



Arizona Head Start ASSOCIATION

Supporting Head Start quality today, impacting Arizona's tomorrow!

AHSA Quarterly Meeting Standing Committee Agenda & Meeting Minutes

Meeting Location: Black Canyon Conference Center: 9440 N. 25th Avenue Phoenix, AZ 85021

Meeting Time: 1:45 pm

Meeting Date: April 28, 2016

NEXT QUARTERLY COMMITTEE MEETING: September 22, 2016

AGENDA ITEM	DISCUSSION/RECOMMENDATION	PERSON(S) RESPONSIBLE/ PRESENTER
I. Call to Order & Introductions	Meeting was called to order @ 1:45 by committee chair	Michelle Thornton
II. Adoption of Agenda	Agenda was sent all committee members via email last week for member to review in preparation for today's meeting. Idea that was generated from general membership meeting: MOU with Az Department of Behavioral Health Services, discussion on increase in aggressive behaviors in the classroom and next steps Motion made by Carla Second by Tracy	Michelle Thornton
III. Approval of Minutes	Motion made by Glenda to approve the minutes of the previous meeting and second by Nadia. All in favor, none opposed.	Michelle Thornton
IV. Announcements	Members introduced themselves by name, position, agency, and shared why they are participating in this meeting. Collaboration was a reoccurring theme among attendees as well as sharing and learning from each other.	Committee Members
V. ADE update (Tabled)		Nicole Russell (not available)



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<p>VI. AzEIP update</p>	<ul style="list-style-type: none"> • State wide systemic improvement plan focuses on social emotional development in young children which has resulted in making some adjustments to the family surveys to help identify concerns families may have, priorities, etc. • Site visits as a part of monitoring are occurring at this time. Visits are prioritized in relationship to compliance and to provide support with problem solving. • Anticipating a staff opening – replacement for an integrated monitoring specialist positioning • Responsibility for the MOU is back to Kathy. Although the MOU is currently expired, AzEIP is operating as though it is still in existence. Do not anticipate this as a priority at this time due to some potential upcoming changes. Work on the MOU may begin again with the new administration. 	<p>Kathy Coloma Data Manager</p>
<p>VII. Profession Development Opportunities</p>	<p>Infant-Toddler Mental Health Coalition of Arizona (ITMHCA) 16th Annual Risk to Resilience Conference October 6th & 7th at Desert Willow</p>	<p>Committee members</p>
<p>VII. Suggestions for future committee projects, guest speakers, etc.... open</p>	<p>DECA</p> <ul style="list-style-type: none"> • Lengthy discussion on use of the DECA tool and how to utilize the information to support children in the classroom to improve behavior outcomes. DECA is now aligned with Conscious Discipline and offers the opportunity to provide specific follow up on identified issues, review of progress, and revision of strategies if needed when utilizing the computerized version. <p>Trauma Informed Care</p> <ul style="list-style-type: none"> • There is a trauma informed care meeting monthly at Phoenix Children's Hospital that is mostly geared for Elementary schools. There is something similar to an implementation guide that supports schools in creating a trauma informed workplace that can be accessed through this group. 	<p>Committee Members</p>



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- Glenda has instituted a Trauma Informed Work Group within her agency to provide support for staff and to enhance staff wellness.
- How can we systematically train staff on trauma informed care? How do we help staff view behaviors through trauma informed caregiving lenses? The need is to increase staff's emotional intelligence which is a slow process as it requires time for staff to self-reflect and be willing to grow personally and professionally.

Challenging Behaviors

- Much discussion revolved around the noticeable increase across all program in challenging behaviors in young children and how to adequately support staff to meet classroom needs. More questions than answers were generated.
- What is the need – is it attachment, is it safety, is it something else? Before a child can learn self-regulation they need support through co-regulation. Children need safety, empathy, guidance, and staff that are composed and willing to be supportive to individual needs.
- Discussion on whether or not teachers are willing to comply with behavior plans that are developed collaboratively with behavioral health consultants/specialist.
- What are best practices in recognizing and helping staff understand and address Compassion Fatigue?
- How can we support school readiness in children with challenging behavior that are not eligible for special education?
- The committee agreed there is a lot of insight, experience, and expertise in the room – so how can we move forward with making an impact?
 - Define challenging behavior
 - Share our processes for addressing behaviors
 - Collect information on the # of incidents, behavior plans, referrals, consultations, etc. to report to the group in the fall



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	<p>from the 15-16 program year.</p> <ul style="list-style-type: none"> ○ Increase integration with behavioral health birth to 5 ○ Begin developing an MOU with Behavioral Health at the state level <ul style="list-style-type: none"> ▪ Is there a way to streamline the referral process? ▪ Is there a way to access training for teachers/parents? ○ How is staff trained on trauma informed care ○ How do we impact the incoming professional to successfully cope with challenging behaviors based on core college curriculum that they are expected to take as an early educator? ○ How is technology impacting the parent-child relationship and the behaviors being seen in the classroom? Children are lacking connection, face to face time, lap top time. Cell phones are being used as substitutes for personal interactions and as toys to engage/entertain children. ● Resources <ul style="list-style-type: none"> ○ ACES Consortium, Phoenix Children's Hospital, Marsha Stanton, Prevention Health Coordinator ○ Heidi Quinlin, Touchstone, Early Childhood ○ Preventative Health Collaborative ○ National Child Traumatic Stress Network (NCTSN) ○ Local school district resources and support 	
<p>XI. Adjournment</p>	<p>Meeting was adjourned at 3:10 as several members needed to leave due to transportation arrangements and the committee chair is required to attend and report out at the executive committee meeting scheduled for 3:30.</p>	