

**Second Regular Session
Seventy-second General Assembly
STATE OF COLORADO**

REENGROSSED

*This Version Includes All Amendments
Adopted in the House of Introduction*

LLS NO. 20-0357.01 Brita Darling x2241

HOUSE BILL 20-1053

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A BILL FOR AN ACT

101 **CONCERNING MEASURES TO SUPPORT THE EARLY CHILDHOOD**
102 **EDUCATOR WORKFORCE.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov/>.)

Early Childhood and School Readiness Legislative Commission. The bill directs the state board of human services (state board) in the department of human services (DHS) to establish licensing standards that will allow an early care and education program to be licensed for a period of time determined by the state board if one or more early childhood educators have pursued DHS-approved early childhood

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
Capital letters or bold & italic numbers indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.

HOUSE
3rd Reading Unamended
June 9, 2020

HOUSE
Amended 2nd Reading
June 8, 2020

credentials but have not yet completed the credential and other state-board-determined quality, safety, and supervision conditions are met.

The state board shall also promulgate rules allowing an early childhood educator to earn points toward an early childhood credential based on the candidate's prior experience and demonstrated competency.

The bill directs DHS and the department of education (CDE) to streamline and align the early childhood professional credential, child care program licensing, and educator licensing to make requirements clear and consistent and to reduce the administrative burden and paperwork burden relating to credentialing and licensing of early childhood educators.

The bill directs DHS to analyze and prepare a written report every 2 years on the gap between Colorado's current supply of early childhood educators and the current and future need for early childhood educators in the state. The report will be posted on DHS's website.

The bill directs DHS and CDE to direct resources to support concurrent enrollment opportunities and career pathways for high school students and other nontraditional students interested in earning college credit toward becoming an early childhood educator.

The bill creates the early care and education recruitment and retention grant and scholarship program in DHS (grant and scholarship program). DHS shall administer the program directly or by contract. The state board shall establish an application process for the grant and scholarship program, and DHS shall award grants and scholarships to eligible individuals or entities for the purposes of increasing the number of individuals qualified as early childhood educators to teach in a program serving children 5 years of age or younger and to retain early childhood educators teaching in those programs.

Individuals and entities eligible for a grant or scholarship include individuals pursuing a career in early childhood education, nonprofit entities that administer scholarship programs aligned with the purposes of the grant and scholarship program, licensed early care and education programs, and institutions of higher education that administer scholarship programs aligned with the purposes of the grant and scholarship program.

The bill includes a list of eligible expenditures of the grant or scholarship money, including, among others, payment of tuition and other expenses for courses that lead to a degree or credential as an early childhood educator or a higher degree or qualification that results in retention of an educator; payment for the costs of coaching, mentoring, professional development, and other costs and programs that lead to credentialing; payments to licensed providers; and money for programs, schools, and institutions of higher education to establish "grow-your-own" programs to support individuals completing qualifications to become early childhood educators.

The bill creates a fund for the grant and scholarship program and requires DHS to report on the grant and scholarship program at least every 2 years and post the report on its website.

The bill creates the early childhood educator apprenticeship program (apprenticeship program) in the division of employment and training (division) in the department of labor and employment (CDLE). The division shall administer the apprenticeship program. The executive director of CDLE shall establish program standards relating to eligibility criteria for local entities, including workforce development programs, nonprofit organizations, institutions of higher education, and early childhood councils, to receive money to support existing apprenticeship programs and to implement new apprenticeship programs for early childhood educators. The bill includes the approved uses of funding provided through the apprenticeship program. The bill creates a fund for the apprenticeship program.

1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1.** In Colorado Revised Statutes, 26-6-106, **add** (7) as
3 follows:

4 **26-6-106. Standards for facilities and agencies - rules.** (7) THE
5 STATE BOARD SHALL PROMULGATE RULES CONCERNING STANDARDS FOR
6 LICENSING EARLY CARE AND EDUCATION PROGRAMS THAT FACILITATE THE
7 RECRUITMENT AND RETENTION OF COLORADO'S EARLY CHILDHOOD
8 EDUCATOR WORKFORCE AS DESCRIBED IN SECTION 26-6-122.

9 **SECTION 2.** In Colorado Revised Statutes, **add** 26-6-122 as
10 follows:

11 **26-6-122. Pathways to the classroom and retention strategies**
12 **for early childhood educators - standards - alignment across agencies**
13 **- report - rules.** (1) THE STATE BOARD SHALL PROMULGATE RULES
14 ESTABLISHING STANDARDS FOR LICENSING THAT ALLOW AN EARLY CARE
15 AND EDUCATION PROGRAM TO BE LICENSED FOR A PERIOD OF TIME
16 DETERMINED BY THE STATE BOARD IF A STATE-BOARD-APPROVED NUMBER
17 OF ASPIRING EARLY CHILDHOOD EDUCATORS IN THE PROGRAM ARE

1 PURSUING A STATE-AGENCY-APPROVED EARLY CHILDHOOD CREDENTIAL
2 AND OTHER QUALITY, SAFETY, AND SUPERVISION CONDITIONS ARE MET.

3 (2) THE STATE BOARD SHALL PROMULGATE RULES THAT ALLOW AN
4 EARLY CHILDHOOD EDUCATOR TO EARN POINTS TOWARD AN EARLY
5 CHILDHOOD CREDENTIAL THAT MEETS CHILD CARE LICENSING STANDARDS
6 BASED ON THE CANDIDATE'S PRIOR EXPERIENCE AND DEMONSTRATED
7 COMPETENCY. THE LICENSING PATHWAY MUST ALSO INCLUDE WAYS IN
8 WHICH A CANDIDATE IN A SECOND CAREER OR CHANGING CAREERS CAN
9 EARN POINTS OR CREDITS FOR PRIOR EXPERIENCE AND COMPETENCIES
10 THAT APPLY TOWARD THE QUALIFICATIONS FOR AN EARLY CHILDHOOD
11 EDUCATOR CREDENTIAL. THE STANDARDS AND CREDENTIAL AWARDED
12 PROCESS MAY USE VALIDATED TOOLS TO AWARD POINTS FOR
13 DEMONSTRATED COMPETENCIES.

14 (3) THE STATE DEPARTMENT AND THE DEPARTMENT OF EDUCATION
15 SHALL ALIGN, TO THE EXTENT POSSIBLE, THE STATE'S EARLY CHILDHOOD
16 PROFESSIONAL CREDENTIAL, DEPARTMENT OF EDUCATION EDUCATOR
17 LICENSING, AND CHILD CARE PROGRAM LICENSING IN ORDER TO MAKE THE
18 REQUIREMENTS AS CONSISTENT AND CLEAR AS POSSIBLE TO EDUCATORS
19 AND PROVIDERS. THE ALIGNMENT PROCESS MUST INCLUDE EXAMINING
20 STRATEGIES THAT SUPPORT RECIPROCITY FOR EARLY CHILDHOOD
21 EDUCATOR CREDENTIALS OR QUALIFICATIONS EARNED OUTSIDE OF
22 COLORADO.

23 (4) THE STATE DEPARTMENT AND THE DEPARTMENT OF EDUCATION
24 SHALL STREAMLINE ALL PAPERWORK THAT LICENSED EARLY CARE AND
25 EDUCATION PROGRAMS AND EARLY CHILDHOOD EDUCATORS MUST
26 COMPLETE TO MEET CHILD CARE LICENSING AND EARLY CHILDHOOD
27 EDUCATOR CREDENTIALING COMPLIANCE REQUIREMENTS. THE STATE

1 AGENCIES SHALL IDENTIFY WAYS TO SHARE INFORMATION AND REPORTS
2 ACROSS THE AGENCIES IN ORDER TO REDUCE THE ADMINISTRATIVE AND
3 PAPERWORK BURDEN ON EARLY CARE AND EDUCATION PROGRAMS AND
4 EDUCATORS. THE STREAMLINING PROCESS MUST INCLUDE A SYSTEMS SCAN
5 OF PROGRAMS AND INITIATIVES, IDENTIFICATION OF OVERLAPPING
6 REPORTING REQUIREMENTS, AND WAYS TO REDUCE THE ADMINISTRATIVE
7 AND PAPERWORK BURDEN ON PROGRAMS AND EDUCATORS.

8 (5) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), NO LATER
9 THAN JANUARY 31, 2022, AND NO LATER THAN JANUARY 31 EACH YEAR
10 THEREAFTER, THE STATE DEPARTMENT SHALL PREPARE A WRITTEN REPORT
11 CONCERNING COLORADO'S CURRENT SUPPLY OF QUALIFIED EARLY
12 CHILDHOOD EDUCATORS.

13 (6) THE STATE DEPARTMENT, THE DEPARTMENT OF HIGHER
14 EDUCATION, AND THE DEPARTMENT OF EDUCATION SHALL DEVELOP
15 RESOURCES TO SUPPORT LOCAL COMMUNITIES TO INCREASE CONCURRENT
16 ENROLLMENT OPPORTUNITIES FOR HIGH SCHOOL STUDENTS OR OTHER
17 NONTRADITIONAL STUDENTS TO EARN HIGHER EDUCATION CREDITS AND
18 DEGREES THAT ALLOW THEM TO SERVE AS EARLY CHILDHOOD EDUCATORS
19 AND SHALL SUPPORT CAREER PATHWAYS FOR HIGH SCHOOL STUDENTS
20 EARNING COLLEGE CREDITS TOWARD BECOMING EARLY CHILDHOOD
21 EDUCATORS, INCLUDING CONCURRENT ENROLLMENT, CAREER AND
22 TECHNICAL EDUCATION, THE ASCENT PROGRAM, AND OTHER CAREER
23 PATHWAYS.

24 **SECTION 3.** In Colorado Revised Statutes, 26-6.5-106, **amend**
25 **(6)(b) and (8)(a); and add (4.5) as follows:**

26 **26-6.5-106. School-readiness quality improvement program -**
27 **created - Colorado shines quality rating and improvement system -**

1 **rules. (4.5) State assistance (a)** THE STATE DEPARTMENT MAY PROVIDE
2 TECHNICAL ASSISTANCE AND FINANCIAL INCENTIVES TO:

3 (I) PROGRAMS THAT ARE RATED IN THE COLORADO SHINES SYSTEM
4 AT A LEVEL ONE OR TWO TO SUPPORT THE PROGRAMS IN ADVANCING TO A
5 LEVEL THREE OR HIGHER QUALITY LEVEL; AND

6 (II) PROGRAMS THAT ARE RATED IN THE COLORADO SHINES
7 SYSTEM AT A LEVEL THREE, FOUR, OR FIVE TO SUPPORT THE PROGRAMS IN
8 MAINTAINING A HIGH-QUALITY LEVEL OR ADVANCING TO A HIGHER
9 QUALITY LEVEL.

10 (b) THE EARLY CHILDHOOD COUNCIL MAY SUPPORT THE STATE
11 DEPARTMENT WITH THE ASSISTANCE DESCRIBED IN SUBSECTION (4.5)(a)
12 OF THIS SECTION BY PROVIDING LOCAL COMMUNITY OUTREACH AND
13 ENGAGEMENT STRATEGIES.

14 (6) **School-readiness plans.** Each early childhood council seeking
15 to apply for school-readiness quality improvement funding pursuant to
16 this section shall prepare and submit to the state department a three-year
17 school-readiness plan that outlines strategies to improve the school
18 readiness of children. The school-readiness plan, at a minimum, must
19 include:

20 (b) A plan that describes how the early childhood council will
21 target and recruit programs that are rated in the Colorado shines system
22 at a level ~~two~~ ONE or higher. ~~or that are licensed programs with a~~
23 ~~demonstrated hardship that are actively working toward achieving a~~
24 ~~Colorado shines system level two rating.~~ The early childhood council
25 must target and recruit programs to increase the access and availability of
26 quality child care for children participating in the Colorado child care
27 assistance program, created in part 8 of article 2 of this title 26. IF THE

1 EARLY CHILDHOOD COUNCIL RECEIVED SCHOOL-READINESS QUALITY
2 IMPROVEMENT FUNDING PRIOR TO THE 2020-21 FISCAL YEAR, THE EARLY
3 CHILDHOOD COUNCIL SHALL AMEND THE THREE-YEAR SCHOOL READINESS
4 PLAN TO COMPLY WITH THE REQUIREMENTS OF THIS SECTION.

5 (8) **Funding.** (a) The school-readiness quality improvement
6 program ~~shall be~~ IS funded using federal child care development fund
7 money or other federal OR STATE money annually appropriated for the
8 program. The state department shall allocate the money to the eligible
9 early childhood councils for distribution to early childhood education
10 programs, as provided in this section.

11 **SECTION 4.** In Colorado Revised Statutes, **add** part 4 to article
12 6.5 of title 26 as follows:

13 **PART 4**

14 **EARLY CHILDHOOD MENTAL**

15 **HEALTH CONSULTATION PROGRAM**

16 **26-6.5-401. Definitions.** AS USED IN THIS PART 4, UNLESS THE
17 CONTEXT OTHERWISE REQUIRES:

18 (1) "DEPARTMENT" MEANS THE STATE DEPARTMENT OF HUMAN
19 SERVICES.

20 (2) "MENTAL HEALTH CONSULTANT" MEANS AN EARLY CHILDHOOD
21 MENTAL HEALTH CONSULTANT WHO IS FUNDED BY APPROPRIATIONS
22 ALLOCATED OR AWARDED TO THE DEPARTMENT FOR THE PROGRAM AND
23 WHO MEETS THE QUALIFICATIONS OUTLINED IN THE PROGRAM DESIGNED
24 AND DEVELOPED PURSUANT TO THIS PART 4.

25 (3) "PROGRAM" MEANS THE STATEWIDE VOLUNTARY PROGRAM OF
26 EARLY CHILDHOOD MENTAL HEALTH CONSULTATION DESIGNED,
27 IMPLEMENTED, AND OPERATED BY THE DEPARTMENT PURSUANT TO THIS

1 PART 4.

2 **26-6.5-402. Early childhood mental health consultation -**

3 **statewide program - creation - purpose - rules. (1) (a) ON OR BEFORE**

4 **JULY 1, 2022, THE DEPARTMENT SHALL DESIGN, IMPLEMENT, AND OPERATE**

5 **THE STATEWIDE VOLUNTARY PROGRAM OF EARLY CHILDHOOD MENTAL**

6 **HEALTH CONSULTATION TO EXPAND AND ENHANCE CURRENT PRACTICES**

7 **ACROSS THE STATE. THE DEPARTMENT, THROUGH THE PROGRAM, SHALL**

8 **SUPPORT MENTAL HEALTH IN A VARIETY OF SETTINGS, INCLUDING BUT NOT**

9 **LIMITED TO EARLY CHILD CARE AND LEARNING, ELEMENTARY SCHOOLS,**

10 **HOME VISITATION, CHILD WELFARE, PUBLIC HEALTH, AND HEALTH CARE,**

11 **INCLUDING SETTINGS PROVIDING PRENATAL AND POSTPARTUM CARE.**

12 (b) IN DESIGNING AND DEVELOPING THE PROGRAM, THE

13 DEPARTMENT SHALL WORK IN CONSULTATION WITH THE NATIONAL CENTER

14 OF EXCELLENCE FOR INFANT AND EARLY CHILDHOOD MENTAL HEALTH

15 CONSULTATION FUNDED BY THE UNITED STATES DEPARTMENT OF HEALTH

16 AND HUMAN SERVICES; NATIONALLY RECOGNIZED ENTITIES THAT SUPPORT

17 IMPLEMENTATION OF SUSTAINABLE SYSTEMS OR PROGRAMS THAT FOCUS

18 ON PROMOTING THE SOCIAL, EMOTIONAL, AND BEHAVIORAL OUTCOMES OF

19 YOUNG CHILDREN; AND KEY STAKEHOLDERS IN THE STATE, INCLUDING

20 MENTAL HEALTH PROFESSIONALS, NONPROFIT ORGANIZATIONS WITH

21 EXPERTISE IN MENTAL HEALTH, ORGANIZATIONS REPRESENTING PARENTS

22 OF CHILDREN WHO WOULD BENEFIT FROM EARLY CHILDHOOD MENTAL

23 HEALTH CONSULTATION, HOSPITALS AND OTHER HEALTH CARE PROVIDER

24 ORGANIZATIONS WITH EXPERTISE WORKING WITH CHILDREN FACING

25 BEHAVIORAL HEALTH AND OTHER CHALLENGES TO OPTIMAL GROWTH AND

26 DEVELOPMENT, EARLY CHILD CARE AND EDUCATION PROVIDERS, AND

27 CLINICIANS WITH EXPERTISE IN INFANT AND EARLY CHILDHOOD MENTAL

1 HEALTH.

2 (c) THE DEPARTMENT SHALL COORDINATE WITH
3 COMMUNITY-BASED ORGANIZATIONS TO ENSURE THE EFFECTIVE
4 IMPLEMENTATION OF THE PROGRAM AND MODEL OF CONSULTATION
5 ESTABLISHED PURSUANT TO SECTION 26-6.5-403, AS WELL AS SUPPORT
6 THE AVAILABILITY OF RESOURCES ACROSS THE STATE TO SUPPORT THE
7 PROGRAM AND THE MENTAL HEALTH CONSULTANTS IN THE PROGRAM IN
8 THEIR WORK.

9 (d) THE DEPARTMENT MAY PROMULGATE RULES FOR THE DESIGN,
10 IMPLEMENTATION, AND OPERATION OF THE PROGRAM.

11 (2) THE PURPOSE OF THE PROGRAM IS TO:

12 (a) INCREASE THE NUMBER OF QUALIFIED AND APPROPRIATELY
13 TRAINED MENTAL HEALTH CONSULTANTS THROUGHOUT THE STATE WHO
14 WILL CONSULT WITH PROFESSIONALS WORKING WITH CHILDREN ACROSS A
15 DIVERSITY OF SETTINGS, AS WELL AS OTHER ADULTS, INCLUDING FAMILY
16 MEMBERS, WHO DIRECTLY INTERACT WITH AND CARE FOR CHILDREN;

17 (b) SUPPORT AND PROVIDE GUIDANCE AND TRAINING, THROUGH
18 VISITS WITH MENTAL HEALTH CONSULTANTS IN THE PROGRAM, TO
19 FAMILIES, EXPECTING FAMILIES, CAREGIVERS, AND PROVIDERS ACROSS A
20 DIVERSITY OF SETTINGS IN ADDRESSING THE HEALTHY SOCIAL-EMOTIONAL
21 DEVELOPMENTAL NEEDS OF CHILDREN AND FAMILIES DURING THE
22 PRENATAL PERIOD THROUGH EIGHT YEARS OF AGE;

23 (c) DEVELOP A DEFINED MODEL OF CONSULTATION THAT IS
24 ROOTED IN DIVERSITY, EQUITY, AND INCLUSION FOR THE STATE PURSUANT
25 TO SECTION 26-6.5-403 THAT INCLUDES QUALIFICATIONS AND
26 COMPETENCIES FOR MENTAL HEALTH CONSULTANTS, JOB EXPECTATIONS,
27 EXPECTED OUTCOMES, AND GUIDANCE ON RATIOS BETWEEN MENTAL

1 HEALTH CONSULTANTS IN THE PROGRAM AND THE SETTINGS THEY
2 SUPPORT; AND

3 (d) DEVELOP AND MAINTAIN A STATEWIDE PROFESSIONAL
4 DEVELOPMENT PLAN PURSUANT TO SECTION 26-6.5-404 THAT ASSISTS THE
5 MENTAL HEALTH CONSULTANTS IN MEETING THE EXPECTATIONS AND
6 DEVELOPING THE COMPETENCIES SET FORTH IN THE MODEL OF
7 CONSULTATION ESTABLISHED PURSUANT TO SECTION 26-6.5-403;

8 (3) NOTHING IN THIS PART 4 CREATES OR EXPANDS THE
9 REGULATORY AUTHORITY OF THE DEPARTMENT OVER MENTAL HEALTH
10 PROFESSIONALS WHO ARE NOT FUNDED BY APPROPRIATIONS MADE TO THE
11 DEPARTMENT FOR THE PROGRAM PURSUANT TO THIS PART 4.

12 **26-6.5-403. Model of early childhood mental health**
13 **consultation - standards and guidelines - qualifications.** (1) ON OR
14 BEFORE JULY 1, 2022, THE DEPARTMENT SHALL DESIGN AND DEVELOP, IN
15 CONSULTATION WITH THE STAKEHOLDERS LISTED IN SECTION 26-6.5-402
16 (1)(b), A MODEL OF CONSULTATION FOR THE PROGRAM THAT INCLUDES
17 QUALIFICATIONS FOR MENTAL HEALTH CONSULTANTS, JOB EXPECTATIONS,
18 EXPECTED OUTCOMES, AND GUIDANCE ON RATIOS BETWEEN MENTAL
19 HEALTH CONSULTANTS AND THE SETTINGS THEY SUPPORT, REFERRED TO
20 IN THIS SECTION AS "THE MODEL". THE MODEL MUST INCLUDE STANDARDS
21 AND GUIDELINES TO ENSURE THE PROGRAM IS IMPLEMENTED EFFECTIVELY,
22 WITH PRIMARY CONSIDERATION GIVEN TO EVIDENCE-BASED SERVICES. THE
23 STANDARDS AND GUIDELINES MUST INCLUDE:

24 (a) CLEAR QUALIFICATIONS FOR MENTAL HEALTH CONSULTANTS
25 IN THE PROGRAM, INCLUDING, AT A MINIMUM, EXPERTISE IN ADULT AND
26 CHILD MENTAL HEALTH THEORY, PRACTICE, AND SERVICES; EARLY
27 CHILDHOOD, CHILD DEVELOPMENT, AND FAMILY SYSTEMS; KNOWLEDGE

1 OF, AND SKILLS TO ADDRESS, CIRCUMSTANCES THAT AFFECT CHILDREN'S
2 BEHAVIOR AND MENTAL HEALTH; KNOWLEDGE OF DEVELOPMENTAL
3 SCIENCE AND MILESTONES; KNOWLEDGE OF A CONSULTATIVE MODEL OF
4 PRACTICE; AND AVAILABLE RESOURCES AND SERVICES TO CHILDREN AND
5 FAMILIES TO ALLEVIATE FAMILY STRESS;

6 (b) EXPECTATIONS FOR THE PLACEMENT OF REGIONAL
7 CONSULTANTS THAT WILL MOST EFFECTIVELY MEET LOCAL COMMUNITY
8 NEED FOR MENTAL HEALTH CONSULTANTS IN THE PROGRAM. THE
9 DEPARTMENT SHALL PERIODICALLY CONDUCT AN OPEN AND COMPETITIVE
10 SELECTION PROCESS FOR THE PLACEMENT OF ANY PUBLICLY FUNDED
11 MENTAL HEALTH CONSULTANTS IN THE PROGRAM.

12 (c) GUIDANCE CONCERNING THE SCOPE OF WORK THAT MENTAL
13 HEALTH CONSULTANTS IN THE PROGRAM MAY PROVIDE TO PROFESSIONALS
14 WORKING WITH YOUNG CHILDREN AND FAMILIES, INCLUDING GUIDANCE
15 ON APPROPRIATE REFERRALS, TRAINING, COACHING, PREVENTION, AND
16 ANY OTHER APPROPRIATE SERVICES;

17 (d) METHODS TO INCREASE THE AVAILABILITY OF BILINGUAL OR
18 MULTILINGUAL MENTAL HEALTH CONSULTANTS IN THE PROGRAM AND
19 OTHERWISE ENSURE THE CULTURAL COMPETENCY OF MENTAL HEALTH
20 CONSULTANTS IN THE PROGRAM AND ENSURE THAT THE CONSULTANT
21 POPULATION REFLECTS AN ARRAY OF CHARACTERISTICS AND
22 BACKGROUNDS AND IS REFLECTIVE OF THE DIVERSITY OF THE PROVIDERS,
23 CHILDREN, AND FAMILIES BEING SERVED;

24 (e) GUIDANCE ON THE DIVERSE SETTINGS IN WHICH AND TYPES OF
25 PROVIDERS WITH WHOM MENTAL HEALTH CONSULTANTS IN THE PROGRAM
26 MAY WORK TO MEET THE VARIED NEEDS OF CHILDREN AND FAMILIES FROM
27 PRENATAL THROUGH EIGHT YEARS OF AGE. THE MODEL MUST INCLUDE

1 PROVISIONS THAT ENSURE THAT MENTAL HEALTH CONSULTANTS IN THE
2 PROGRAM MAY WORK WITH A DIVERSITY OF PROFESSIONALS AND
3 CAREGIVERS, INCLUDING BUT NOT LIMITED TO EARLY CHILD CARE AND
4 EDUCATION TEACHERS AND PROVIDERS, ELEMENTARY SCHOOL TEACHERS
5 AND ADMINISTRATORS, HOME VISITORS, CHILD WELFARE CASEWORKERS,
6 PUBLIC HEALTH PROFESSIONALS, AND HEALTH CARE PROFESSIONALS,
7 INCLUDING SETTINGS PROVIDING PRENATAL AND POSTPARTUM CARE.

8 (f) ANTICIPATED OUTCOMES THAT THE PROGRAM AND MENTAL
9 HEALTH CONSULTANTS IN THE PROGRAM SHOULD ACHIEVE, INCLUDING:

10 (I) PROMOTING SOCIAL-EMOTIONAL GROWTH AND DEVELOPMENT
11 OF CHILDREN;

12 (II) PROVIDING GUIDANCE TO PROFESSIONALS AND CAREGIVERS
13 TO EFFECTIVELY UNDERSTAND AND SUPPORT CHILDREN'S POSITIVE
14 BEHAVIOR AND DEVELOPMENT;

15 (III) UNDERSTANDING THE EFFECTS OF TRAUMA AND ADVERSITY,
16 INCLUDING OPPRESSION, PREJUDICE, DISCRIMINATION, RACISM, AND
17 GENDER INEQUITY, ON THE DEVELOPING BRAIN TO ULTIMATELY REDUCE
18 CHALLENGING BEHAVIORS AND INCREASE POSITIVE EARLY EXPERIENCES;

19 (IV) PROMOTING HIGH QUALITY INTERACTIONS AND
20 RELATIONSHIPS BETWEEN CHILDREN AND ADULTS;

21 (V) SUPPORTING THE MENTAL HEALTH AND WELL-BEING OF
22 ADULTS WHO CARE FOR CHILDREN;

23 (VI) CONNECTING AND REFERRING CHILDREN, FAMILIES, AND
24 PROVIDERS TO PROGRAMS, RESOURCES, AND SUPPORTS THAT WILL ASSIST
25 THEM IN THEIR DEVELOPMENT AND SUCCESS WHILE ADDRESSING BARRIERS
26 TO ACCESSING SUCH RESOURCES AND SUPPORTS;

27 (VII) SUPPORTING EQUITABLE, INCLUSIVE OUTCOMES FOR THE

1 DIVERSE PROVIDERS, CHILDREN, AND FAMILIES THROUGHOUT THE STATE;
2 AND

3 (g) GUIDANCE ON APPROPRIATE RATIOS OF MENTAL HEALTH
4 CONSULTANTS AND THE SETTINGS THEY SUPPORT, AS WELL AS CASELOAD
5 EXPECTATIONS.

6 **26-6.5-404. Statewide professional development plan for early**
7 **childhood mental health consultants.** (1) ON OR BEFORE JULY 1, 2022,
8 THE DEPARTMENT SHALL DEVELOP A STATEWIDE PROFESSIONAL
9 DEVELOPMENT PLAN TO SUPPORT MENTAL HEALTH CONSULTANTS IN THE
10 PROGRAM IN MEETING THE EXPECTATIONS SET FORTH IN THE MODEL OF
11 CONSULTATION DESCRIBED IN SECTION 26-6.5-403, REFERRED TO IN THIS
12 SECTION AS "THE PLAN". IN DEVELOPING THE PLAN, THE DEPARTMENT
13 SHALL WORK COLLABORATIVELY, TO THE EXTENT PRACTICABLE, WITH THE
14 NATIONAL CENTER OF EXCELLENCE FOR INFANT AND EARLY CHILDHOOD
15 MENTAL HEALTH CONSULTATION FUNDED BY THE UNITED STATES
16 DEPARTMENT OF HEALTH AND HUMAN SERVICES. THE DEPARTMENT MAY
17 IMPLEMENT THE PLAN IN PARTNERSHIP WITH NONPROFITS, INSTITUTIONS
18 OF HIGHER EDUCATION, AND CREDENTIALING PROGRAMS FOCUSED ON
19 INFANT AND EARLY CHILDHOOD MENTAL HEALTH.

20 (2) THE PLAN MUST INCLUDE, AT A MINIMUM, TRAINING RELATED
21 TO:

22 (a) TRAUMA AND TRAUMA-INFORMED PRACTICES AND
23 INTERVENTIONS;

24 (b) ADVERSE CHILDHOOD EXPERIENCES;

25 (c) THE SCIENCE OF RESILIENCE AND INTERVENTIONS TO PROMOTE
26 RESILIENCE;

27 (d) CHILD DEVELOPMENT THROUGH EIGHT YEARS OF AGE;

- 1 (e) CAREGIVER SUBSTANCE USE AND EFFECTIVE FAMILY
- 2 INTERVENTIONS;
- 3 (f) IMPACT OF INEQUITY AND BIAS ON CHILDREN, FAMILIES,
- 4 CAREGIVERS, MENTAL HEALTH CONSULTANTS, AND PROVIDERS, AND
- 5 STRATEGIES TO MITIGATE SUCH IMPACT;
- 6 (g) SENSORY PROCESSING ISSUES;
- 7 (h) THE NEEDS OF CHILDREN WITH DEVELOPMENTAL DELAYS AND
- 8 DISABILITIES, INCLUDING CHILDREN BORN PREMATURELY OR WITH SPECIAL
- 9 HEALTH CARE NEEDS, AND SPECIAL EDUCATION LAW;
- 10 (i) COLORADO'S CHILD PROTECTION AND FOSTER CARE SYSTEM;
- 11 (j) OCCUPATIONAL THERAPY, SPEECH THERAPY, PHYSICAL
- 12 THERAPY, AND MENTAL HEALTH THERAPY;
- 13 (k) OTHER PUBLIC AND PRIVATE SUPPORTS AND SERVICES;
- 14 (l) EARLY CHILDHOOD SOCIAL-EMOTIONAL DEVELOPMENT AND
- 15 FAMILY SYSTEMS;
- 16 (m) EARLY CHILDHOOD MENTAL HEALTH DIAGNOSIS AND
- 17 EFFECTIVE TREATMENT MODELS; AND
- 18 (n) CONSULTATION AS A MODEL OF ADULT LEARNING.
- 19 (3) THE PLAN MUST ALSO:
- 20 (a) ALLOW MENTAL HEALTH CONSULTANTS IN THE PROGRAM TO
- 21 ACCESS REGIONALLY APPROPRIATE AND CULTURALLY RESPONSIVE
- 22 PROGRAMS TO BEST LINK THEM TO THE CHILDREN AND FAMILIES IN THEIR
- 23 COMMUNITIES AND THEIR UNIQUE NEEDS;
- 24 (b) INCLUDE STRATEGIES FOR MENTAL HEALTH CONSULTANTS IN
- 25 THE PROGRAM TO ESTABLISH INDIVIDUALIZED COACHING AS REQUESTED
- 26 BY TEACHERS, CAREGIVERS, AND FAMILIES; AND
- 27 (c) PROVIDE OPPORTUNITIES FOR REGULAR SUPPORT MEETINGS

1 BETWEEN MENTAL HEALTH CONSULTANTS IN THE PROGRAM;
2 SUPERVISORS, INCLUDING REFLECTIVE SUPERVISORS; AND PEER MENTAL
3 HEALTH CONSULTANTS. THE SUPPORT MEETINGS MUST INCLUDE
4 REFLECTIONS ON THE PRACTICE IMPACT OF ATTITUDES AND VALUES.

5 **26-6.5-405. Statewide qualifications and competencies for**
6 **early childhood mental health consultants.** THE DEPARTMENT SHALL
7 ENSURE THAT EACH MENTAL HEALTH CONSULTANT FUNDED THROUGH THE
8 PROGRAM MEETS THE QUALIFICATIONS AND COMPETENCIES OUTLINED IN
9 THE PROGRAM AS DESIGNED AND DEVELOPED PURSUANT TO THIS PART 4.

10 **SECTION 5. Safety clause.** The general assembly hereby finds,
11 determines, and declares that this act is necessary for the immediate
12 preservation of the public peace, health, or safety.