

2018 Supplemental Budget Decision Package

Agency: 307 Department of Children, Youth, and Families

Decision Package Code/Title: PL-A1 / Prevent Harm to Children

Budget Period: 2017-19

Budget Level: Policy Level

Agency Recommendation Summary Text:

The Department requests 2.5 FTEs and \$11.9 million to administer a collection of prevention services for children/youth designed to front-load the new department's investment in prevention.

Fiscal Summary:

Operating Expenditures	FY 2018	FY 2019	FY 2020	FY 2021
001-1 General Fund-State	\$0	\$11,944,897	\$8,443,606	\$8,443,606
Total Cost	\$0	\$11,944,897	\$8,443,606	\$8,443,606
Staffing	FY 2018	FY 2019	FY 2020	FY 2021
FTEs	0	2.5	2.5	2.5
Object of Expenditure	FY 2018	FY 2019	FY 2020	FY 2021
Object A – Salaries	\$0	\$201,268	\$201,268	\$201,268
Object B – Benefits	\$0	\$70,838	\$70,838	\$70,838
Object C – Contracts	\$0	\$1,634,000	\$1,334,000	\$1,334,000
Object N – Grants & Benefits	\$0	\$9,912,891	\$6,729,600	\$6,729,600
Other FTE-related costs	\$0	\$125,900	\$107,900	\$107,900

Package Description: With the creation of the Department of Children, Youth, and Families (DCYF), the legislature acknowledged the need for greater investment in prevention services to help reduce the number of at-risk children/youth entering the child welfare and juvenile justice systems, to limit progressively deeper systems-involvement, and to further reduce trauma for the children and youth who have entered these systems. The department requests \$11.9 million to increase investment in children along the continuum of development, as well as to build greater capacity to identify and invest in local communities with high concentrations of children and families at very high risk for child adverse experiences.

- 1. Increase the availability of high-quality childcare with trauma-informed enhancements for child welfare-involved infants and toddlers [ages 0-2]: \$5,104,606**

The lack of available subsidized childcare for infants and toddlers in the child welfare system has become a barrier to placing these children in foster care with families in which child care is a necessity. In Fiscal Year 2017, 4,062 infants and toddlers were in out-of-home foster care statewide. Of these, 2,527 (62.2%) children were in childcare paid by the state. According to Bureau of Labor Statistics estimates of workforce participation, approximately 71 percent (2,888 kids) need childcare, suggesting a shortage of care for approximately 360 children. Using a similar methodology, a similar shortage of care for CPS-involved infants and toddlers who are not yet placed in foster care is estimated at approximately 1,639 children.¹

A shortage of care for infants and toddlers affects the location and type of placement. If a child is unsafe, they will be placed regardless of whether childcare is available. However, children often end up being placed further from their home community, may not be able to be placed with a relative who would otherwise be safe and appropriate, or may end up with multiple short-term placements until a stable placement can be found. Placement of children far from their home communities threatens timely reunification. Additionally, providers who care for these infants and toddlers need supports to meet the special needs of children exposed to adverse experiences.

Greater access to subsidized childcare for infants and toddlers entering foster care as well as those who are CPS-involved is needed to both preserve and moderate the need for foster care placements for these vulnerable children. Trauma-informed coaching supports ensure providers, foster parents, and birth parents receive additional supports that will encourage child development, encourage providers to continue to accept child-welfare involved children, and help to prevent further harm to children.

DCYF proposes to ensure the availability of high-quality infant and toddler childcare for children in foster care and children involved with CPS – with a rate enhancement for a specific number of children in very high need communities. The department will use available geocoded data to identify communities with very high need for infant and toddler care for children in foster care and will focus the slot-based enhanced rate in those areas. To further support the providers, families, and children, the department will provide tailored coaching on relationship-focused and trauma-informed care necessary to support these very vulnerable children. By using CA service delivery data to identify the local communities with the greatest demand for infant and toddler care for CA-involved children, the department can target the enhancements to high-quality childcare providers in those communities.

Although the most immediate reported barrier is in how the lack of infant and toddler care is complicating the placement of children in foster care, DCYF is including providers providing care for CPS-involved children as eligible for the enhancements for two main reasons. First, these are the same communities. Children who come to the attention of CPS are often from the same high-risk communities where the department wishes to place children in foster care, so targeted

¹ In FY 2017 7,836 children ages 0-2 were screened in for CPS and not placed within 90 days, 688 received paid CA childcare. BLS data suggests 29.7% would need such care = 2,327 children – 688 = 1,639.

investments in local communities can be leveraged to benefit both groups of children. Second, these are often the same children at different points in their involvement with the child welfare system; in FY 2017 2,457 infants and toddlers entered foster care statewide, 26.7% of these had prior a prior screened-in CPS intake. If we can increase the supports to these families using the same tools, we can prevent some from entering the foster care system thus reducing some of the demand for infant/toddler foster care. One basic principle of the new DCYF is to orient child-serving systems to be more prevention focused (HB 1661, Sec 1), and this is an apt opportunity to leverage early learning programs to help meet the needs of child welfare-involved children.

Development among children who have experienced trauma and other adverse experiences benefits from intentional care that is relationship-centered and incorporates principles of trauma-informed practice. In addition, childcare providers working with high-need infants and toddlers and their family members benefit from additional support. DCYF will use a DEL-developed, research-informed coaching model to support this population of providers who care for infants and toddlers.²

Expected Results

CPS-involved infants and toddlers and those in foster care will have greater access to high-quality childcare that meets their needs. Child welfare social workers will have greater access to foster parents able to accept infants and toddlers for placement, and will have greater access to high-quality childcare as a supportive resource for families screened in following a CPS referral. Childcare providers working with CPS-involved infants and toddlers will build their skills and provide high-quality, relationship-focused, trauma-informed care to meet the needs of CPS-involved children.

Measure:

- The department will increase access to high-quality infant/toddler care by 315 subsidized slots across 50 high-quality child care providers in identified high-need communities.
- The department will provide evidence-based, trauma-informed coaching for the teachers and other caregivers in the 50 high-quality childcare providers.

2. Expand home visiting services to very high-need families and communities with children ages 0-3: \$2,606,648

Research repeatedly indicates that home-based support results in more confident parents and healthy children who are less likely to suffer from abuse or neglect and translates into long-term savings on social services, foster care, health care, education, and other government assistance programs. For families involved in the child welfare system, but not in out-of-home care, these intensive longer term relationship-based supports are critical.

² See more information on DEL's FIND program (Filming Interactions to Nurture Development) here: <https://del.wa.gov/node/702>.

Young children and their families in high-need communities, and those involved in the state’s child welfare system, need preventive supports to enhance child well-being and prevent the progression to foster care. In Fiscal Year 2017, 6,485 children under age 5 were in out-of-home foster care placement statewide; an estimated 32.9% of these children had a previous screened-in CPS referral. There is clearly a need to prevent young children from entering foster care.

DCYF proposes to expand voluntary home visiting across the state by 475 slots, specifically for very high-need families (defined as those involved in the child welfare system) and those in four very high-need communities (see proposal #5 below) with young children under age 5. This solution leverages the current state infrastructure and investment in both evidence-based and promising home visiting models by expanding such services in communities and for families in greatest need.

Building on the success in reaching high-risk families on TANF through the DEL-TANF home visiting partnership, this request proposes development of strong referral pathways to high-quality, voluntary home visiting services made available specifically for child welfare-involved families involved that would benefit from intensive supports and result in reduced need for foster care placements in some of the state’s highest risk communities.

Expected Results

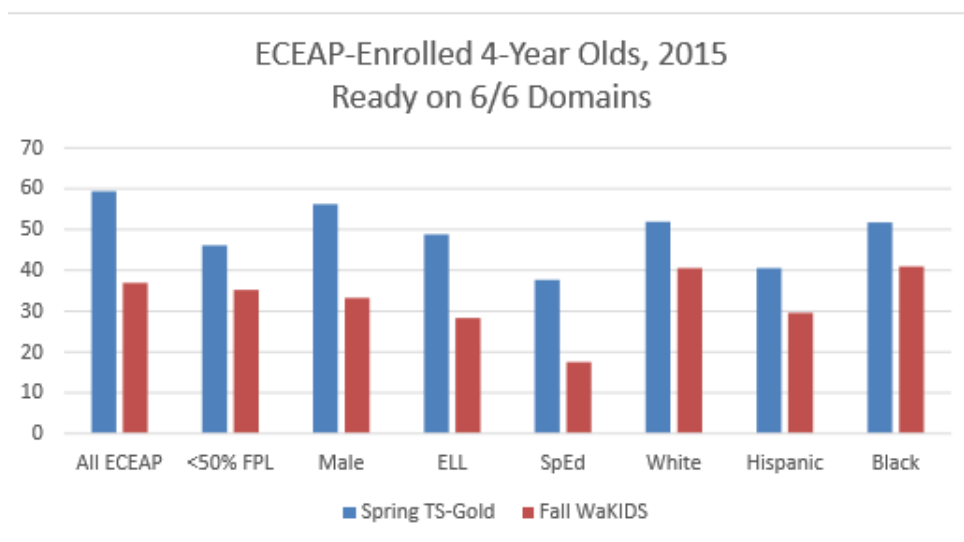
When young children from very high-need families are engaged in voluntary home visiting programs in their local communities the department expects a reduction in the demand for foster care among the young child population in those communities.

Measure:

- The department will increase access to home visiting by 475 slots using promising practices and evidence-based practices for child welfare involved families across the state, with a concentrated focus in four communities identified at very high need for child maltreatment prevention efforts (see #5 below).

3. ECEAP Pilots for Summer Programming and 3-year old gap [ages 3-4]: \$3,183,291

Children who participated in ECEAP in the 2014-15 school year showed significant growth across all six learning domains as assessed in Teaching Strategies GOLD®. Unfortunately, analysis of WaKIDS data also demonstrate that ECEAP children appear to lose some of the academic gains they make in ECEAP prior to Kindergarten entry. Specifically, 60 percent of ECEAP children were “kindergarten ready” in six out of six of GOLD® learning domains at the end of the ECEAP school year, but only 37 percent were ready in six out of six learning domains when assessed by WaKIDS at kindergarten entry.



ECEAP part day and full school day services take place during the course of a typical school year calendar, so most children do not have access to continuous services through the summer months. This gap in learning through the summer is likely one core cause of the “drop off” of learning gains that happens for ECEAP children leading up to kindergarten entry. There is high interest from parents and providers in offering summer programming to offset summer learning loss and ensure children sustain learning gains as they enter kindergarten in the fall.

During the 2017-2018 school year, the department expects that ECEAP will serve approximately 12,461 3- and 4-year-old children in low-income households. An evaluation by the Washington State Institute for Public Policy shows that children who participate in ECEAP have significantly higher math and reading test scores in the third, fourth, and fifth grades than similar children who did not participate. While this is a great accomplishment among children in low-income families, it still falls short of closing the achievement gap between children from low-income and those from non-low-income families.

The second challenge we address here is the 3-year-old gap, when children exit early intervention or other infant/toddler programs at 3 years of age, but are not yet 3 by the August 31st deadline for 3-year old ECEAP and Head Start enrollment. This gap means that for some children at risk for developmental delay or at high risk due to other concerns, they are unable to enroll in high quality preschool until the following year. **Serving three year-olds in ECEAP is critical** in order to close the opportunity gap and ensure children who are at-risk have the school readiness skills necessary to enter kindergarten ready to learn. By serving three year-olds, ECEAP:

- **Provides continuity of care for children transitioning from effective early intervention programs.** Providing ECEAP to three year-olds prevents a loss in significant gains made for at-risk children who participate in early intervention programs like home visiting, Early Head Start, ESIT and other related programs for infants and toddlers that end on their third birthday. Enrolling three year-olds in ECEAP upon transition from these programs (as soon

as they turn three and become ineligible for 0-2 focused programs), rather than by their age on a date-certain, ensures continuity of service and builds on the developmental gains achieved in early intervention programs.

- **Supports rural Washington communities.** In smaller communities, it is necessary to provide ECEAP in mixed age classes with both 3- and 4-year-olds to have sufficient children to pay teacher salaries and cover other expenses (having enough children to fund a classroom). ECEAP also supports working families that have 3-year-olds who are experiencing risk, and allows ECEAP to be in smaller settings such as family child care homes and small child care centers.

DCYF proposes two pilots based on these two areas of need:

First, to offer nine weeks of summer programming as a pilot for four year-olds (a group which makes up approximately two-thirds of the existing caseload) to determine if this enhancement can prevent a drop off of ECEAP learning gains prior to kindergarten entry. DEL proposes to add summer programming to 15 percent of eligible slots in fiscal year 2019. Of the funding designated for summer programming, 75 percent will be for part-day slots and 25 percent will be for full school day slots.

Second, to pilot 200 additional ECEAP slots statewide to address the 3-year-old gap year problem. The pilot would involve existing experienced contractors, with preference for providers experienced in serving younger children, those with close connections with early intervention programs, and those in communities identified at high risk for child maltreatment (see proposal #5 below).

At the end of the first year of the pilot, DCYF's research unit will analyze child outcomes for children in both pilots, using comparison groups of similar children who did not receive these enhancements, to determine the extent to which these enhancements work to improve child outcomes.

Expected Results

When children from very low-income families participate in high-quality ECEAP in the summer before kindergarten entry, we would expect that their summer learning loss will decrease and they will be more likely to present at kindergarten ready to learn. This pilot will allow us to determine the size of that benefit. Additionally, when children transitioning from early intervention to ECEAP are able to avoid a gap year, the increased continuity should result in better kindergarten preparedness.

Measure:

- The department will evaluate this effort using WaKIDS kindergarten entry assessment data for these children linked with TS-Gold data from their ECEAP year. We will quantify the extent to which summer learning loss occurred among summer pilot children compared with ECEAP 3- and 4-year olds who did not participate in a summer program before kindergarten entry.

- Additionally, the department will quantify continuity of services for children transitioning from early intervention programs into ECEAP, as well as TS-Gold and WaKIDS outcomes for these children.

4. Universal PreK [age 4] Study: \$200,000

Only half of Washington State’s children entering kindergarten enter school ready to succeed.³ While the problem is most acute among children from low-income households, even among children from non-low income households 59% arrive at school not yet ready.

A substantial body of research tells us that high-quality preschool accelerates children’s learning. This is the same research base for ECEAP’s high quality preschool program with family support services for children from the state’s lowest income families. Universal preschool differs from ECEAP in that it would have a goal of being universal, not categorically based on income, and would further differentiate the family support services families need to achieve child and family outcomes.

A handful of states have implemented full day universal preschool (for example Oklahoma, West Virginia, Georgia) to help address similar problems. There is variation in how states have built universal preschool programs, with some building on state-funded preschool for low-income children (similar to Washington’s ECEAP) incrementally expanding eligibility. Other states have built on the public school system and expanded to younger ages incrementally, starting with high-poverty communities first.

DCYF proposes to procure a study of the precursors necessary for a universal high quality universal prekindergarten program for potential deployment in Washington State. This will involve studying what other states have done, along with outcomes for children’s learning that have been achieved. The department will also seek specific policy options for implementation in Washington.

Expected Results

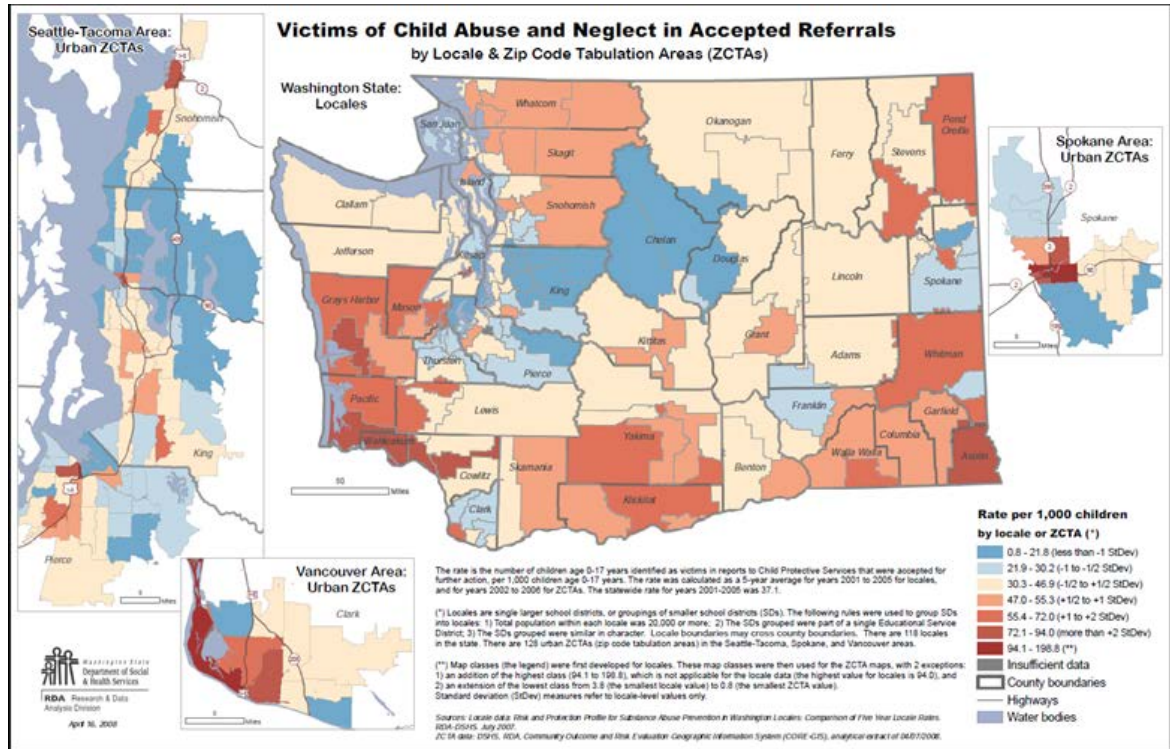
DCYF proposes to update the 2011 Washington Preschool Recommendations⁴ to incorporate the latest research on high-quality prekindergarten for three and four-year old children. This should include consultation with national experts on essential elements, phase-in, adequate funding at the provider and state level to support implementation, and lessons learned from other state and local communities implementing universal prekindergarten. A final report will contain policy options for high-quality universal prekindergarten programming that could be expected to contribute to child success.

³ 2016 WaKIDS, 47.4% of kindergarteners demonstrated characteristics of entering kindergarteners on 6 of 6 domains.

⁴ http://www.k12.wa.us/LegisGov/2011documents/Preschool_Nov11.pdf

5. Micro-targeting [community capacity]: \$850,353

The rate at which Washington’s children enter the state’s child welfare system is increasing rather than decreasing. From 2012 to 2016 CPS intakes requiring a face-to-face response increased by 23%, from 31,405 to 38,677. Children living in some local communities in Washington State are at higher risk for child maltreatment and adverse experiences than others. DSHS’ Research and Data Analysis (RDA) has described the geographic variation in numerous reports.⁵ This level of increase and this volume of referrals suggest that in addition to individual and family-level services, community-level approaches to prevention are needed.



Research shows that the geographic variation in maltreatment rates can be leveraged to identify small geographic areas at the neighborhood level where children are at particularly high risk. DCYF proposes to use the methodology described as “risk terrain modeling” in a recent research publication⁶ to identify 4 such small geographic areas/neighborhoods in the state, target these neighborhoods/communities with intensive prevention planning and interventions, and test the effectiveness of this approach.

We propose a 3-year project that will allow DCYF to develop and deploy the analytic capacity, identify high-risk communities, randomly select 4 local communities from among the highest risk in the state, provide support for a community-driven prevention response, and evaluate the results. The community-driven prevention response will be built on existing community capacity

⁵ Sharkova, Estee, Kohlenberg, (2008) Community Indicators of Youth and Family Problems, DSHS RDA

⁶ Daley, Dyann, Michael Bachmann, Brittany A. Bachmann, Christian Pedigo, Minh-Thuy Bui, and Jamye Coffman.

"Risk terrain modeling predicts child maltreatment." *Child abuse & neglect* 62 (2016): 29-38.

and best practices⁷, and will include staffing and support for community-driven planning, examining the extent to which additional services are needed and how existing service dollars might be re-aligned at the local level. We will hire 1.0 FTE at the state level to provide coordination, and contract for 1.0 FTE with a community-based organization in each of the four chosen communities to facilitate the community-driven prevention response.

Testing the approach will be possible through choosing the communities by lottery, or at random, from among those at highest risk across the state. Using available data from DSHS RDA, the DCYF will identify 10-20 communities/locales across the state that are highest risk for child maltreatment, then choose four communities/locales from among those by lottery to target for further small-area analysis and investment. Choosing communities in this manner will allow us to compare rates of child maltreatment between the intervention communities chosen and those high-risk communities not chosen, from before to after the intervention, using a difference-in-difference analytic design. This methodology will increase confidence that any observed results may be attributed to the intervention. Evaluation of the results will also include a formative evaluation to determine the extent to which the approach is practical, scalable, and replicable.

Expected Results

Because the approach described above is based on existing research and best practices, we expect it will result in decreased rates of child maltreatment and CPS involvement in the four targeted communities. Additionally, we expect to learn whether such an approach can work in Washington State to reduce rates of child maltreatment and CPS-involvement in the targeted communities. This project will also result in building the foundational capacity of DCYF to identify and invest in small geographic areas where high concentrations of children and families at very high risk for child maltreatment live, including developing the analytic capacity to identify these communities/neighborhoods.

Base Budget:

The base budget for child care provided for children involved with the child welfare system is \$24,167,662. The base budget for home visiting services is \$15.4 million per year.

There is no base budget for summer programming, Universal Pre-K, or micro-targeting communities for the purpose of capacity building.

Decision Package expenditure, FTE and revenue assumptions, calculations and details:

Increasing Child Care for Infants and Toddlers, with Trauma-Informed Enhancements

⁷ Daro, Deborah, and Kenneth A. Dodge. "Creating community responsibility for child protection: Possibilities and challenges." *The Future of Children/Center for the Future of Children, The David and Lucile Packard Foundation* 19, no. 2 (2009): 67.

The estimated shortfall in child care is 1,999 slots (360 slots for children in foster care, and 1,639 slots for children involved with CPS, but not yet in foster care). The June 2017 per cap costs for child care as reflected in the adopted forecast by the Caseload Forecast Council are \$855.51/month. Assuming only infants and toddler rates in the calculation changes the estimated per cap cost to \$1,129.79/month. Assuming that the department provides 315 slots dedicated to infants and toddlers that are involved with CPS or in foster care, the cost would be \$4,270,606.

Mathematical calculation: $\$1129.79/\text{mo} \times 12 \text{ months} \times 315 \text{ slots} = \$4,270,606$.

Providing six contracted coaches for 50 child care centers is estimated to cost \$834,000, assuming that contracts average \$139,000/coach.

Expand Home Visiting to Very High-Risk Communities

Using the model attached, it is assumed that the average cost of models classified as “Promising Practices” is \$4,030 per slot, while the average cost of models classified as “Evidence-Based” is \$6,899/slot. The department’s request to add 450 slots is divided 50 percent to Promising Practice models and 50 percent to Evidence-Based models, and is estimated to cost \$2,458,994.

1.0 FTE costing \$147,654 in salaries and related costs in fiscal year 2019, and \$141,654 in salaries and related costs in future fiscal years.

Duties of this FTE is as follows:

- A program specialist (PS5) added in fiscal year 2019 will be responsible for contracts administration and management (including on-site monitoring and reporting). This position will have two primary functions: developing and supporting relationships between the state and local children’s administration offices and contract monitoring. This position will carry a caseload of approximately 12-15 contracted organizations (about 500 slots), consistent with other program specialists. Effective administration of these programs is essential to successful implementation, and the agency is unable to accomplish this work without state-level administration.

Pilot Summer Programming in ECEAP

Assuming that 65 percent of all ECEAP slots are filled by four-year olds and that 15 percent of these slots will be extended through the summer, and further assuming that 200 slots currently filled by three-year olds are also extended on a pilot basis, the department estimates costs to be \$3,183,291 in Fiscal Year 2019. No staff costs are assumed because the model assumes the extension of existing slots, not new slots. A detailed cost model is attached.

Universal Pre-K

Based on studies of similar scope and subject, such as the report mandated by SB 6759 of the 2010 session, the department estimates this study will cost \$200,000.

Micro-Targeting of Communities to Build Community Capacity

\$100,000 for analytic consulting from a researcher who has experience conducting and implementing the method of neighborhood identification once the four communities are chosen. The goal is to develop capacity within DCYF to conduct these specialized analyses, training and support in the first year will be needed from an expert who has previously done this work, thus 0.5 FTE research staff are allocated.

Costs for four community-based organizations to facilitate community-driven prevention is estimated to cost \$500,000, assuming contracts of \$125,000 per organization for staffing and implementation costs.

1.5 FTE costing \$250,353 in salaries and related costs in fiscal year 2019 and \$238,353 in future years.

Duties of these FTE are as follows:

- 1.0 WMS Band 1, state-level coordinator will provide state-level planning and coordination of this new approach within DCYF and across state partner agencies. This will include identifying best practice in community-driven prevention planning, engaging local community partners, serving as agency staff contact for national data analytic consultant. Effective administration of this programs is essential to successful implementation, and the agency is unable to accomplish this work without state-level administration.
- 0.5 Management Analyst 5, a researcher to compare rates of child maltreatment between the intervention communities chosen and those high-risk communities not chosen, from before to after the intervention, using a difference-in-difference analytic design, and to conduct the formative evaluation.

The department expects to request some additional funds for intervention in the four high-need communities in future years of this project in addition to expanding the effort if it is successful.

Decision Package Justification and Impacts

What specific performance outcomes does the agency expect?

Results expected from each proposed investment are noted in the Package Description above.

Performance Measure detail:

Measures are noted in the Package Description above.

Fully describe and quantify expected impacts on state residents and specific populations served.

What are other important connections or impacts related to this proposal?

Impact(s) To:		Identify / Explanation
Regional/County impacts?	No	Identify:
Other local gov't impacts?	No	Identify:
Tribal gov't impacts?	Yes	Identify: Potential tribal impacts if tribal communities are identified for micro-targeting efforts.
Other state agency impacts?	Yes	Identify: Micro-targeting prevention work will be done in collaboration with existing prevention partners including DOH, OSPI, HCA, DSHS. These agencies are already engaged in community-based planning of various types, DCYF will involve and coordinate with these efforts so as to maximize state efforts and resources.
Responds to specific task force, report, mandate or exec order?	Yes	Identify: This request is designed to make progress on improving child outcomes, the primary goal of the Blue Ribbon Commission on Children and Families' final report, which recommended creating the department.
Does request contain a compensation change?	No	Identify:
Does request require a change to a collective bargaining agreement?	No	Identify:
Facility/workplace needs or impacts?	No	Identify:
Capital Budget Impacts?	No	Identify:
Is change required to existing statutes, rules or contracts?	No	Identify:
Is the request related to or a result of litigation?	No	Identify lawsuit (please consult with Attorney General's Office):
Is the request related to Puget Sound recovery?	No	If yes, see budget instructions Section 14.4 for additional instructions

Identify other important connections		Click here to enter text.
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Please provide a detailed discussion of connections/impacts identified above. How have families, providers, and communities of color been involved in the planning and implementation of this proposal?

Services provided at the local level across these proposals – licensed subsidized childcare, home visiting services, ECEAP, and micro-targeting – are provided through various organizations that are responsive to the needs of the local communities, including non-profits, local health jurisdictions, Tribes, and other community-based organizations. The micro-targeting proposal will require inclusive planning at the local level, to include families and service providers in the high-need local communities.

What alternatives were explored by the agency and why was this option chosen?

For increasing the availability of child care for infants and toddlers, alternatives were considered that would have raised rates for foster care and CPS-involved infants and toddlers across the whole state, and that was determined to be too costly. The department believes we can meet the greatest need by targeting the highest need communities within a more realistic budget.

What are the consequences of not funding this request?

Without access to enhanced childcare for infants/toddlers in the child welfare system, there will continue to be challenges recruiting and retaining foster parents to care for such children and children will go without important protective childcare. Without piloting ECEAP summer and 3-year old gap programs, we will forego the opportunity learn whether these enhancements are effective in preparing children for kindergarten. Without home visiting expansions, we forego the potential benefits to children and families. Without updating the universal prekindergarten study, we miss the opportunity to explore the potential benefits of a universal prekindergarten program for Washington’s young children. Without the micro-targeting strategy, we miss the opportunity to learn about efficient and effective community-based approaches for effective prevention of child maltreatment.

How has or can the agency address the issue or need in its current appropriation level?

The department does not have the appropriation capacity to increase Working Connections Child Care rates, expand home visiting services, or launch new pilot programs.

Other supporting materials:

References have been included throughout the paper; certain cost models are attached to this request.

Information technology:

No

Yes