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## Beyond the Grant: LAUNCH Grantees' Successes in Workforce Development

### *Introduction*

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), Project LAUNCH (Linking Actions for Unmet Needs in Children's Health) addresses the physical, social, emotional, cognitive, and behavioral aspects of children's development from birth to age 8. Project LAUNCH communities have a dual focus on improving collaboration across the child-serving system and improving access to and the availability of evidence-based prevention and wellness promotion practices. Specifically, grantees infuse mental health practices into primary care, early care and education (ECE), home visiting, and family settings. In addition to providing direct services, Project LAUNCH communities increase knowledge about healthy child development through public education campaigns and cross-disciplinary workforce development. States, territories, and tribes work to sustain and replicate local innovative and effective prevention and promotion practices and influence broader shifts in policy.

### *About Project LAUNCH*

*Project LAUNCH grantees improve coordination across child-serving systems, build infrastructure, and increase access to high-quality prevention and wellness promotion services for children and their families.*

*States, territories, and tribes receiving Project LAUNCH grants select a local pilot community within the larger jurisdiction as a partner and then bring together child-serving organizations to develop policies, financial mechanisms, and other reforms to improve the integration and efficiency of the child-serving system.*

This brief highlights many notable and emerging successes of grantees in expanding and sustaining workforce development activities in the initial pilot communities and state-wide. Project LAUNCH cross-sector workforce development activities help increase the recognition and understanding of social, emotional, and behavioral problems in a variety of settings and professional groups (e.g., child care, primary health care, home visiting, and child welfare and law enforcement). Workforce development activities at the state, tribal, and territory levels also increase knowledge and understanding of the social and emotional development of young children (and other aspects of young child wellness) across disciplines and agencies. Building workforce capacity within a variety of settings can create a long-lasting impact on the availability and quality of wellness promotion and prevention services and supports.

## Methodology

This brief is based on a review of grantee reports, publicly available websites, and other materials. In addition, grantee representatives were interviewed to identify instances in which LAUNCH activities were sustained and replicated beyond the grant period and where LAUNCH grants influenced changes in policies and systems at the state, territory, tribal, or local level. The examples highlighted in this brief focus specifically on changes to state and local workforces that have expanded the impact of LAUNCH beyond the grant. [Individual and cross-site grantee evaluations](#) have captured other types of sustaining program impact, such as increased organizational capacity and collaboration at the local level or long-term changes in participant knowledge and practice. It is important to note that only a small number of tribal LAUNCH grantees have “graduated” from Project LAUNCH at this point, and therefore the tribal examples included in this report are limited.

## Grantees Sustain and Expand Workforce Development Initiatives

As part of their activities, LAUNCH grantees invest resources in building the capacity of, and expanding, the workforce available to promote children’s mental health. LAUNCH grantees have supported a range of training and coaching initiatives for professionals in the health care, mental health, ECE, and home visiting fields. By investing in the workforce, LAUNCH grantees build critical professional capacity that lasts beyond the 5-year grant. Notably, some grantees have continued or expanded on these initiatives in efforts to further support the workforce, even after initial funding ends.

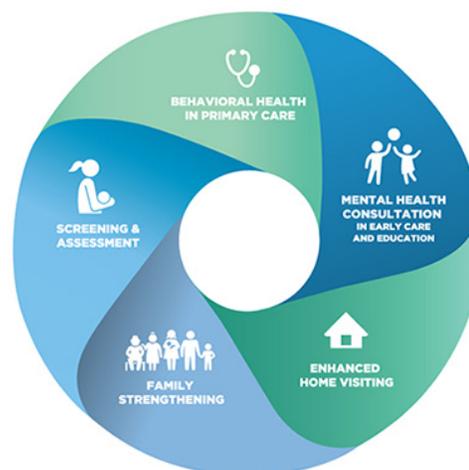
LAUNCH grantees have been successful in sustaining their workforce/professional development efforts for a range of service providers, such as early care and education staff, home visitors, child health providers, early interventionists, related service therapists (speech/language, physical and occupational therapists), and mental health clinicians. In general, LAUNCH grantees have employed three interrelated workforce development strategies: 1) cross-sector training to promote infant and early childhood mental health (IECMH); 2) targeted training to increase the availability of developmental screening in early childhood settings; and 3) leveraging other early childhood systems improvement efforts to build workforce capacity.

### Cross-Sector Training to Promote Infant and Early

**Childhood Mental Health.** The field of IECMH is an area of knowledge and practice that supports early relationships and the social, emotional, and behavioral health of infants and young children. Professionals from a range of disciplines who care for and provide services to young children and their family members comprise the infant mental health workforce. In an effort to assure that professionals working with your children have the knowledge, skills, and attitudes to promote healthy social–emotional development; to help families support their child’s development; and to identify concerns early and make connections to intervention services when necessary, LAUNCH grantees have implemented and sustained several specific IECMH workforce development initiatives.

For example, **Iowa** developed an early childhood mental health (ECMH) professional association as a direct result of LAUNCH. A group of professionals founded the Iowa Association for Infant and Early Childhood Mental Health in 2013. The professional association now serves as a hub to facilitate

Project LAUNCH Model



networking among cross-sector professionals serving children and families (mental health professionals, child care providers, home visitors, and others), provides increased access to information and resources, and ensures opportunities for professional development. This organization is currently funded through the Early Childhood Iowa state

Initiative and has recently purchased a license to implement the [Michigan Association for Infant Mental Health's \(MI-AIMH\) Endorsement® system](#).

**Massachusetts LAUNCH** expanded the Center on the Social and Emotional Foundations for Early Learning (CSEFEL) Pyramid training and adopted the [Infant and Early Childhood Mental Health Competency Guidelines](#). After using the CSEFEL Pyramid framework to support multidisciplinary workforce development as well as mental health consultation in LAUNCH sites, state leaders launched an annual Massachusetts Pyramid Partnership Summit and moved toward state-wide adoption of this model. The [Pyramid Model](#) is an evidence-based approach to building children's social and emotional competence in ECE programs and has been implemented in states nationwide. Pyramid Model training has since reached ECE providers, early intervention and preschool special education professionals, and staff working in homeless shelters. Training capacity for the Pyramid Model was supported through funding from a Race to the Top – Early Learning Challenge (RTT-ELC) grant. As RTT-ELC funding comes to an end, the state's Department of Elementary and Secondary Education is committed to supporting and expanding on this effort.



The **New York** state LAUNCH grantee also influenced multiple ECMH workforce development initiatives. New York LAUNCH supported ***Training on Social and Emotional Development for Early Childhood Providers***. They provided partial funding for the first year of the Pyramid Model State Leadership team, which successfully initiated the state-wide use of the CSEFEL Pyramid Model to promote the social and emotional competence of young children in ECE programs. New York LAUNCH also worked with other partners to implement ***ECMH Training for***

***Pediatric Health and Child Care Providers***. LAUNCH was a partner in promoting the Office of Mental Health's Project TEACH (Training and Education for the Advancement of Children's Health), targeting outreach to LAUNCH service providers in Westchester County and New York City. TEACH offers rapid access to child and adolescent psychiatric consultation, referral and linkages to community mental health and support services, and education-based training. Evaluation results show that TEACH is effective in improving primary care practitioners' perception of their ability to address mental health issues, increasing diagnoses of mental health issues, and more appropriate use of psychiatric medication and psychiatric emergency services. Funding for TEACH was recently increased from \$1.4 million to \$2.5 million annually through 2020, allowing increases in consultations by child and adolescent psychiatrists, increases in on-site trainings for primary care providers, and additional referral and outreach staff. The Office of Mental Health plans to enroll an additional 3,800 providers and conduct an additional 24,500 consultations in the next 5 years.

As one component of the LAUNCH grant, the **Red Cliff Band of Lake Superior Chippewa** hired and trained family resource coordinators, who partnered with families to assist them with connections to primary care, mental health services, home visiting services, early childhood programs, and other

services as needed. In collaboration with tribal programs, the family resource coordinators developed a resource directory of child and family serving programs. The resource directory is provided to families annually and is available on the tribal website in Ojibwemowin and English. Red Cliff Project LAUNCH also provided mental health consultation and reflective practice to early care staff.

In addition, through Project LAUNCH funding, tribal-wide training was provided on the Touchpoints Model, provided by the [Brazelton Touchpoints Center](#), creating a common language of child development and family engagement guiding principles. The training enhanced collaboration across providers, strengthened the early childhood system of care and measurably improved the organizational climate within and between early care and primary care systems.

**Training to Increase Developmental Screenings in Early Childhood Settings.** Project LAUNCH grants also promote the use of validated developmental and behavioral screening of infants and young children in a range of child-serving settings. In addition, grantees may provide training for providers and parent education regarding the importance of screening and screening results, referral to appropriate services, and systematic efforts to implement universal screening.

The **New Mexico** LAUNCH grantee was able to sustain training efforts on developmental screening and scale-up to a state-wide initiative. New Mexico LAUNCH provided training on the [Ages and Stages Questionnaire®](#) (ASQ) during their 5-year grant (2009–2014) to more than 500 health care, home visiting, and ECE providers. After New Mexico LAUNCH concluded, funding for developmental screening training and the purchase of materials was supported by the state Early Childhood Comprehensive Systems grant. An additional 1,000 providers were trained between 2009 and 2016, and 25 early childhood providers, many bilingual, were selected to participate in a Training of Trainers seminar for the ASQ.

### **Leveraging Other Early Childhood Systems**

**Improvement Initiatives.** In addition to expanding Pyramid Model training, the Massachusetts LAUNCH grantee **leveraged RTT-ELC funding** from the state Department of Elementary and Secondary Education to support purchase of the Michigan Association for Infant Mental Health Competency Guidelines. The LAUNCH grantee (Massachusetts Department of Public Health) is currently working on using the competencies to define levels of training and create a compendium of ECMH trainings aligned with the competencies that are available within the state.

The New York LAUNCH grantee, in conjunction with the New York State Early Childhood Advisory Council’s Promoting Healthy Development Work Group, co-led efforts to develop a **toolkit of online learning resources** on social and emotional development. Similar online resources for child care health consultants were developed by [Docs for Tots](#) and by New York City LAUNCH staff as part of the state-wide Child Care Health Consultant training system. New York LAUNCH also helped to establish a state **Parenting Education Credential** intended to professionalize the parenting education field. Since 2012,



more than 65 credentials have been awarded. NYSPEP administers and promotes the credential to parenting education providers.

## Conclusion

This brief highlights some LAUNCH grantees that were successful in promoting workforce development priorities and leveraging other early childhood system improvement efforts. Building a competent, cross-sector workforce to promote ECMH and well-being seems to be a cornerstone of successful LAUNCH sustainability. The training and professional development strategies used by LAUNCH grantees have long-lasting impacts on the individuals involved and the systems in which they work. This brief shows the promise of LAUNCH grants in catalyzing long-term support for young children’s wellness.



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