Supporting Social and Emotional Competence in Infants and Young Children in RTT-ELC States – The Pyramid Model and Other Initiatives

This resource was prepared in response to a request for information from a Race to the Top – Early Learning Challenge (RTT-ELC) State about which RTT-ELC States are using the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children. The State also requested information about other projects States have designed to support social and emotional competence in infants and young children. This information will be useful to other States as they look for strategies to support school readiness and long-term academic success of young children, particularly children with high needs.

Social and Emotional skills form the basis for all other learning and which are formed through the secure relationships with parents and other care givers, including teachers and other family members. Some parents and classroom staff may need more support and even intervention for some young children who develop social and emotional challenges that can affect their ability to learn.

- New Mexico 2014 APR – Section D

Recent research on early learning and brain development of infants, toddlers, and preschoolers reinforces the importance of social and emotions development and its significance as the gateway for cognitive development. Changes in the Federal Child Care and Development Block Grant Act include language about provisions related to social and emotional health of children, and the Federal policy on the expulsion and suspension of young children from early learning settings emphasizes the need to give teachers strategies for understanding classroom behaviors and to manage challenging behaviors of young children in center and family based programs using an evidence-based curriculum.

This response has information about the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children. It provides information from 2014 Annual Performance Report (APR) data that the 20 RTT-ELC States submitted to the Department of Education and the Department of Health and Human Services in the spring of 2015, about RTT-ELC States that are using the Pyramid Model and about additional State projects that support social and emotional development. Appendix A gives specific examples from the individual RTT-ELC State APRs about States that are using the Pyramid Model. Appendix B has information about additional projects RTT-ELC States are supporting to promote positive social and emotional development. Individual State web pages were consulted to clarify or update information.

Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children

The Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children is supported by the Center on the Social and Emotional Foundations for Early Learning. CSEFEL promotes the social and emotional development and school readiness of young children birth to age 5. The center is funded by the U.S. Department of Health and Human Services, Office of Head Start and Office of Child Care, to disseminate research- and evidence-based teaching practices and intervention approaches that promote children’s social development to early childhood programs across the country. CSEFEL has State partnerships with the following RTT-ELC States: California, Colorado, Maryland, Massachusetts, North Carolina, Vermont, and Wisconsin to help them establish systems and policies to adopt and sustain the Pyramid Model. Colorado and Massachusetts did not choose Health as a focused investment area in their RTT-ELC application so they did not need to describe health promotion activities in their APRs. In its 2014 RTT-ELC APR, Massachusetts did include information about its initiatives to address children’s social and emotional development. Non RTT-ELC States with State Partnerships with CSEFEL include Hawaii, Iowa, Nebraska, and Tennessee.

How RTT-ELC States Are Using the Pyramid Model

Six RTT-ELC States described how they were using the Pyramid Model (California, Massachusetts, New Jersey, New Mexico, North Carolina, and Wisconsin). Their various strategies to support the model include:

- **Train the trainer**
  - In California, 11 Consortia adopted the Pyramid model and formed a network of trainers and coaches.
  - New Jersey used its training academy to train experts in the Pyramid Model.
  - New Mexico trained a Master Cadre in the use of the modules of the CSEFEL curriculum.
  - In Vermont, early childhood education professionals in cohort 1 of the Early MTSS [Multi-tiered System of Supports] received training through a train-coach-train model based on the Pyramid Model.

- **Training and coaching early childhood education professionals**
  - Massachusetts implemented the Top of the Pyramid Skills Training for early education professionals, early childhood mental health consultants, and staff in homeless shelters. Mental health clinicians provided the staff in homeless shelters with nine hours of mentoring and conducted pre- and post-observations.
  - New Mexico provided training symposiums, lectures, and workshops using the Pyramid Partnership framework.
  - In North Carolina, a Healthy Social Behavior Specialist provided training and technical assistance using the teaching Pyramid framework and strategies to early learning and development programs in Transformation Zones.
Wisconsin gave a set of protocols for on-site technical consultation related to the Wisconsin Pyramid Model to trained Technical Consultants. In addition, early childhood education professionals trained in the Wisconsin Pyramid Model become eligible to apply for additional hours of on-site technical consultation.

- **Community of Practice: North Carolina** created a Community of Practice in each Transformation Zones for the cohort of early learning and development programs that had been trained in the Pyramid Model.
- **Assessment: North Carolina and Vermont** used the Teaching Pyramid Observation Tool (T-POT) for assessment.

### Additional State-Supported Initiatives That Promote Social and Emotional Development

States also described the following additional initiatives to support social and emotional development.

- **Use the Ages & Stages Questionnaire®: Social-Emotional (ASQ-SE)**
  - **Train the Trainer on ASQ-SE: California** provided funding for toolkits and train the trainer sessions.
  - **Training and Technical Assistance on ASQ-SE**
    - **California** provided technical assistance on connecting the ASQ-SE screening results to making appropriate referrals.
    - **Minnesota** has trained staff in 12 pilot site programs to use an online version of the ASQ-SE screening tools.
    - **Pennsylvania** created a State-level Project Manager position to plan professional development that includes information on the use of ASQ-SE.
    - **Pennsylvania** trained staff in homeless shelters and low income housing to administer the ASQ-SE.
    - **Vermont** trained child health providers to administer the ASQ-SE and enter screening results in the Health Department Developmental Screening Registry.
  - **Screening using ASQ-SE:**
    - **Massachusetts** used local family and community engagement providers to screen young children using ASQ-SE and shared the results with families.
    - **Pennsylvania** requires screening for designated publically funded programs. It recommends ASQ-SE, but programs may choose from any valid and reliable screening tool which has been aligned to the Standards and meets the needs of their program.
  - **Screening Registry for ASQ-SE Results: Vermont** planned a statewide developmental screening registry that includes screening results for the ASQ-SE.

- **Funding for Screening**
  - In **Michigan**, the Medicaid program has “unbundled” the billing for developmental screening, and distributed policy and information about billing to primary care providers.
• **Training** about social and emotional development and screening.
  - **Maryland** launched a website that offers professional development training modules.
  - **Maryland** offered in person training for child care providers, coaches, and parent trainers.
  - **Michigan** trains physicians and their office staff to integrate regular developmental and social-emotional screenings into their daily work flow.
  - **New Mexico** trained early learning educators and administrators to conduct developmental screenings of infants, toddlers, and preschoolers.
  - **New Jersey** used its training academy to provide training and supports that focus on infant and young child mental health and social-emotional development.

• **Train the trainer** about social and emotional development and screening
  - **Massachusetts** developed a train the trainer course related to its new social and emotional development early learning standards.
  - **New Mexico** developed training for Cross-Sector consultants and trainers in the background, implementation and follow up of age and cultural appropriate screening tools for developmental and social and emotional development (New Mexico)

• **Develop or revise Early Learning Standards:**
  - **Massachusetts** developed early learning standards in the domain of social and emotional development and translated the standards and guidance into Spanish, Portuguese, Haitian Creole, and Simplified Chinese.
  - **Pennsylvania** developed skill standards in social and emotional development for its Kindergarten, Grades 1 and 2 standards.

**Summary**

Promoting the social and emotional development of infants, toddlers, and preschoolers and helping teachers understand and manage challenging behaviors before they lead to suspension or expulsion sets young children up for success in kindergarten and beyond. RTT-ELC States have used their RTT-ELC grants to collaboration with partners in education and health and social services; promote screening; provide professional development; and develop and update early learning standards. The Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children and the Ages & Stages Questionnaire®: Social-Emotional have provided States with important tools in this effort.

**References and Additional Resources**

*2014 RTT-ELC Annual Performance Reports* are available at [https://elc.grads360.org/#program/annual-performance-reports](https://elc.grads360.org/#program/annual-performance-reports)


Appendix A: Descriptions of State-Supported Initiatives Using the Pyramid Model to Support Social and Emotional Development

The following table gives specific examples from the individual State 2014 RTT-ELC Annual Performance Reports about States that are using the Pyramid Model to Support Social and Emotional Development. These examples are intended to provide the reader with information about which States to contact to find out more information rather than to serve as detailed examples. Text in italics is taken verbatim from the Annual Performance Reports. Individual APRs are available at https://elc.grads360.org/#program/grantee-profiles.

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<td>California</td>
<td><strong>California 2014 APR</strong> - Executive Summary: Statewide Investment Projects. p. 8</td>
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<tr>
<td>Adopt Pyramid model</td>
<td>• Health - To promote social-emotional development, California adopted the teaching pyramid model. An online overview was created of the CSEFEL teaching pyramid (posted on CECO). To 2013’s three consortia, seven more counties are engaged in adopting this model in 2014, and eight are scheduled for 2015. A network of CA CSEFEL trainers and coaches has been formed within the Consortia.</td>
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<td>Massachusetts</td>
<td><strong>Massachusetts 2014 APR</strong>- Section C(4), p. 51</td>
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<td>Train early education professionals, mental health consultants,</td>
<td>• DMH [the Department of Mental Health] has implemented the Top of the Pyramid Skills Training/CSEFEL (Center on the Social and Emotional Foundations for Early Learning) Pyramid Model Training for early education professionals and early childhood mental health consultants; 49 staff attended these regional trainings. The evaluations demonstrated that all trainees showed new ways to understand classroom behaviors and use new strategies to: a) identify triggers of challenging behavior and to describe the use of prevention strategies to address these triggers; b) describe why it is important to be intentional about teaching social emotional skills and when to teach these skills; and c) identify strategies for how to teach friendship, problem-solving, impulse and anger control skills.</td>
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<td>Train child care providers</td>
<td>• Completed professional development series in three EEC regions of the state for educators on challenging behaviors of young children in center and family based programs using an evidenced based curriculum, Top of the Pyramid Skills Training (TOPS), developed by CSEFEL, which uses the pyramid model for supporting social emotional competencies in infants and young children. Fifty education and consultation staff were trained in TOPS.</td>
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<td>Provide training and mentoring to staff in</td>
<td>• DPH [Department of Public Health] led the collaboration with DHCD and Horizons for Homeless Children to design and implement the Pyramid Model Foundations training for staff working within homeless shelters. DPH invited teams made up of a supervisor, direct care staff and an identified lead person</td>
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### Pyramid Model for Supporting Social Emotional Competence in RTT-ELC States

**Source:** Individual State 2014 RTT-ELC Annual Performance Reports

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<td>homeless shelters</td>
<td>interested in sustaining the use of the Pyramid model. DPH then linked the eight shelters with an early childhood mental health clinician with knowledge of the Pyramid Model and trauma. The mental health clinicians participated in the trainings with their teams, and provided nine hours of mentoring plus conducting pre and post observations. Mentors have received support through an orientation, monthly Communities of Practice calls and will participate in a face to face debrief at the end of the project. The total number of participants for this first training series is 38</td>
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**New Jersey**
Train the trainer

New Jersey 2014 APR - Executive Summary: Accomplishments. p. 4
The purpose of the Training Academy is to create a cadre of certified and endorsed trainers who are experts in the components of Grow NJ Kids as follows:...
- Pyramid Model,

**New Mexico**
Train the trainer

New Mexico 2014 APR - Executive Summary: Project 2 – FOCUS-TQRIS. p.5
The New Mexico Pyramid Partnership selected and began training a Master Cadre, consisting of 13 members, in preparation for promoting the social/emotional development of children (0-5) using the modules of the CSEFEL (Center on the Social and Emotional Foundations for Early Learning) curriculum.

New Mexico 2014 APR - Section D2, p. 58
**Symposiums and Lecture**
In alignment with the quality elements and criteria being measured under the FOCUS-TQRIS training symposiums, lectures and workshops are being provided regarding the Full Participation of Each Child:...
- Social and Emotional skills form the basis for all other learning and which are formed through the secure relationships with parents and other care givers, including teachers and other family members. Some parents and classroom staff may need more support and even intervention for some young children who develop social and emotional challenges that can affect their ability to learn. The Pyramid Partnership Framework is developing training based on the Center on the Social Emotional Foundations of Early Learning (CSEFEL).

**North Carolina**
Technical assistance

North Carolina 2014 APR – Section D(2), p. 49
- A Healthy Social Behavior (HSB) Specialist in the Transformation Zone is providing technical assistance and training the ELD [early learning and development] programs to improve program capacity to support healthy social/emotional development of children in their care, using the teaching pyramid framework and strategies. Working with county implementation teams, the HSB Specialist recruited ELD programs to apply to participate in the project. Each county formed a cohort and is functioning as a community of...
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<td><strong>Teaching Pyramid Observation Tool</strong></td>
<td>practice, convening meetings to delve more deeply into various pyramid model-related topics, and providing coaching across programs. Pyramid Model training was provided and Teaching Pyramid Observation Tool (T-POT) observations conducted. The HSB Specialist provided technical assistance to classroom teachers and also worked with teachers on Ages &amp; Stages Questionnaire®: Social-Emotional (ASQ-SE) screenings.</td>
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<td><strong>Vermont</strong></td>
<td>Vermont 2014 APR - Section C(4), p. 39</td>
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<td>Train the trainer</td>
<td>A state cadre of eight Early MTSS [Multi-tiered System of Supports] trainers and coaches have been identified and under contract with the AOE [Agency of Education]. Early MTSS cohort 1 … site early childhood practitioners are receiving content training through a train-coach-train model that is based on the Pyramid Model, a tiered framework of evidence-based practices (EBP) developed by two national, federally funded research and training centers: the Center on the Social and Emotional Foundations for Early Learning (CSEFEL) and the Technical Assistance Center on Social Emotional Intervention (TACSEI). Early MTSS collects child progress data, teacher implementation data, and program-wide systems data through a variety of measures, including Ages &amp; Stages Questionnaires® (ASQ), The Pyramid Observation Tool (TPOT), Social Skills Improvement System (SSIS) and Early MTSS Program Inventory (systems tool). These efforts align with, and are supported by, our Comprehensive Assessment work.</td>
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<td><strong>Wisconsin</strong></td>
<td>Wisconsin 2014 APR - Section B1 Narrative, p. 24</td>
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| Train the trainer | During 2014, the YoungStar Consortium developed a process to train YoungStar Technical Consultants (TCs) in a content area and give the trained TCs a set of protocols for on-site technical consultation related to that content area. The first three content areas were the Wisconsin Model Early Learning Standards [WMELS], the Ages & Stages Questionnaires, and the Wisconsin Pyramid Model [for Social and Emotional Competence]. Once a provider has taken the training associated with a particular content area, s/he becomes eligible to apply for additional hours of on-site technical consultation. These on-site hours are in addition to the provider’s regular YoungStar consultation hours and focus on the protocols given to the YoungStar TCs. These additional on-site hours allow providers the opportunity to apply the content learned in the training to their specific programs, and providers can ask questions and receive support around their specific needs. In 2014, 1,059 hours of additional on-site technical consultation were completed with 127 total providers (34 family child care programs, 92 group child care programs, and 1 school-age program). Of these 1,059 hours, 643 were on the Wisconsin Model Early Learning Standards, 287 were on the Wisconsin Pyramid Model, and 127 were on the Ages & Stages Questionnaires. This consultation reached 60% of the counties in the state during 2014, with about a quarter of the consultation
## Pyramid Model for Supporting Social Emotional Competence in RTT-ELC States

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<td>Wisconsin 2014 APR - Section C: Narrative, p. 33</td>
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*Implemented Pyramid Model Sites to foster social and emotional development of children.*

The social and emotional domain of WMELS remains a priority focus for the state effort and the Pyramid Model for Social and Emotional Competence has been the primary focus of professional development. RTT-ELC has allowed us to support existing program-wide implementation sites (previously called demonstration sites). Seven new sites were added in 2014, including three in Milwaukee. In 2014, Regional Coaches became even more involved in the training coordination, trainer application processes, and implementation of the Pyramid Model Communities of Practice. Forty-nine (49) Pyramid Model trainings were completed in 2014. There were 988 participants involved in the trainings, including individuals from group child care (419), Early/Head Start (162), public schools (109) and many others. Training content included group care and education, parent education, home visiting, and intervention. The 2014 Pyramid Model Implementation Academy was held in Milwaukee, with “tracks” covering Preschool Provider content, Program Implementation content, and Parenting module content. Previous implementation site data were transferred to the web-based Pyramid Model Benchmarks of Quality data system. Planning occurred in 2014 for program expansion using the RTT-ELC supplemental funding. Two areas of expansion have occurred. The first focused on expanding the number of programs and providers who received content-specific and targeted training on social-emotional development and application to practice and ensured the workforce had the resources needed to apply social-emotional, evidence-based practices through implementation of the Pyramid Model training and technical assistance structure. The second supported communities in implementing Parents Interacting with Infants (PIWI) groups, in order to enhance parental competence and confidence, increase parental engagement, and provide optimal experiences for healthy brain development. The Pyramid Model maintains a strong relationship with Wisconsin’s Positive Behavioral Intervention and Supports (PBIS) system. The Wisconsin Pyramid Model Training and Coaching Coordinator has served on the PBIS state leadership team, and the Wisconsin PBIS Coordinator has served on the Pyramid Model Leadership team since 2010. They have presented together at various state leadership conferences, collaboratively developed materials, and crosswalked the Pyramid Model and PBIS Benchmarks of Quality. These materials are available on the DPI and collaboratingpartners.com websites. (See [http://www.collaboratingpartners.com/documents/pbis_goes_to_preschool.pdf](http://www.collaboratingpartners.com/documents/pbis_goes_to_preschool.pdf) and [http://ec.dpi.wi.gov/sites/default/files/imce/sped/pdf/ecspedldr-pyramid-pbis.pdf](http://ec.dpi.wi.gov/sites/default/files/imce/sped/pdf/ecspedldr-pyramid-pbis.pdf)).
Appendix B: Additional State-Supported Initiatives That Promote Social and Emotional Development

The following table gives specific examples from the individual State 2014 RTT-ELC Annual Performance Reports about additional initiatives States have developed that support social and emotional development. These examples are intended to provide the reader with information about which States to contact to find out more information rather than to serve as detailed examples. Text in italics is taken verbatim from the Annual Performance Reports. Individual APRs are available at [https://elc.grads360.org/#program/grantee-profiles](https://elc.grads360.org/#program/grantee-profiles).

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| California Toolkit| California 2014 APR - Section C(3), p. 50
In 2013, California RTT-ELC provided funding for toolkits and for Consortia members in all 16 counties to attend train-the-trainer sessions on the Ages and Stages Questionnaire (ASQ) and ASQ-Social Emotional screening tools. In 2014, the CDE EESD [California Department of Education, Early Education and Support Division] extended its contract to provide continued support beyond the ASQ work initiated in 2013. The 2014 developmental screening work began with conducting consortium visits to create individualized county TA plans. Additional ASQ train-the-trainer sessions were conducted, more importantly, TA on connecting screening results to making appropriate referrals. The use of screening results to improve services and supports to staff and children served within the RTT-ELC participating sites is a focus of the contract and connecting to the work of the California Statewide Screening Collaborative (CSSC).                                                                                       |
| Train the Trainer |                                                                                                                                                                                                                                                                                                                                                                 |
| Technical assistance |                                                                                                                                                                                                                                                                                                                                                                 |
| Maryland On-line training modules | Maryland 2014 APR – Section C(3), p. 38
Develop on-line training modules for the Social and Emotional Foundations of Early Learning (SEFEL)
The Institute for Innovation and Implementation at the University of Maryland/School of Social Work has launched a new and improved Social Emotional Foundations in Early Learning (SEFEL) website that offers professional development training modules, resources developed for parents and for those teaching or implementing SEFEL in early learning programs across the state. The website is being advertised at conferences, through existing local councils and state level committees and councils, and links are established with MSDE and other websites for [http://theinstitute.umaryland.edu/sefel/](http://theinstitute.umaryland.edu/sefel/). The Institute for Innovation and Implementation at the University of Maryland/School of Social Work reported that all four SEFEL infant and toddler modules are complete and have been published to the website. Ninety-five participants completed and received a certificate for the online SEFEL Infant and Toddler training. For the already published preschool modules, there have been 650 participants who earned certificate for completion at [http://theinstitute.umaryland.edu/sefel/](http://theinstitute.umaryland.edu/sefel/).                                                                                                                                 |
## Additional Projects Supporting Positive Social and Emotional Development RTT-ELC States

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<td><strong>Massachusetts</strong></td>
<td>Through the Maryland Family Network, in person training for SEFEL was offered the fall of 2014 to child care providers. 44 providers attended the SEFEL Infant and Toddler in person training and 19 attended the SEFEL in person preschool training. In the spring 2015 a coaches training and a parent trainer training will be offered.</td>
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<td><strong>Massachusetts 2014 APR</strong> - Section C(1), p. 37</td>
<td>In August 2014, EEC [Department of Early Education and Care] contracted with the University of Massachusetts Boston (UMB) to develop learning standards in the domains of Social-Emotional Development and Approaches to Play and Learning for preschool and kindergarten. The standards will align and connect to the Massachusetts Early Learning Guidelines for Infants and Toddlers, Massachusetts Curriculum Frameworks, the Head Start Child Development and Early Learning Framework (HSCDELF), Pre-K and Kindergarten Science, Technology and Engineering Standards (STE) and the World Class Instructional Design and Assessment (WIDA) English Language Development Standards (K-12) and the Early English Development Standards. Additionally, UMB will develop accompanying guidelines that demonstrate the inter-connection and integration between the new Social-Emotional Development and Approaches to Play and Learning standards with existing state standards (such as the Massachusetts Early Learning Guidelines for Infants and Toddlers, the Massachusetts Guidelines for Preschool Learning Experiences, the Massachusetts Curriculum Frameworks and the HSCDELF) ... The standards and accompanying guidelines will be translated into Spanish, Portuguese, Haitian Creole, and Simplified Chinese. The professional development plan for the new standards will include an introduction of the new standards to the field through regional information sessions and a train the trainer model. The train the trainer course, which will be online and face-to-face will be developed and delivered to approximately 100 trainers in the state’s mixed-delivery system. Professional development will commence in fall 2015.</td>
</tr>
<tr>
<td><strong>Massachusetts 2014 APR</strong> - Section C(1), p. 43</td>
<td>Ages &amp; Stages Questionnaire® (ASQ) Screenings and Trainings Since January 2014, approximately 1,380 children have been screened using the ASQ and ASQ-SE (social emotional) developmental screening tool based on online database information, through the state’s network of local family and community engagement providers, also known as the Coordinated Family and Community Engagement (CFCE) grantees. These 89 CFCE grantees were trained in using the ASQ and have strengthened their skills in having meaningful conversation with families about their child’s progress across the five developmental domains. For example, if the child’s ASQ scores are below the cutoff, CFCE staff provide the family with information and referrals to other...</td>
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<tr>
<td>Michigan</td>
<td>Michigan has invested significantly in the promotion and implementation of screening and referral procedures under Medicaid’s Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program. The state’s Medicaid program has “unbundled” the billing for developmental screening, and distributed policy and information about billing to primary care providers. The Promoting Child Development Screening II Project trains physicians and their office staff to integrate regular developmental and social-emotional screenings into their daily work flow.</td>
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<td>Minnesota</td>
<td>Minnesota is making progress in improving the delivery of developmental and social-emotional screening by piloting electronic access to the Ages &amp; Stages Questionnaire, Third Edition (ASQ-3) and Ages &amp; Stages Questionnaire: Social-Emotional (ASQ:SE) screening instruments. Minnesota contracted with Patient Tools, Inc. to provide electronic access to the screening instruments and an electronic data management system for programs participating in the pilot. The app-based screening and data system includes use of audio versions available in Hmong, Spanish, Somali, and English languages for the purpose of increasing access to developmental and social-emotional screening for culturally and linguistically diverse populations as well as an option for adults with low-literacy levels. Twelve pilot site programs have been selected through an application process and have received training on screening. Applicants were reviewed and selected based on diversity of program type and populations served; capacity and readiness to implement an electronic screening system and interest in and capacity to build and strengthen partnerships with other screening programs and service providers in their communities. Three of the four RTT-ELC transformation zones are participating. Minnesota is working with White Earth Reservation to identify a screening program that is interested in participating. Electronic screening efforts are aligned with other state-led early identification initiatives, including Minnesota’s Early Childhood Comprehensive Systems (ECCS) grant and Minnesota’s implementation of the National Help Me Grow system. Finally, Minnesota is in the process of contracting with a Quality Improvement Advisor to provide facilitation of shared learning opportunities and consultation on quality improvement activities for the pilot sites. Pilot activities will continue throughout 2015.</td>
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### Additional Projects Supporting Positive Social and Emotional Development RTT-ELC States

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| **New Jersey** | *New Jersey 2014 APR* – Executive Summary, p.3  
*we have established a regional NJ Early Learning Training Academy (Academy), led by Rutgers University, Center for Effective School Practices, to align early childhood workforce preparation. Of the many responsibilities for the Academy, one notable focus is the extensive training and supports that focus on infant and young child mental health and social-emotional development. In fact, the mental health focus extends throughout the grant as family engagement initiatives are specifically designed to address the impacts of toxic stress and prevent many stress factors by helping families and caregivers access vital health services.* |
| **New Mexico** | *New Mexico 2014 APR* – C(3), p. 51  
*New Mexico is conducting a collaborative effort with the Department of Health, Maternal Child Health, Family Health Bureau, for training of early learning educators and administrators regarding conducting developmental screenings of infants, toddlers, and preschoolers. CYFD is developing a contract for a comprehensive training for Cross-Sector consultants and trainers in the background, implementation and follow up of age and cultural appropriate screening tools for developmental and social-emotional development. This includes the referral follow up and inclusion process.* |
| **Pennsylvania** | *Pennsylvania 2014 APR* – Executive Summary, p. 5  
*Pennsylvania hired an Early Learning Outcomes Reporting (ELOR) Project Manager in August 2014 who is developing a professional development plan that includes robust information on the use of the developmental screening assessments, Ages & Stages Questionnaire (ASQ) and Ages & Stages Questionnaire Social-Emotional (ASQ-SE)* |
| **Pennsylvania** | *Pennsylvania 2014 APR* – C(1) p. 51  
*Revisions to the Kindergarten, Grades 1 and 2 standards began in the fall of 2014 through convening diverse stakeholder groups using Race to the Top-Early Learning Challenge funding. Executive function skill standards in Approaches to Learning through Play and Social and Emotional Development were developed and finalized on September 22 and 23 [2014].* |
| **Pennsylvania** | *Pennsylvania 2014 APR* – C(2), p. 56  
*Pennsylvania encourages early screening and ongoing, comprehensive, observation-based assessment for young children. Requirements for use of a standards-aligned, developmental screening tool are included in program standards for all children from birth to age five upon entry into Pennsylvania Pre-K Counts programs, Head Start Supplemental Assistance Programs, state-managed Early Head Start programs, home visiting programs, early intervention programs, and child care programs in levels 2, 3, and 4 of the STARS tiered* |
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<td>Vermont</td>
<td><strong>Training on Developmental screening Ages &amp; Stages Questionnaire</strong>&lt;br&gt;Our partnership with the Vermont Child Health Information Program (VCHIP) is for two HMG core components: (1) child health provider outreach and, (2) HMG [Help Me Grow] data collection and analysis. Leveraging resources and aligning with Project LAUNCH, we are using (VCHIP) for training in developmental screening for HMG health and education provider outreach. VCHIP training will educate providers about the role of HMG care coordinators for referrals and connection to resources. Additionally, VCHIP will assist with training and piloting our new Health Department Developmental Screening Registry (spring 2015 under Project LAUNCH). Child health providers will be trained to administer the Ages &amp; Stages Questionnaire®: Social-Emotional and enter screening results in the Registry.&lt;br&gt;&lt;br&gt;... Our Health Department has made great progress this year in the development of our developmental screening registry (part of our immunization registry) that will include screening results for the Ages &amp; Stages Questionnaire® (ASQ), Ages &amp; Stages Questionnaire®: Social-Emotional (ASQ-SE), and the Modified Checklist for Autism in Toddlers (M-CHAT). Now in the test phase (nearing completion), the developmental screening registry will offer a state-wide data collection system with reporting features for primary care providers including: a screening history report, screening follow up status, and practice children due for screening (according to the American Academy of Pediatrics Bright Futures Periodicity schedule). The intent is for primary care providers to use the registry features to help them improve developmental screening rates overall for children in their practice and to utilize the data to get credit for improved screening rates (under the Vermont Blueprint for Health Care Reform).</td>
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*Source: Individual State 2014 RTT-ELC Annual Performance Reports*