

Excerpts from the adopted  
Whatcom Healthy Children's Fund Implementation Plan  
March 2023  
Strategic Goals pages 23- 38



## Portfolio of Strategies for Years 1 & 2: Early Learning & Care

Early childhood development paves the way for success throughout a person's life, and the interactions young children have with their caregivers influence the constant brain development that takes place during children's early years. For parents, access to early learning & care can allow them to work more, attend school, and have lasting, positive effects on family economic security and opportunity. Researchers have found that access to more affordable, high-quality early learning & care produces a greater likelihood of improved health outcomes, increased future earnings, and reduced crime rates.

To ensure early learning & care programs meet the diverse and unique needs across Whatcom County, the HCF needs to have a robust mixed-delivery system. This system will allow parents/caregivers options between program delivery models so that children can participate in the program that best meets their needs, learning styles, and cultures. Early learning & care classrooms also provide opportunities to connect children and their families to support and services in areas such as mental and behavioral health, housing, and more.

### The Science Behind The Focus Areas

#### Accessible

To realize the individual and societal benefits of reducing disparities, early learning & care must be affordable and accessible for all families. Accessibility is not only determined by cost, but by the number and diversity of programs available to meet individual family needs and preferences, flexibility in schedules, and geographic proximity. Support for businesses providing early learning & care is needed to ensure that increasing costs of care are not passed on to families. As stated by the 117th Congress, "Child care is infrastructure" ("H.R.1911", 2021). Just as roads enable access to essential resources and services, the availability of diverse, affordable, and accessible early learning & care options provides families with the freedom to participate in the workforce and society. Such an investment ultimately results in overall cost-savings and other societal benefits.

#### High-Quality

Relationships are critical to healthy child development and caregivers of all kinds must be able to engage in nurturing, meaningful interactions that foster optimal development. Wherever early learning & care occur, essential components of high-quality care include a safe, welcoming, and stable environment with an abundance of language-rich, responsive, and playful interactions. Small group sizes and high ratios of adults to children support effective interactions that lead to positive outcomes (Center on the Developing Child, *Early Childhood*, 2007).

#### Affordable

Participation by young children in educational environments can increase academic, cognitive, and social skills. A healthy brain structure shaped by enriched environments in early life enables children to be ready to learn as they enter kindergarten. Additionally, through participation in high-quality early learning environments, it's possible to reduce disparities in educational achievement, income, and even physical health between children from low-income backgrounds and those with high-income backgrounds (University of Wisconsin, 2022). Currently, the high cost of early learning & care is a disproportionate burden and unaffordable for low-income families despite early learning & care subsidies and early learning & care businesses operating on slim profit margins.

#### Professional

Early childhood educators with higher qualifications are associated with higher-quality learning environments (University of Wisconsin, 2022). Attracting and retaining quality staff requires adequate support for early learning & care educators and workers, including livable wages and the ability to pursue professional goals. Enhancing providers' skills and program quality benefits participating children. Professional development programs, curriculum enhancement, and specific skill training have been shown to improve a broad range of positive outcomes for children (Fisher, 2020).

*"A growing body of work suggests that racially and economically diverse preschools have significant learning benefits, which some researchers say is not surprising given how much growth in preschool happens through playing and sharing with peers. "Children of all backgrounds learn more on average in racially and socioeconomically diverse preschool classrooms, and diverse early learning settings can help reduce prejudice among young children," wrote Halley Potter, senior fellow at The Century Foundation, in a recent report that dives into that research and offers ideas for how the federal government can foster integration in universal preschool." (Hurley, 2021)*

**HCF's Early Learning & Care priority has four focus areas:**

1. **Accessible:** Expand early learning & care services that meet the varied needs of families and children. Geographic locations, ages of children, special needs, and a broad range of early learning & care scheduling needs (including emergency opportunities) will all be considered in the development.
2. **Affordable:** Decrease the cost of early learning & care experiences for both families and providers.
3. **High-Quality:** Increase the quality of early learning and care experiences.
4. **Professional:** Attract and retain quality early childhood educators.

**Considerations for Early Learning & Care Strategies:**

- The Healthy Children's Fund cannot be used in place of federal, state, county, city, or school district funding already committed for the purpose of providing outlined services (Whatcom County, 2022). To date, Whatcom County has committed \$12.4 million in ARPA funding for early learning and care, approximately \$10 million of which will be devoted to capital projects to increase early learning slots. HCF spending will complement these ARPA capital investments by focusing largely on non-capital strategies in Years 1 and 2. This will expand resources to create a sustainable child care landscape and to ensure adequate staff to operate quality programs. Capital needs will be reevaluated for years 3 and beyond.
- Strategies are not listed in any particular order. Implementing these strategies will require the collaboration of many community partners, and we anticipate that strategies will have multiple recipients of funding identified through a competitive process. Detailed information can be found in the [funding mechanisms](#) section.
- All of the data needed to measure the effectiveness of the HCF does not yet exist. As data improves, metrics in each strategy area will be further refined. In addition to headline and secondary indicators, each strategy will also have program measures that will help evaluate the effectiveness of approaches and opportunities for growth.

Table 6b. Early Learning & Care Strategies, Year 1 & 2

Strategies	Years 1 & 2	
	\$	%
Early Learning & Care	\$12,800,000	64%
1: Provide funds for small capital projects to expand, renovate, or repurpose buildings to increase early learning & care slots in a mixed-delivery system.		
2: Coordinate current and develop additional pathways to ensure a stable early learning & care workforce to deliver high-quality programs for children.		
3: Improve access to early learning & care through subsidies that reduce the cost of programs for children from families which are cost-burdened.		
4: Ensure access to early learning and care by promoting the expansion and retention of the early learning & care workforce.		
5: Create regional early learning & care hubs that include shared administrative services, colocated early learning and other services for children and families, and support for smaller providers in the County (i.e. the "hub and spoke model").		
6: Support innovative approaches to meet various Healthy Children's Fund goals related to Early Learning & Care.		

**Strategy 1: Provide funds for small capital projects to expand, renovate, or repurpose buildings to increase early learning & care slots in a mixed-delivery system.**

Focus Areas	Early Learning & Care (ELC): Affordable & Accessible
Objectives	Increase early learning & care slots by improving and/or expanding facilities in a variety of program models across the county, including rural locations, to ensure slots are accessible to underserved populations.
Details	<ul style="list-style-type: none"> <li>• Support classrooms to increase the number of early learning &amp; care slots, paying particular attention to age groups and areas of the county most in demand, through funding for facility startup, renovation, or expansion.</li> <li>• This can include converting extra space into an early learning &amp; care program, as appropriate for licensing standards.</li> <li>• This generally does not include the construction of new buildings but would include things such as bathroom renovations, septic systems, etc.</li> <li>• Investments should complement other opportunities for facility improvements.</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Early learning &amp; care slots per 100 infants, toddlers, and preschoolers.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>• Number of parents/caregivers who have a demand for early learning &amp; care report that they have access.</li> <li>• The number of early learning &amp; care providers that report having a waitlist.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Opportunities to Leverage Funds	<ul style="list-style-type: none"> <li>• Ensure providers can apply for and receive Washington State Department of Children, Youth, and Families (DCYF) small-capital and licensed-family home grants.</li> <li>• Complement Whatcom County's ARPA allocations for capital projects to ensure the expansion of varied program models.</li> </ul>
Cost estimate for years 1 & 2*	~\$500,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.

**Strategy 2: Coordinate current and develop additional pathways to ensure a stable early learning & care workforce to deliver high-quality programs for children.**

Focus Areas	ELC: Professional, Accessible, High-Quality Support for Vulnerable Children (SVC): Mental & Behavioral Health
Objectives	<ul style="list-style-type: none"> <li>• Increase access by recruiting operators, educators, intervention specialists, and staff into the early learning &amp; care field, especially those that increase diversity in the classroom.</li> <li>• Provide more accessible pathways to a sustainable career through training and credentialing.</li> <li>• Increase participation in early learning &amp; care programs by improving the experience of children and families within such programs.</li> <li>• Improve access to mental and behavioral health supports for children with specialized needs within the context of early learning and care.</li> </ul>
Details	<p>Pathways will include recruitment, credentialing, and professional development. They must be accessible to a diverse workforce, identify and maximize state and local assets, include community-based options, and fill gaps in the system. Components of the early learning &amp; care workforce development system should facilitate equitable access to the early learning &amp; care field including scholarships, mentoring, and coaching.</p> <p>Planning and Infrastructure:</p> <ul style="list-style-type: none"> <li>• Identify current resources and gaps in the local professional development landscape.</li> <li>• Coordinate and develop the local infrastructure necessary to improve access to and quality of professional development.</li> <li>• The pathway should address recruitment of a diverse workforce, credentialing, training, and retention; track the efficacy of retention strategies; and work with providers to implement them effectively and make adjustments as needed.</li> </ul> <p>Expand access to early learning &amp; care credentialing through higher education and community pathways through avenues such as:</p> <ul style="list-style-type: none"> <li>• Recruiting potential early learning &amp; care workforce.</li> <li>• Support the development of a clear pathway for non-English speaking individuals to become early learning &amp; care educators and providers, especially those that can communicate with children and families in their native language.</li> <li>• Work with K-12 school district Career and Technical Education programs to include early learning &amp; care as a career field.</li> </ul> <p>Expand access to training, professional development, and integration of curriculum into programs across the county through avenues such as:</p> <ul style="list-style-type: none"> <li>• Offer financial planning and business modeling services to early learning &amp; care centers.</li> <li>• Expand access to Teaching Strategies Gold and quality coaching for programs engaged in Early Achievers.</li> <li>• Increase the number of early learning and care programs that use the Since Time Immemorial and other BIPOC-created curricula.</li> <li>• Train early learning professionals to better address the needs of vulnerable populations, including children with behavioral health needs, health issues, social needs, and non-English speaking families.</li> </ul>

	Provide training and technical assistance to potential early learning and care operators and those interested in expanding their programs.
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Percent of credentialed early learning &amp; care educators in Whatcom County.</li> <li>• Percent of early learning &amp; care programs enrolled in the Early Achievers Quality Rating System that has a rating of 3 or higher.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>• Number of early learning &amp; care educators completing training or education provided by the local higher education system or community credentialing program</li> <li>• Number of parents/caregivers who have a demand for early learning &amp; care report that they have access</li> <li>• Number of parents/caregivers who report having access to behavioral/mental health services for their children at their early learning &amp; care program/location</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	Numerous partners offer recruitment, credentialing, and training programs that can be coordinated.
Cost estimate for years 1 & 2*	~\$1,500,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will either shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.

**Strategy 3: Improve access to early learning & care through subsidies that reduce the cost of programs for children from families which are cost-burdened.**

Focus Areas	ELC: Accessible and Affordable
Objectives	<ul style="list-style-type: none"> <li>• Improve access to early learning &amp; care by providing program subsidies for families with children ages 0-5 who are cost-burdened by child care.</li> <li>• Build a plan to incrementally increase the affordability of care for low-income or income-constrained families each year until families are paying 7-10% of their household income.</li> </ul>
Details	<ul style="list-style-type: none"> <li>• Standardize an income eligibility scale in a subsidy program that prioritizes families paying the highest percentage of their household income.</li> <li>• United Way's ALICE (Asset Limited Income Constrained Employed) metrics could be used to help establish the parameters of the sliding scale.</li> <li>• Seattle's Child Care Assistance Program can be used as a model for subsidy implementation.</li> <li>• It is expected that a portion of funds will be used to plan and develop an equitable, effective process for allocating subsidies.</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Percent of median household income spent on early learning and care for a family with two children.</li> <li>• Early learning &amp; care slots per 100 infants, toddlers, and preschoolers.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>• Number of parents/caregivers who have a demand for early learning &amp; care report that they have access.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	Must be implemented to complement <u>Working Connections Child Care (WCCC)</u> , the early learning & care subsidy program that helps income-eligible families with children pay for early learning & care administered by DCYF.
Cost estimate for years 1 & 2*	~\$3,300,000

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**Strategy 4: Ensure access to early learning & care by promoting the expansion and retention of the early learning & care workforce.**

Focus Area	ELC: Professional & Affordable
Objectives	<p>Ensure programs have a stable workforce to run high-quality early learning &amp; care programs.</p> <ul style="list-style-type: none"> <li>• Retain current early learning &amp; care educators and staff in the field by increasing wages.</li> <li>• Recruit additional early learning and care educators and staff by positioning it as a field with earning potential.</li> </ul>
Details	<ul style="list-style-type: none"> <li>• Explore and assess the feasibility of potential strategies, including wage subsidies.</li> <li>• Develop a plan to implement sustainable and effective strategies to meet the objectives with the goal of implementing the plan in years 2 &amp; 3.</li> <li>• Explore innovative models to address workforce shortages, such as partnerships with education, multi-age settings, and apprenticeships.</li> <li>• Leverage the results of state and local wage subsidy pilot projects such as the Best Start for Kids' Workforce Demonstration Project. (King County, 2021)</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Percent of credentialed early learning &amp; care educators in Whatcom County.</li> <li>• Average annual salary for full-time early learning &amp; care educators compared to regional school system salary scales.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>• Number of early learning &amp; care providers reporting challenges with recruiting and retaining early learning &amp; care educators.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	Leverage and align with Washington State efforts to increase wages.
Cost estimate for years 1 & 2*	~\$2,050,000

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**Strategy 5: Create regional early learning & care hubs that include shared administrative services, co-located early learning and other services for children and families, and support for smaller providers in the County (i.e. the "hub and spoke model.")**

Focus Areas	<ul style="list-style-type: none"> <li>• ELC: High-Quality &amp; Accessible</li> <li>• SVC: Mental &amp; Behavioral Health and Supporting Parents</li> </ul>
Objectives	<ul style="list-style-type: none"> <li>• Increase access to early learning opportunities by increasing the number of child care slots across Whatcom County, prioritizing slots for underserved children, especially in rural communities.</li> <li>• Decrease early learning &amp; care operational costs by establishing regional shared service hubs to increase the accessibility and quality of care for low-income children and their families.</li> </ul>
Details	<p>Research, planning, and implementation to establish hubs, including where capital investments are needed, the number and type of providers for each geographic area, etc. Hub and spoke planning will take place regionally and in partnership with community stakeholders within that area to ensure the expansion plan reflects the unique demands and needs of the region. Key assets of the hub may include shared services determined by the needs of the early learning &amp; care community. Examples include:</p> <ul style="list-style-type: none"> <li>• Onsite early learning &amp; care service delivery, including onsite mental and behavioral health providers to provide targeted interventions to children during working hours in early learning &amp; care centers, and early parenting supports.</li> <li>• Shared administrative services including accounting, contract management, and accessing local and state child care resources. Help programs manage licensing needs and expectations with DCYF.</li> <li>• Support for business development, grant writing, contract management, etc.</li> <li>• Expanding the resources and coordinated system for families seeking early learning &amp; care.</li> </ul> <p><i>For this document, regions are defined by school district boundaries, and a hub is a model for shared services and support.</i></p>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Early learning &amp; care slots per 100 infants, toddlers, and preschoolers.</li> <li>• Number of early learning &amp; care providers participating in a regional shared service hub.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>• Number of early learning &amp; care providers reporting an increase in sustainability.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	<ul style="list-style-type: none"> <li>• Apply for shared service grants through DCYF.</li> <li>• Align with local efforts to expand family resource centers.</li> <li>• Utilize state-wide resources such as The Imagine Institute's Shared Service Center program.</li> <li>• Leverage state funds by increasing the number of slots paid for by state subsidies.</li> </ul>
Cost estimate for years 1 & 2*	~\$4,500,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.

<b>Strategy 6: Support innovative approaches to meet various Healthy Children's Fund goals related to Early Learning &amp; Care.</b>	
Focus Areas	ELC: Affordable, Accessible, High-Quality & Professional
Objectives	<ul style="list-style-type: none"> <li>• Increase the accessibility, affordability, quality, and professionalism of Early Learning &amp; Care through innovative solutions for underserved populations, including but not limited to, low-income and/or rural areas with a lack of access across Whatcom County.</li> <li>• Fund pilot programs and approaches that increase the evidence base and demonstrate impact on outcomes for underserved populations, including but not limited to, low-income and/or rural areas with a lack of access across Whatcom County.</li> </ul>
Details	<p>Service providers and/or partners submit innovative projects that advance Healthy Children's fund goals. Examples include:</p> <ul style="list-style-type: none"> <li>• Expand access to healthy foods through early learning &amp; care centers, especially for Latinx families.</li> <li>• Programs that offer support to low-income and vulnerable children in the context of early learning and care, such as in-classroom mental health or early intervention services.</li> <li>• Community service providers partnering with early learning and care environments, such as therapy providers or early intervention.</li> <li>• Expand partnerships with communities to include services (such as playgroups) in community-based settings.</li> <li>• Increase programs' access to culturally appropriate curriculum to reduce the cultural gap in kindergarten readiness.</li> </ul>
How we will measure our success	<ul style="list-style-type: none"> <li>• The number of innovative solutions that demonstrate valid results.</li> <li>• Improvement to one or more early learning &amp; care focus areas (accessibility, affordability, quality, and professionalism).</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Cost estimate for years 1 & 2*	~\$950,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.

## Portfolio of Strategies for Years 1 & 2: Supporting Vulnerable Children

Responsive, nurturing interactions and healthy environments provide a foundation for positive early childhood development, paving the way for success throughout a person's life. Strong, stable relationships with caregivers are essential to children's healthy development. Supporting children's social, emotional, and physical needs builds resiliency and prevents excessive activation of stress responses and the eventual physical and mental health problems that stem from chronic stress.

For families dealing with significant adversity from poverty, unstable housing, mental illness, disability, exposure to violence, or racism, the potential benefits of high-quality accessible early learning & care and comprehensive services are magnified (Center on the Developing Child, *The Impact and A Science-Based Framework*, 2007). Policies, programs, and interventions focused on optimizing early childhood development, stabilizing families, and minimizing exposure of children to serious adversity can have long-lasting positive impacts on the health and well-being of the community as a whole. Providing access to these services in the context of early learning & care leverages funds and other community resources, and increases access for children of working parents.

Housing is critical to overall childhood well-being. If we want children to enter kindergarten ready to learn and thrive, we must address safe and stable housing. Even further, experiencing homelessness causes trauma in children that has lifelong effects. Preventing and ameliorating that trauma is key to this work. A goal of the Healthy Children's Fund is to prevent homelessness for children and families, specifically to divert families from homelessness before it occurs.

Supporting parents/caregivers are the foundation of a healthy community. When parents/caregivers thrive, children can thrive. And when children thrive, only then can a community thrive.

### The Science Behind The Focus Areas

#### Mental & Behavioral Health

Throughout a lifetime, many factors can affect mental health, including biological factors, life experiences such as trauma or abuse, and family history. In children and youth, it's normal to experience different kinds of emotional distress as they grow and mature. However, when symptoms persist, it may be more than a developmental occurrence. The consequences of prolonged untreated mental illness can include educational difficulties, social disengagement, risk of suicide, and the potential development of further mental health illnesses such as substance misuse.

#### Prevent & Reduce Homelessness

People thrive when they have safe, stable places to live. That means we feel secure, our homes and neighborhoods are free from hazards, and our communities provide us with what we need. Housing is the biggest expense in most family budgets, making housing affordability a significant factor in financial well-being. Homeownership has long been at the center of the American Dream, offering a way to build family wealth and stable, diverse communities (Milstein et al., 2020).

#### Supporting Parents/Caregivers

Mood and anxiety disorders are the primary complications of pregnancy and the postpartum period. About 10-20% of parents experience very distressing symptoms (Mughal, 2020). This can include feeling more sad, disconnected, worried, angry, or overwhelmed than usual. Parents of every culture, age, income level, and race can be affected. There are approximately 2,000 births per year in Whatcom County. If 10-20% experience postpartum depression (Whatcom Perinatal, 2022), that means up to 400 new parents will likely experience some sort of mood or anxiety disorder each year. Unfortunately, only about 15% of parents seek support for their symptoms (Whatcom Perinatal, 2022). That means up to 340 parents in Whatcom County may not get the help they need.

HCF's Supporting Vulnerable Children priority has three focus areas:

1. **Expand Mental & Behavioral Health Services** for vulnerable children and their families.
2. **Prevent & Reduce the Trauma of Homelessness** through diversion and other preventative services and reduce the trauma associated with homelessness by supporting interim housing services and trauma-focused system reform for vulnerable children and their families.
3. **Support Vulnerable Children's Parents/Caregivers** by expanding support and services for families who have or are expecting children deemed to be vulnerable.

**Considerations for Supporting Vulnerable Children strategies:**

- The term parents/caregivers is meant to be inclusive of all family structures (mothers, fathers, grandparents, guardians, etc.)
- Strategies are not listed in any particular order. Implementing these strategies will require the collaboration of many community partners, and we anticipate that strategies will have multiple recipients of funding identified through a competitive process. Detailed information can be found in the Funding Mechanisms section.
- All of the data needed to measure the effectiveness of the HCF does not yet exist. As data improves, metrics in each strategy area will be further refined. In addition to headline and secondary indicators, each strategy will also have program measures that will help evaluate the effectiveness of approaches and opportunities for growth.
- Vulnerable children are defined in the ordinance as "any children at greater risk of experiencing physical or emotional harm and/or experiencing poor outcomes because of one or more factors in their lives, including but not limited to homeless and foster children.

*Table 6c. Supporting Vulnerable Children Strategies, Year 1 & 2*

Strategies	Years 1 & 2	
	\$	%
Supporting Vulnerable Children	\$5,356,400	27%
7: Recruit Mental & Behavioral Health Workforce to Whatcom County.		
8: Develop and/or expand resources and programs for families who disproportionately experience housing instability.		
9: Expand and enhance early parenting supports.		
10: Integrate and co-locate services via coordinated access to resource navigation.		

Strategy 7: Recruit Mental & Behavioral Health Workforce to Whatcom County.	
Focus Areas	SVC: Mental & Behavioral Health and Supporting Parents/Caregivers
Objective	<ul style="list-style-type: none"> <li>Expand behavioral and mental health services for vulnerable children, pregnant parents, and parents with young children.</li> </ul>
Details	<ul style="list-style-type: none"> <li>Support pilots and internship models that expand access to mental &amp; behavioral health services for underserved children and families.</li> <li>Retain and/or develop mental health supports serving vulnerable populations with an emphasis on providers who represent our culturally diverse community.</li> <li>Increase the number of mental health professionals who specialize in perinatal mental health.</li> <li>Support providers to provide services to families who meet the criteria of or are enrolled in Apple Health (Medicaid).</li> <li>Hold listening/learning sessions to better understand how the county government can support local Medicaid providers.</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>Number and type of behavioral and mental health providers in Whatcom County that serve young children, per 0-5 population.</li> <li>Number and type of behavioral and mental health providers in Whatcom County that serve pregnant parents and parents with young children, per 0-5 population.</li> <li>Number of families on provider wait lists for behavioral health services.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>Number of parental (prenatal to age 5) referrals conducted by the SEAS for mental health services.</li> <li>Number of parents/caregivers who report having access to behavioral/mental health services for their children at their early learning &amp; care program/location.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	Leverage Whatcom County Behavioral Health Fund, State of Washington funding, and federal Medicaid dollars to ensure complementary services are funded as the workforce expands.
Cost estimate for years 1 & 2*	~\$850,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.

Strategy 8: Develop and/or expand resources and programs for families who disproportionately experience housing instability.	
Focus Areas	SVC: Prevent and Reduce Homelessness, Mental & Behavioral Health, and Support Parents/Caregivers
Objectives	Reduce the number of children experiencing a housing crisis or homelessness.
Details	<ul style="list-style-type: none"> <li>• Build family-centered problem-solving and advocacy to help a household identify practical solutions for stabilizing their housing quickly and safely, including assistance negotiating with property managers, navigating mainstream resources, and short-term, flexible financial assistance to avert a crisis (i.e. family "diversion").</li> <li>• Fund flexible housing stability supports that prioritize families actively seeking services through coordinated entry and/or other community housing assessments.</li> <li>• Reform eligibility guidelines for housing services to center child well-being through racial equity and trauma-informed decisions and care.</li> <li>• Partner with early learning &amp; care centers and school districts with pre-K programs to identify children and families at risk of housing instability and connect them to services.</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Percent of public-school students in grades Pre-K to 3rd experiencing a housing crisis.</li> <li>• Number of families with children experiencing homelessness.</li> </ul> <p>Secondary</p> <ul style="list-style-type: none"> <li>• Number of Whatcom families with children experiencing homelessness and actively seeking services through the Coordinated Entry Program.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	<ul style="list-style-type: none"> <li>• Coordinate funding from Whatcom County, the City of Bellingham, Washington State, and the U.S. Department of Housing and Urban Development Funding to maximize the use of dollars locally.</li> <li>• Focus Healthy Children's Fund dollars on those populations (such as families doubled up in housing) that may not be served with other funding regulated by the State or Federal government.</li> </ul>
Cost estimate for years 1 & 2*	~\$1,875,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.

Strategy 9: <i>Expand and enhance early parenting supports.</i>	
Focus Areas	SVC: Mental & Behavioral Health & Supporting Parents/Caregivers
Objectives	Increase support and services for pregnant and parenting families, particularly those with vulnerable children.
Details	<p>Service providers and/or partners submit innovative projects that expand and enhance early parenting support. Examples include:</p> <ul style="list-style-type: none"> <li>• Replicate and/or expand innovative, promising practices being implemented in Whatcom and other communities.</li> <li>• Expand the availability of birth and postpartum doulas.</li> <li>• Increase access to culturally responsive parenting supports (e.g. supports embedded in health care settings, etc.)</li> <li>• Increase opportunities for one-to-one and group peer support for parents, caregivers, and those expecting children (e.g. Program for Early Parent Support (PEPS) model, etc.)</li> <li>• Support expansion of home visiting models to support a greater number of families such as the universal "Welcome Baby" model, as well as targeted models such as the "Nurse-Family Partnership."</li> <li>• Coordinate and provide resources and community-wide training on trauma-informed care, supporting LGBTQ+ youth, and equity/ anti-racist assessments and improvements.</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Well-child visits in the first 30 months of life.</li> <li>• Rate of Low Birth Weight infants, less than 2500 grams.</li> <li>• Percent of mothers or parents carrying a child who received adequate prenatal care.</li> <li>• Percent of mothers or parents carrying a child who received prenatal care in the first trimester of pregnancy.</li> </ul> <p>Secondary</p> <ul style="list-style-type: none"> <li>• Number of parents/caregivers who report that they have access to the parenting support services they need.</li> <li>• Percent of mothers or parents carrying a child who reported having a postpartum check-up.</li> <li>• Percentage of deliveries in which the mothers or parents carrying a child were screened for a perinatal mood and anxiety disorder during pregnancy and during the postpartum period.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	<ul style="list-style-type: none"> <li>• Whatcom County assistance for Nurse-Family Partnership and other parenting support programs.</li> <li>• Washington State and other grant funding for perinatal health services.</li> </ul>
Cost estimate for years 1 & 2*	~\$1,875,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.



Strategy 10: <i>Integrate and co-locate services via coordinated access to resource navigation.</i>	
Focus Areas	SVC: Mental & Behavioral Health, Prevent & Reduce Homelessness, and Support Parents/Caregivers
Objectives	<ul style="list-style-type: none"> <li>• Increase access to wraparound services</li> <li>• Decrease barriers to accessing services for families and children.</li> <li>• Expand behavioral and mental health services and supports for vulnerable children and pregnant and parenting families with vulnerable children.</li> </ul>
Details	<ul style="list-style-type: none"> <li>• Build on promising practices and successes from the state-wide Help Me Grow network, SEAS (single entry access to services), and other Whatcom County resources.</li> <li>• Implement coordinated systems to access resources, and expand access to mental health services for pregnant and parenting families.</li> <li>• Strengthen coordination to identify families experiencing or at risk of housing instability including those who are doubled-up or otherwise under-housed.</li> <li>• Increase the number of family resource center locations or access points for pregnant and parenting families with a priority on providing access to those populations that currently experience the greatest barriers.</li> <li>• Embed community health workers and/or social workers into settings such as medical clinics that primarily serve low-income families for access to wraparound support services.</li> </ul>
How we will measure our success	<p>Headline:</p> <ul style="list-style-type: none"> <li>• Number and type of behavioral and mental health providers in Whatcom County that serve young children, per 0-5 population.</li> <li>• Number and type of behavioral and mental health providers in Whatcom County that serve pregnant parents and parents with young children, per 0-5 population.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>• Number of parents/caregivers who report having access to behavioral &amp; mental health services for their children at their early learning &amp; care program/location.</li> <li>• Number of parents/caregivers who report that they have access to the parenting support services they need.</li> </ul> <p><i>All measures are disaggregated by race, income, and geography as data is available.</i></p>
Leveraging Funds	<ul style="list-style-type: none"> <li>• Washington State and Whatcom County Behavioral Health fund.</li> <li>• Grant funding supporting state-wide Help me Grow Network.</li> </ul>
Cost estimate for years 1 & 2*	~\$757,000

\*These estimates are based on current data and understanding and may shift as new information emerges and circumstances change. Any decrease will shift to reserves or to another strategy, while any increase would come from reserves or decreasing or eliminating another proposed strategy.