



A Trauma-Informed Care Designation in Early Achievers



Washington State Department of
CHILDREN, YOUTH & FAMILIES

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Executive Summary

During the 2019 Legislative Session, the Washington State Legislature asked the Department of Children, Youth, and Families (DCYF) to create a trauma-informed care designation within Early Achievers and to write a plan to pay providers who earn that designation an enhanced rate ([HB 1391 – 2019-20, Sec. 10](#)).

Stakeholders were invited to participate in the planning process and reviewed the [Trauma-Informed Care Advisory Group report](#). The stakeholders reviewed the updated Early Achievers Quality Standards for criteria for the trauma-informed care designation and explored options for an enhanced rate for the designation.

As a result, the designation will be given to both family home and center early learning providers that meet required Early Achievers standards related to child screening and assessment, supporting families, preventing expulsion and completing specialized training in trauma-informed care as described in this report.

When a family home or center early learning provider meets the required criteria, they will receive an enhanced rate on a monthly basis. This will compensate providers for the ongoing costs of providing trauma-informed care to all children.

Early Achievers will create three tiers of trauma-informed care for the designation. At the first tier, early learning providers will develop policies and complete training related to trauma-informed care. Upon demonstration of these first-tier practices during rating, providers will receive a Tier 1 Trauma-Informed Care payment to support the purchase of screening tools or assessments to continue in quality to the second tier.

At the second tier, trauma-informed care will include healing centered practices such as more advanced training, supports for preventing expulsion and infant and early childhood mental health consultation. Early learning providers will be paid in an ongoing payment to continue these healing centered practices.

At the third tier, programs will offer therapeutic care with certificated staff and lower teacher-to-child ratios. This new designation in Early Achievers is a starting point to begin the work of a trauma-informed early childhood system in Washington.

Background

In 2018, the Legislature enacted Engrossed House Bill (EHB) 2861 establishing a Trauma-Informed Care Advisory Group. The group's task was to develop a five-year plan to expand the availability of trauma-informed early care and education experiences. The advisory group recommended support for family home and center early learning providers which should include professional development, access to infant and early childhood mental health specialists, subsidy rate increases, expulsion tracking and reduction and trauma-informed practices in Early Achievers.

The advisory group concluded that trauma-informed child care must be grounded in racial equity and that all children should have access to early care and education that is trauma-informed and that promotes their social and emotional development within the context of nurturing and responsive relationships with consistent caregivers. The advisory group strongly advised that professional development, reflective supervision and compensation are necessary to support a workforce to provide consistent caregiving which is a vital component of trauma-informed care.

Early Achievers Trauma-Informed Care Designation

Inviting Stakeholders to Partner in the Work

The first step in developing this plan was forming an Early Achievers Trauma-Informed Care Designation Work in which stakeholders and partners from across various areas of early learning and child care were invited to co-create a plan to submit to the Legislature. Stakeholder and partner representation included members from family home and center early learning providers, Early Childhood Education and Assistance Program (ECEAP) providers, Child Care Aware of Washington, Cultivate Learning at the University of Washington, the Imagine Institute, members of the Trauma-Informed Advisory Group defined in EHB 2861 and Wellspring Family Services. DCYF staff included members of the child care subsidy team, the Early Achievers team and the early childhood mental health consultation system coordinators.

Goals/objectives of the workgroup:

- Review the updated Early Achievers Quality Standards to determine areas of focus for a trauma-informed care designation, using an equity framework.
- Develop a plan for a trauma-informed care designation that includes a financial incentive to family home and center early learning providers that earn the trauma-informed care designation.

The Process

The workgroup began by reviewing the updated Early Achievers Quality Standards with some recommendations from Cultivate Learning at the University of Washington. The members of the group looked at each standard using the Early Learning Advisory Council racial equity questions:

- Is this policy, decision or practice good for kids, families and early learning educators of color?
- Do some kids, families and early learning educators benefit more or less than others?
- Do kids, families and early learning educators of color have access, and if not, why?
- What data and information is missing?
- What unintended consequences might there be for the kids, families and early learning providers of color?

Early learning providers receive points in Early Achievers based on demonstration of quality standards through observation and data collection. All providers are evaluated on their early learning environment and interactions and have the option to be evaluated on additional Early Achievers standards for additional points. The workgroup reviewed these Early Achievers standard areas for the trauma-informed care designation:

- Child Outcomes
- Interactions and Curriculum
- Family Engagement and Partnerships
- Professional Development and Training

The Plan

The recommended trauma-informed care designation in Early Achievers has three tiers. At the first level, early learning providers begin to gain skills and put policies and practices into place to provide trauma-informed care. At the second tier, providers implement practices related to more Early Achievers Quality Standards that support trauma-informed care. At its most comprehensive tier, providers implement practices related to 11 Early Achievers Quality Standards that support trauma-informed care through healing centered practices.

A TRAUMA-INFORMED CARE DESIGNATION IN EARLY ACHIEVERS

Structuring the designation in tiers allows providers to continue to enhance their skills over time by scaffolding their practices and starting with professional development and program policies then building supports for children, staff and families and increasing their skills and abilities to provide more specialized trauma-informed care. Providers will opt-in to the trauma-informed care designation as part of the data collection and rating process. In other words:

- Tier 1 providers set foundational policies that support trauma-informed and responsive caregiving.
- Tier 2 providers meet all of the requirements of Tier 1 and implement practices that support trauma-informed and responsive caregiving.
- Tier 3 includes all of Tiers 1 and 2 as well as therapeutic caregiving.

Standards Included in the Trauma-Informed Care Designation	Tier 1	Tier 2	Tier 3	Points Possible
Screening 1 Policy is in place to ensure that all children birth through kindergarten entry receive developmental screening using a valid and reliable screening tool.	x	x	x	1
Screening 2 Results of developmental screening are on file for all children.		x	x	2
Screening 3 Results of annual developmental screening are on file for all children.		x	x	2
Screening 4 Results of valid screening tool are shared with families.		x	x	2
Individualization 1 Policy is in place to individualize instruction for all children.		x	x	1
Ongoing Assessment 1 Policy is in place to ensure that all children birth through kindergarten entry receive ongoing formal assessment or informal observation and documentation at least three times per year (e.g., child portfolio/work sampling assessments).		x	x	1
Preventing Suspension and Expulsion Policy includes how staff work with families to establish and implement a behavior support plan for children with persistent challenging behaviors.	x	x	x	Tier 1: 1 Tier 2: 2 Tier 3: 3
Preventing Suspension and Expulsion Policy includes the procedures for training staff to support positive social and emotional development, reducing challenging behaviors and trauma-informed care on an annual basis.		x	x	1
Preventing Suspension and Expulsion Policy includes plans to access consultation for behavioral or developmental concerns through a mental health consultant, coach or other professional.			x	1
Strengthening and Supporting Families 1 Goals for providing support for families are documented on the family engagement action plan template based on Strengthening Families or equivalent self-assessment.	x	x	x	2
Professional Development Not yet defined		x	x	TBD – up to 5
Total Points Possible	4	15-19	16-21	15-21

The standards included within the three tiers of designation and a description of how they support trauma-informed care are included below.

Standard Area: Child Outcomes

Standard: Developmental Screening

Screening is done when a brief questionnaire is filled out by parents to identify children who may be at risk for developmental delays or social-emotional issues. It is a snapshot in time, based on a child's chronological age. The American Academy of Pediatrics recommends that families screen children under five years of age at least annually. Families and early care and education providers can use developmental screening to understand if a child is on track developmentally and to learn about typical child development and developmental delays.

However, all standard developmental screening tools do not reveal indications of social-emotional concern. It is important to conduct social-emotional screening in addition to general developmental screening. Family home and center early learning providers are now required in the state child care licensing standards to be able to articulate to families why developmental screening is important. Providers must also connect families to resources in their community for further evaluation when needed. The updated Early Achievers standard for developmental screening builds on these foundational requirements.

Early Achievers will award a point when a child care provider develops a policy to work with families to conduct developmental screening for all children. The policy must include information such as which screening tool is used, how often children are screened and how the program will work in partnership with families to complete screenings. Early Achievers awards additional points when a program demonstrates that all children have received developmental screening. Programs can accept screening results from community organizations such as an Early Support for Infants and Toddlers (ESIT) or health care provider. In another standard, points are awarded when early care and education providers demonstrate sustainable screening practices by ensuring that all children are screened annually. This allows for more than a "snapshot in time" as a child's development can be seen across multiple years. Finally, when providers share results of screening with families, two points are awarded. Overall, with completion of this standard, an additional seven points will be added to a facility's overall score when demonstrated.

Meeting all areas of the Developmental Screening standard is required as part of both Tier 2 and Tier 3 of the trauma-informed care designation in Early Achievers. As stated in the Interactive Rating Readiness Tool (IRRT) guide, "Early identification of potential developmental delays is critical to helping ensure that children get the resources they need to support positive development. Programs that are knowledgeable about developmental milestones and use screening tools with children can share information with families to facilitate early identification of developmental delays. They can then connect families with services and formal evaluation."

Impact Considerations for Early Learning Providers

While most members of the workgroup agreed that screening should be foundational to receiving the designation, there were some concerns around current screening processes. First, guidance is needed for providers around which specific screening tools can be used to screen for social and emotional development to earn the trauma-informed designation. Secondly, trauma-informed care requires providers to have a solid relationship with the families they serve and providers may need time to know the family well before the screening. There were also some cost concerns raised, as some tools require that screening results be shared with families in the family's home language, which would require

translation services. Supports for training on the tools is another key area in which coordination between DCYF, Early Achievers partners, the University of Washington, health care agencies and providers would need to happen. Information about these services would need to be readily available at no cost to the provider. Lastly, the development of these supports requires compensation on an ongoing basis to support the screening of all children.

Standard: Ongoing Observation and Assessment

Ongoing Observation and Assessment is a comprehensive process that describes how children are learning and developing. This is a continuous process and conducted by an early learning provider through the course of a year. Assessment is used to track the effectiveness of instruction methods as well as a child’s progress in the early learning environment. Early learning providers demonstrate quality by having a policy and practices in place to do either informal observation and documentation of the child’s progress in response to instruction or formal educational assessment at least three times a year. This standard is required for Tiers 2 and 3 of the designation.

Impact Considerations for Early Learning Providers

Formal ongoing assessment is often a component of the curriculum, for example Teaching Strategies GOLD® is a formal assessment that complements Creative Curriculum. These formal assessments require tools and training for staff to administer to fidelity and require significant investment. Informal observation and assessment also require an investment in tools for documentation. Both formal and informal assessments require investment for non-contact time for staff to be trained and to implement. At this time, coach and provider training on formal assessment is limited to supporting ECEAP, thus additional resources are necessary to ensure subsidy providers have access to training and assessment tools and all coaches in the Early Achievers system are trained to support implementation with fidelity.

Standard: Individualization

Providers demonstrate this standard with a policy that describes how they use informal observations and documentation or formal educational assessments to help individual children to learn and grow. Providers work with families to develop individual goals for their child using two-way communication to learn about a child’s strengths and needs. When providers focus on learning about each child’s strengths, needs and interests, it promotes a safe and encouraging environment. Early learning providers will note differences in areas of temperament, learning styles, life experiences, culture, language learning and gender. Providers will use child assessment information to inform individualized learning goals for each child. Providers will monitor a child’s progress and acknowledge changes in a child’s growth and development, as well as adapt instructional practices in response to the child. The policy will include specific attention to social and emotional growth, interactions and relationship-based practices. This standard is required for both Tier 2 and 3 of the designation.

Impact Considerations for Early Learning Providers

Providers receive points in this area for having a policy that describes how they use screening and assessment to set educational goals for every child. Some children may have an individual care plan in addition to other learning objectives. Providers need non-contact time to learn how to use the data from assessments to plan individual goals for each child. The policy also requires providers to work together with families to develop goals for their child.

Standard Area: Interactions and Curriculum

Standard: Preventing Suspension/Expulsion

The Foundational Quality Standards for Early Learning Programs requires all providers to develop an expulsion policy that describes the type of behavior that will get a child expelled, details the steps the

provider takes to avoid expulsion, communicates with parents about the steps taken before expulsion and may include information about community resources that may help the expelled child.

The Early Achievers standard requires early learning programs to expand the expulsion policy required by licensing to include proactive steps in preventing expulsion through family partnership, staff training and outside consultation. In Early Achievers, this could include mental health consultation. Studies show that expulsion affects children of color disproportionately and training for staff for expulsion prevention must include training on child development as well as anti-bias training. Elements of this standard are required at Tier 1, Tier 2 and Tier 3 in the designation.

Impact Considerations for Early Learning Providers

A high number of providers request training and coaching related to challenging behaviors. A variety of training opportunities on this topic are currently available but must be evaluated to determine if they are trauma-informed. Infant and early childhood mental health consultation (IECMHC) is not readily available at this time, as Washington State is in the process of developing a mental health consultation set of supports and interventions. There are few community-based trainings and a small number of mental health consultants working with early learning programs in Early Achievers. The state must increase investment in the infrastructure of the IECMH system for full implementation of expulsion prevention.

Standard Area: Strengthening and Supporting Families

Standard: Strengthening Families Action Plan

Foundational Quality Standards for Early Learning Programs requires all programs to take either the Strengthening Families or an equivalent self-assessment of their program to reflect on how they engage and support families in their program. In Early Achievers, to demonstrate quality in this standard area, providers must develop an action plan after taking the assessment to set goals in areas where they want to become more proficient. For the trauma-informed care designation, this action plan will include goals specifically related to promoting social and emotional development for all children, which is one of the content areas in the Strengthening Families framework. More information about the Strengthening Families framework can be found at the [Center for the Study of Social Policy](#). The Strengthening Families Action Plan is required for Tier 2 and Tier 3 of the designation.

Impact Considerations for Early Learning Providers

The social-emotional area of the self-assessment may require additional resources. For example, one of the items requires providers to provide ongoing, regular IEMHC. In Washington, this system of supports is under development.

Standard Area: Professional Development and Training

To receive the Early Achiever trauma-informed care designation, family home and center early learning providers must have professional development focused on trauma-informed care. DCYF is committed to ensuring any professional development requirements are offered equitably by trainers who represent the race/ethnicity and linguistic needs of their community. The trainers and content must be culturally responsive for both family home and center early learning providers around the state. Specialized trauma-informed professional development is required at Tier 2 and Tier 3 of the designation.

All training must meet the following criteria:

- Delivered by a state-approved trainer or training organization. Training completion must be verified in MERIT, Washington’s professional development registry.
- Includes content delivery as well as an ongoing community of practice.

- Offered in multiple languages and is culturally appropriate.
- Offered at no cost to the participants and may be time compensated.

Impact Considerations for Early Learning Providers

Provider training on responding to challenging child behaviors is accessible now. Independent trainers, training organizations, contractors, grantees and sessions in statewide training meetings or conferences deliver training on the subject of behaviors that challenge early learning providers. Additionally, DCYF and the University of Washington are developing training focused on trauma-informed care. The workgroup agreed that providers must have professional development focused on trauma-informed care to earn the Trauma-Informed Care Early Achievers Designation. However, DCYF must first develop a better understanding of the learning objectives for the range of trainings currently offered in the field to be able to endorse them for this particular designation.

The workgroup recommended that training in trauma-informed care should be available for all early learning providers, not just those that seek the designation. Research on Adverse Childhood Experiences (ACES) indicates that nationally 35% of children ages birth through 5 have experienced one or more adverse experiences. Training should support staff and equip them to cope with the challenging work of serving young children impacted by trauma and their families. Trauma-informed care training will need to be delivered to coaches and data collectors as well.

Enhanced Rate for Trauma-Informed Care Designation

Review of Enhanced Rate Recommendations

To implement the practices associated with the trauma-informed care designation, providers need resources to begin implementation as well as ongoing resources to support continued implementation. Providers may use these resources to purchase screening tools, assessment materials, professional development or other supportive services offered as a fee for service within their communities, or additional staff. The workgroup reviewed options for compensating early learning providers to do this work which resulted in the following conclusions.

Enhanced Rate

Any Early Achievers participant is eligible to earn the trauma-informed care designation, but only subsidy and ECEAP providers are eligible for the enhanced rate.

Early Achievers ratings look for facility-wide practices to develop a facility quality score. Similarly, the practices required for the trauma-informed care designation should also be facility-wide. Providers need resources to support all children in their facility. Children who have experienced trauma are not limited to children eligible for subsidy – they are represented in all socio-economic statuses.

Washington needs a ready workforce of high-quality early learning providers that are prepared to serve children who have experienced trauma. Therefore, DCYF recommends a flat monthly enhanced rate based on staff size in the facility and the trauma-informed care designation tier. This will allow providers to carry on their continuous quality improvement while benefiting from increased resources as their practices advance. Like Quality Improvement Awards, DCYF recommends the trauma-informed care designation enhanced rate is paid as an award for demonstrating a higher level of quality. Tier 1 payment is a one-time award. Tier 2 and Tier 3 are ongoing monthly flat-rate payments displayed in the per year amounts below.

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Tier 1	\$1,000 as a one-time payment when all criteria are met and the provider indicates they would like to move to Tier 2
Tier 2	Award based on teaching staff size < 20 staff: \$8,000 per year < 50 staff: \$12,000 per year < 100 staff: \$15,000 per year
Tier 3	Award based on model for therapeutic preschool in school district settings

DCYF recommends the payment structure increases based on the size of the staff rather than the number of children served, which supports providing ongoing professional development resources to staff as well as incentivizes lower staff-to-child ratios. At the higher tiers, expenses needed to implement these recommendations are ongoing – a regularly-timed payment is more acceptable than a one-time monetary award. The recommended plan includes a monthly payment for facilities that have received the trauma-informed designation that compensates for things such as the costs related to training, specialized consultation and materials.

IT Considerations

Information Technology (IT) resources must be allocated in order to implement the designation in the rating system and develop an additional award or payment and tracking method for this designation, in the DCYF-defined data system. Currently, there is not a method to track the designation and associated tiers. This work will require IT system research, development and ongoing system maintenance in the form of at least one IT-categorized FTE.

Evaluation

If resources are allocated that allow DCYF to move forward with the designation and enhanced rate, an annual review of Early Achievers data is recommended. This will allow DCYF to assess whether the trauma-informed care designation is being implemented as intended, gather data about how the designation is impacting quality and availability of trauma-informed practices and make adjustments to the process as needed.

DCYF cannot currently evaluate the effectiveness of the trauma-informed designation and enhanced rate program, and therefore needs new resources to support this data collection and allow DCYF’s Office of Innovation, Alignment, and Accountability to conduct the needed analysis.

Estimated Costs

To build a trauma-informed early childhood system that is responsive to both children and adults, long-term investment is needed in multiple areas including staffing, time, materials, IT infrastructure, consultation and reflective supervision. In addition to the resources needed for the enhanced rate, DCYF needs additional resources to develop and implement the trauma-informed care designation and support providers who are working to implement healing centered practices through trauma-informed care. DCYF would need to do further modeling and budget development to arrive at more precise cost figures – the following are estimated costs to develop a trauma-informed care designation and the necessary provider supports.

Resources for Providers

Providers need support to implement specific practices to provide trauma-informed care and to earn the associated trauma-informed care designation. Building on Early Achievers, supports should be available to help programs demonstrate the quality elements that are essential to trauma-informed and responsive caregiving including curriculum/assessment and developmental screening.

DCYF must offer supports to providers to help achieve the trauma-informed care designation. Without these supports, we will not have the capacity to develop a trauma-informed care early learning system.

- Developmental screening training and materials
- Curricula training and materials
- Ongoing assessment training and materials
- Coaching to support trauma-informed and responsive caregiving
- Increased access to Infant and Early Childhood Mental Health Consultation

\$1,852,000 for Ages and Stages Questionnaire Training, Materials and Implementation Supports

DCYF will use the successful [Project Launch Pilot](#) model to inform the implementation of widespread training and support for universal developmental screening on the Ages and Stages Questionnaire 3 (ASQ-3) and Ages and Stages Questionnaire-Social Emotional (ASQ-SE) for children ages birth to 5.

The state will leverage the existing trainer capacity within our early learning system and request funds to deliver the training and materials. This includes helping providers host a family engagement event and ongoing coaching support to implement the screening to include connections with families about the results of the screening and possible referral for further evaluation or interventions when necessary.

DCYF will offer ASQ-3 and ASQ-SE Kits to eligible Early Achievers participants that complete the training and coaching program. Materials, coaching and training will be provided in English and Spanish when requested. Early Achievers coaches and infant-toddler coaches will support the implementation of developmental screening in alignment with the Early Achievers quality standards and criteria.

DCYF requests \$1,852,000 for Ages and Stages Questionnaire training, materials and implementation supports for each site that has rated Level 3+ or higher, has completed Tier 1 of the trauma-informed care designation and is moving forward to reach Tier 2 or Tier 3.

Facility Type	Coach Contact with Provider	ASQ Materials	Training: 4-Hour STARS Class	Family Engagement: 2-Hour Activity	Travel	Record-Keeping	Total Estimated Cost Per Facility
Child Care Centers Base # of Facilities 619	6 hours per facility (on-site meeting pre- and post-training and screening and recordkeeping)	<ul style="list-style-type: none"> • ASQ-SE Kit • ASQ-3 Kit • Activity Guide • Spanish Questionnaires 	6 hours per facility (includes setup/teardown)	4 hours per facility (includes prep, setup/teardown)	10 hours per facility	4 hours per facility	\$2,500
Family Child Care Homes	6 hours per facility	<ul style="list-style-type: none"> • ASQ-SE Kit • ASQ-3 Kit • Activity Guide 	6 hours using cohort	3 hours per facility	10 hours	2 hours per facility	\$1,500

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Base # of Facilities 203	(on-site meeting pre- and post-training and screening and recordkeeping)	<ul style="list-style-type: none"> Spanish Questionnaires (Cohort model shared: 1 set of materials for 10 FCCs)	model training for up to 10 facilities (includes prep, setup/teardown)	(includes prep, setup/teardown)	per facility		
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\$5,975,926 for Evidence-Based Early Learning Curricula (Curriculum Kits, Provider Training, Coach Training)

Curriculum Kits	\$4,638,964
Training	\$1,166,787
Substitute Coverage	\$50,000
Accredited Program Trainer Certification	\$20,175
Specialized Coach Training	\$100,000
Total	\$5,975,926

DCYF requests \$5,955,751 to purchase Creative Curriculum kits and provide the corresponding Creative Curriculum training for each site that has rated Level 3+ or higher, has completed Tier 1 of the trauma-informed care designation and is moving forward to reach Tier 2 or Tier 3. Each age group in a child care center must have access to evidence-based curricula to support that specific age group. Family child care providers must have access to evidence-based curricula tailored to serving mixed age groups.

In addition to the curriculum materials, each teacher implementing a curriculum in their classroom must attend Creative Curriculum training. This training helps teachers learn how to implement their curriculum. Follow-up coaching with specially trained coaches helps them implement the curriculum with fidelity. Implementing curriculum to fidelity ensures that children reap the benefits of the evidence-based model. DCYF assumes that 50% of providers will attend in-person Creative Curriculum and the other 50% will access the training online.

Early Achievers data shows the average child care center has one infant room, one toddler room and two preschool rooms. Each classroom averages two lead teachers. Family child care homes typically include one lead teaching staff. These assumptions inform the table below.

Facility Type and Classroom Number	Creative Curriculum Kits Assumption: One Per Classroom	Number of Teaching Staff Assumption: 2 Leads Per Classroom	Creative Curriculum Training In-Person Cost Per 25 Teaching Staff Assumption: 50% Will Attend in Peron	Creative Curriculum Training Online Assumption: 50% Will Attend Online Training	Total Material Costs
Family Child Care – 203 Sites	\$1,449 x 203= \$294,147	203	203 x .50= 102 teachers	203 x .50= 102 teachers	\$329,515

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			102/25= 4 training sessions 4 X \$5,017= \$20,068	102 x \$150= \$15,300	
Child Care Center – 619 Infant Classrooms	\$1,149 X 619= \$711,231	1,238	1,238 x .50= 619 619/25= 25 training sessions 25 x \$5,017= \$125,425	1,238 x .50= 619 619 x \$150= \$92,850	\$929,506
Child Care Center – 619 Toddler Classrooms	\$1,149 X 619= \$711,231	1,238	1,238 x .50= 619 619/25= 25 training sessions 25 x \$5,017= \$125,425	1,238 x .50= 619 619 x \$150= \$92,850	\$929,506
Child Care Center – 1,238 Preschool Classrooms	\$2,149 x 1,238= \$2,660,462	2,476	2,476 x .50= 1,238 1,238/25= 50 training sessions 50 x \$5,017= \$250,850	2,476 x .50= 1,238 1,238 x \$300= \$371,400	\$3,282,712
Total Costs	\$4,638,964	5,484	\$556,887	\$609,900	\$5,471,239

Both the in-person and online training for Creative Curriculum removes a teacher from the classroom for up to three days. DCYF will offer substitute coverage from the substitute pool covering the hours of the training and travel time.

To deliver Creative Curriculum training across the state, DCYF must increase training capacity. The state needs to add at least three Accredited Program Trainers (APT) Creative Curriculum trainers to build on existing capacity and meet training demand. Accreditation for the trainers runs on a three-year cycle. The costs associated with developing APT for Creative Curriculum are listed below.

APT Training Cycle	Creative Curriculum Accredited Program Training Unit Costs – Three Year Training Cycle	Expanded Costs for Three Creative Curriculum APT Trainers	Biennial Request
Year One	\$4,500	\$13,500	\$20,175
Year Two	\$2,225	\$6,675	
Year Three	\$0	\$0	
Year Four	\$4,500	\$13,500	
Year Five	\$2,225	\$6,675	
Year Six	\$0	\$0	

In addition to the supports for the teachers and facilities, DCYF must offer professional development resources to Early Achievers coaches to help them support providers with the implementation of Creative Curriculum. DCYF requests \$100,000 to develop a cadre of coaches in each region who will serve as content experts in Creative Curriculum. These coaches will participate in Coaching to Fidelity training and an ongoing professional learning community that includes submitting work and receiving feedback from trainers. This training is crucial to their ability to help providers implement their curriculum with fidelity.

\$3,516,044 for Ongoing Assessment Using Teaching Strategies GOLD® (GOLD) (Assessment Materials, Provider Training, Coach Training)

Child Profile Licenses \$9.95 per child	\$203,049
Data Integration \$210 Per Classroom	\$562,590
Provider Training	\$1,508,630
Substitute Pool	\$50,000
Coach Training	\$100,000
Technology	\$1,071,600
Accredited Program Trainer Certification	\$20,175
Total	\$3,516,044

Using an analysis done by the DCYF Licensing Analyst team of the current average family home and child care center capacity, DCYF requests \$765,639 to purchase 20,406 additional Teaching Strategies GOLD® Child Profile licenses under the current license agreement and to establish the classroom level data integration with DCYF data systems. DCYF will distribute these licenses to Early Achievers participants who have achieved a Level 3 or higher rating and have achieved the Tier 1 trauma-informed care designation and volunteer to attain Tier 2 or higher. The licenses will cover the GOLD child portfolio for each infant, toddler and preschool child served by sites participating in the state preschool program. This online whole-child assessment aligns with the Washington Kindergarten Inventory of Developing Skills (WaKIDS), the state kindergarten entry assessment. Providers who choose to offer state-funded preschool services must use GOLD to record their observations and assess the development of the children in their program to measure progress and individualize their teaching practices. The data collected from GOLD will help DCYF measure the impact of trauma-informed care on child outcomes and interim progress to reach the 90% kindergarten readiness goal.

DCYF also requests \$1,508,630 to provide the training necessary for providers to reliably conduct the whole child assessment. DCYF must expand on the existing training capacity and also requests resources to deliver the training. GOLD training is available online as well as in person. DCYF estimates that 5,155 teachers will attend the GOLD training and that 70% will attend the in-person training and the remaining 30% will access the training online. Both the in-person and online training for GOLD removes a teacher from the classroom for up to three days. DCYF will offer substitute coverage from the Substitute Pool covering the hours of the training and travel time. The estimated cost for substitute coverage is \$50,000.

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Facility Type and Classroom Number	Data Set-Up and Licenses		Provider Training		Total Costs by Provider Type
	GOLD Classroom Data Setup	Number of Children That Need GOLD Profile	GOLD Training In-Person Cost Per 20 Teaching Staff Assumption: 70% Will Attend in Person	GOLD Training Online Assumption: 30% Will Attend Online Training	Data Integration, Child Profiles and Provider Training
Family Child Care – 203 Sites	\$210 x 203 = \$42,630	1,218 child profiles in FCC x \$9.95 = \$12,119	203 x .70 = 142 teachers 142/20 = 7 training sessions 7 x \$7,015 = \$49,105	203 x .30 = 61 teachers 61 x \$150 = \$9,150	\$113,004
Child Care Center – 619 Infant Classrooms	\$210 x 619 = \$129,990	2,476 infant profiles x \$9.95 = \$24,636	1,238 x .70 = 867 867/20 = 44 training sessions 44 x \$7,015 = \$308,660	1,238 x .30 = 371 371 x \$150 = \$55,650	\$518,936
Child Care Center – 619 Toddler Classrooms	\$210 x 619 = \$129,990	4,333 toddler profiles x \$9.95 = \$43,113	11,238 x .70 = 867 867/20 = 44 training sessions 44 x \$7,015 = \$308,660	1,238 x .30 = 371 371 x \$150 = \$55,650	\$537,413
Child Care Center – 1,238 Preschool Classrooms	\$210 x 1,238 = \$259,980	12,380 preschool profiles x \$9.95 = \$123,181	2,476 x .70 = 1,733 1,733/20 = 87 training sessions 87 x \$7,015 = \$610,305	2,648 x .30 = 743 743 x \$150 = \$111,450	\$1,104,916
Total	\$562,590	\$203,049	\$1,276,730	\$231,900	\$2,274,269

To deliver GOLD training across the state, DCYF must increase training capacity. The state needs to add at least three APT GOLD trainers to build on existing capacity and meet training demand. Accreditation for the trainers runs on a three-year cycle. Of the request, \$20,175 will provide training to increase GOLD trainer capacity. Trainers will participate in the ongoing GOLD trainer professional learning community (PLC) facilitated by a DCYF APT trainer. This PLC helps ensure consistency of training as well as coordination of training delivery across the state. The costs associated with developing Accredited Program Trainers (APT) for GOLD are listed below.

APT Training Cycle	Creative Curriculum APT Trainer Unit Costs – Three Year Training Cycle	Expanded Costs for Three New Creative Curriculum APT Trainers	Biennial Request for Creative Curriculum APT Trainers
Year One	\$4,500	\$13,500	\$20,175
Year Two	\$2,225	\$6,675	

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Year Three	\$0	\$0	
Year Four	\$4,500	\$13,500	
Year Five	\$2,225	\$6,675	
Year Six	\$0	\$0	

Providers implementing GOLD must have access to technology to enter their observations in the online system. DCYF requests \$1,071,600 so that Early Achievers participants that provide trauma-informed care services can purchase technology resources for their facilities.

In addition to the supports for the teachers and facilities, DCYF must offer professional development resources to Early Achievers coaches to support providers with the implementation of Teaching Strategies GOLD®. DCYF requests \$100,000 to develop a cadre of coaches in each region who will serve as content experts in Teaching Strategies GOLD®.

Failure to deliver training, materials and coaching services to providers limits DCYF’s ability to expand high-quality early learning services and eliminates the opportunity to launch a trauma-informed care designation in Early Achievers. DCYF requests \$3,516,044 to support GOLD implementation across the state for each site that has rated Level 3+ or higher, has completed Tier 1 of the trauma-informed care designation and is moving forward to reach Tier 2 or Tier 3.

\$3,949,024 to Increase Access to Infant and Early Childhood Mental Health Consultation

In addition to the screening, curricula and assessment supports, providers who offer trauma-informed care must have access to infant and early childhood mental health consultation (IECMHC). For several years, DCYF has offered some IECMHC to providers serving infants and toddlers on subsidy through Child Care Development Funds, but demand far outweighs the current capacity for this service. During the last legislative session, additional investments were made to bring six mental health professionals to the early learning system – one for each DCYF-designated region. While those six will help us connect a system of support for providers and offer support to Early Achievers coaches, additional resources are needed to ensure providers can offer trauma-informed care.

DCYF seeks to add five additional mental health consultants to each of the six DCYF-designated regions and one statewide lead for this growing cadre of mental health professionals. The estimated cost for these mental health professionals is \$3,840,000 in each fiscal year for a contract. The mental health consultants will provide consultation services to providers in Tier 2 and Tier 3 of the trauma-informed care designation in Early Achievers and the lead will serve as a clinical supervisor and coordinator of the Infant and Early Childhood Mental Health Professionals. Additionally, DCYF must hire a management analyst to evaluate the IECMHC services and monitor fidelity to the model.

These various parts of this designation are linked to one another so limiting investment in one area dramatically impacts the others. For example, if a provider offers developmental screening but then does not assess a child’s development, the impact on that child’s outcomes is unknown and deliberate individualization cannot happen. Similarly, without coaches and mental health professionals to support the implementation of practices and approaches, the impact of professional development is minimal.

Investment Summary

FY21 Estimates	
Enhanced Rate*: Tier 1 Payments for FY21	\$822,000
Ages and Stages Questionnaire (training, materials and implementation supports, etc.)	\$1,852,000
Evidence-Based Early Learning Curricula (kits, provider training, coach training, etc.)	\$5,975,962
Teaching Strategies GOLD® (assessment materials, provider training, coach training)	\$3,516,044
1 IT Developer FTE (master) Research, develop, maintain designation and enhanced rate	\$202,982
Infant and Early Childhood Mental Health Consultation and state-lead	\$3,840,000
1 MA5 FTE for IECMHC analysis and monitoring	\$167,124
Total	\$16,376,112

**The enhanced rate for FY21 and beyond for Tiers 2 and 3 need additional modeling to estimate costs.*

Conclusion

With the necessary resources, the Early Achievers framework presents an opportunity to move forward with the initial recommendations from the Trauma-Informed Care Advisory Group while allowing Early Learning Providers the opportunity to continue to develop their skills along a continuum as supports and resources from DCYF become available for implementation.

The trauma-informed care designation would be the first of its kind in the nation, using multiple standard criteria categorized with a purposeful intent to support growth and recognition across domains.