

# Program: Multnomah LAUNCH-Mental Health Consultation and Home Visiting Logic Model

Inputs	Outputs		Outcomes		
	Activities	Participation	Short-Term	Medium-Term	Long-Term
<ul style="list-style-type: none"> <li>• Adequate funding for IECMHC services</li> <li>• Trained IECMH consultants</li> <li>• Mental health consultants who are connected with other rural mental health consultants in the region or state</li> <li>• Positive relationships and community partnerships with local social service providers</li> <li>• Involvement by mental health consultants in mental health program planning</li> <li>• A sufficient number of initial and follow-up mental health consultant visits to the program</li> <li>• Flexibility and creativity in delivering IECMHC services</li> <li>• Trauma-focused IECMHC services</li> <li>• Incorporation of telehealth services when possible</li> </ul>	Develop positive relationships with staff, children, and families	<ul style="list-style-type: none"> <li>• Develop program plan for IECMHC services</li> <li>• Support families</li> <li>• Support teachers</li> </ul>	Mental health consultants feel competent, connected, and supported	Reduced program staff turnover	Increased number of rural IECMHC providers
	Develop positive relationships with community partners		Teachers experience less stress	Improved coordination and integration among community child-serving systems	Improved social and emotional development in infants and young children
	Integrate paraprofessional mental health providers, such as elders or behavioral health aides, when possible and appropriate		Teachers are more confident in addressing challenging behaviors	Increased knowledge and understanding of IECMH in the community	Decreased suspensions and expulsions for challenging behaviors
	Conduct classroom observations		Families feel more connected to the early care and education teachers and program	Decreased stigma around children's mental health	
	Conduct child screening and assessment		Families feel more confident in addressing challenging behaviors		
	Meet with families		Programs are more connected to community partners		
	Consult with classroom teachers and other staff				
	Support teachers experiencing personal stress, grief, or loss				
	Provide trainings for families and teachers				

**Assumptions:** Infants, children, and families living in rural communities often do not have access to quality mental health services; IECMHC is especially important in these communities.

**External factors:** Delivery of IECMHC services in rural communities is challenging due to the high cost of services, the shortage of qualified IECMH providers, limited access to health and behavioral health services, the isolation of mental health consultants, the time and funds needed to travel between remote communities, and the stigma associated with children's mental health.