

A PCCY Behavioral Health Guide for Philadelphia

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First Hospital Foundation



***Behavioral Health and
Developmental Resources:***
**A Guide for Early
Childhood Educators**

**For Young Children (Birth to Age 5)
Enrolled in Medical Assistance or CHIP**

November 2016

PCCY public
citizens for
children + youth

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Public Citizens for Children and Youth

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PURPOSE OF THIS GUIDE

This purpose of this guide is to provide information to Philadelphia early childhood educators on how to help parents and caregivers obtain services for children ages 0 to 5 with behavioral health concerns and/or developmental delays.

Early childhood educators are on the front line when it comes to recognizing developmental, emotional and behavioral health problems in young children. The value of this role cannot be overstated. One in six children age three and over has a delay or disability and are not identified until they start school. Children who do not receive interventions when they need it often feel frustrated or hopeless and can fall behind. Children who receive appropriate help are more likely to build good relationships, be better prepared for school and grow up healthy and strong.

The challenge for the child care provider is to help parents/caregivers better understand the needs of their children and to assist them in finding supports when necessary. Public Citizens for Children and Youth (PCCY) designed this guide to assist with this task.

WHO IS PCCY?

PCCY is non-profit organization dedicated to improving the lives and life chances of children in southeast Pennsylvania through thoughtful and informed advocacy. PCCY regularly publishes behavioral health resource guides and provides training on how to access care. PCCY also operates the Child Health Watch Helpline which provides free, multi-lingual assistance over the phone to parents/caregivers to apply for health insurance, resolve insurance problems and provide referrals for mental, dental, vision and other health care services. We also advise child care and health care providers and other professionals on health insurance and access challenges.

- **Behavioral Health Trainings** – Contact Colleen McCauley at 215-563-5848 x33 or colleenm@pccy.org.
- **Child Health Watch Helpline & Insurance Trainings** – Contact Deborah Zubow at 215-563-5848 x17 or dzubow@pccy.org.

IMPORTANT PHONE NUMBERS

Department of Behavioral Health and Intellectual disAbility Services – 215-685-4646

Early Intervention intake for children 0 – 3 years old.

Child Link – 215-731-2420

Provides Early Intervention services for children 0 – 3 years old.

Elwyn SEEDS – 215-222-8054 (Special Education for Early Developmental Success). Early Intervention intake and services for children 3 – 5 years old.

Community Behavioral Health – 1-888-545-2600

Behavioral Health services for children with Medical Assistance.

Public Citizens for Children and Youth – 215-563-5848 x17

Non-profit advocacy organization to assist with applying for health insurance and referrals to health care providers.



HOW CAN I TELL IF A CHILD MIGHT NEED HELP?

If you are concerned that a child is not doing things that most children of the same age are doing, or if a child's behavior seems extreme or has changed suddenly, you should discuss this with the child's parent/care-giver. Some questions to ask when you are considering if a child may need help:

- Does the child have frequent temper tantrums?
- Is the child unusually quiet or withdrawn?
- Does the child often play very aggressively (biting, hitting or kicking)?
- Does the child intentionally destroy objects such as furniture, walls or toys?
- Have you observed a dramatic change in the child's personality?
- Does the child show no delight or pleasure?
- Does the child engage in or imitate inappropriate sexual behavior?
- Does the child frequently soil himself/herself, even after being toilet trained?
- Does the child make serious threats to others?
- Does the child have frequent nightmares?
- Does the child bully younger children?
- Does the child have a poor appetite or overeat?
- Does the child daydream and then seem to be upset?
- Does the child appear to lag behind other children on developmental skills? Does he/she engage with others? Maintain eye contact? Laugh? Seek attention?
- Has the child's doctor or other health professional expressed concern about the child's development?
- Was the child born under three pounds?
- Did the child spend time in the neonatal unit at birth?
- Has the child been affected by illegal substance abuse or alcohol?
- Has the child been involved with the child welfare system?
- Has the child experienced unstable housing or homelessness?

WHAT TYPES OF SERVICES ARE AVAILABLE AND HOW DOES A CHILD QUALIFY FOR THEM?

Two main types of services are available.

Early Intervention is for children with developmental delays and/or disabilities. Separate Early Intervention eligibility criteria and services exist for children birth to 3 years and ages 3 – 5. Early intervention services are free to eligible children and involve services such as speech/language therapy, occupational and physical therapy and vision/hearing services.

Behavioral Health services are for children with behavioral health diagnoses. Only a handful of behavioral health agencies serve children under three years old, but most agencies provide services to children over three – services such as family, individual and play therapy. Public health insurance, either Medical Assistance or the Children's Health Insurance Program (CHIP), pay for most Behavioral Health services. Private or employer-based insurance coverage may or may not cover behavioral health services; a family will need to check with their plan. Some agencies provide services to children who are uninsured or whose insurance does not cover behavioral health services. See page 17 for more information.

Some children need and qualify for both Early Intervention and Behavioral Health services.

Birth to 3 Early Intervention

Infants and toddlers (less than 2 years and 10 months old) qualify for Early Intervention if they meet one of the following conditions:

A significant delay in one or more areas of development, which are:

- Adaptive Behavior – how children eat, dress and take care of themselves
- Cognitive – how children think and learn



- Communication – how children use signs, sounds and words to express needs and understand what others are saying
- Physical - how children hear, see, taste, smell and touch things in their world; walk, run and use their hands
- Social-Emotional - how children take in and understand things that happen in the world around them, show emotions and develop relationships

OR

- A specialist determines that there is a delay even though it doesn't show up on the assessments (called informed clinical opinion)

OR

- Known physical or mental condition which have a high probability for developmental delays (such as Down Syndrome).

Children with any one of the six risk factors below must be referred for an Early Intervention evaluation. Early Intervention will periodically assess or “track” these children until age three. More information is on page 9 and 11.

- Birth weight under 3.3 lbs.
- Cared for in neonatal intensive care units (NICU)
- Elevated blood lead level
- Substantiated abuse or neglect
- Born to chemically dependent mother
- Experiencing homelessness

3 to 5 Years Old Early Intervention

Children age three to five qualify for Early Intervention if they meet the following criteria:

- A significant delay in one or more areas of development compared to other children of the same age;

OR

- Any physical or mental disability as defined under the Individuals with Disabilities Education Act (IDEA) such as: autism/pervasive developmental disorder; serious emotional disturbance; neurological impairment; deafness/hearing loss; specific learning disability; mental retardation; multiple disabilities; other health impairment; physical disability; speech impairment or blindness/visual impairment;

AND

- The child is in need of special education and related services

Behavioral Health/Mental Health

A child who has a behavioral health challenge that fits the criteria of a behavioral health diagnosis is eligible for behavioral health services. Some of the most common diagnoses for children 0 – 5 include anxiety, attention deficit disorder, depression and trauma.



HOW ARE EARLY INTERVENTION SERVICES INITIATED?

The steps to start services are below. Sometimes the agencies providing services don't follow these steps. Sometimes parents don't follow through because they are discouraged or for other reasons. Parents must advocate for themselves to make sure their children get what they need. Parents and professionals who work with parents, such as child care providers, who know the steps are in a much better position to get the services because they know how the process should work and can speak up when a barrier appears.

For Children Birth to 3:

Services are coordinated by the Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS). DBHIDS contracts with ChildLink to evaluate children and coordinate their care. Early Intervention services are free for eligible children and are provided by a network of agencies that contract with DBHIDS.

- **Step 1:** The parent/caregiver calls DBHIDS at 215-685-4646, where a member of the intake and registration staff will collect some initial information about the child and register him or her. If a child has any of the six conditions that require Early Intervention tracking listed on page 7, inform the registration staff at this time.
- **Step 2:** Within 7- 10 business days, a Service Coordinator from Child Link will call the family to discuss their concerns, describe the Early Intervention process and schedule a home visit to evaluate the child. Child Link's number is 215-731-2420.
- **Step 3:** At the home visit the Service Coordinator will:
 - Conduct an Ages and Stages Questionnaire (ASQ) if one has not already been done by the child's primary care or child care provider and ask additional questions to help identify routines that are challenging for the child and/or family. If a social or emotional delay is suspected, the screener might also use the ASQ:SE, an additional Ages & Stages Questionnaire that focuses on the child's social and emotional development. Parents and caregivers can request that an ASQ:SE be used in addition to the general ASQ.

- Schedule a Multidisciplinary Evaluation, usually in the child's home, but it can be completed at another location of the family's choice where the child and family is most comfortable.

- **Step 4:** The Multidisciplinary Evaluation (MDE) home visit will involve the child's parents/caregivers, other individuals whom the parents choose, the Service Coordinator and one or two developmental specialists in fields such as physical or speech therapy. This group is the MDE team.
- **Step 5:** If the child meets the eligibility criteria (see page 6), with the parents' permission, the MDE team will create an Individualized Family Service Plan (IFSP). This plan is based on the child's strengths and unique needs and states the family's concerns and priorities. The plan includes outcomes that are important to the child and the family and will detail the services and supports that will assist the family to reach those outcomes. The team will then determine the best provider to help the child and family reach the IFSP goals.
- **Step 6:** The Service Coordinator will set up the services the child needs based on the plan. All of the services in the IFSP should begin within fourteen days of the IFSP's completion – which should also be within 60 days of when the parent/caregiver first contacted Early Intervention. The Service Coordinator will call the family to confirm that services have started and the family is satisfied.

Ongoing Services: The Service Coordinator will make monthly contact with the family to check on the status of services. Quarterly review meetings are held with the child's family and service delivery team to monitor progress and review the status of the IFSP outcomes. Each therapist is required to submit a contact note after each session (to the parent and their agency) and the team develops a progress report at each quarterly review meeting. If the service provider and/or family notes significant progress, the child can be re-assessed to determine if Early Intervention services are still needed. At the 12 month quarterly review meeting, a full MDE will be done to assess the child's developmental status and continued eligibility.

Transition to 3 - 5 Early Intervention: If the child is still receiving services at age two and a half, the Service Coordinator will schedule a transition meeting to see if the child is eligible for 3 - 5 Early Intervention. If eligible, service transition should be seamless. If there is a significant delay in service transition, families may be entitled to compensatory services.

Services for children with high-risk conditions: Children with the conditions listed below must be referred to Early Intervention. If an evaluation determines they are not eligible for services, Early Intervention will “track” them or provide regular developmental screenings until age three.

- Birth weight under 3.3 lbs.
- Cared for in neonatal intensive care units (NICU)
- Elevated blood lead level
- Substantiated abuse or neglect
- Born to chemically dependent mother
- Experiencing homelessness

A Service Coordinator will contact the family every three months to check-in on the child’s development and will send the family a developmental screen to complete and send back. If the screening indicates a possible delay, another evaluation will be performed.

For Children 3 to 5/School Age: In order for children ages three to school-age to receive Early Intervention services, they must have a disability and/or developmental delay that impacts their ability to learn. Services are free and are coordinated by Elwyn SEEDs.

- **Step 1:** The parent/caregiver calls Elwyn at 215-222-8054 to speak to an Intake Service Coordinator who will ask for information regarding the child’s medical history, birth history, developmental milestones and concerns about the child’s development. If a child is receiving birth to 3 Early Intervention, the current Service Coordinator will schedule a transition meeting.

OR

- A child care or health care provider can initiate a referral by completing Elwyn’s Community Referral Form available on their website at <https://www.elwyn.org/services/children-3-21/seeds-preschool-early-intervention-services/>. The parent/caregiver needs to sign the form, and once Elwyn receives it they will contact the parent/caregiver to start intake.

- **Step 2:** Elwyn will mail the family a set of papers including a **Permission to Evaluate form** within 10 days of speaking with the Intake Service Coordinator - or they will be provided at the transition meeting. **The parent/caregiver must sign and send this form back to Elwyn to move to the next step.**

- **Step 3:** Once Elwyn has received the signed Permission to Evaluate form, a Multidisciplinary Evaluation (MDE) scheduler will contact the family to schedule the child’s evaluation at Elwyn’s office, but arrangements can be made to do it at another location such as a classroom. The MDE meeting will involve the child’s parents/caregivers, other individuals whom the parents choose and a developmental specialist. This group is the MDE team. The evaluation includes a hearing screening. The findings of the MDE are written up in a report called the Evaluation Report which is mailed to the parent/caregiver within 60 days of the parent/caregiver signing the Permission to Evaluate form.
- **Step 4:** If the child is eligible, an MDE scheduler will call the family to schedule a meeting to develop an Individualized Education Program (IEP) within 30 days of completing the Evaluation Report.
- **Step 5:** Services indicated on the IEP are required to start within 14 days of the parent’s approval or on the child’s 3rd birthday. Each child is assigned to a Service Coordinator who will help the family obtain services. The location of services is determined by the IEP team. It is possible for children to receive services at home or at childcare programs if the IEP team determines it is appropriate.

Transition to Kindergarten: The Service Coordinator must convene a transition meeting to discuss service options by the end of February before kindergarten begins. The Philadelphia School District is responsible for special education services and will conduct a new Multidisciplinary Evaluation and IEP.

Services for a child not eligible for 3 to 5 Early Intervention: The Service Coordinator can provide information on additional resources in the community that may help the family. Families can request a re-evaluation at any time.

WHAT CAN I DO IF I HAVE A PROBLEM WITH EARLY INTERVENTION?



Parents/caregivers have the right to disagree with any decision made by Early Intervention providers or the MDE team. See page 18 for a list of organizations providing resources to help families navigate Early Intervention systems.

Parents/caregivers should first address their questions or concerns with their child's Service Coordinator and/or the Coordinator's supervisor – someone who is familiar with the family and likely to help produce a more timely resolution.

If this first step is not successful, parents/caregivers can request help in several ways from state agencies that operate Early Intervention services.

- Share a verbal or written complaint with the Office of Child Development and Early Learning at (717) 346-9320.
- To improve communication about a child's service plan, the IFSP or IEP, request an outside/neutral person help facilitate an IFSP/IEP meeting. Parents/caregivers can obtain a form to set up this meeting from their Service Coordinator or from the Office for Dispute Resolution (ODR) at 1-800-222-3353 or <http://odr-pa.org/>
- For a more informal way to help resolve disagreements about types and frequency of services, for example, and where services take place, ask for a mediation meeting conducted by an outside person or mediator who does not make decisions. Contact the Office for Dispute Resolution at 1(800) 222-3353; TTY: 1 (800) 654-5984.
- For a more formal way to resolve disagreements which can involve having witnesses testify, request a due process hearing by asking your Service Coordinator to arrange it or contact the Office for Dispute Resolution at 1(800) 222-3353; TTY: 1 (800) 654-5984.

HOW ARE BEHAVIORAL HEALTH SERVICES INITIATED?

Behavioral health services are typically provided and paid for by a child's health insurance. If a child has Medical Assistance, Community Behavioral Health oversees behavioral health services for all of the Medical Assistance health plans. For a child with CHIP, families need to call their CHIP health plan to arrange services.

If a child does not have health insurance, free services are available at some agencies. See page 17 for more information.

- **Step 1:** The parent/caregiver needs to find a behavioral health provider to schedule an initial visit/intake appointment. Providers can be found a number of ways:
 - Talk with the child's health care provider about who he/she recommends.
 - Talk to friends, co-workers or family members for referrals.
 - Find providers using the list of agencies in this guide that accept Medical Assistance or see kids for free on page 20. Many of these agencies also accept CHIP and private coverage as well.
 - Call the child's health insurance plan. If a child has Medical Assistance, call Community Behavioral Health (CBH) at 1-888-545-2600. If a child has CHIP or private insurance, the parent/caregiver needs to call the 1-800 number on the back of the child's insurance card.
- **Step 2:** The parent/caregiver calls the behavioral health provider to schedule an intake appointment. Encourage parents/caregivers to ask the following questions: Are they accepting new patients? Do they accept the child's health insurance? Do they have experience treating children like your child? When is the next available appointment?
 - Behavioral health agencies that accept Medical Assistance are required to offer intake appointments within 1 hour if it is an emergency, within 24 hours if it is urgent and within 7 days for a routine assessment.

- Despite these requirements, some agencies cannot offer a child a routine assessment in 7 days, but don't be discouraged. The child might be able to be seen more quickly at another agency. The parent/caregiver can report the delay to Community Behavioral Health (CBH) at 1-888-545-2600, and CBH will assist the family to secure an appointment within the required timeframe.
 - For children who have the Children's Health Insurance Program (CHIP) or a private insurance company, the allowable wait times vary.
 - A child with Medical Assistance or CHIP does not need a referral from their health care provider to receive services.
- **Step 3:** During the intake visit the behavioral health care provider will ask questions about the parent/caregiver's concerns and interact with the child to assess his/her status. If the child has a diagnosable condition, the provider will approve and arrange treatment. Depending on the child's age and needs, treatment could involve individual, family or play therapy, wraparound services and/or medication. More information about wraparound services are on the next page.

Each therapist works a bit differently. Most will want to talk with the caregiver and the child first to understand what the problems are that concern the family. Together with the therapist the family will set goals for the therapy. It will take multiple appointments to see improvement on most problems. In each session, the family might talk about the behavior each week, talk about what strategies seem to have worked and which ones did not and talk about their feelings about the behavior.

WHAT IS WRAPAROUND?

Wraparound services are special home or school-based intensive support services that focus on children's individual emotional, developmental and educational needs. These services are only covered by Medical Assistance, not CHIP or private coverage. Services must be prescribed by a psychiatrist or licensed psychologist at the child's behavioral health agency.



Services may include:

- A Mobile Therapist who provides therapy to children in their own home. They help children and families cope with issues such as loss, developmental delays or disabilities, anger management, parenting, and behavior modification.
- A Behavior Specialist who works with the child and the family to develop a plan for re-shaping the child's behavior. The behavior specialist observes the child's behavior in the child's own setting identifying the child's strengths and develops a treatment plan with the parent/caregiver.
- A Therapeutic Support Staff (TSS) who may work with a child and parent in the home or child care center to provide encouragement to the child as well as feedback about how the child's behavior affects others.

If wraparound services are recommended for a child insured through CHIP or private health insurance or for a child who is uninsured, the child may be eligible for Medical Assistance. Contact PCCY at 215-563-5848 x17 to ask about applying for Medical Assistance.

WHERE TO GO FOR BEHAVIORAL HEALTH SERVICES

Name	Location	Ages	Phone/Web	Services & Languages Spoken
11th Street Family Health Services	850 N. 11th St., 19123	4+	215-769-1100	I, F, GP, SA, GR, P, PT
Abbottsford Falls Family Practice and Counseling	4700 Wissahickon Ave, Suite 118, Building D, 19144;	3+	215-843-2580	I, F, SA, GR, P, PT English/Spanish
CATCH	1417 Oregon Ave., 19145	5+	215-218-9499	I, F, GP, SA, GR, P, W, C, PT English
Center for Family Relationships	7901 Bustleton Ave., 19152	4+	215-537-5367	F, SA, GP, P, PT English
Children's Crisis Treatment Center	417 N. 8th St. Suite 402, 19123	2.5+	215-496-0584 215-496-0707	I, F, GP, SA, GR, W, C, PT English/Spanish
Community Council	4900 Wyalusing Ave., 19131	5+	267-295-8850 (215) 473-7033	I, F, SA, GP, P, W, C, PT English
Elwyn Falls Outpatient Center	3300 Henry Ave., 19129	5+	215-254-2043	I, F, P, W English
Elwyn Outpatient Behavioral Health	4040 Market St., 19104	5+	215-895-5500	I, F, P English
Intercommunity Action, Inc (Interac)	6122 Ridge Ave., 19128	3-4	215-487-1330	F, SA, GR, P, W, C, PT English
Intercultural Family Services, Inc	2317 S. 23rd St., 19104	5+	215-468-4673	I, F, GP, SA, GR, P, W, C, PT English/ Spanish/Chinese/ Cambodian
JFK Community MH/MR Center	112 N. Broad St., 19102	3+	215-568-0860	I, F, SA, GR, P, W, C, PT English
JFK Community MH/MR Center	2742 North 5th St., 19133	3+	215-634-7060	I, F, SA, GR, P, W, C, PT English/Spanish
NHS, Human Services	265 E. Lehigh Ave., 19125	3+	215-427-1500 215-206-5400	I, F, SA, GR, P, W, C, PT English/Spanish

WHERE TO GO FOR BEHAVIORAL HEALTH SERVICES

Name	Location	Ages	Phone/Web	Services & Languages Spoken
Northeast Community Center for MH/MR	7226 Castor Ave., 19149	3+	215-742-7810 215-831-2863	I, F, GP, SA, GR, P, PT English
Northeast Treatment Center	493 N. 5th St. Suite D, 19123	3+	215-408-4913	I, F, GP, SA, GR, P, W, C, PT English/Spanish
Nueva Vida	112 E. Allegheny Ave., 19134	3+	215-291-1250	I, F, GP, SA, GR, P, PT English/Spanish
Nueva Vida	3169 N. 5th St., 19133	3+	215-426-9680	I, F, GP, SA, GR, P, PT English/Spanish
Nueva Vida	616W. Lehigh Ave., 19133	3+	215-229-8857	I, F, GP, SA, GR, P, PT English/Spanish
theVillage	657 Chester Ave. 19142	2+	215-730-2240	I, F, GP, SA, GR, P, PT English/Spanish
The Health Annex	6120 B Woodland Ave., 2nd Fl, 19143	6+	215-727-4721	I, F, GP, SA, GR, P, C, PT English

Note: Agencies in bold provide services to any Philadelphia resident with or without insurance.

Counseling Services Codes

I = Individual
F = Family
GP = Group
SA = Sexual Abuse

GR = Grief Counseling
P = Psychiatric
W = Wraparound
C = Community Based
PT = Play Therapy

Because things change so quickly and agencies may move or change phone numbers, if you try to contact an agency and find out that the information in this guide is outdated, please call us at 215-563-5848 x17 so we can try to connect you with the services that you need.

WHAT CAN I DO IF I HAVE A PROBLEM WITH BEHAVIORAL HEALTH SERVICES?

Parents/caregivers should first address their questions or concerns with their child's therapist or therapist's supervisor – someone who is familiar with the family and likely to help produce a more timely resolution. If parents/caregivers don't like their child's behavioral health provider, they can always change. They can ask to see a different therapist at the agency or find a new agency altogether.

If the child has Medical Assistance, parents/caregivers can contact Community Behavioral Health to file a complaint by calling 1-888-545-2600 or mailing: CBH, 7TH Floor, 801 Market Street, Philadelphia, PA 19107. ATTN: Quality Management.

I HAVE AN UNINSURED CHILD IN MY PROGRAM, WHAT CAN I DO?

Almost every child in Pennsylvania is eligible for Medical Assistance or CHIP. Call PCCY at (215) 563-5848 x17, for help applying for insurance for children for free and in any language. Parents/caregivers can also go to their neighborhood County Assistance Office (welfare office) and apply in person or apply online at www.compass.state.pa.us.

The only children who do not qualify for Medical Assistance or CHIP are children who are undocumented. Children and adults who do not have insurance can get treatment at one of the Community Behavioral Health Centers in Philadelphia. These centers will treat any county resident for free or very low cost (depending on the family's income). See pages 20-21 for a listing. If a child is denied services due to lack of insurance the family should contact the Department of Behavioral Health at 215-685-5400. The family should have the name of the person denying them an appointment and the date the call was made.

If a child is undocumented and experiencing an emergency medical condition, the child may be eligible for Emergency Medical Assistance (EMA). Contact the Pennsylvania Health Law Project at 800-274-3258 for more information and assistance.

A CHILD'S PRIVATE INSURANCE DOESN'T COVER BEHAVIORAL HEALTH SERVICES. WHAT CAN I DO?

Even if a child has insurance, sometimes it does not cover all of the necessary behavioral health services. If this is the case, there is a good chance the child will be eligible for Medical Assistance. To find out more, call PCCY at (215) 563-5848 x17.

ADDITIONAL RESOURCES FOR PARENTS & CAREGIVERS

ARC Philadelphia 215-229-4550 www.arcphiladelphia.org
Provides advocacy to support parents/caregivers through the Early Intervention process and resolve problems.

Education Law Center 215-238-6970 www.elc-pa.org/
Provides advocacy for children with disabilities and published a user-friendly guide for inclusive early education in English and Spanish at http://www.elc-pa.org/wp-content/uploads/2012/08/ELC_EarlyLearning_Guide_2ndedition_2012.pdf

Parents Involved Network (PIN) 267-507-3860 www.mhasp.org
PIN is a project of the Mental Health Association of Southeastern PA that assists parents and caregivers of children with emotional and behavioral challenges.

Elwyn Parent Partnership Program 215-222-4181 www.elwyn.org
Offers peer support by and for parents and caregivers for children served by Elwyn SEEDS.

Philadelphia Interagency Coordinating Council 215-731-2464 www.philadelphiaicc.org - Brings together families and service providers to share information, work together and ensure the availability of quality Early Intervention services.

Transition to Kindergarten: A Planning Guide for Parents download at <https://www.elwyn.org/services/children-3-21/seeds-preschool-early-intervention-services/> - A 23-page guide from Elwyn and the Philadelphia School District with information families need to know during the year before kindergarten.

RESOURCES FOR EARLY CHILDHOOD EDUCATORS

Southeast Regional Key Early Childhood Mental Health Consultant
215-219-8967. Go to <http://www.seregionalkey.org/site/index.php/services/early-childhood-mental-health> to download forms to request a consultation.

An Early Childhood Mental Health Consultant can help if you have a child who regularly gets into fights, hurts him/herself or others or who doesn't participate or interact with the other children. A Consultant can:

- Provide on-site child-specific consultation services to children age six-weeks to five years
- Model universal screening tools such as the Ages & Stages to identify children who may need additional support
- Observe child and classroom environment and provide recommendations to promote healthy social emotional development
- Provide professional development to practitioners to increase the knowledge of social emotional development
- Support practitioners and parents to access community resources



For more information, contact:
Public Citizens for Children and Youth
1709 Benjamin Franklin Parkway, 6th Floor
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