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**SUBSTITUTE HOUSE BILL 1639**

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**State of Washington 65th Legislature 2017 Regular Session**

**By** House Early Learning & Human Services (originally sponsored by Representatives Ortiz-Self, Dent, Frame, Kagi, Goodman, Fey, and Doglio)

AN ACT Relating to creating a specialized child care pilot program for vulnerable children; adding new sections to chapter 43.215 RCW; creating a new section; and providing an expiration date.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec.**  The legislature finds that children in early learning and child care programs who exhibit antisocial behavior, including violence, verbal or physical abuse, or other challenging behavior, are expelled at three times the rate of children in K-12 environments.

The legislature further finds that training on trauma-informed care will help teachers and administrators better serve most children, however some children may need access to more intense care and treatment. Developing specialized care and interventions for very high needs children throughout our state is critical in ensuring that these children are ready to enter kindergarten.

Therefore, in order to make informed and research-based investments in early learning and child care, the legislature intends to establish a pilot program for the department of early learning to explore the results of specialized child care for children from birth to five years of age.

NEW SECTION. **Sec.**  A new section is added to chapter 43.215 RCW to read as follows:

The definitions in this section apply throughout this act unless the context clearly requires otherwise.

(1) "Multitiered behavior support" means a framework of progressive interventions and positive behavioral supports that address a child's social and emotional needs.

(2) "Trauma-informed care" means child care in which providers:

(a) Recognize the signs and symptoms of trauma in children;

(b) Incorporate an understanding of both the impact of trauma and the potential paths for recovery; and

(c) Respond by fully integrating knowledge about trauma into policies, procedures, and practices while actively seeking to avoid retraumatization.

NEW SECTION. **Sec.**  A new section is added to chapter 43.215 RCW to read as follows:

(1) Beginning September 1, 2017, the department must establish a two-year pilot program in four licensed child care facilities to provide multitiered behavior support, including specialized trauma informed care, for children from birth to five years of age.

(2) The pilot sites must:

(a) Reserve at least fifty percent of their slots for children who have experienced an adverse childhood experience as defined in RCW 70.305.010;

(b) Participate in an evaluation study at the end of the pilot program to assess the effectiveness of the program;

(c) Agree to a nonexpulsion policy for children;

(d) Keep records on social, emotional, and behavioral development for the children participating in the program; and

(e) Keep records on discipline outcomes for the children participating in the program.

(3) The department must select pilot sites that equally represent urban and rural areas. The department must select at least one site located east of the Cascade mountains and at least one site located west of the Cascade mountains.

(4) The department must submit an evaluation of the results of the pilot program to the governor and the appropriate committees of the legislature in accordance with RCW 43.01.036 by December 1, 2019.

(5) The department must design the pilot program and evaluation report in such a way as to be able to report on:

(a) The optimal staffing levels and necessary staff support for effectively working with high needs children in a child care or early learning environment;

(b) Necessary support for children's families in order to ensure child success;

(c) Recommendations for how best to transition children to other schools or programs; and

(d) How to best serve high needs children across the state.

NEW SECTION. **Sec.**  A new section is added to chapter 43.215 RCW to read as follows:

(1) The department must convene an advisory council on trauma informed care. Advisory council members must be selected by the department and must include:

(a) One or more child psychologists;

(b) A child care provider specializing in working with traumatized children;

(c) A child care provider specializing in working with children with developmental disabilities;

(d) An expert in research on adverse childhood experiences and its impact on child development;

(e) A child care provider who operates a facility in which at least fifty percent of the children served are children of color;

(f) An expert in racial bias in education;

(g) A provider of the early childhood intervention and prevention services (ECLIPSE) program;

(h) A representative of the University of Washington; and

(i) A representative of a nonprofit entity that provides quality improvement services to participants in the early achievers program.

(2) The advisory council must:

(a) Advise the department in the development and implementation of the pilot program created in section 3 of this act;

(b) Assist the department with the development of training and consultation resources for teachers and administrators on the provision of trauma-informed care;

(c) Evaluate the early achievers quality rating and improvement system under RCW 43.215.100 and make recommendations for modifications to the rating system criteria as necessary to incentivize child care providers to serve high-needs children, including but not limited to children:

(i) Who have a developmental delay or disability; or

(ii) Who have experienced an adverse childhood experience as defined in RCW 70.305.010;

(d) Develop recommendations for the innovative delivery of intermediate and advanced training to providers in trauma-informed care;

(e) Establish a method for tracking the number of expulsions from state subsidized early childhood education and child care programs and the reasons for those expulsions; and

(f) Provide parents with information about which programs have expertise in universal design for learning, including multitiered behavior support and trauma-informed care.

NEW SECTION. **Sec.**  This act expires January 1, 2020.

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