

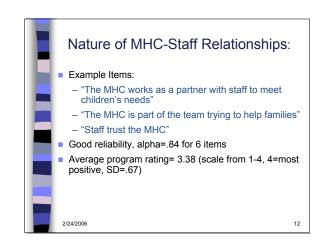
MHC Activities: Two Types of Service (continued) Individual Level (Child- or Family-Centered) Consultation includes: Assessment and screening of individual children Direct service to specific children or families to ameliorate specific issues or concerns Working with staff to develop IEPs Making referrals for family or staff Goal of this type of consultation is to develop a plan to address the functioning difficulties of a particular child (and/or family) in home and/or or early childhood setting

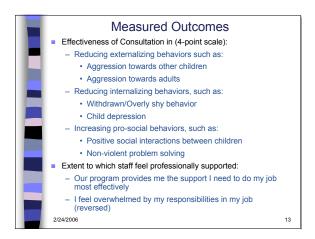
Table 1. Variability in Consultant Activities (Aggregate Program Reports)

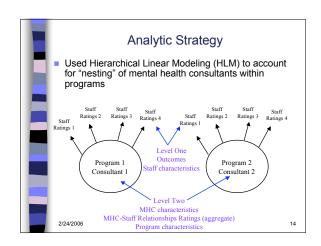
MHC Activities	Rarely/never	Monthly or more
Program-Level Consultation		
General classroom observations	14%	28%
Attends management team	30%	36%
Attends team meetings with staff	15%	40%
Provides formal training to staff	27%	15%
Provides staff wellness support	33%	30%
Individual Level Consultation		
Individual screening	26%	25%
Individual assessment	23%	32%
Does IEP planning	28%	31%
Makes referrals	15%	38%
Provides direct therapeutic service	28%	39%

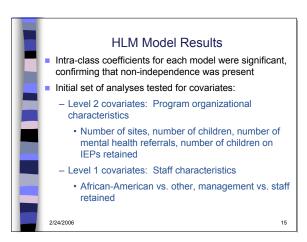
More than Half of the Programs	Fewer Programs Had More
Had Lower Levels of Consultation	Extensive Consultation
 57% (31) reported less than 1 hour	 26% (13) report more than 2 ho
of consultation per child, per year	of consultation per child, per ye
■ 37% (20) reported less than ½ hour per child	
71% (35) reported less than a half-	 29% (14) reported 1 half-time
time mental health consultant	mental health consultant or more
	 16% (8) reported 1 full-time consultant or more
 79% relied on external, contracted consultants 	 21% had salaried, on-staff consultants

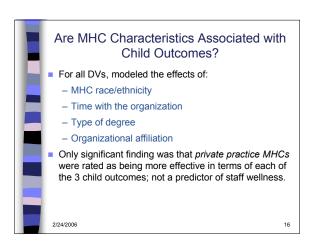
Consultant Characteristics Most MHCs were white (71%), female (59%) and well-educated (58% Master's degree, 37% Ph.D.). Programs serving minority populations were somewhat more likely to have a minority MHC. Programs varied little in the percentage of overall budget spent on mental health consultation (2%-3%). MHCs varied in their organizational affiliations: - 21% employed by Head Start - 32% community non-profits - 20% private practice - 13% government agency (e.g., Health Department) - 6% school systems

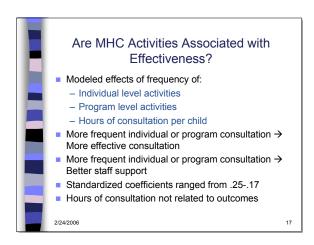


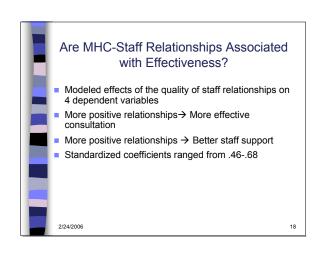


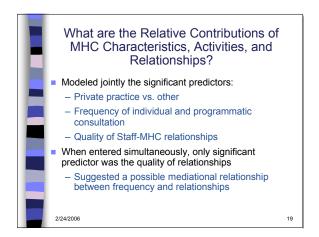


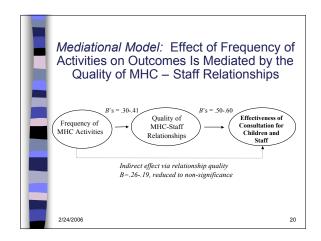












Implications for Mental Health Consultation Models Frequency of activities is important only inasmuch as it contributes to positive relationships Qualitative research suggests that some models involving relatively limited hours of consultation still effective in building positive staff-MHC relationships Consultant background characteristics are less important than ability to build positive relationships with staff Consultation is associated with both child outcomes and staff wellness, at least as reported by staff

