavioral Health services are covered from birth through the lifetime. Maximum financial benefit amount for Behavioral Health services may not be established [regardless of age].
- Ensure access to Evidence-Based Dyadic Treatment
- Intensive outpatient level of care available for children 0-5 years with Adverse Childhood Experiences (ACEs) and high complexity
 - Multi-system involvement
 - 2 or more caregiver placements within past 6 months
 - Moderate to severe behavior challenges or at risk of losing current caregiver placement, school or daycare placement

Intensive Services for Early Childhood Mental Health examples:

not all inclusive list of possibilities



Intensive Outpatient Services

Client age 14 months



At Entry

- Severe neglect & physical abuse
- Other severe trauma
- Multiple physical illnesses & injuries
- Significant developmental delays
- Self harm & lack of social responsiveness

Services

- **Wrap Around Care Coordination**
 - Primary Care
 - Developmental Evaluation
 - Foster Care
 - Child Attorney & CASA
 - Dyadic Treatment 2x week
 - Support & Respite for Foster Family

What does “Ensure Access” Mean?

- Know the providers in your area which have EBP Dyadic Treatment
- Phone and intake staff are trained on referral for mental health assessment and EBP Dyadic Treatment
- Children 0-5 are not put on waitlists or lower levels of care based on age.
- Embed EBP Dyadic Treatment in natural settings where young children and their families exist
- Awareness by providers of all types that reimbursable, developmentally appropriate behavioral health services are available
- Engage national trainers as needed to ensure therapists are available to provide high fidelity EBP Dyadic Treatment
- Plan for sustainability and continuity

Oregon Early Childhood Diagnostic Crosswalk

Guidance Document

Bridging the Diagnostic Gap Between the Oregon Health and Developmental Disorders of Infancy and Early Childhood (OEDD) and the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and the International Statistical Classification of Diseases and Related Health Problems, Tenth Edition (ICD 10) to aid behavioral health providers with developmentally appropriate Oregon Health Plan reimbursable diagnoses.

NEW LOCATION:

<https://www.oregon.gov/oha/HSD/AMH/Pages/Child-Mental-Health.aspx>

Treatment

Best Practices-Examples

Parent Child
Interaction
Therapy

Child Parent
Psychotherapy

Generation
PMTO

Trauma
Focused CBT

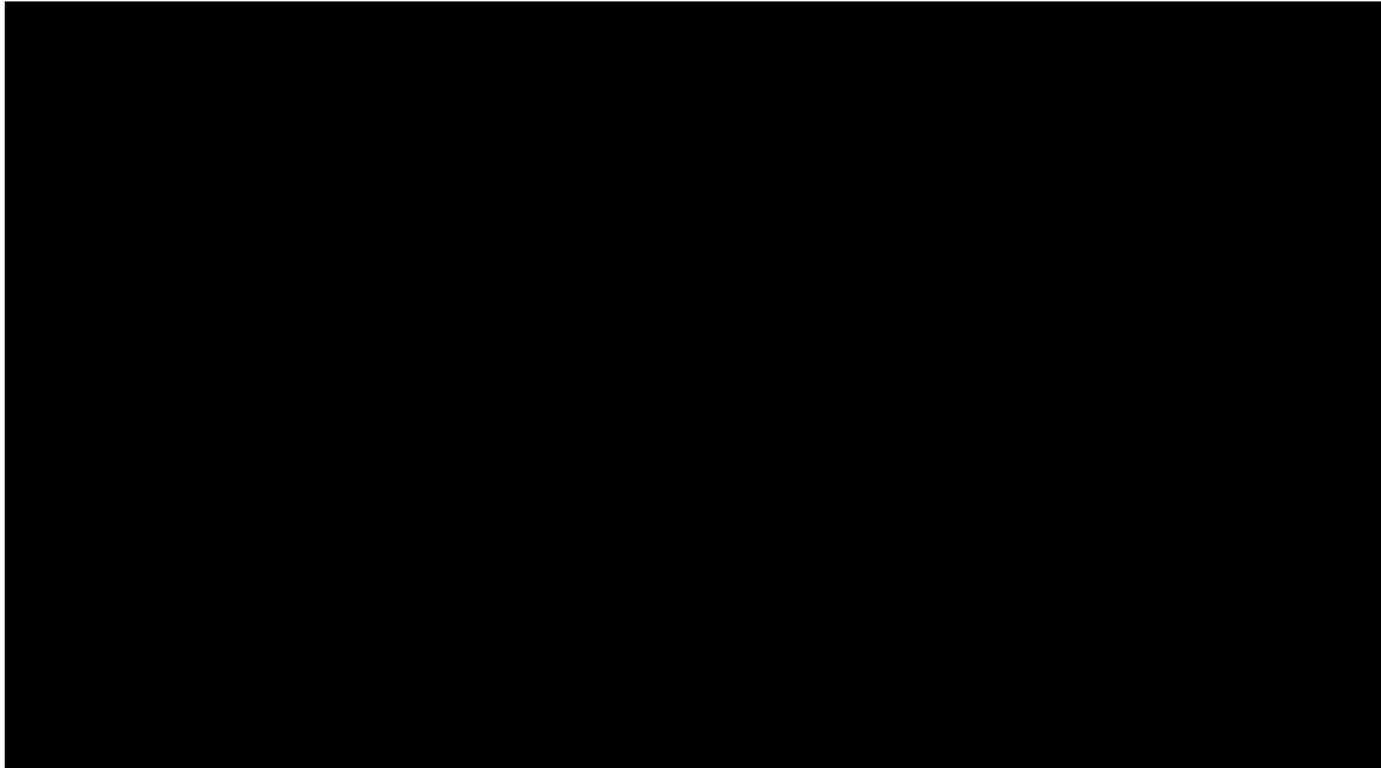
Attachment and
Biobehavioral
Catch-up

Other Non-Behavioral Health Early Childhood Social Emotional Development Supports/Interventions

- Home Visiting
- Early Intervention/Early Special Education
- Head Start/Early Head Start
- Other Preschools
- Relief Nurseries
- PAX Good Behavior Game
- Mental Health Consultation
- Vroom and Act Early
- High Quality Childcare
- Circle of Security
- Infant Massage Training



Sensitive Periods in Early Brain Development



The Human Early Learning Partnership, 2010

[Video link: https://www.youtube.com/watch?v=M89VFIk4D-s](https://www.youtube.com/watch?v=M89VFIk4D-s)

HEALTH SYSTEMS DIVISION

Child and Family Behavioral Health

Oregon ECMH Training Opportunities

- Oregon Infant Mental Health Endorsement (ORIMHA)
<http://www.oraimh.org/whats-new/trainings/>
- Parent Child Interaction Therapy (PCIT) – contact Jackson County Mental Health, Alejandra Moreno, MA, MS
MorenoAJ@jacksoncounty.org
- Child Parent Psychotherapy (CPP) – contact Debby Bassett,
debbybassett@gmail.com
- Infant Toddler Graduate Certificate Program, Portland State University
<https://www.pdx.edu/sped/itmh>

Other Resources

- Zero to Three has a wealth of resources <https://www.zerotothree.org/> and <https://www.zerotothree.org/resources/410-official-dc-0-5-training>
- DC:0–5 Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood <https://www.zerotothree.org/resources/2221-dc-0-5-manual-and-training>
- The Georgetown University Center for Child and Human Development- <https://gucchd.georgetown.edu/64271.html>
- Harvard Center on the Developing Child- <http://developingchild.harvard.edu/>
- Centers of Disease Control and Prevention (CDC) library of photos, videos and checklists for child developmental milestones from 2 months to 5 years. <https://www.cdc.gov/ncbddd/actearly/milestones>

Resources, cont.

- Handbook of Infant Mental Health, Third Edition edited by Charles Zeanah Jr., MD
- Child Trauma Academy, <http://www.childtraumaacademy.com>
- Child Trauma Academy, Neurosequential Model of Therapeutics Articles, <http://childtrauma.org/nmt-model/references/>
- Infant/Child Mental Health, Early Intervention, & Relationship-Based Therapies: A Neurorelational Framework for Interdisciplinary Practice by Connie Lillas and Janiece Turnbull (<http://the-nrf.com/>)

