

Candelaria HB 766 Senate Testimony 3.25.21.pdf

Uploaded by: Candelaria, Margo

Position: FAV

March 25, 2021

Dear Senator Pinsky and Members of the Education, Health and Environmental Affairs Committee,

Margo Candelaria, Ph.D., Research Assistant Professor and the University of Maryland School of Social Work (UMB SSW), Institute for Innovation and Implementation (The Institute) urges the Senate Education, Health and Environmental Affairs Committee to issue **a favorable report on HB776 - State Department of Education – Infant and Early Childhood Mental Health Consultation Project – Study and Report**, sponsored by Delegate Eric Ebersole.

I am writing to share my favorable support for HB776 which will establish a full study and gap analysis of Maryland's Infant and Early Childhood Consultation Program (Consultation). Consultation is an evidence-informed intervention designed to build the capacity of early childhood professionals' ability to nurture social and emotional development in infants and young children, by working with their adult caregivers to best support social emotional development and address social emotional concerns.

Consultation has been shown to successfully: Support children's social and emotional development¹; address challenging behaviors in early learning and home environments¹; improve classroom climate and child behaviors²; and reduce preschool suspensions and expulsions.²

History of Infant and Early Childhood Mental Health Consultation in Maryland

I currently serve as the lead evaluator for Maryland's Consultation program under a contract between MSDE and the Institute at UMB SSW. The Institute has been working with MSDE since the inception of the Consultation program beginning in 2002. At that time, UMB partnered with Georgetown Center for Child and Human Development, MSDE and BHA on a pilot study of two programs in Baltimore City and Eastern Shore. Positive outcomes from that study led to securing statewide funding beginning in 2006 for an Infant and Early Childhood Mental Health Consultation Program operated through MSDE that included 12 programs covering all 24 jurisdictions. We at the Institute at UMB SSW have maintained active and ongoing collaboration with MSDE since then, increasing the evaluation capacity over the years to include quarterly reports, an annual legislative brief, and other deliverables. The Institute also offers ongoing implementation support including workforce development training and coaching in various domains. As can be seen in the most recent legislative brief³, in Maryland there are significantly improved positive classroom and child outcomes with teacher reported behaviors and classroom observations demonstrating statistically significant improved scores after receiving Consultation. **However, currently the system is only able to serve less than 600 children per year which does not fully reflect the full number of children who would benefit from services.**

Current Capacity in Maryland

¹Cohen. E. & Kaufmann, R.K. (200, Rev. Ed). Early Childhood Mental Health Consultation. DHHS Pub. Rockville MD: Center for Mental Health Services, SAMHSA

² Perry, D. F. Allen. M. O., Brennan. E., M. & Bradley. J. R (2010) The Evidence Mental Health Consultation in Early Childhood Settings: Addressing Children's Behavioral Outcomes. Early Education & Development 21(6), 79:5-824 doi:10.1060/1040928090347:5444

³Latta, L., Afkinich, J., Kane, A., Wasserman, K., & Candelaria, M. (2021). Maryland IECMHC Legislative Brief for FY2020.

Consultation have been level funded for over a decade. Although there currently is statewide coverage, it is insufficient and clearly does not reach the need of all children and early childhood program providers. As an example, there are only two consultants funded to cover all of Baltimore City. However, there are approximately 41,600 children ages 0 to 4 living in Baltimore⁴, and 19,927 child care slots in Baltimore city including home, center, and head start sites⁵. Clearly, two consultants is not nearly sufficient coverage to work with children and providers in Baltimore City. This discrepancy is similar across the state.

It is clear there are gaps in coverage, but the full picture of where gaps exist, where needs are highest, and the cost to fully cover services is not yet known. With more resources, the Maryland Consultation program would have greater capacity to intervene earlier, helping providers create more supportive environments, prevent more intense behavioral concerns, and more successfully keep children in schools. At current levels, programs often are not available for more promotion and prevention activities at the program and classroom level, and thus are typically called in when a specific child is in crisis. Although the data for the last three years in Maryland indicate only 3-5% of children who engage in Consultation are suspended or expelled from child care¹⁶⁷, this does not capture the children who are suspended or expelled before accessing Consultation services. In fact, anecdotal evidence from IECMHC providers indicates that children are often removed from or have left their child care setting while awaiting Consultation services. Currently, we do not know rates of suspension and expulsion among providers who do not have access to or engage in IECMHC.

Current Maryland Practice Standards

Despite level funding, Maryland has worked hard to offer high quality services. From 2018-2020 The Institute partnered with MSDE Division of Early Childhood and Division of Early Intervention and Special Intervention in a collaboration with the National Infant and Early Childhood Mental Health Consultation Center of Excellence to update the state Consultation standards, supporting the integration of updated national standards for the for Maryland's Consultation Program. **The Maryland Practice Standards and Recommendations were published in the Spring of 2020 and are in the process of being implemented by programs⁸. A primary goal of the standards was to more specifically delineate workforce requirements and competencies.** Although national standards recommend Consultation providers be licensed clinicians^{9,10}, Maryland's IECMHC workforce are primarily not licensed providers, with some programs engaging licensed providers. It should be noted that two programs that routinely engage licensed providers do so through use of non-MSDE funding including local early childhood funding in Montgomery County and the the use of a SAMHSA System of Care grant in Southern Maryland (Calvert,

⁴ Baltimore City Early Childhood Care & Education Landscape Analysis. April 2020

⁵ Maryland Family Network, LOCATE: Child Care, November 2019 and Baltimore City Public Schools, Pre-K Classrooms, 2019-2020.

⁶ Wasserman, K. & Candelaria, M. (2019). FY19 Maryland IECMHC Legislative Brief. [MD IECMHC Leg Brief 2019](#)

⁷ Andujar, P., Fry, J., Wasserman, K. & Candelaria, M. (2018). FY18 Maryland IECMHC Legislative brief. . <https://create.piktochart.com/output/35764480-md-iecmhc-project-1-25-2019>

⁸ Sweeney Wasserman, K., Candelaria, M., Hanna, T., & Guerra, J. (2020). Maryland Infant & Early Childhood Mental Health Support Services: Practice Standards and Recommendations. [MSDE IECMHSSP 2020 Standards](#)

⁹ Center of Excellence for Infant and Early Childhood Mental Health Consultation (2017). Competencies. Retrieved from: https://www.samhsa.gov/sites/default/files/programs_campaigns/IECMHC/infant-early-child-mental-health-consult-competencies.pdf.

¹⁰ Center of Excellence for Infant and Early Childhood Mental Health Consultation (2020). Consultation Competencies. Retrieved from: <http://www.iecmhc.org/documents/IECMHC-competencies.pdf>.

Charles, and St. Mary's Counties). **At the current funding level it is not possible to hire highly qualified staff and a recent survey of program directors indicated it can be difficult to find qualified providers, with employment vacancies lasting 3-12 months¹¹.** A recent analysis by our team at the Institute found that Consultation can be effective for children and classrooms regardless of licensure status, but there is a significantly greater positive impact when the provider is licensed¹². Based on these data, the standards including a tiered system that requires programs have at least one licensed provider on staff to work with non-licensed providers and to see more complicated cases as needed. In addition, the new Maryland Consultation standards require additional competencies such as engaging in routine reflective supervision – a key pillar for the practice -, use of the state's established National Pyramid Model training and coaching practices, and having deep knowledge and understanding of equity. The Institute at UMB SSW is working with MSDE to engage in these workforce development efforts.

Overall, Infant and Early Childhood Mental Health Consultation is an important beneficial program with demonstrated outcomes in Maryland to retain children within early education settings and reduce suspension and expulsion, which we know has significantly detrimental outcomes for not only that child, but the family at large. However, at current funding levels the program is insufficiently serving young children in the state and has limited capacity to secure a highly qualified workforce. For these reasons, The University of Maryland School of Social Work, Institute for Innovation and Implementation **urges a favorable committee report on HB776, and expresses appreciation for your attention to this matter.** Thank you for your time and consideration.

Sincerely,

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11 Fry, J., Fehringer, A., Wasserman, K., & Candelaria, M. (2019). Maryland IECMHC Quarterly Report 2019-2020 Q1. [Maryland IECMHC Quarterly Report July to September 2020](#)

12 Candelaria, M., Afkinich, J., Sweeney Wasserman, K., Endy, K., & Hanna, T. (2021). Early Childhood Mental Health Consultation Outcomes by Consultants' Licensure Status
Manuscript draft January 2021. [MSDE IECMHC Licensure Outcomes draft Jan 2021](#)

Abilities Network Project ACT HB776 Senate testimo

Uploaded by: Horvath, Morgan

Position: FAV



SEEING ABILITIES NOT DISABILITIES.

Testimony Concerning HB 776

“State Department of Education - Infant and Early Childhood Mental Health Consultation Project - Study and Report”

Submitted to the Senate Education, Health and Environmental Affairs
Committee

March 22, 2021

Position: Favorable

Abilities Network is a 501(c)(3) non-profit organization that assists individuals with disabilities in Maryland to achieve their personal goals and reach their maximum potential. Project ACT has been a leading support in the Maryland early learning community for 23 years. We support HB 776.

The Child Resource Center of Baltimore/Harford/Cecil Counties at Abilities Network/Project All Children Together (ACT) provides Infant and Early Childhood Mental Health Consultation (IECMHC) services to Baltimore, Harford and Cecil Counties.

Of the children whose caregivers receive IECMH services from Project ACT, **approximately 92% are retained in care**. This service provides invaluable support that prevents suspension and expulsion, keeping parents working and their children learning. *“[The consultant] has been hugely helpful to our family. She has supported our child - acted as an advocate for our family and gone above and beyond,”* according to one Baltimore County Parent.

A multi-disciplinary model is key to our success. Project ACT utilizes a multi-disciplinary team that includes social workers, special educators, behaviorists, and early childhood educators. Referrals are often made for children who are reacting to developmentally inappropriate practices, who have unidentified development delays, or who have experienced trauma. Approximately 20% of children who receive IECMHC services have an IFSP or IEP upon referral, but receive no special education support services in the child care setting. With a multi-disciplinary team of professionals, we are able to leverage our expertise to support this wide variety of needs. The 2020 Maryland IECMHC Project Standards from MSDE have been revised to align with national standards, increasing the required staff qualifications to include a licensed clinician, and adding additional requirements for ongoing staff support. This is a valuable addition to the service model. However, a sufficient increase in funding to achieve these goals did not accompany the FY21 grants.

Current funding serves only .2% of the childcare population in our jurisdictions, when data shows that 1-5% of the population may be in need of support. The National Pyramid Model estimates that between 1-5% of children in care will require intensive individual support through services such as IECMHC. Project ACT is funded to provide this service to approximately .2% of the



SEEING ABILITIES NOT DISABILITIES.

Project ACT is only able to accept an average of 62% of referrals, and funds are typically exhausted by the third quarter. Over the past five years, Project ACT has been able to serve only 62% of the children who were referred for IECMHC services on average and demand continues to rise. From FY17-FY19, referrals increased by 23%. Most years, Project ACT is unable to accept new referrals by the end of the third quarter of the grant term. Regrettably, many children placed on a waiting list for this service are expelled from their childcare programs.

Wait time for service can be as long as 8 weeks. Wait time for a consultant to become available can reach from 4-8 weeks during heavy referral periods. During this time, children may be suspended or expelled from their programs, and teachers reach burn out points from lack of support. *“At the start of the school year I had a class that had a huge variety of difficulties. I lost control of my classroom. However with step by step help from [the IECMHC consultant] I was able to gain control again. [The consultant] not only helped with [the identified child] but also helped with all other children,”* said one Harford County Early Childhood Provider.

This bill offers an opportunity for the State to examine the feasibility of expanding IECMHC services and providing these vital services to more young children. We respectfully urge the Committee’s favorable consideration.

A handwritten signature in black ink, appearing to read "Morgan Durand Horvath".

Morgan Durand Horvath, M.Ed.
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EHEA HB 776.DD Council.Support.pdf

Uploaded by: London, Rachel

Position: FAV



**Maryland Developmental
Disabilities Council**

EMPOWERMENT • OPPORTUNITY • INCLUSION

Senate Education, Health, Environmental Affairs Committee

*HB 776: State Department of Education – Infant and Early Childhood Mental Health Consultation
Project – Study and Report*

March 25, 2021

Position: **Support**

The Maryland Developmental Disabilities Council’s (Council) mission is to advance the inclusion of people with developmental disabilities in all facets of community life by eliminating barriers, creating opportunities, empowering people, and promoting innovation. Increasing access to early care and education for Maryland’s children is critical for their development. This is particularly true for young children with disabilities who need more access and opportunity to learn and play alongside their peers without disabilities. The majority of child care providers want to support children with disabilities but need assistance, including training and coaching, to do so. Therefore, **the Council supports efforts that build that capacity of early care and education providers.**

Research demonstrates that classroom management, positive behavior supports, and other evidence-based interventions are effective in changing behavior – this is exactly what the Infant and Early Childhood Mental Health Consultation (IECMHC) does. The IECMHC is an evidence-informed intervention designed to build the capacity of early childhood professionals’ ability to nurture social and emotional development in infants and young children. This is particularly important now, during, and after the COVID-19 pandemic.

When early care and education providers are empowered with the skills and knowledge they need, children are better supported to play, learn, and succeed together.

Contact: Rachel London, Executive Director: RLondon@md-council.org

MDAEYC HB 776 Testimony.pdf

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Position: FAV



Maryland Association for the Education of Young Children

Testimony in Support of HB 776
“State Department of Education – Infant and Early Childhood Mental Health
Consultation Project – Study and Report”
Submitted to the Education, Health and Environmental Affairs Committee
March 23, 2021

Position: Favorable

The Maryland Association for the Education of Young Children (MDAEYC) supports HB 776, which would allow MSDE to conduct a thorough review and study the Infant and Early Childhood Mental Health (IECMH) Consultation Project.

MDAEYC is a professional association of 1,500 early childhood educators, allied professionals, and families. We promote high-quality early learning for all children, birth through age 8, by connecting early childhood education practice, policy, and research. We advance a diverse, dynamic early childhood profession and support all who care for, educate, and work on behalf of young children. Many of our members are educators working in child care centers or family child care homes.

Science tells us that the foundations of sound mental health are built early in life. Early experiences—including children’s relationships with parents, caregivers, relatives, teachers, and peers—interact with genes to shape the architecture of the developing brain. Disruptions in this developmental process can impair a child’s capacities for learning and relating to others, with lifelong implications.¹ The IECMH Consultation project works to bring awareness to this important issue and provide support to young children and their caregivers.

We have all experienced an extended period of crisis this past year of the COVID-19 pandemic, with emotional and mental stress at an all time high. Now more than ever greater attention needs to be paid to the mental health of our youngest children in these trying times and the ways in which we can better support healthy infant and early childhood mental development. As we begin to welcome families and children back into our care we must be as intentional about addressing their mental well-being as we are their physical safety. This is why we strongly urge you to support a strong beginning for all Maryland’s children by supporting HB 776, which would allow MSDE

¹ National Scientific Council on the Developing Child. (2012). *Establishing a level foundation for life: Mental health begins in early childhood*. Harvard University, Center on the Developing Child.



Maryland Association for the Education of Young Children

to further investigate and expand upon existing investments in infant and early childhood mental health.

If you have any questions, please contact: Christina Lopez, President, at christina.lopez@mdaeyc.org or 301-751-1626.

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Position: FAV



Testimony Concerning HB 776
**“State Department of Education - Infant and Early Childhood Mental Health
Consultation Project - Study and Report”**
Submitted to the Senate Education, Health, & Environmental Affairs Committee
March 25, 2021

Position: Favorable

Maryland Family Network (MFN) strongly supports HB 776. This legislation would require the Maryland State Department of Education to evaluate the need for infant and early childhood mental health care and support services and the capacity of the existing Infant and Early Childhood Mental Health Consultation Project (IECMHCP) to meet that need.

MFN has worked since 1945 to improve the availability and quality of child care and early childhood education as well as other supports for children and families in Maryland. We have been active in state and federal debates on child care policy and are strongly committed to ensuring that children, along with their parents, have access to high-quality, affordable programs and educational opportunities.

Infant and Early Childhood Mental Health Consultation is a prevention-based service. It pairs a mental health consultant and/or a behavioral specialist with early education professionals who work with infants and young children (and their families) in the different settings where they learn and grow, including child care, preschool, and their homes. Maryland has embraced a multi-disciplinary early intervention strategy that has demonstrated outstanding success in preventing expulsions from preschool settings. IECMHCP has also been shown to improve classroom climate, improve teacher confidence, and decrease challenging behavior in children.

Preventive measures and early treatment delivered through IECMHCP have proven to be highly successful – and cost effective. The keys are starting early with services and supports and, whenever possible, providing them within the community, in a natural environment such as the child’s home or child care setting. Maryland’s tiered model of service delivery is aligned with the nationally vetted IECMH consultant competencies and qualifications developed by SAMHSA’s Center of Excellence for Infant & Early Childhood Mental Health Consultation.

In many cases, adjustments to the early education program itself provide resolutions. Sometimes children require individual interventions or referrals. Some forms of treatment, not surprisingly, are vastly more expensive. But by following the principles of prevention and early intervention, IECMHCP works to ensure that problems that can be dealt with early don’t intensify. The benefits to be gained from community-based mental health services for young children – in both human and fiscal terms – are enormous.

HB 776 offers an opportunity for the State to examine the feasibility of expanding IECMHCP and providing these vital services to more early education programs and more young children. For this reason, MFN respectfully urges the Committee’s favorable consideration.



HB 776 Mental Health Testimony EHEA March 23 Ebers

Uploaded by: Peusch, Christina

Position: FAV



**Caring For Maryland's Most
Important Natural Resource¹...**

Maryland State Child Care Association

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The Maryland State Child Care Association (MSCCA) is a non-profit, statewide, professional association incorporated in 1984 to promote the growth and development of child care and learning centers in Maryland. MSCCA has over 4500 members and our members provide care and education for Maryland children and support working families. We believe children are our most important natural resources and work hard to advocate for children, families and for professionalism within the early childhood community.

Testimony Concerning HB 776:

State Board of Education-Infant and Early Childhood Mental Health and Consultation Project Study and Report

Submitted to Education Health and Environmental Affairs

March 23, 2021

Position: Support

MSCCA supports HB 776 and applauds the efforts of Delegate Ebersole in sponsoring this legislation to require MSDE to examine the ECMHCP support services, evaluate critical services and provide a report to best address whether and at what level the Early Childhood Mental Health needs are being met in our State.

There is no question this initiative has been a resounding success over the years and has made a significant difference in the lives of children, families and partners caring for and educating young children. The critical demand for mental health and consultation services has continued to rise, even without the impact of a global pandemic, yet resources have not kept pace.

I am on the Advisory Board of the Abilities Network/Project Act, an excellent organization providing some of these important services within the child care/early childhood education programs. They incur waitlists regularly and this legislation will help identify areas in the State where services are insufficient.

HB 776 also includes the alignment and integration possibilities for services and provide analysis of costs to ensure and expand mental health support services that are life changing when addressed early.

It is crucial now to move forward with HB 776 as standards have been updated and we will continue to realize the impact of the pandemic on children and families.

MSCCA urges a favorable committee report.

HB 776 FAV_ACY_MRock.pdf

Uploaded by: Rock, Melissa

Position: FAV



To: The Honorable Chair, Senator Paul G. Pinsky, and members of the Education, Health, and Environmental Affairs Committee

From: Melissa S. Rock, Birth to Three Strategic Initiative Director

Re.: **HB 776: State Department of Education - Infant and Early Childhood Mental Health Consultation Project - Study and Report**

Date: March 25, 2021

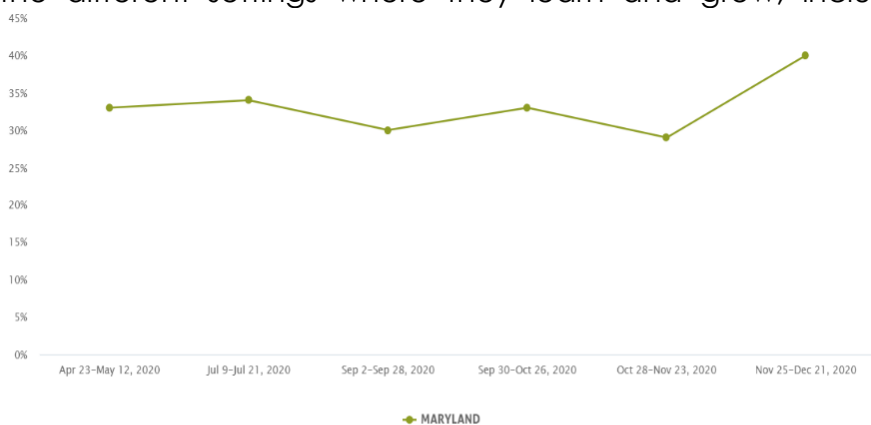
Position: **SUPPORT**

As Jack P. Shonkoff, M.D., Director of the Center on the Developing Child at Harvard University explains “Mental health can’t be separated out from cognitive development and language development and...social competence and they all have their roots early on in a very sturdy or a weak foundation....Most potential mental health problems will not become mental health problems if we respond to them early.”¹ Early childhood mental health consultation (ECMHC) is a key tool we have for responding early to potential mental health problems in young children and ensuring they do not become serious problems.

The Maryland State Department of Education’s (MSDE’s) Division of Early Childhood and Division of Early Intervention and Special Education Services’ “Maryland Infant & Early Childhood Mental Health Support Services Program: *Practice Standards & Recommendations*” dated 2020 explains that “[Infant and Early Childhood Mental Health Consultation] IECMHC is a prevention-based service that pairs a mental health consultant and/or a behavioral specialist with early childhood education professionals who work with infants and young children, and their families in the different settings where they learn and grow, including childcare, preschool, and their

homes.”² When young children are exhibiting behavior problems, a childcare provider can call Maryland’s IECMC program and a consultant will assess whether the child needs services or if changes at the childcare setting will solve the behavior issue.

The COVID-19 pandemic makes Maryland’s IECMH program more important than ever. As the graph to the left indicates, almost half of adults surveyed in Maryland indicated that the children in their households were experiencing anxiety.³ Routine is particularly



Adults Living In Households With Children Who Felt Nervous, Anxious Or On Edge For More Than Half Of The Days Or Nearly Every Day In The Past Week (Percent)

National KIDS COUNT
 KIDS COUNT Data Center: datacenter.kidscount.org
 A project of the Annie E. Casey Foundation

¹ <https://developingchild.harvard.edu/resources/inbrief-early-childhood-mental-health-video/>

² Sweeney Wasserman, K., Candelaria, M., Hanna, T., & Guerra, J. (2020). Maryland Infant & Early Childhood Mental Health Support Services: Practice Standards and Recommendations at p. 5.

³ <https://datacenter.kidscount.org/data/line/10893-adults-living-in-households-with-children-who-felt-nervous->

important for young children's social emotional health, and thousands of children across Maryland have had their childcare providers change. As of June 30, 2019, there were 6,917 licensed childcare providers across Maryland (5,360 home-based childcare providers and 1,557 center-based providers).⁴ However, as of May 8th, 2020, only 55% (or 3,778) of those childcare providers were caring for children.⁵ **HB 776 will help ensure that Maryland's IECMHC project meets the needs of Maryland's children and families.**

HB 776's inclusion of an assessment of the staffing qualifications will help ensure that Maryland's IECMHC project will have the best possible outcomes for Maryland's children and families. MSDE's "Maryland Infant & Early Childhood Mental Health Support Services Program: Practice Standards & Recommendations" cited above states that "Outcomes from a 2019 analyses of data from the ECHMC Project indicate that **outcomes at the child and classroom levels in Early Childhood Education (ECE) settings are stronger when consultation is provided by licensed mental health professionals** (Candelaria, et al., 2019)."⁶ (Emphasis added.) In its 2020 Legislative Session, Virginia passed a joint resolution to study ECMHC, and they determined that their ECMH consultants would all "hold a master's degree in social work, psychology, school counseling, or related field" and "have at least 2-3 years of experience working as a mental health professional with young children and families."⁷ **ACY urges this committee to issue a favorable report on HB 776 to ensure that Maryland's Early Childhood Mental Health Consultation Project is as robust as it needs to be to meet the social emotional needs of our youngest Marylanders.**

[anxious-or-on-edge-for-more-than-half-of-the-days-or-nearly-every-day-in-the-past-week?loc=22&loct=2#2/22/false/2047,2042,2034,2033,2032,2028,2027,2002,1997,1996/asc/any/21180](https://www.marylandfamilynetwork.org/sites/default/files/2020-03/2020_MFN_Demographics.pdf)

⁴ https://www.marylandfamilynetwork.org/sites/default/files/2020-03/2020_MFN_Demographics.pdf at p. 5.

⁵ <https://www.marylandfamilynetwork.org/sites/default/files/2020-09/2020%20MFN%20Caring%20During%20Covid%20%28bg%29%201.3%20Pages%5B1%5D.pdf> at p. 3.

⁶ Sweeney Wasserman, K., Candelaria, M., Hanna, T., & Guerra, J. (2020). Maryland Infant & Early Childhood Mental Health Support Services: Practice Standards and Recommendations at p. 4.

⁷ "House Joint Resolution No. 51: Feasibility Study of Developing an Early Childhood Mental Health Consultation Program: Report Prepared for the Governor and General Assembly," December 18, 2020 at p. 29.