

Project Abstract

Project Title	PDG B-5 ACES Initiative				
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Adverse childhood experiences (ACEs) are a health epidemic in Arkansas affecting our B-5 population at an alarming rate. In Arkansas, 1 in 7 children experience 3 or more ACEs compared to the national average of 1 and 10. This is a crucial time in a child's life and the importance of high quality early childhood care can change the trajectory of a child's life benefiting them well beyond childhood and ultimately be an indicator for their overall life expectancy. Our state is driven by to act. We must protect our most vulnerable population early to prevent the further generational perpetuation of adverse childhood experiences in Arkansas.

Through this grant we will work to educate individuals at the professional and community level on understanding trauma including the long-term health outcomes of those who experience prolonged toxic stress. Our focus will be to streamline the ACEs work in Arkansas by gaining buy-in with stakeholders, collaborating with partners, and examining existing programs to ensure children have the best start in life. The DCCECE is committed through to maximizing parental choice and knowledge, sharing best practices, and improving overall quality as it relates to ACEs and trauma informed care in early childhood. We will accomplish the following activities:

Activity 1 (Needs Assessment): Update existing needs assessment and identify research gaps on trauma and ACEs in Arkansas. Conduct further research to fill gaps and create a comprehensive B-5 needs assessment.

Activity 2 (Strategic Plan): Update existing strategic plan based on; needs assessment, collaboration partners, and identifying stakeholders/key decision makers

Activity 3 (Maximize Parental Choice and Knowledge):

- Embed trauma informed education into previously established family engagement activities
- Dissemination of information at established family engagement activities
- Creation and management of social media accounts to engage parents on accessible platforms
- Creation of evaluation tools to examine family engagement practices

Activity 4 (Sharing Best Practices):

- Conduct train-the-trainer activities with internal staff, partners, and providers on evidence based trauma informed practices
- Host a stakeholder, partner, and provider joint symposium on trauma in conjunction with the previously established ACEs Summit
- Develop infographics in ACEs and trauma

Activity 5 (Improving Overall Quality):

- Create higher levels of Arkansas Better Beginnings which include trauma informed care practices
- Create pilot program models for trauma informed care
- Implement Family Engagement Specialists/Family Support Staff

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1 Project Approach

1.1. Activity 1: Needs Assessment

Arkansas will write to update their B-5 needs assessment to include data on trauma and to ensure all data on vulnerable/underserved children is accurate. This will be accomplished by using well established mixed delivery systems and through new and established partnerships. The purpose of this needs assessment will be to identify and close research gaps, update a comprehensive strategic plan, increase communication/coordination amongst stakeholders, and to gain a greater understanding of the needs of Arkansans as it relates to trauma and ACE scores in the B-5 early childhood education population.

1.1.1 Established Needs Assessments

Arkansas previously wrote for the Preschool Development Grant and was awarded the opportunity to served 1492 PDG Improvement slots and 1391 PDG Expansion slots annually for the past 4 years. A comprehensive needs assessment including defining key terms, identifying the populations of children served who are vulnerable or underserved and identifying to the extent practicable the number of unduplicated children served/children in rural areas was generated as part of the previous grant efforts. With the PDG B-5 Grant we will extend the current needs assessment to include information on ACEs scores and trauma informed care in Arkansas in addition to forming a comprehensive plan to fill the gaps in data or research by supporting collaboration between the DCCECE, service providers, programs, and other stakeholders throughout our mixed delivery systems (see Activity 2).

1.1.2 Identified Gaps in Research

In 2016 Arkansas launched the Behavior Help Support system statewide to help eliminate expulsion and suspension from early childhood education settings as outlined in the CCDF Final Rule¹. Behavior Help served 268 children during Year 1 and saw a 40% increase in cases during Year 2 (376 children.). During the first quarter of Year 3 the system has already served 279 children which is more children than the total number of children served in Year 1. The system is comprised of three entities DCCECE and two contracted partners. DCCECE is responsible for intake interviews and the contracted partners are responsible for technical assistance. During the first two years data was collected and analyzed on the cases submitted. As such, we found that 50% of children referred to Behavior Help (who were at risk of being suspended or expelled) had or were experiencing trauma². This data showed a clear gap in our B-5 needs assessment. Trauma in the B-5 early childhood education world exists at an alarming rate and it has had an abundant impact on the children served through our mixed delivery systems.

1.1.3 Filling the Gaps in Research

Arkansas will work to fill the research gap by collaborating with our partners to do a meta-analysis of previously obtained ACEs scores (WIC and BRFSS Surveys³), collect ACE scores on subsidized child care recipients in various mixed delivery systems and collect ACE scores of children at Family Engagement Events.

First, the meta-analysis will be conducted by the contracted partner responsible for the research and evaluation of the proposed PDG B-5 Grant. This will shape all subsequent research

¹ Retrieved From: <https://www.acf.hhs.gov/occ/resource/ccdf-final-regulations>

² Edge, Nicola (2018) BehaviorHelp: Supporting Teacher So Children Can Reach Their Potential

³ WIC: Women Infants and Children, BRFSS: Behavior Risk Factor Surveillance System phone survey conducted by the Arkansas Department of Health

based on the findings. The purpose of this is to eliminate redundancy and leverage resources to minimize unnecessary expenditures. This will allow for a focus on priority areas and populations.

Second, the DCCECE will combine the resources of several multiple mixed delivery systems housed within our agency and external partners (CCDF, State Funded Pre-K, PDG Funded Pre-K, Early Head Start, Head Start, IDEA Part B and C). This will be accomplished using two methods:

- Attaching an ACEs survey to parental applications for CCDF and Early Head Start Assistance
- Sending an ACEs survey to State Funded Pre-K, PDG Funded Pre-K, Head Start, and IDEA Part B and C program coordinators who will be responsible for assisting parents in submitting the survey

Third, the DCCECE, in collaboration with our partners, will collect ACEs surveys at established Family Engagement Events (See Activity 3). This will be accomplished by the following:

- Assigning a Family Engagement Specialist/Family Support Staff (FES/FSS) to attend the events to collect the survey data (See Activities 3,4,5 for more information in FES)
- The partner responsible for facilitating the Family Engagement Event will collect the survey data if an FES/FSS is unavailable

These scores will be submitted to our research and evaluation team for comparison and analysis as it relates to mixed delivery systems, QRIS rating, family engagement attendance, etc. Scores collected will be further analyzed against the meta-analysis. This will allow DCCECE and partners to determine the pockets of highest need. Data collected will be used to update the

strategic plan to include a comprehensive action plan on addressing the ACEs epidemic in Arkansas.

1.1.4 Collaboration and Coordination

Arkansas has several statewide plans in place to address facility and facility-related concerns. We will consult with CCDF, CACFP, State Funded Pre-K⁴, AR Better Beginnings (QRIS)⁵, Head Start, Early Head Start⁶, and the Child Care Licensing Unit⁷ to incorporate their prospective state plans into our comprehensive needs assessment. The original Preschool Development Grant (PDG) included an analysis to barriers of funding. We will use this existing analysis and expand upon it. In doing so we will propose how to address each of the barriers. This will be a collaborative effort between the DCCECE, Policy Makers, Partners, Providers, and other relevant parties.

1.2 Activity 2: Strategic Plan

DCCECE will work with our partners to review existing strategic plans to identify weaknesses and areas of growth. We will use this analysis to update our existing B-5 strategic plan. In addition, we will work with the current ACEs workgroup through AFMC⁸ as well as our B-5 mixed delivery system to strengthen existing efforts by streamlining the work both present and future.

⁴ Arkansas Better Chance (ABC) PreK program funded by the State of Arkansas

⁵ Arkansas' quality rating and improvement system

⁶ Arkansas was one of three states awarded the Early Head Start Federal Partnership Grant in 2016

⁷ A unit within the DCCECE responsible for licensing and accreditation of all early childhood education facilities

⁸ AFMC: Arkansas Foundation for Medical Care

1.2.1 ACEs Ad-Hoc Committee and Collaborative Partners

An ACEs Ad-Hoc committee will be formed and added to the Early Childhood Commission to accomplish ensuring the strategic plan is ACE's focused. Through this Ad-Hoc committee we will also work on developing an early childhood statewide framework addressing ACE's work in Arkansas. Our completed/revised strategic plan will recommend collaboration, coordination and quality improvement activities among existing programs in the state and local educational agencies. The entities who have been identified to be represented and part of this process are/but are not limited to; the Arkansas Department of Health (ADH), University of Arkansas (U of A), Arkansas State University (ASU), University of Arkansas for Medical Sciences (UAMS), Arkansas for Medical Care (AFMC), Division of Child Care and Early Childhood Education (DCCECE), Division of Children and Family Services (DCFS), Better Beginnings (BB), Child Care Development Fund (CCDF), Arkansas Better Chance (ABC), Division of Developmental Disabilities (DDS), Arkansas Department of Education (ADE), Early Childhood Advisory Council (ECAC), Early Childhood Commission (ECC), Arkansas Home Visiting Network, Arkansas Children's Hospital (ACH), Mid-South Health Systems (MSHS), Arkansas Early Childhood Association (AECA), Zero to Three, Arkansas Association for Infant Mental Health (AAIMHAR), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Teaching Important Parenting Skills (TIPS), Arkansas Head Start Collaboration Office (ARHSSCO), Child Care Resource and Referral Center (CC&R), Behavior Help (BH), ADH Pediatrician and Professor Dr. Alan Mease, Program Manager for Arkansas Building Effective Services for Trauma at UAMS Chad Sievers, Honorable Judge Joyce Williams Warren

of the Sixth Judicial Circuit and Zero to Three Court Team, the existing ACEs workgroup made up of 180 individuals who represent a wide array of sectors that impact early childhood education, government, nonprofit, medical, advocacy and school administration in Arkansas. DCCECE will launch our efforts by conducting training on ACEs (Building Strong Brains) for our stakeholders and partners. With the formation and education of the Ad-Hoc committee DCCECE will establish a clear and concise vision and set goals for our B-5 Mixed Delivery Systems on ACEs work in Arkansas.

1.2.2 Strategic Plan Formation and Stakeholder Collaboration

The DCCECE will lead the strengthening of the strategic plan to include a focus on ACEs work. DCCECE will schedule meetings (via conference call and in-person) monthly with stakeholders and key partners. In these meeting's we will discuss previously obtained research and statistics, assign new research tasks, share program information across the B-5 mixed delivery systems, share progress and ideas, review strategic plan drafts, and ensure the sustainability of the ACEs work across Arkansas beyond the funding cycle. Data will be collected through attendance taken at each meeting, minutes from the meeting's and from those work plans being sent out to attendees. These work plans will track our progress, outline goals, specify tasks to be completed and ensure our success. DCCECE will create a listserv to disseminate information and have ongoing communication with individuals across our B-5 mixed delivery system, stakeholders and partners. For this effort, the following components will be considered:

- DCCECE will update existing strategic plans and build on our partners previous strategic planning efforts by coordinating and collaborating with representatives

across the B-5 mixed delivery system, stakeholders and partners to increase the overall participation in high quality early childhood care and education programs and services.

- Utilizing our internal and external partnerships as well as identifying the need to build other partnerships we will leverage existing resources to improve collaboration, coordination, policy alignment, program quality and service delivery across early childhood care and education programs.
- DCCECE will utilize the existing Family Support Staff (FSM)/Family Engagement Specialist (FES) as well as our partnership with the Arkansas Department of Education (ADE) to ensure a child's transition from early childhood care and education programs into elementary schools.
- DCCECE will partner with a full range of stakeholders in the development and implementation process. By building upon our existing strong partnerships across the B-5 mixed delivery system, stakeholders, policy makers and partners we will ensure that each individual and their entity will be meaningfully impacted beyond the grant funding cycle.

1.3 Activity 3: Maximizing Parental Choice and Knowledge

In an effort to promote and increase involvement by parents and family members, including families of low-income and disadvantaged children, in the development of their children, and the transition of those children from an early childhood care and education program into an elementary school, Arkansas has invested in several initiatives through established mixed delivery systems. While much of the trauma-informed literature focuses on building resilience,

the five protective factors (parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social and emotional competence of children) are interwoven, wrapping supports around a family, as any strength-based approach should recognize, in both theory and practice. The best practices of implementing a protective factors approach is the strongest foundation for all of the more complex work that needs to be applied with families. This will be accomplished through a social media effort, imbedding trauma informed training into existing family engagement activities, and disseminating ACEs/Trauma information at established family engagement events.

1.3.1 Social Media

Arkansas will make information accessible to parents, providers, and stakeholders through the use of multiple social media accounts and by updating an existing consumer education website to be inclusive of ACEs information. The DCCECE will collaborate with a previously established communications vendor to determine the best possible strategies to address how information is disseminated using online platforms. Once developed we will work with the communications vendor to collect data on reach and unduplicated followers using analytics on a monthly basis. This information will be shared with the research and evaluation team to ensure the completion of the long-term goal of 1,500 unduplicated followers through all designated platforms.

Social Media information will be promoted in the following ways:

- The VROOM⁹ app will be promoted on materials handed out at parent involvement events
- Staff Email Signatures including links to Social Media Accounts

⁹ Retrieved From: <https://www.vroom.org>

- Establishing partnerships and promotional posts with previously created Social Media Accounts by collaborating agencies
- Include Social Media Account information on all infographics and ACEs information disseminated to stakeholders, providers, and community members
- Display Social Media Account information in resource centers placed in programs provided by our Mixed Delivery Systems

Information to be displayed on Social Media Accounts is as follows:

- Links to credible articles surrounding ACEs and trauma
- Promotional material regarding trainings
- Promotional material for Family Engagement Events
- Shared content with other previously created Social Media Accounts managed by collaborating partners
- Surveys
- Graphics with important and relevant trauma informed information
- Any other information relative to maximizing parental choice and expanding parental knowledge

1.3.2 Embedding Trauma Informed Information into Established Family Engagement Practices

We propose to embed trauma informed information into Arkansas’ previously established family engagement activities. Arkansas made an investment in the early childhood education workforce several years ago by creating the Arkansas Guide for Promoting Family Engagement by the Arkansas State Parent Advisory Council in 2015¹⁰. Several early educators across the

¹⁰ Retrieved From: <http://arheadstart.org/Arkansas%20Family%20Engagement%20ReportRevised.pdf>

state have been trained on an overview of the Guide and the accompanying framework and strategies.

Arkansas formed a cadre of trainers certified by the National Alliance of Children's Trust and Prevention Fund¹¹ in the Strengthening Families Protective and Promotive Factors Framework. There have been over 600 early educators trained on this strength-based curriculum.

Arkansas has implemented a unique family-provider connection opportunity called Caring Conversations Café, developed by Zero To Three. The Café is guided by table hosts who have specific questions for discussion on seven topics relevant to promoting and increasing involvement by parents and family members, including families of low-income and disadvantaged children, in the development of their children and the transition of those children and families from an early childhood care and education program into an elementary school. This model has been implemented across the state with childcare providers, home visiting programs, teen parent groups and a diverse group of families. Almost 500 cafes have been conducted with close to 2500 participants.

Parenting with Purpose informs families of important information about the development of their young children while reflecting on their own childhood experiences and the impact those experiences may or may not be having on their own parenting journey. This model was developed by Zero To Three and has been delivered in over 20 sessions with 447 participants.

1.3.3 ACES Information Dissemination to Parents

Arkansas has several previously established Family Engagement Events such as the Fatherhood Initiative¹², Caring Conversations Cafés¹³, Teen Dad Events, Reading with Dad, and

¹¹ Retrieved From: <https://www.ctfalliance.org>

¹² Retrieved From: <https://www.fatherhood.org>

¹³ Retrieved From: <https://www.zerotothree.org/resources/657-caring-conversations-cafe-model-facilitator-guide>

others. We propose to leverage these existing resources and compound upon the awareness shared with parents by disseminating fact sheets, graphics, and ACEs tool kits. By extending our presence into events parents are already comfortable attending we will be able to truly maximize our reach. This will increase parental knowledge regarding trauma informed care and ACEs thereby equipping them with the tools needed to effectively use their parental choice to identify high quality early childhood education settings. By creating an in-home and center-based knowledge level of trauma it will allow for increased protective factors to prevent and negate early childhood trauma in the B-5 population through parental empowerment. We will track the number of fact sheets, graphics, or ACEs tool kits distributed and at which events. We will submit this information to our research and evaluation team to ensure a minimum of 2,000 are distributed over the 12-month grant period.

1.3.4 The Need in Arkansas

While there has been significant investment in engaging families in Arkansas, these initiatives have only scratched the surface of the work needed to fully and meaningfully engage parents and family members in the early years of their child's educational career. This early exposure to engagement with educators and other families will carry over into the elementary years. Expansion of each of these initiatives will allow us to reach even more families who are so desperately seeking positive relationships with peers and others, child development knowledge, and referral-based services. Building positive relationships using a strength-based approach can change the trajectory of the lives of the families being served through early education programs in Arkansas.

1.4 Activity 4: Sharing Best Practices

Arkansas will use the PDG B-5 grant to share best practices in early childhood education through collaboration, training, and coordination. While there has been ACEs efforts coordinated in the state previously, there has not been one strong, collective, unified voice on trauma and trauma informed care. Several of our partners (Arkansas Department of Health, Arkansas Children’s Hospital, Arkansas Department of Education, AFMC, etc.) have seen similar trends of trauma and instances of high ACEs scores in the programs they support, as such we are all compelled to act. The DCCECE and partners collaboratively commit to mitigate the effects of trauma on our B-5 population by: hosting train the trainer sessions on “Building Strong Brains”, identifying pilot programs, developing infographics on ACEs/trauma, establishing an annual stakeholder’s symposium in conjunction with the previously established ACEs summit, and utilizing technical assistance/coaching.

1.4.1 “Building Strong Brains” Train the Trainer

“Building Strong Brains”¹⁴ is an evidence-based curriculum developed by the Tennessee Commission on Children and Youth (TCCY) and the Tennessee Department of Health (TDH) in alignment with the Frameworks Institute¹⁵. “Building Strong Brains” curriculum teaches the importance of understanding trauma, toxic stress, brain development, and the lasting impact of trauma. “Building Strong Brains” started as the Tennessee ACEs Initiative’s major statewide effort to establish Tennessee as a national model for how a state can promote culture change in early childhood based on a philosophy that preventing and mitigating adverse childhood

¹⁴ Retrieved From: <https://www.tn.gov/tccy/ace/tccy-ace-building-strong-brains.html>

¹⁵ Retrieved From: <https://www.frameworksinstitute.org>

experiences, and their impact, is the most promising approach to helping children lead productive, healthy lives and ensure the future prosperity of the state. In December 2018 Audrey Freshwater, the State Pre-K Administrator and proposed PDG B-5 Administrator, will be certified as a trainer for “Building Strong Brains”. This will kick off our train the trainer effort on the state of Arkansas. We will then host a training for the DCCECE staff which encompasses individuals across all facets of early childhood education administration with representatives from several of our mixed delivery system. By first conducting the “Building Strong Brains” training amongst internal staff we will begin to form the collective, unified voice needed to generate the ACEs paradigm shift in Arkansas.

In the second phase we will launch train the trainer efforts with early childhood education professionals and partners across all mixed delivery systems. Arkansas will consult established trainers from TCCY who were pivotal in the development and implementation of “Building Strong Brains” across the state of Tennessee eventually reaching over 35,000 trained professionals and community members. To accomplish our first goal of 500 trainers we will invite all State Pre-K Program Coordinators and DCCECE collaborative partners. During this phase, we will also train all staff at identified pilot programs and all Family Engagement Specialist/Family Support Staff (See Activity 5 for more details).

In the third phase, we will identify individuals who have completed the train the trainer requirements to pilot “Building Strong Brains” across all regions of Arkansas. DCCECE will house all data collected from subsequent “Building Strong Brains” trainings conducted by the identified individuals. Each trainer will submit a request for training to DCCECE for approval. Once approved the DCCECE will send out a training packet to include sign in sheets and evaluation forms. Each trainer will be required to submit the training packet back to the

DCCECE within 15 business days of the completed training session. Information received will be logged by the PDG B-5 Research and Statistics Supervisor on an excel spreadsheet in order to capture the accurate number of training participants. The PDG B-5 team routinely send updated documentation to the research and evaluation team as well as discuss progress with relevant stakeholders to ensure adequate progress is being made towards our long-term goal of 5,000 trained individuals.

1.4.2 Identifying Pilot Programs

The DCCECE and partners will identify five pilot programs across the all regions of Arkansas (Northwest, Southwest, Central, Northeast, and Southeast). There will be an assortment of pilot programs across the different mixed delivery systems. They will be split up into two categories:

- 0-35 months (*Early Head Start, CCDF*)
- 36-71 months (*State Funded Pre-K, Head Start, CCDF*)

Pilot programs will be chosen based on previous trauma informed care, QRIS ranking, level of interest, number of underserved and vulnerable children, and application score. Identified prospective programs must submit an application with narrative including how they propose to pilot trauma informed care in their early childhood education programs. Applications will be scored by readers who have already been trained in “Building Strong Brains” and other relevant trauma informed educational experience. Once the programs have been chosen all staff must be trained in “Building Strong Brains”. The implementation of pilot programs will be addressed in Activity 5.

1.4.3 Infographic Development

The Arkansas Department of Human Services Office of Communications in collaboration with the DCCECE will be tasked with the creation, development, and implementation of ACEs infographics. Infographics will be made at three different knowledge levels: trainer, early childhood professional, and community/family. Infographics will be based on current ACEs research funded by the Annie E. Casey Foundation¹⁶ published by Child Trends¹⁷. Infographics will be periodically updated to reflect current research being conducted in Arkansas as part of Activity 1 (Needs Assessment).

1.4.4 Stakeholder/Partner/Provider Symposium

AFMC and other collaborative partners hosted their first ACEs summit in 2017 to much success. In 2018 they experienced an increase in both attendees and presenters indicating the thirst for knowledge around trauma and the impact of children. DCCECE will partner with AFMC and others to join the summit and host a symposium focused on stakeholders as well as partners and providers. The goal of this is to increase the sharing of best practices across the state through collaboration. DCCECE will create a collective and unified voice to progress the current and future work across Arkansas. By forming this unified voice we will march together towards our goal of increasing knowledge of the ACEs epidemic amongst legislators, key decision makers and policy makers.

¹⁶ Retrieved From: <https://www.aecf.org>

¹⁷ Retrieved From: <https://www.childtrends.org/publications/prevalence-adverse-childhood-experiences-nationally-state-race-ethnicity>

1.4.5 Technical Assistance and Coaching

The DCCECE has previously established contracts dedicated to training, technical assistance, and coaching. We will leverage this existing resource to minimize the cost associated with implementing trauma informed care into Arkansas' early childhood education system. All contracted partners will be trained in "Building Strong Brains". This will allow for an effective and efficient transition into trauma informed care. By implementing coaching and technical assistance we seek to mitigate the pressure associated with a large-scale transition by ensuring our programs have the support systems in place to be successful.

1.5 Activity 5: Improving Overall Quality

1.5.1 Embedding Trauma Informed Care into the Arkansas QRIS Levels (AR Better Beginnings)

Through the award of this grant and with the updates and changes being implemented by AR Better Beginnings (BB)¹⁸ in regards to programs' ability to achieve higher levels/ratings, the DCCECE will embed trauma informed care throughout Arkansas' QRIS system known as AR Better Beginnings. Trauma informed care will be weaved into every aspect of training that programs must attend to achieve a higher level/rating. Currently DCCECE staff, as well as professionals throughout the early childhood field, are collaborating to finalize the intricate details of the professional development and training that will be required. As you can see from the description below we will be working to ensure that high quality care is prioritized by

¹⁸ Retrieved From: <https://arbetterbeginnings.com>

including trauma informed practices across all levels of BB. This will serve to create true sustainability, collaboration and coordination of trauma informed care in Arkansas in the B-5 early childhood education system.

AR Better Beginnings is a quality rating and improvement system implemented in Arkansas to raise the quality of care in licensed early childhood facilities and homes. Better Beginnings promotes and addresses the quality education and care of children in the following component areas:

- Administration and Staff
- Child Development and Assessment
- Educational Learning Environment and Environmental Assessments
- Child Health and Safety
- Family and Community Engagement

The quality of care, education and interactions for children families and communities is increased in Better Beginnings accredited facilities in each component area as follows:

The Administration and Staff Qualifications component is designed to guide and teach the administrators of early childhood education programs in establishing and operating facilities with developmentally appropriate practices such as: lower staff child ratios; educators who have or obtain formal degrees in early childhood education and/or certifications in early childhood education; professional development plans for all educators on staff which improves and increases the knowledge of the workforce in early childhood education.

Specific topics which Better Beginnings promotes in this component includes trainings in:

Management and administration of early childhood education programs; the prevention of child abuse and neglect; mandated reporter; brain development; identifying and addressing risk factors for families of the children served by the local program; McKinney-Vento Homeless Assistance; trauma informed care, and ethics.

The Child Development and Assessment component is designed to guide and teach early childhood education programs to meet the individual needs of all children in their programs.

Specific topics which Better Beginnings promotes in this component includes trainings in:

Screening, assessments and services for individual children in the program; assessing ACE scores; early childhood development; social and emotional development; math, science and technology; language and literacy; behavior guidance; and early childhood mental health. In addition to trainings this component area also and guides programs in Better Beginnings to provide screenings, assessments, referrals and services as needed to all children enrolled in their facility.

The Educational Learning Environment and Environmental Assessment component is designed to guide and teach early childhood programs how to establish and maintain high quality learning environments.

Specific topics which Better Beginnings promotes in this component includes trainings in:

Appropriate use of schedules, social and emotional learning, learning centers, curricula, lesson plans, and activities, and adult/child interactions which promote the development and educational advancement of children in the early childhood education programs.

The Child Health and Safety component is designed to guide and teach early childhood education programs how to promote better health and safety practices in: the early childhood education facilities; families and homes of the children enrolled in the programs; and the local communities.

Specific topics which Better Beginnings promotes in this component includes trainings in:

Well child health screenings; mental health screenings; dental screenings; vision and hearing screenings; injury prevention; infection control; immunizations; CPR/First Aid trainings; emergency preparedness; inclusion of children with special health care needs; safe sleep practices; choosing safe spaces for child care facilities; medication administration; trainings and procedures to address allergies; and transportation trainings and procedures.

The Family and Community Engagement component is designed to guide and teach early childhood education programs to plan, implement and promote practices which create meaning and ongoing opportunities in the local communities served by each early childhood education facility.

Specific topics which Better Beginnings promotes in this component includes trainings in:

Family communications; family support and involvement; marketing and public relations; community outreach; and the appropriate use of technology with families and community partners.

1.5.2 Implementing Pilot Programs

Once the selection and training of pilot programs is completed as outlined in Activity 4 the trauma informed programs will be implemented. Programs will be closely monitored and supported by the DCCECE and partners. The Family Engagement Specialists/Family Support staff will offer technical support and coaching to all pilot programs. The following indicators of success will be submitted monthly to ensure implementation has been successful:

- Description of implemented trauma informed practices
- Demonstration of trauma informed practices
- Attendance records
- Behavior Support requests
- Number of collaborative trainings conducted between the B-5 and K-6 staff
- Number of timely referrals and screenings
- All other data deemed necessary by the DCCECE

1.5.3 Implementation of the Family Engagement Specialist/Family Support Staff

The original Preschool Development Grant (PDG) awarded to Arkansas in 2015 allotted for Family Service Managers to be implemented at all PDG sub-grantee locations. In a survey

conducted by the DCCECE in December 2017 sub-grantees stated that having the Family Service Manager position has had the greatest positive impact on their programs and in their families' lives. We propose to continue and extend this positive effort through the PDG B-5 grant.

Currently the PDG grant allows for 84 Family Support Staff across 16 early childhood education programs. We propose to extend this facet of the PDG grant by enhancing their scope of work and expanding their service areas to include multiple counties and programs. Family Support Staff will not be designated or assigned to any singular program. They will be responsible for assisting families in all of our mixed delivery systems. They will be trained in "Building Strong Brains" and other professional development deemed relevant by the DCCECE. They will work closely with the DCCECE and partners to provide Technical Assistance (TA) to programs, training, family engagement activities, ensure trauma informed practices, work with the Behavior Help (BH) team and be responsible for reporting data. The Family Support/Family Engagement Staff will ultimately be the frontline workers in programs and communities to further our mission of trauma informed care across the B-5 Mixed Delivery System.