



Olympic Educational Service District 114

105 National Avenue North, Bremerton, Washington 98312
(360) 478-6887 • 1-800-201-1300 • FAX (360) 405-5808



Mental Health Child Referral During COVID-19 Procedure

1302.45 Child mental health and social and emotional well-being.

(a) *Wellness promotion.* To support a program-wide culture that promotes children's mental health, social and emotional well-being, and overall health, a program must:

- (1) Provide supports for effective classroom management and positive learning environments; supportive teacher practices; and, strategies for supporting children with challenging behaviors and other social, emotional, and mental health concerns;
- (2) Secure mental health consultation services on a schedule of sufficient and consistent frequency to ensure a mental health consultant is available to partner with staff and families in a timely and effective manner;
- (3) Obtain parental consent for mental health consultation services at enrollment; and,
- (4) Build community partnerships to facilitate access to additional mental health resources and services, as needed.

(b) *Mental health consultants.* A program must ensure mental health consultants assist:

- (1) The program to implement strategies to identify and support children with mental health and social and emotional concerns;
- (2) Teachers, including family child care providers, to improve classroom management and teacher practices through strategies that include using classroom observations and consultations to address teacher and individual child needs and creating physical and cultural environments that promote positive mental health and social and emotional functioning;
- (3) Other staff, including home visitors, to meet children's mental health and social and emotional needs through strategies that include observation and consultation;
- (4) Staff to address prevalent child mental health concerns, including internalizing problems such as appearing withdrawn and externalizing problems such as challenging behaviors; and,
- (5) In helping both parents and staff to understand mental health and access mental health interventions, if needed.
- (6) In the implementation of the policies to limit suspension and prohibit expulsion as described in §[1302.17](#).

During COVID-19, Mental Health Consultation is completed through zoom meetings, phone calls, text messages, and email.

Staff Steps in the Referral Process

1. Discuss child concerns/behaviors with the family. Gather cultural considerations from the family to utilize with the child. Complete the Behavior Observation Form and any observations of the child. Document family conversation, observations, and the completed Behavior Observation Form in the Observation tab in ChildPlus. If staff member is able to observe during a classroom zoom or family zoom, note these observations as well.



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2. Email your coach within 48hrs of discussion with family, include CPID # so that additional information regarding step one, the child and family can be accessed.
3. If able, the coach will observe the child during a zoom within 1 week. Coach will document conversation and observations in child plus under the observation tab.
4. Coach will create a Social Emotional Care Plan with staff and family. The Social Emotional Care Plan will outline strengths, goals, and strategies to be implemented.
5. Guidance, strategies, and on-going communication of the plan's progress will be shared consistently and frequently with families by the direct service staff.
6. 2 weeks after the Social Emotional Care Plan is implemented, the coach will evaluate the progress of how the strategies are working. If necessary, the coach will complete another observation. Coach will document the progress in child plus under the observation tab.
7. The coach will coordinate with ECMHC to schedule a debrief.
8. If concerns continue and the strategies are not helping to make behavioral progress, direct service staff will talk with the family about a child referral to mental health services and will document in child plus.

Referral Criteria for Early Childhood Mental Health Consultant (ECMHC)

- Family and staff are concerned about the child's social and emotional health.
- Child is not making progress with the Social Emotional Care Plan and staff have implemented strategies with consistency.
- Child's behaviors and protective factors are worsening as evidenced by assessments, observations, incidence reports, and family report.
- Sudden change in child's behavior.
- Child and family have experienced a sudden loss or traumatic event.

9. Complete referral form. Upload to Mental Health Services tab as an attachment.
10. Document verbal authorization in ChildPlus under Mental Health Service Tab



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11. Create a transaction for Mental Health Referral in ChildPlus.
12. Email ECMHC (cc supervisor and program manager) with CPID #.
13. ECMHC will collaborate with direct service staff, coach and the family to review family, development, concerns and observations prior to meeting with family.

ECMHC Procedure for Mental Health Referrals:

1. ECMHC will engage with the family and staff, schedule an observation within 1 week, and complete a DECA-C assessment.
2. ECMHC will complete a Functional Assessment, observation, and will facilitate a family/staff collaboration meeting within 2 weeks.
3. Purpose of the family/staff collaboration meeting is to create the Social Emotional Collaboration Plan.
4. ECMHC will provide on-going support to staff/child/family through monitoring the plans progress, in addition to ensuring any family/child stabilization needs, family resources, and family referral coordination.
5. All reports, communication, and gathered information will be documented into ChildPlus.
6. Mental Health referral will be closed if the child, family, and staff no longer need support to stabilize behaviors and coordinate referrals.