



Service Use, Risk Factors, and Assessments among ECLIPSE, ECEAP, and ESIT Clients

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Report to the Washington State Department of Children, Youth, and Families

THIS REPORT examines the children enrolled in three Department of Children, Youth, and Families (DCYF) Family Support and Early Learning Program Division programs: Early Childhood Intervention and Prevention Services (ECLIPSE), Early Childhood Education and Assistance Program (ECEAP), and Early Support for Infants and Toddlers (ESIT). The aims of the report were to examine overlaps between ECLIPSE and the other two programs, consider the feasibility of using assessments from ESIT and/or ECEAP to evaluate outcomes for the ECLIPSE population, and assess service use and risk factors of the population(s).

Key Findings

- 1. ECLIPSE, ECEAP, and ESIT had little overlap in client populations.** Of the 52,445 children who participated in ECLIPSE, ECEAP, or ESIT only 1,064 (2 percent) enrolled in another of the focal programs over a four-year period. The lack of overlap between the ECLIPSE and the ESIT and/or ECEAP population makes using the assessments from those programs to evaluate outcomes for children in ECLIPSE impractical.
- 2. ECLIPSE, ECEAP, and ESIT clients used social and health services.** While use levels varied somewhat between the three programs, nearly 90 percent of the combined population used Medicaid; over two-thirds used Basic Food; and between one-quarter and one-third used TANF, Developmental Disabilities Administration services, or Working Connections Child Care subsidies over a four-year period.
- 3. Over one-quarter of the combined ECLIPSE, ECEAP, and ESIT population was involved with the child welfare system over a four-year period.** The most prevalent type of involvement was with Child Protective Services (CPS) case management at 24 percent. Child welfare involvement was especially prevalent in the ECLIPSE population (86 percent). Parent risk factors that may correlate with child welfare involvement were examined in the population, with the most prevalent being the presence of a mental health condition (48 percent), TANF receipt (45 percent), and criminal justice involvement (39 percent).
- 4. Children enrolled in ECLIPSE had especially high rates of service use and family risk factors.** For example, 86 percent of children enrolled in ECLIPSE were involved in the child welfare system, 75 percent received TANF benefits, and 30 percent received mental health treatment during the four-year study period. Nearly three-quarters (72 percent) had a parent with a history of substance use disorder and 76 percent had a parent with a history of criminal justice involvement. ECLIPSE serves a population of young children with acute service needs.

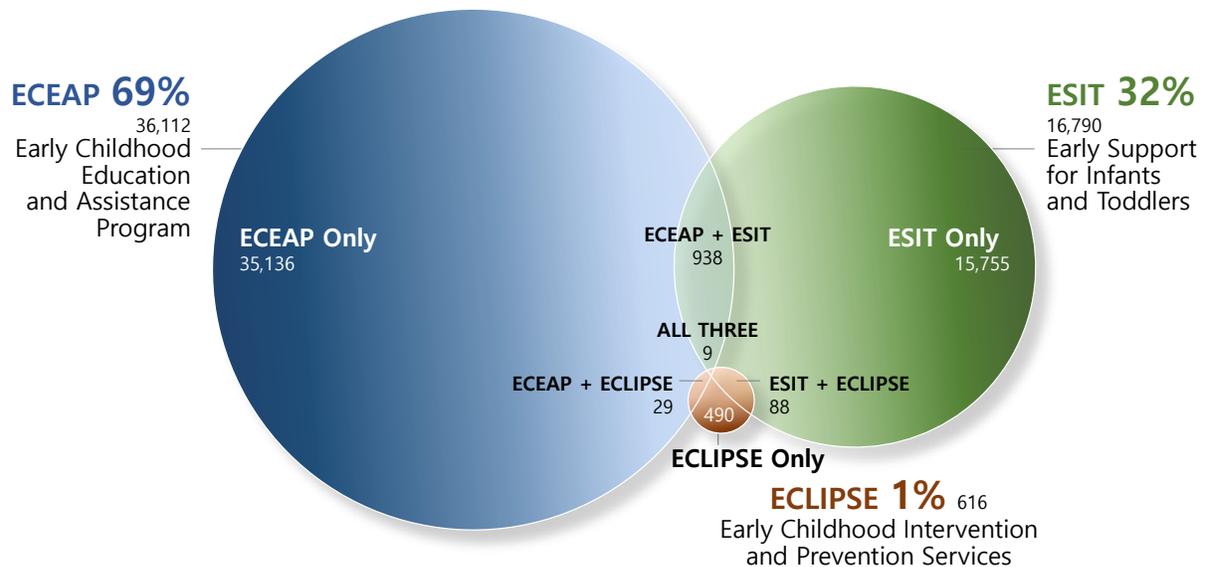
Four-Year Early Learning Program Overlap

Enrollment data provided by DCYF for State Fiscal Year (SFY) 2013 through SFY 2016 shows little overlap between the three early learning programs. For purpose of this analysis, overlap meant enrollment in more than one program at any point in the four years; enrollment in one program could happen before, after, or at the same time as enrollment in another program and be considered overlap. These numbers will not be comparable to single year counts. However, given the differing age targets between programs, a four-year analysis was selected to account for movement through programs as children age.

Across all three programs, 52,445 unique children were identified in at least one of the programs in the SFY 2013 – SFY 2016 period. ECEAP had the largest enrollment with 36,112, followed by ESIT with 16,790, and ECLIPSE with 616. Only 938 children were found to have enrolled in both ECEAP and ESIT at some point in the four years. The ECLIPSE/ESIT and ECLIPSE/ECEAP populations were smaller still. Nine children used all three programs over four years.

Early Learning Population Service Overlap

SFY 2013 – SFY 2016 (TOTAL = 52,445)



Three Early Learning Programs for Children Under Age 6

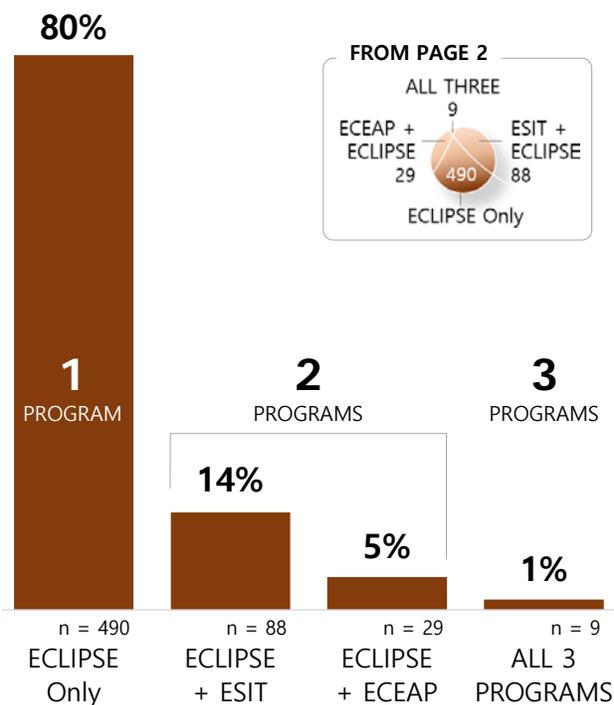
Managed by the Washington State Department of Children, Youth, and Families (DCYF)

- Early Childhood Intervention and Prevention Services (ECLIPSE):** ECLIPSE serves children birth to age 5 who are at risk of child abuse and neglect and may be experiencing behavioral health issues due to exposure to complex trauma. ECLIPSE serves a small number of children in two counties: King County and Yakima County.
- Early Childhood Education and Assistance Program (ECEAP):** ECEAP is Washington's pre-kindergarten program for 3- and 4-year-old children from low-income families. ECEAP is available statewide for children who meet age requirements and are from families at or below 110 percent of the federal poverty level, are in foster care, or have an Individualized Education Program (IEP) for special education. Some children may be accepted who are over the income limit if they have developmental or environmental risk factors.
- Early Support for Infants and Toddlers (ESIT):** ESIT provides individualized early intervention services to children birth to age 3 who have disabilities or developmental delays in accordance with the federal Individuals with Disabilities Education Act (IDEA), Part C. A child is eligible if he or she demonstrates a delay of 1.5 standard deviations in a specified area of development or has a diagnosed physical or mental condition that has a high probability of resulting a developmental delay (e.g. Down syndrome or cerebral palsy).

ECLIPSE Population in Other Early Learning Programs

ECLIPSE Program Overlap

TOTAL = 616



While overlap in enrollment in the entire population was small, there was interest from DCYF in understanding the ECLIPSE program overlap in particular. Since ECEAP and ESIT use entry and exit assessments, they could potentially be used in an evaluation of the ECLIPSE program. However, overlap between ECLIPSE and the other two programs was not substantial.

Of the ECLIPSE group (N = 616) 80 percent were enrolled in ECLIPSE only during the four years, 14 percent were in ECLIPSE and ESIT, 5 percent were in ECLIPSE and ECEAP, and 1 percent were in all three programs.

The table below illustrates that the ECLIPSE population with assessment data from ECEAP or ESIT. *Teaching Strategies GOLD®* is observation-based assessment used by ECEAP and the Child Outcome Summary (COS) is a process used to collect functional information about children from multiple settings for ESIT. Fewer than 5 percent of children served by ECLIPSE had *GOLD®* scores and only 16 percent had COS information.

ECLIPSE Population with ECEAP or ESIT Assessment Data

Both Fall and Spring for *GOLD®* and Entry and Exit for COS, Denominator = 616

ASSESSMENT	NUMBER	PERCENT
<i>Teaching Strategies GOLD®</i> MEASURES		
Cognitive	27	4%
Literacy	26	4%
Math	27	4%
Language	27	4%
Physical	27	4%
Social Emotional	28	5%
CHILD OUTCOME SUMMARY (COS) MEASURES		
Positive Social Emotional	97	16%
Use of Appropriate Behaviors	97	16%
Acquiring and Using Knowledge and Skills	97	16%

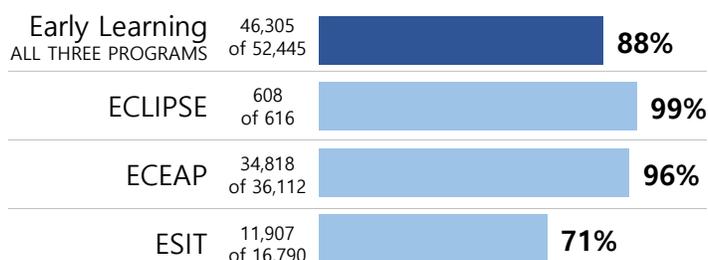
Social and Health Service Use of the Early Learning Population

To identify social and health service use, children in the early learning population were matched to service receipt in the same four-year period (SFY 2013 – SFY 2016). As with the overlap analysis, social services could have been received before, after, or concurrent with the enrollment in the early learning program, as long as both fell within the four-year period. These rates will not be comparable to single year use rates.

Medicaid Enrollment among Early Learning Programs

SFY 2013 – SFY 2016

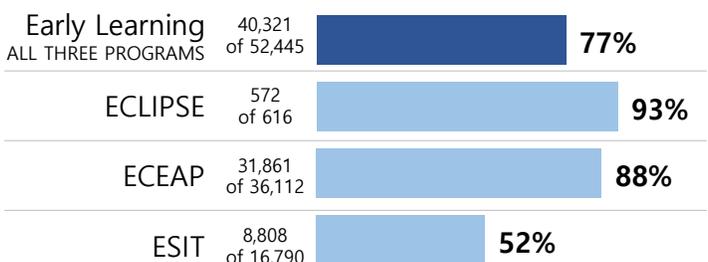
A majority of the early learning population was enrolled in **Medicaid** (88 percent), with near universal enrollment among the ECLIPSE population (99 percent), and a lower rate among the ESIT population (71 percent).



Basic Food Receipt among Early Learning Programs

SFY 2013 – SFY 2016

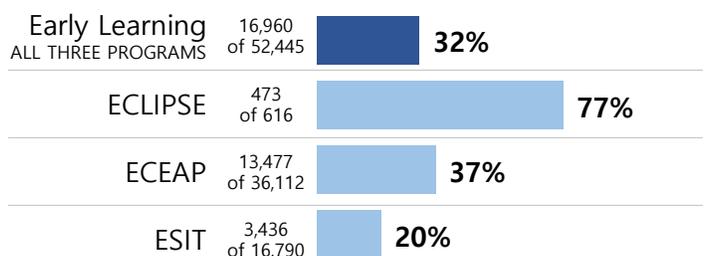
Nearly 80 percent of the early learning population received **Basic Food**, with high rates in ECLIPSE (93 percent) and ECEAP (88 percent) and lower rates in the ESIT population (52 percent).



TANF Participation among Early Learning Programs

SFY 2013 – SFY 2016

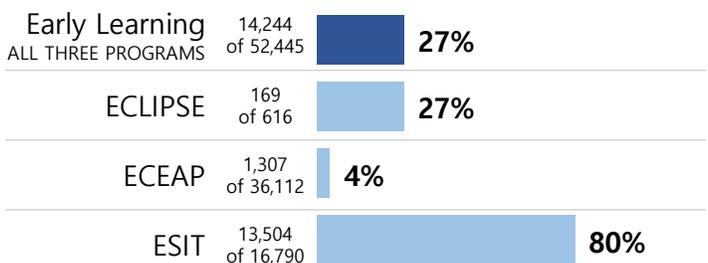
About one-third (32 percent) of the overall early learning population received **TANF** cash benefits. The TANF use rate was especially high in the ECLIPSE population (77 percent), lower in the ECEAP population (37 percent), and lowest in the ESIT population (20 percent).



Developmental Disabilities Administration Service Use among Early Learning Programs

SFY 2013 – SFY 2016

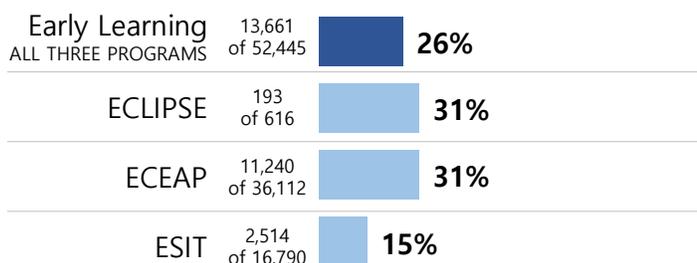
Over one-quarter (27 percent) of the early learning population received a service from the DSHS **Developmental Disabilities Administration** (DDA). The use of DDA services was highest in the ESIT population (80 percent) and the lowest in the ECEAP population (4 percent).



Working Connections Child Care Receipt among Early Learning Programs

SFY 2013 – SFY 2016

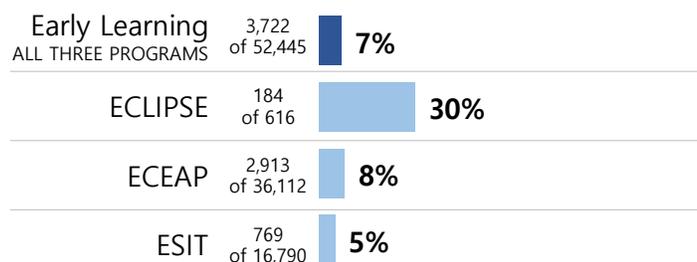
About one-quarter (26 percent) of the early learning population used **Working Connections Child Care** (WCCC), with similar rates in the ECLIPSE and ECEAP population (31 percent for both) and lower rates in the ESIT population (15 percent).



Division of Behavioral Health and Recovery Service Use among Early Learning Programs

SFY 2013 – SFY 2016

Use of **Division of Behavioral Health and Recovery** (DBHR) mental health services was rare for children in the overall early learning population (7 percent), though the ECLIPSE population had somewhat high rates of use given their age (30 percent).



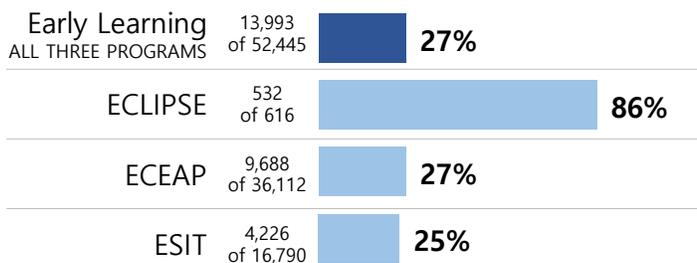
Child Welfare Service Use in the Early Learning Population

Using the same four-year period (SFY 2013 – SFY 2016), the early learning population was matched to child welfare service receipt. These rates will not be comparable to single year rates of child welfare involvement.

Any Child Welfare Service Use among Early Learning Programs

SFY 2013 – SFY 2016

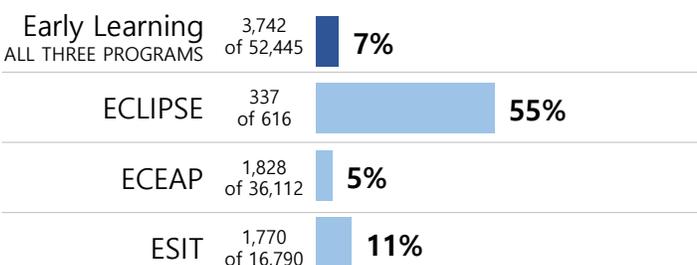
About one-quarter (27 percent) of the total population received a **child welfare** service over the four years, with extremely high rates in the ECLIPSE population (86 percent) and lower rates in the ECEAP (27 percent) and ESIT (25 percent) populations.



Out-of-Home Placement among Early Learning Programs

SFY 2013 – SFY 2016

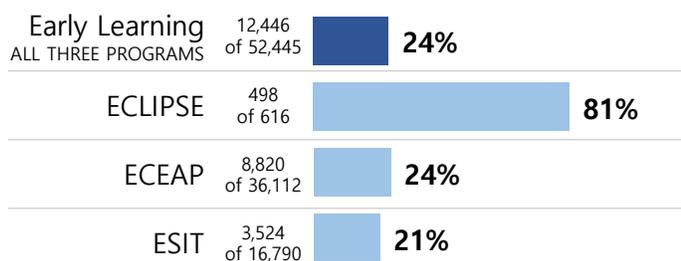
About 7 percent of the total early learning population experienced an **out-of-home placement**. However, over half (55 percent) of the ECLIPSE population was placed out-of-home. Out-of-home placement was more prevalent in the ESIT population (11 percent) than in the ECEAP population (5 percent).



Child Protective Services Case Management among Early Learning Programs

SFY 2013 – SFY 2016

The most common interaction with the child welfare system was with **Child Protective Services (CPS)**. About one-fourth (24 percent) of the early learning population was associated with a CPS case during the four years, with the highest rate for the ECLIPSE population (81 percent), and lower rates in the ECEAP (24 percent) and ESIT (21 percent) populations.



Other Child Welfare Services

Use rates of other services and case management types in the child welfare system are displayed in the table below (see Technical Notes for explanations of each service). The ECLIPSE population was notable for having high rates of use of many child welfare services including Child and Family Welfare Services Case Management (60 percent), Family Focused Services (48 percent), Child Care Services (43 percent), Foster Care Placement Services (40 percent), and Foster Care Support Services (39 percent).

The ESIT population tended to have higher involvement with the child welfare system than the ECEAP population. For example 11 percent of ESIT participants received Child and Family Welfare Services Case Management, compared to 6 percent of the ECEAP population.

DENOMINATOR	Early Learning ALL THREE PROGRAMS 52,445		ECLIPSE 616		ECEAP 36,112		ESIT 16,790	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Child & Family Welfare Services Case Management	4,320	8%	367	60%	2,304	6%	1,856	11%
Family Focused Services	3,266	6%	298	48%	1,645	5%	1,497	9%
Child Care Services	3,023	6%	266	43%	1,552	4%	1,363	8%
Foster Care Placement Services	2,669	5%	249	40%	1,170	3%	1,385	8%
Foster Care Support Services	2,470	5%	238	39%	1,139	3%	1,227	7%
Family Voluntary Services Case Management	1,959	4%	165	27%	1,180	3%	698	4%
Adoption Services Case Management	1,238	2%	74	12%	397	1%	818	5%
Adoption Support Services	1,191	2%	41	7%	402	1%	790	5%
DLR Child Protective Services Case Management	942	2%	76	12%	493	1%	430	3%
Family Reconciliation Services	799	2%	19	3%	612	2%	201	1%

Risk Factors among Parents of the Early Learning Population

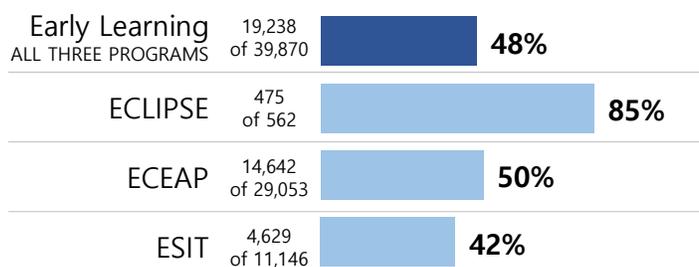
Children from the early learning population were linked to their parents through birth certificates, child support enforcement orders, and records of parental visitation in prison. Only 76 percent of the overall population could be linked to a parent who received a social or health service. The quarter of the population without matched parents was likely due to both out of state births (including foreign births) and parents who were not clients of DSHS or enrolled in Medicaid.

The prevalence of each risk factor among children with at least one parent identified is displayed in the figures below. In line with the Adverse Childhood Experiences (ACEs) literature, risk factors were identified over a number of years not a single point in time. In this case, the five year period prior to first enrollment in one of the three early learning programs is examined. These measures can be thought of as risk factors a child has been exposed to prior to entering the early learning system.

Mental Health Conditions among Parents of Children in Early Learning Programs

SFY 2013 – SFY 2016

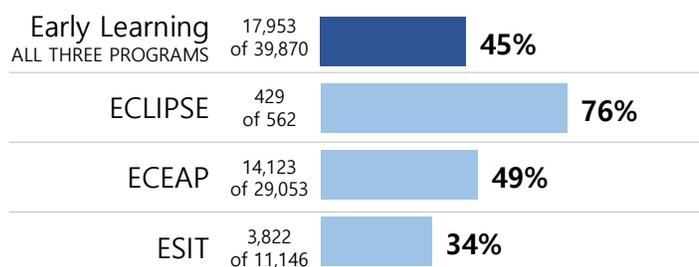
The most common risk factor was having a parent with an identified mental health condition. About 1 in 2 (48 percent) of the early learning population had a least one parent with a mental health condition. The highest rate was for the ECLIPSE population (85 percent), with lower rates for ECEAP (50 percent) and ESIT (42 percent).



TANF Participation among Parents of Children in Early Learning Programs

SFY 2013 – SFY 2016

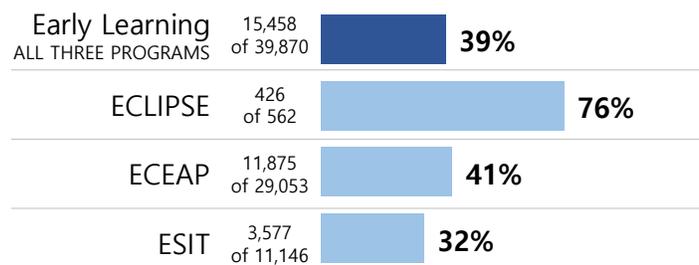
The next highest risk factor was TANF receipt (45 percent), an indicator of very low income. Three-quarters (76 percent) of ECLIPSE children had a parent who had used TANF, compared to about half (49 percent) of ECEAP children and about one-third (34 percent) of ESIT children.



Criminal Justice Involvement among Parents of Children in Early Learning Programs

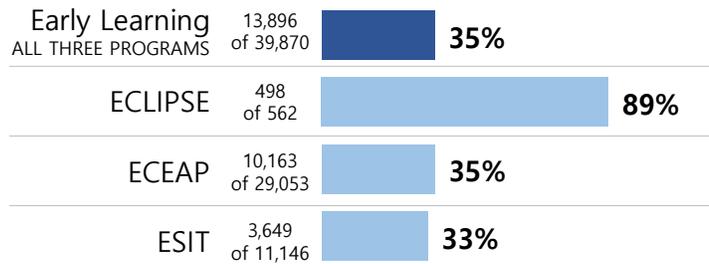
SFY 2013 – SFY 2016

Thirty-nine percent of the early learning population had a parent with criminal justice system involvement, with the ECLIPSE population having the highest prevalence (76 percent). Forty-one percent of ECEAP children and 32 percent of ESIT children had criminal justice-involved parents.



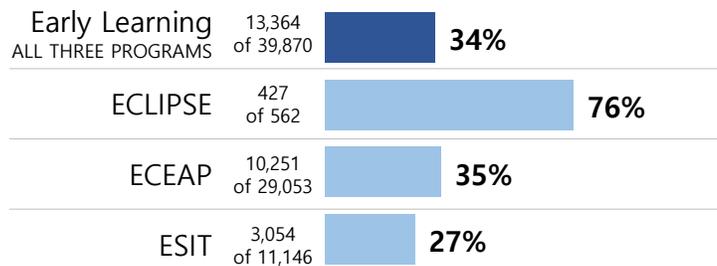
Child Welfare Service Use among Parents of Children in Early Learning Programs SFY 2013 – SFY 2016

Over one-third (35 percent) of the early learning population had at least one parent who had involvement with the child welfare system. The prevalence among children in ECLIPSE was 89 percent, while the prevalence was 35 percent for ECEAP and 33 percent for ESIT.



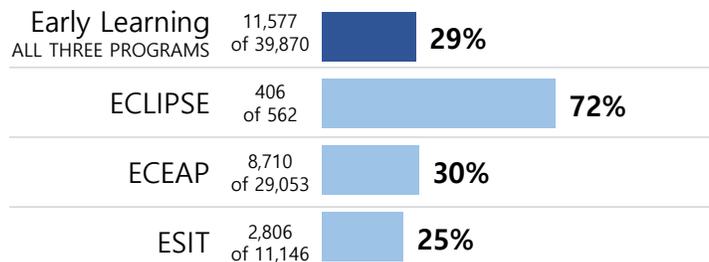
Homeless or Housing Instability among Parents of Children in Early Learning Programs SFY 2013 – SFY 2016

About one-third (34 percent) of children in early learning programs had a parent with a history of homelessness or housing instability. The prevalence was highest for ECLIPSE (76 percent), and lower for ECEAP (35 percent) and ESIT (27 percent).



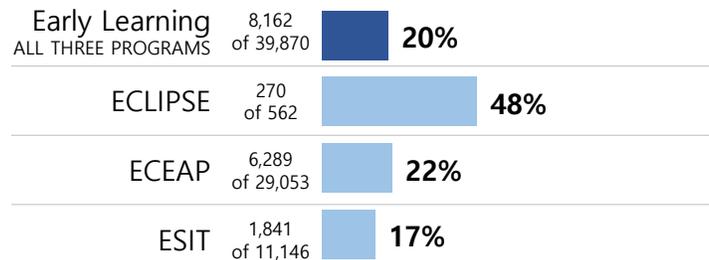
Substance Use Disorder among Parents of Children in Early Learning Programs SFY 2013 – SFY 2016

Over one-fourth (29 percent) of children had a parent with a substance use disorder. The prevalence was highest for ECLIPSE (72 percent), and lower for ECEAP (30 percent) and ESIT (25 percent).



Domestic Violence among Parents of Children in Early Learning Programs SFY 2013 – SFY 2016

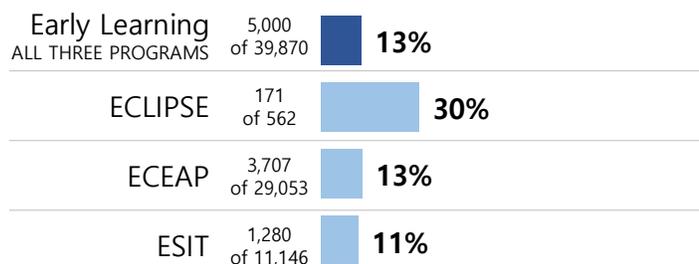
One-fifth (20 percent) of the early learning population had a parent who experienced or perpetrated domestic violence. Among the ECLIPSE population, the prevalence was closer to one-half (48 percent). ECEAP and ESIT had lower prevalence, 22 percent and 17 percent respectively.



Significant Health Problems among Parents of Children in Early Learning Programs

SFY 2013 – SFY 2016

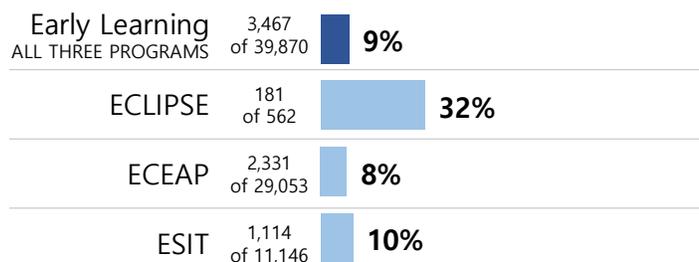
Thirteen percent of the early learning population had a parent with significant health problems. The ECLIPSE population had a prevalence of 30 percent, while ECEAP had a prevalence of 13 percent, and ESIT had a prevalence of 11 percent.



Disability Medical among Parents of Children in Early Learning Programs

SFY 2013 – SFY 2016

Nine percent of the early learning population had at least one parent who qualified for disability-related medical coverage. The percentage was highest in the ECLIPSE population (32 percent), while the ESIT population's prevalence (10 percent) was slightly higher than for the ECEAP population (8 percent).



Discussion

The Department of Children, Youth, and Families (DCYF) was established in July 2018 in order to bring services for children, youth, and their families under one agency. DCYF combined the early learning system from the former Department of Early Learning and the child welfare system of the former DSHS Children's Administration and will absorb the functions of DSHS Juvenile Rehabilitation and Office of Juvenile Justice in the future.

This report demonstrates that the early learning population does not have a large percentage of overlap across the three programs examined: ECEAP, ESIT, and ECLIPSE (home visiting services which DCYF oversees could not be included because of data limitations). However, findings indicate that there is significant crossover between the early learning population and child welfare system. Additionally, the early learning population receives social and health services from DSHS and HCA including Medicaid, Basic Food, TANF, developmental disabilities services, child care, and mental health services. A portion of the early learning population is also exposed to adverse experiences through their parents. Therefore, while DCYF has brought together early learning and child welfare in order to form a more integrative prevention/intervention system, cross-agency collaboration will be necessary to meet DCYF's goals of child safety and well-being through addressing needs of both children and their parents.

DATA SOURCES

DYCF provided SFY 2013 to SFY 2016 enrollment records for ECLIPSE, ECEAP, and ESIT, as well as assessment records for ECEAP (*Teaching Strategies GOLD®*) and ESIT (Child Outcome Summary) during the same time period. Children from ECLIPSE and ESIT enrollment records were matched to the Integrated Client Databases (ICDB) using Link King in SAS Statistical Software. Match rates were 93.5 percent for ECEAP and 90.5 percent for ECLIPSE. Initial ESIT data files included all children referred to ESIT, whether or not they were found eligible or later enrolled. Because the analysis was focused on children who received early learning services, those without an entry rating for the Child Outcome Summary assessment were excluded. Of the ESIT population that ever enrolled (ever had an entry rating) 92.4 percent were matched to the ICDB. The analysis focuses on the early learning program population that could be linked to ICDB records. Social and health service use, child welfare service use, and parent risk factor information comes from the ICDB.

MEASURES

- **Medicaid enrollment:** Children were identified as enrolled in Medicaid if they had at least one month of Medicaid eligibility between SFY 2013 and SFY 2016.
- **Basic Food receipt:** Children were identified as Basic Food recipients if they had at least one month of Basic Food receipt between SFY 2013 and SFY 2016.
- **TANF participation:** Children were identified as TANF recipient if they were a recipient in a TANF assistance unit between SFY 2013 and SFY 2016.
- **Developmental Disabilities Administration (DDA) service receipt:** Children were identified as receiving DDA services if they had at least one paid service from DDA or were determined eligible for DDA services between SFY 2013 and SFY 2016.
- **Working Connection Child Care (WCCC):** Children were identified as receiving WCCC if they had at least one month of WCCC-subsidized child care between SFY 2013 and SFY 2016.
- **Division of Behavioral Health and Recovery (DBHR) mental health service receipt:** Children were identified as receiving DBHR mental health services if they had at least one DBHR-paid mental health service between SFY 2013 and SFY 2016.
- **Child welfare service receipt:** Children were identified as receiving child welfare service if they had at least one Children's Administration service or case management between SFY 2013 and SFY 2016.
 - Child Protective Services (CPS) Case Management: CPS workers provide family services to reduce risk to children and to maintain them in their own homes. Family Assessment Response (FAR) is a differential alternative response for low to moderate risk screened-in reports of child maltreatment.
 - Child and Family Welfare Services (CFWS) Case Management: (CFWS) is designed to strengthen, supplement, or substitute for parental care and supervision. These services may involve substitute care such as Foster Care or Adoption placements. Case management for guardianships are not included.
 - Family-Focused Services helps families who are at risk of child placement or are in need of reunification. Services include traditional child welfare services such as parent aides or counselors, and/or support centered on basic needs, such as clothing, shelter, employment, and transportation. These services also include in-home family preservation and intensive family preservation services that are provided by contract agencies.
 - Child Care Services are available to parents, unlicensed relative placements, and licensed foster parents when an open case plan includes child care, and for individual safety.
 - Foster Care Placement Services are provided to children who need short-term or temporary protection because they are abused, neglected, or involved in family conflict. Children are served exclusively in out-of-home placements which include traditional Foster Care as well as Family Receiving Homes. Unlicensed relative foster care is not included.
 - Foster Care Support Services include clothing and personal incidentals, psychological evaluation and treatment, personal care services, transportation, and payments made to foster parents for respite, and additional supervision for special activities.

- Family Voluntary Services Case Management offers case management and referrals to services for high-risk and moderately high-risk families without a dependency. Services are aimed at reducing safety threats and family risks so that a child can remain safely at home.
- Adoption Services Case Management works to permanently place children in DSHS custody with families. Services include permanency planning, adoption preparation, placement supervision, and limited post-adoption services.
- Adoption Support Services works to find permanent homes for hard-to-place children from DSHS foster care. These children, because of age, race, physical condition, or emotional health, would not otherwise be placed for adoption. This service eliminates barriers to the adoption of such children by providing financial assistance, medical, counseling and rehabilitative services, and assistance with legal fees for adoption finalization.
- DLR Child Protective Services Case Management workers investigate allegations of child abuse in facilities licensed, certified, or operated by the Department of Social and Health Services (DSHS) or the Department of Children Youth and Families (formerly Department of Early Learning (DEL)).
- Family Reconciliation Services (FRS) help adolescents, 13-17 years of age and their families, in instances where the adolescent has run away and/or is in conflict with his/her family. FRS includes Intake, Family Assessment, and Crisis Counseling provided by county-contracted counselors.
- Out-of-home placement identifies children placed out-of-home including foster care, kinship care, or congregate care.

Parent risk factors were measured for the subset of children who could be linked to at least one parent. The period of measurement was the five years prior to the first time a child enrolled in any of the three early learning programs. Children and parents could only be linked if the parent received social and health services in Washington State during the five-year period. Sources of links include Washington state birth certificates, child support enforcement records, and parental visitation in prison. The percent of children that could be linked to one parent was:

All Early Learning	76%	ECEAP	80%
ECLIPSE	91%	ESIT	66%

- **Parent mental health condition:** Parents with mental health conditions were identified through mental health diagnosis, treatment records, or psychotropic medications in ProviderOne.
- **Parent TANF receipt:** Parents who received TANF were identified through the Automated Client Eligibility System (ACES) data warehouse.
- **Parent criminal justice involvement:** Parent criminal justice included arrests, convictions, or DOC incarcerations.
- **Parent child welfare involvement:** Parent child welfare involvement was defined as any service received from Children’s Administration.
- **Parent homelessness or housing instability:** Parent housing instability was identified from ACES living arrangement codes, and includes codes for both homeless with housing and homeless without housing.
- **Parent substance use disorder:** Parent substance use disorder was identified through SUD treatment and diagnosis codes, as well as substance-related arrests.
- **Parent domestic violence:** Parent domestic violence was identified through indicators for DV in the TANF comprehensive evaluation, participation in the address confidentiality program, the presence of a waiver from participation with the Division of Child Support due to DV, as well as DV-related arrests or convictions.
- **Parent significant health problems:** Parent significant health problems was identified through a risk model which assigns a health risk score based on diagnosed conditions and prescriptions. Significant health problems is defined as a risk score that is above the average SSI-client.
- **Parent disability medical:** Parent disability medical was identified through disability-related Medicaid eligibility codes.



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