Early Childhood Iowa receives funding that is to be used for professional development activities to support and strengthen the comprehensive early childhood system. Input is provided by the ECI Professional Development Component Group regarding needs for the system. Primarily, these funds are applied towards activities that support the entire state and could not happen at a local level. All projects are aligned with the ECI Strategic Plan and the Professional Development Component Group’s Action Plan.

### Infant and Early Childhood Mental Health

IDPH continued utilizing ECI Professional Development funds to support implementation of Iowa’s Culturally Sensitive, Relationship-Focused Practice Promoting Infant Mental Health Endorsement, and to bring a mental health competency lens to other early childhood initiatives. Iowa’s competency-based professional Endorsement model was developed and refined by the Michigan Association for Infant Mental Health and launched in 2002. This model has been adopted by 30 states, plus infant mental health associations in Ireland and Western Australia.

Funds used this period supported a full-time staff position to conduct activities such as coordinating training opportunities, advocating for early childhood mental health within existing initiatives, providing staff support for the IAIECMH, representing mental health on the ECI Steering Committee, the PBIS State Leadership Team, the Preschool Expulsion/Suspension workgroup, and providing leadership for the Health/Mental Health/Nutrition PD Leadership Team. Funds were also used to contract with an experienced Endorsement Coordinator to assist professionals in the application process, to support monthly Reflective Consultation sessions for early childhood professionals, to maintain the IAIECMH’s website (including the addition of competency and Endorsement information), to align existing training initiatives with infant mental health competencies; and to provide professional development opportunities on the topics of infant mental health and Reflective Consultation.
This project supports the ECI Professional Development Executive Committee’s Implementation Plan in the Policy Area of Professional Standards, Objective 1, Action Step 3 (Promoting Iowa’s Infant Mental Health Endorsement) and Objective 2, Action Step 2 (Promoting Alignment of Professional Development with Competencies), and Objective 3, Action Step 1 (Incorporating competencies into licensure, regulations and designations). The purpose of this work is to strengthen professional competencies and skills within Iowa’s early childhood workforce to support the social, emotional and behavioral wellbeing of young children and their families.

This project did not receive any additional direct funding other than nominal membership dues; however, the following in-kind resources have been provided:

- IAIECMH Board of Directors actively volunteered their time to provide leadership for this work
- Children and Families of Iowa provided fiscal agent services for a nominal fee
- Drake Legal Clinic provided pro bono assistance in exploring development of 501c3 status
- Whenever possible, the IAIECMH collaborates with community partners to coordinate professional development events

**Performance Measures:**

- 7 Professional Development webinars provided/linked to Iowa professionals on the topic of infant and early childhood mental health and Endorsement
- 10 meetings of the Early Childhood Mental Health Consultation Leadership Team
- Approximately 185 professionals participated in Early Childhood Mental Health and Reflective Practice Trainings
- 48 hours of Reflective Consultation provided
- Alignment of existing training opportunities with infant mental health competencies and training plan initiated
- Competencies and Endorsement information now available on the IAIECMH website
- 7 Iowa professionals achieved Endorsement in 2018; 1 Endorsed as Infant Family Associate; 3 Endorsed as Infant Family Specialist; 1 Endorsed as Infant Mental Health Specialist; and 2 Endorsed as Infant Mental Health Mentor
- 22 Iowa professionals currently in process of applying in cohort 2
• 5 Breakout sessions held at Prevent Child Abuse Iowa Conference on the topic of Infant/Early Childhood Mental Health, Endorsement and Reflective Practice

Health and Safety Checklist Tool-kit and Training for Child Care Nurse Consultants (CCNCs)

On May 22, 2018, 29 CCNCs attended the *Health and Safety Checklist for Early Care and Education Programs* training in Des Moines. This training included an overview of the assessment tool and manual including utilizing practice scenarios for CCNC to learn the assessment items and scoring. CCNCs also received the Health and Safety Checklist tool-kit. After the training CCNCs were asked to “practice” utilizing the assessment tool onsite at a child care provider business and scoring the assessment. A second follow-up day of training was held in September with continuation of learning the tool and group discussion of specific assessment item numbers that were the most challenging. Follow-up training has also included monthly practice scenarios emailed via SurveyMonkey for CCNCs to score specific items with follow-up feedback, the correct score and comments emailed to the group by the Healthy Child Care Iowa coordinator.

This project supports activities outlined in the following Early Childhood Iowa plans:

• Goal 2: Ensure Access to High Quality Services for Young Children and their Families
• Focus Area 2-1: Promote and invest in high quality services, programs and systems
  2-1A: Identify and implement evidence-based services, programs and activities across the early childhood systems.
  Action Step: Utilize materials from established and accepted national resources.

The following project supports the ECI Professional Development Executive Committee Implementation Plan.

• Goal 1, Objective 2: Align professional development with national early childhood standards.

**Does this project receive other funding or in-kind resources? If so, please describe.** HCCI Coordinator salary/fringe for training organization, handouts, follow-up training in September 2018 and practice survey’s funded by Iowa DHS.
Early Childhood Iowa Professional Development Activities Report (FY ‘18)

Performance Measures:

- 29 (97%) CCNCs attended the May 22, 2018 training. 27 (90%) CCNCs attended the September 5, 2018 follow-up training
- 30 (100%) CCNCs who received the Health and Safety tool-kit are utilizing it when providing quality assessments of early care programs
- Over half of the CCNCs have completed 1-3 Health and Safety Checklist for Early Care and Education Programs assessments with a total of 27 “practice” assessments completed

T.E.A.C.H. Early Childhood® IOWA

T.E.A.C.H. Early Childhood® IOWA is a comprehensive, evidence-based scholarship program that provides the early childhood workforce access to educational opportunities and is helping establish a well-qualified, fairly compensated and stable workforce for Iowa’s children.

T.E.A.C.H. supports the professional development of the early and education workforce in the state, contributing to healthy, safe, and quality early learning environments for Iowa’s youngest citizens.

Does this project receive other funding or in-kind resources? If so, please describe. Yes, in addition to this source, T.E.A.C.H. IOWA receives support from the Iowa Department of Human Services through federal funding from the Child Care Development Fund; United Way of Central Iowa, Women’s Leadership Connection; the Iowa Department of Public Health through MIECHV funds; Polk County Early Childhood Iowa Area; and the child care programs who co-sponsor a T.E.A.C.H. scholarship recipient.

Summary of data or actual data from the project for the grant period to date (use performance measures in contract or other notable data from the contract.)

- 5% rate of teacher turnover rate (compared to 30% nationally)
- 10% Average wage increase for T.E.A.C.H. participants
- 397 scholarship recipients
- 26 graduates from associate and bachelor degree programs
- 79 CDA credentials earned
- 3.6 average GPA for over 2,888 credits earned
Child Care WAGE$® IOWA

Child Care WAGE$® IOWA is a project that provides education-based salary supplements, or bonuses, to low-paid early care and education providers working with children ages birth to five in regulated settings in Iowa. The project is designed to increase retention, education, and compensation. Higher levels of formal education are tied to higher supplement amounts (ranging from $500-$3,500 annually) and are contingent upon continued employment in a qualifying early care and education program.

ECI-PD funds support the expansion of the WAGE$ program and statewide efforts to bring awareness of workforce issues (specifically compensation). These funds also support direct WAGE$ supplements for those working with children ages 3-5 in programs serving infants and toddlers (taking part in the DHS-funded WAGE$ pilot in 15 counties). The matching funds allow all staff in these programs to participate in WAGE$, as long as they serve children 0-5.

WAGE$ helps bring awareness to workforce issues, such as the need for improved compensation, increased education, and higher retention of early care and education professionals. As a nationally licensed program, WAGE$ must meet benchmarks in supporting state systems and be actively engaged in moving the profession forward. The program partners closely with all sectors of the early childhood workforce.

During this contract year, WAGE$ has been supported by multiple funding sources. These include private foundations, United Ways, local ECI areas, and state agencies.

During this contract year, 274 individuals across Iowa, from 114 early care and education programs, received at least one financial supplement from the WAGE$ program. The average six-month supplement was $835.03. 82.3% of individuals retained employment in their early care and education program. Of those without at least an Associate Degree in Early Childhood Education, 27.4% completed additional college credits during the contract year to work toward advancing their award level.
**Shaken Baby Syndrome/Abusive Head Trauma**

Shaken Baby Syndrome/Abusive Head Trauma Evidence shows many infants are seen several times in children's hospitals and emergency rooms prior to a life threatening episodes of abusive head trauma/shaken baby syndrome. Parents also my come Family support staff in the Home Visitation programs and to Title V MH staff with questions about infants with uncontrollable crying. It is important for the staff to reinforce the same prevention messages the family received in the birthing hospital. 

IDPH provided a brief training for Maternal, Infant Early Childhood, Home Visitation Program Contractor Meeting on Shaken Baby Prevention and the available app. The Period of Purple Crying App with mobile application access code can be down loaded to the family support worker, nurse or social worker tablet or smart phone. This allows the client to view the full color 10 page booklet, Period of Purple Crying DVD and the Crying, Soothing and Coping DVD during a home visit with no need for a DVD player or TV. Training for home visitors was held on 11/26/17. 2. The number of DVD/booklets provided to birthing hospital/ER or urgent care clinics to promote implementation of Period of Purple Crying. In 2018 7,581 DVD/booklets or Apps were distributed to 12 different hospitals/clinics. They were distributed to the following locations: Blank Children’s Hospital - Des Moines, Boone County Hospital- Boone, Crittenden Center-Sioux City, Grinnell Regional Medical Center- Grinnell, Hawkeye Area Community Action Program- Cedar Rapids, Lutheran Hospital – Des Moines, Mahaska Health Partners - Oskaloosa, Mercy Medical Center- Des Moines, Mercy Medical Center Clinton, Scott County Public Health – Davenport, Unity Point Methodist – Des Moines.

**Listening visits**

Listening Visits in Title V Maternal Health Agencies Training staff in Listening Visits provides an acceptable and effective first line treatment option for women with depression. Among women of reproductive age, approximately one out of ten women suffer from depression within the past year. While screening has improved identification of women with depression, studies show that fewer than half of depressed women receive any treatment. Numerous barriers such as fear, stigma, lack of understanding of the significance of depression, lack of providers, language barriers, financial barriers or logistical barriers prevent women with depressive symptoms from obtaining treatment. Postpartum depression causes unnecessary suffering for the mother, and unfortunately can also have a negative effect on the infant. A meta-analysis of 19 studies showed that postpartum depression has a negative effect on maternal-infant interaction during the first year of life. Early identification, and prevention and
treatment and alleviate suffering for a new mother and decrease the potentially harmful impact on her infant. Under this agreement, The University of Iowa College of Nursing faculty Lisa Segre PhD trained Nurses and social workers in Listening Visits (LV) in the Maternal Child Health (MCH) project. 1. One Listening Visit trainings workshops was held June 22, 2018. Following the in person training simulated visits over the phone with a trained Listing Visit provider were held with each class participant. Nine participants attended the class.

Iowa Family Support Credential

The purpose of the Iowa Family Support Credentialing Program is to improve program quality, provide an outside evaluation perspective and to ensure that family support programs in Iowa represent a deep and abiding commitment to delivering the highest quality services possible to families and children. As the family support initiative continues to grow and expand in our state, quality improvement helps assure that family support will continue to be regarded by the interested public as a quality service, representing a given set of standards.

The Iowa Family Support Credentialing program is intended for programs that do not have access to an external evaluation. The Iowa Family Support Credential is public recognition by the Early Childhood Iowa office and Iowa Department of Public Health that a family support program is following evidence-based practice standards. The Iowa Family Support Credential is awarded to family support programs that complete the peer review process and are found to be in substantial adherence with all of the Iowa Family Support Standards.

In FY ’18, forty-three programs were served with 703 hours of technical assistance provided. Fifty programs were awarded the credential, all of which were through the standard method. Currently 96% of Iowa counties have at least one program participating in the credential.

Early Childhood – Positive Behavior Interventions and Supports
The mission of the EC-PBIS State Leadership Team is to develop the state infrastructure so that all early care, health and education providers successfully implement the Pyramid Model of positive behavior supports with fidelity. To accomplish the mission, the SLT uses data informed decision making to develop policies, procedures, and tools to ensure:

- Consistent practice;
- Quality implementation;
- Engagement of family and community as critical partners;
- Continuous improvement; and
- Implementation sustainability.

The Early Childhood Positive Behavioral Interventions and Supports State Leadership Team (SLT) was established to guide the development of state infrastructure to support the successful implementation of social and emotional teaching strategies into early childhood classrooms statewide. In collaboration with the Center on the Social and Emotional Foundations for Early Learning (CSEFEL), the SLT began coordinating training for early childhood professionals in the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children in 2006. Since then, the team has continued to sponsor training for programs, coaches, trainers, and educators throughout Iowa. Program cohorts began to initiate program-wide implementation in between 2006-2009, an effort that involved three cohorts of ten programs each. New cohort training was re-initiated in 2013. During bi-monthly meetings, the SLT discusses relevant data and examines policy to establish working action plans designed to promote and sustain EC-PBIS implementation in early childhood settings.

This contract supported external coaches to support cohort programs to increase fidelity of EC PBIS implementation. The project is supporting a pilot project with an AEA to provide dedicated staffing to assist programs and provide training. Through this funded project, on-line access to the ePyramid Preschool Module training via AEA PD Online is supported. Finally, incentives supported ten program staff and /or coaches to attend a national conference.