



# 129th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2019

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Legislative Document

No. 997

S.P. 287

In Senate, February 26, 2019

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**An Act To Promote Social and Emotional Learning and  
Development for Young Children**

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Reference to the Committee on Education and Cultural Affairs suggested and ordered printed.

A handwritten signature in black ink, appearing to read 'D M Grant'.

DAREK M. GRANT  
Secretary of the Senate

Presented by Senator BREEN of Cumberland.  
Cosponsored by Representative GATTINE of Westbrook and  
Senators: GRATWICK of Penobscot, MILLETT of Cumberland, MOORE of Washington,  
Representatives: BEEBE-CENTER of Rockland, FARNSWORTH of Portland, KORNFIELD  
of Bangor, MILLETT of Waterford, MORALES of South Portland.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 20-A MRSA §254, sub-§20** is enacted to read:

3 **20. Statewide voluntary early childhood consultation program.** Beginning  
4 September 1, 2020, the commissioner shall implement a statewide voluntary early  
5 childhood consultation program to provide support, guidance and training to improve the  
6 abilities and skills of early care and education teachers and providers working in public  
7 elementary schools, child care facilities as defined in Title 22, section 8301-A, subsection  
8 1-A, paragraph B, family child care settings and Head Start programs serving infants and  
9 children who are 8 years of age or younger who are experiencing challenging behaviors  
10 that put the infants or children at risk of learning difficulties and removal from early  
11 learning and education settings, and to improve the abilities and skills of families and  
12 foster parents with infants or children who are 8 years of age or younger in the home who  
13 are experiencing challenging behaviors that put the infants or children at risk of learning  
14 difficulties and removal from early learning and education settings.

15 **Sec. 2. Early childhood consultation program.** By September 1, 2020, the  
16 Department of Education shall develop, establish and implement an early childhood  
17 consultation program under the Maine Revised Statutes, Title 20-A, section 254,  
18 subsection 20, referred to in this section as "the program," to enable trained consultants  
19 with expertise in the areas of early childhood development and mental health to work on-  
20 site with early care and education teachers and providers working with children to aid  
21 them in the use of low-cost or no-cost evidence-based strategies that reduce challenging  
22 behaviors in children and promote social-emotional growth; to provide guidance to  
23 parents about effective ways to address their children's behavioral difficulties; and to  
24 connect children and families to programs, resources and supports that will assist them in  
25 their development and success, while addressing barriers to accessing these resources and  
26 supports. The department shall design the program in consultation with the national  
27 Center of Excellence for Infant and Early Childhood Mental Health Consultation, a  
28 project funded by the United States Department of Health and Human Services,  
29 Substance Abuse and Mental Health Services Administration, and key stakeholders in the  
30 State, including mental health professionals delivering mental health consultation within  
31 the State. In developing the program, the department shall:

32 1. Develop standards and guidelines to ensure that the program is implemented with  
33 primary consideration given to the core elements of evidence-based services as adapted  
34 for the State's unique rural character. The guidelines must include effective strengths-  
35 based strategies and plans that support children's success across learning environments.  
36 The standards must include knowledge of research-informed infant and early childhood  
37 mental health practices, family circumstances that affect children's behavior and mental  
38 health, developmental science and milestones, mental health, trauma-informed  
39 approaches, adverse childhood experiences, sensory processing issues, poverty, disability  
40 and community supports, resources and services available to a child and the child's family  
41 to alleviate family stress;

42 2. Explore enhancing cross-sector professional development capacity in the State  
43 through partnerships with entities such as the national Center of Excellence for Infant and

1 Early Childhood Mental Health Consultation and the Technical Assistance Center on  
2 Social Emotional Intervention for Young Children, a project funded by the United States  
3 Department of Education;

4 3. Develop a plan for consultants to establish connections for individualized on-site  
5 coaching as requested by teachers, caregivers and families. The plan may include  
6 professional development in the form of group training and communities of practice that  
7 include professionals, such as home visitors or child welfare staff, who work with young  
8 children and families. The plan must reinforce and extend the supports provided by early  
9 childhood mental health consultants to people providing professional development in  
10 early childhood and public school settings;

11 4. Develop a system for collecting and analyzing implementation data and selected  
12 outcomes to identify areas for improvement, promote accountability and provide  
13 continuous quality improvement and service delivery to improve child outcomes by  
14 providing feedback, including feedback from department staff and community  
15 consultation staff;

16 5. Develop a plan for establishing, training and certifying a roster of community-  
17 based qualified mental health consultants with the specialized knowledge, skills and  
18 experience to effectively coach families, teachers, providers and program directors to  
19 promote a child's social and emotional health and reduce challenging behaviors. The  
20 training must include training related to the following: trauma; adverse childhood  
21 experiences; resilience; trauma-informed practices; child development from birth to 8  
22 years of age; effects of substance use; sensory processing issues; needs of children with  
23 disabilities, including special education law; the State's child protection and foster care  
24 system; other disciplines such as occupational therapy, speech therapy, physical therapy  
25 and mental health therapy; and public and private supports and services, including the  
26 Women, Infants and Children Special Supplemental Food Program of the federal Child  
27 Nutrition Act of 1966; the Child Development Services System under the Maine Revised  
28 Statutes, Title 20-A, section 7209; the division within the Department of Health and  
29 Human Services concerned with children's behavioral health services; case management;  
30 and entitlement programs. Consultants must also receive training that is regionally  
31 appropriate to understand the programs, resources and supports in their region or  
32 community in order to link children, families and professionals to them. The training  
33 must also include training in cultural competence to ensure consultants understand the  
34 needs of the ethnically diverse communities they may be serving and the unique services  
35 needed to support those populations;

36 6. Develop a plan for supervision of early childhood consultation and outreach staff  
37 that includes administrative, clinical and reflective supervision;

38 7. Develop a plan in conjunction with staff from the Child Development Services  
39 System under the Maine Revised Statutes, Title 20-A, section 7209 for how early  
40 childhood consultants can support children, families and staff who intersect with the  
41 Child Development Services System, particularly as the plan relates to children who are  
42 referred for behavior issues; and

