

Please submit your letter of support for AB 2429 through the California Legislature Position Letter Portal:

<https://calegislature.ca.gov/Advocates/>

(If you have any difficulty submitting your letter through the portal, please send it to [mrenaud@kidango.org](mailto:mrenaud@kidango.org) and [mari.mendozaleon@asm.ca.gov](mailto:mari.mendozaleon@asm.ca.gov)).

[Insert Your Logo]

**March XX, 2026**

The Honorable Dr. Darshana R. Patel  
Chair, Assembly Education Committee  
California State Assembly  
1020 N Street Room 159  
Sacramento, CA 9581

The Honorable Alex Lee  
Chair, Human Services Committee  
California State Assembly  
1020 N Street Room 122  
Sacramento, CA 9581

**RE: AB 2429 (B. Rubio)- Support - Strengthening Access to Early Childhood Mental Health Consultation Services in Child Care Programs**

Dear Chairwoman Patel, Chairman Lee and Committee Members,

[NAME OF ORGANIZATION] is writing to express our strong support for Assembly Bill 2429 (B. Rubio) and respectfully requests your “Aye” vote to strengthen the Early Childhood Mental Health Consultation (ECMHC) model in the state and increase the number of children with access to inclusive and supportive environments.

ECMHC continues to grow as a model that can build the capacity of teachers to respond effectively to all children and create trauma-informed and inclusive environments. Since the passage of AB 2806 in 2022, also authored by Assemblymember Rubio, more ECE providers have been able to implement ECMHC with a roadmap on best practices and program requirements to follow. Now, we have the opportunity to make key adjustments to the model, which will make it easier for providers to implement and allow consultants to further customize their approach based on needs of the children, families, and teachers.

Based on feedback from providers and ECMHC consultants, it is necessary to revisit and update ECMHC programmatic requirements to strengthen the focus of the model on strong relationships between consultants and teachers and where appropriate, reduce assessment burdens on providers so they are more incentivized to implement ECMHC. In doing so, we can make this model more readily available to more programs across the state.

AB 2429 creates more flexibility for consultants and classrooms to co-develop a plan tailor-made for the needs of an individual classroom. Specifically this bill will:

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- Remove the requirement to conduct the ACEs screener for each child in a classroom receiving ECMHC. The ACEs Screener is an important tool, but is not an essential component of an ECMHC program and providers may already be utilizing a tool that serves a similar purpose. Furthermore, the ACEs Screener is more commonly conducted in well-child visits with pediatricians and parents may be hesitant to do this screener multiple times.
- Reduce required classroom observations from twice per year to once per year in consultation with the classroom team.

Both of these components will allow consultants to further customize their approach based on needs of the children and in collaboration with teachers and families. This allows ECMHC delivery to be more effective, particularly by building strong relationships between the ECMHC consultants and the key adults in a child's life.

For these reasons, [NAME OF ORGANIZATION] supports AB 2429 and respectfully requests your "Aye" vote.

Sincerely,

[YOUR FULL NAME]

[YOUR TITLE]