
SUBSTITUTE HOUSE BILL 2456

State of Washington

59th Legislature

2006 Regular Session

By House Committee on Children & Family Services (originally sponsored by Representatives Roberts, Kagi, Moeller, Pettigrew, Green, Darneille, Morrell, Lantz, Dickerson, Upthegrove and Schual-Berke)

READ FIRST TIME 01/31/06.

1 AN ACT Relating to mental health consultation services for child
2 care programs; creating new sections; and providing an expiration date.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** The legislature finds that there is
5 compelling evidence demonstrating that infants and young children who
6 experience high-quality early care and learning programs are more self-
7 confident and have better language skills, a greater ability to
8 regulate their behavior, and more advanced cognitive developments.
9 These outcomes are inextricably linked to school readiness and a
10 child's overall success in school and beyond. The legislature finds
11 also that there has been an increase in the manifestation of
12 significant emotional and behavioral problems of children in preschool
13 and other early childhood settings. Growing numbers of young children
14 are being expelled from child-care settings because their behaviors
15 create additional responsibilities for caregivers who may not have
16 adequate support or training to appropriately manage the challenges
17 presented by such behaviors. The legislature finds further that
18 children's behavioral and mental health is critical to school readiness
19 and when left untreated, behavioral and mental health issues create the

1 potential of significant damage and life-long consequences. The
2 legislature finds that behavioral and mental health consultation in
3 child-care settings can provide information, education, and support for
4 caregivers, administrators, and parents to enable them to identify and
5 work more effectively with children presenting difficult behaviors or
6 other challenges. The legislature intends to promote the integration
7 of behavioral and mental health services into early care and education
8 settings as a means of early intervention to prevent more serious,
9 long-term consequences and to promote quality child care continuity and
10 school readiness for more children.

11 NEW SECTION. **Sec. 2.** (1) The child care mental health
12 consultation pilot program is established. The pilot program shall be
13 administered by the department of early learning or, if the cabinet-
14 level department of early learning is not established by the effective
15 date of this act, by the division of child care and early learning
16 within the department of social and health services. The pilot program
17 shall promote the integration of research-based and best practices for
18 infants and young children presenting behavioral concerns into the
19 child-care setting through a collaborative approach to supporting
20 children and their families.

21 (2) The pilot program shall consist of at least two communities
22 selected by the administering agency on the basis of need as determined
23 by:

24 (a) The relative availability or unavailability of comparable
25 services locally; and

26 (b) The risk factors in the community, including but not limited
27 to, elevated child-care expulsion rates, poverty, homelessness,
28 uninsured families or children, child abuse or neglect, parental mental
29 illness or chemical dependency, adolescent parents, community violence,
30 and limited support services.

31 (3) Funding shall be contracted to the local child-care resource
32 and referral network, public health department, or another community-
33 based organization with knowledge or expertise in child development and
34 child-care programs. Contracted agencies shall be responsible for:

35 (a) Coordinating with the community to develop a program model
36 consistent with the legislative intent in section 1 of this act and the
37 description of program structure in subsection (4) of this section;

1 (b) Hiring mental health consultants knowledgeable in infant and
2 early childhood development;

3 (c) Supervising the work of mental health consultants;

4 (d) Responding to requests from providers for consultation
5 services;

6 (e) Maintaining information required for evaluation of program
7 outcomes;

8 (f) Managing funds;

9 (g) Ensuring equitable access to services for all child-care
10 providers in the community; and

11 (h) Reporting to the administering agency which shall brief the
12 appropriate committees of the legislature.

13 (4) The pilot program shall provide a structure for mental health
14 consultants to:

15 (a) Consult with caregivers on-site or with case management teams
16 around solving specific problems with an individual child or family;

17 (b) Observe children in the child-care setting to assess
18 functioning relationships with peers and caregivers, and the
19 appropriateness of the setting and program for the child's needs;

20 (c) Meet on-site or at home with parents to gather and share
21 information and provide developmental guidance and referrals, including
22 but not limited to referrals to clinical services and other services
23 for families and children;

24 (d) Provide support and guidance to child-care staff to promote the
25 behavioral health and well-being of infants and young children in their
26 care through structured opportunities for training, team building,
27 communication, and problem solving that is person-centered and
28 strengths-based; and

29 (e) Coordinate with specialists in public health, infant and
30 toddler early intervention, infant mental health, and others involved
31 with the care and well-being of young children.

32 NEW SECTION. **Sec. 3.** Sections 1 and 2 of this act expire July 1,
33 2010.

34 NEW SECTION. **Sec. 4.** If specific funding for the purposes of this
35 act, referencing this act by bill or chapter number, is not provided by

1 June 30, 2006, in the omnibus appropriations act, this act is null and
2 void.

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