



**Commonwealth  
Medicine**



# Building Resilient Children: Final Report

June 2020



## ABSTRACT

Early childhood educators in lower income communities have the unique opportunity to provide children who have experienced trauma, including racial inequity, with the tools they need to grow their resilience. This report outlines a pilot project that trained early childhood teachers in Massachusetts in techniques for recognizing trauma and racial inequity, coached them in behaviors and classroom structures that supported children, and empowered them to create change in early childhood education to build childhood resilience and advance racial equity.

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This pilot was sponsored by the Massachusetts Office of the Child Advocate, using funding allocated by the Massachusetts Legislature in FY20, thanks to a budget amendment sponsored by Senator Harriette L. Chandler (D-Worcester) and supported by the Worcester state legislative delegation. Jointly, the Massachusetts Office of the Child Advocate and Commonwealth Medicine developed a pilot intervention to support early childhood educators in promoting resilience in young children. After a series of discussions with Worcester-area stakeholders, Commonwealth Medicine partnered with Family Services of Central Massachusetts to implement the pilot. Commonwealth Medicine is the public service consulting and operations division of the University of Massachusetts Medical School.

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# I. Introduction

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Childhood trauma is a deep, complex, and pervasive societal issue that requires many strategies to address this important problem effectively. Without a coordinated approach, implementing and sustaining resiliency strategies in children and their families have little likelihood of success. Structural changes to address issues such as food security, affordable housing, and institutional racial and gender justice take commitment and work from society as a whole. Early education and family support services are critical ingredients to provide optimal childhood development and learning. Early child care settings provide a safe, stable environment for young children. Staff can provide parenting education and connection to community resources. Children can develop their learning skills while cultivating a relationship of trust with an adult caregiver/educator. Mutual support and scaffolded learning opportunities for staff are essential for building a system to address the impact of childhood trauma effectively.

In-service training has been the backbone of early childhood staff development for many years. However, due to wide variation in educational backgrounds, with only 50 percent having completed a college degree, most training is introductory and knowledge-focused with only minimal time spent learning skills. Therefore, studies show, training is rarely practiced in the classroom. Even at the college level, evening students may attend college for several years on a part-time basis before a faculty member observes them during a practicum. Research shows clear results of training: classroom training supplemented by program level coaching is significantly more effective.

This project targeted families, children, and early educators in Worcester, Massachusetts, serving a primarily low income, racially, and ethnically diverse urban community. The focus was on child care centers serving populations of at-risk children whose families rely on income-based government-subsidized child care and supportive child care for children receiving services through the Department of Children and Families (DCF) due to child abuse or neglect. Families typically are working in low to moderate paying jobs or are in education or job training programs. A large percentage of families are single heads of households.

The goal of the project was to increase trauma resiliency in young children by targeting early childhood educators with:

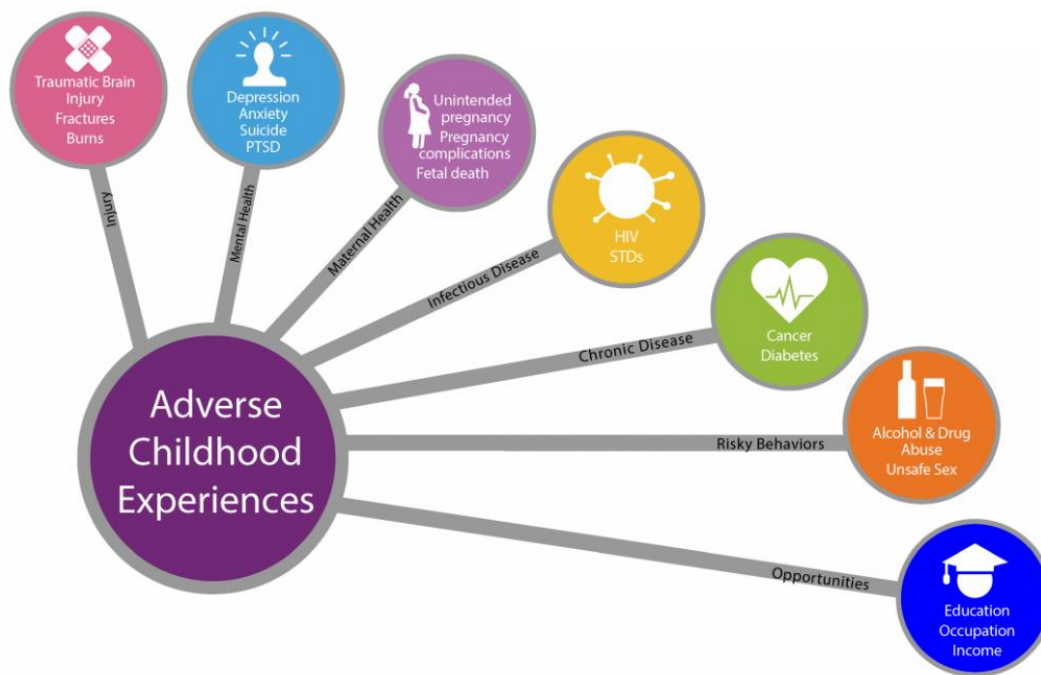
1. Intensive training on the foundation of trauma-informed knowledge, attitudes, and practices in a context of equity-based early education and care, and self-care; and
2. One-on-one coaching to change behaviors and classroom structure by developing goals related to key areas to support children impacted by childhood trauma and racial inequity.

## II. Background

### ***Adverse Childhood Experiences and Early Childhood***

Since the 1990s, researchers have identified a battery of negative stressors as Adverse Childhood Experiences (ACEs) and connected the cumulative effects of these ACEs to lifelong consequences, including adverse social outcomes (e.g., teen pregnancy, incarceration, dependence on public assistance, and employment instability), a variety of serious chronic illnesses, and even premature death as outlined in Figure 1. Understanding these issues has slowly developed over the past 20 years.

**Figure 1. Early Adversity has Lasting Impacts**



<https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/resources.html>

Young children experience the world through their relationships with parents and other caregivers. Safe, stable, nurturing relationships and environments are essential to building trust and resiliency in young children. The role of early childhood educators connected with ACEs is multi-faceted. In addition to their essential role in providing care and education for preschool children, early childhood educators also help build resiliency in young children by forming a strong positive connection with the children and their families. They support parents who need child care to work or engage in education and training. And they interact with families and provide parent education and early identification of developmental delays or problems.

The field of early education and care is a public and private mixed delivery system. It includes small non-profit businesses such as faith-based preschools, public preschools focusing on children with developmental delays or disabilities, corporate chain child care centers catering to the business

community, federally-funded Head Start programs, small family-owned child care programs, and family child care homes. Massachusetts regulates all non-relative care outside of public schools or license-exempt faith-based programs.

Early childhood educators are often the lowest paid and least educated teachers. Unlike many public-school teachers who have a master's degree and the benefit of ongoing in-service training, only about half of early childhood educators have a college degree. The Massachusetts regulatory requirement to qualify as a "teacher" in an early childhood classroom is one college course in Child Development and nine months of job experience. A private sector child care teacher's annual income is \$25,000<sup>1</sup> per year, and they often do not have benefits such as dental insurance or employer-based contributions toward retirement. In fact, 39 percent of Massachusetts' child care workers and early childhood educators qualify by income guidelines to receive public benefits such as SNAP or public medical insurance plans.<sup>2</sup> Many staff caring for preschool children do not have the formal training to be an educator. Not only do many early educators share a common background with the low-income communities they serve, but they also continue to mirror the social and economic conditions of the low-income communities where they work.

Two trends have been occurring over the past ten years. The level of education and experience among preschool teachers has been declining. This is due to multiple factors, including lack of retention due to low wages and better-paying job opportunities in public education or elsewhere, the retirement of older teachers, and the cost of higher education. At the same time, program directors have noted an increase in enrollment of children with challenging behaviors, including an increase in the number of children on the autism spectrum. Other reasons may include changes in parenting and the pervasive influence of technology, with small children having long hours of screen time and a simultaneous decline of outdoor and imaginative play.

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<sup>1</sup> U.S. Bureau of Labor Statistics, Occupational Employment Statistics. (2015); Head Start Program Information Report. (2015). Data in U.S. Department of Health and Human Services, U.S. Department of Education. (2016). High-Quality Early Learning Settings Depend on a High-Quality Workforce. Massachusetts Wage Profile. Retrieved from: [https://www.acf.hhs.gov/sites/default/files/occ/massachusetts\\_wage\\_profile.pdf](https://www.acf.hhs.gov/sites/default/files/occ/massachusetts_wage_profile.pdf).

<sup>2</sup> Center for the Study of Child Care Employment. (2016). Early Childhood Workforce Index 2016, Massachusetts fact sheet <http://cscce.berkeley.edu/files/2016/Index-2016-Massachusetts.pdf>.

## ***Early Childhood Education and Care Collaboration in Central MA***

Early childhood education and care have a long history of collaboration and support in greater Worcester. There is a director support group that has been active for more than 30 years and a chapter of the National Association for the Education of Young Children. More than ten years ago, a group developed the Together for Kids coalition and submitted a grant application to address the rising incidence of challenging behaviors in early education. A pilot project that trained and embedded early childhood mental health clinicians in some of the large child care programs was adopted as a state model and funded through the Department of Early Education and Care. Early childhood curriculum included the domain of social-emotional development and used available curricula, especially Second Step (<https://www.secondstep.org/second-step-social-emotional-learning>) and the Pyramid Model (<http://csefel.vanderbilt.edu/>). Training regularly included both college coursework and workshops on behavior and discipline and recognizing and addressing challenging young children's challenging behaviors.

From 2012 to 2016, Massachusetts received a federal Race to the Top for Early Learning grant. A series of trainings were developed to prepare teachers in Greater Worcester to address childhood trauma. These trainings were offered in English and Spanish. In 2015, Worcester Public Schools in the city's North Quadrant initiated Worcester HEARS, providing all school personnel with training in recognizing trauma and using skills to build child resilience. At the same time, Family Services of Central Mass., as the professional development contractor for the Department of Early Education and Care, initiated a smaller parallel training program on child trauma. This program involved multiple trainings and interconnections among early childhood educators and mental health clinicians. In 2018, this effort was broadened by the Together for Kids coalition and the Greater Worcester Community Foundation with an invitation to Dr. Nadine Burke Harris to speak to a cross-section of public, education, and business community leaders.

In the Building Resilient Children model, the strategies begin with networking and building communication channels employing a strength-based, whole child and family support model to address racial equity.

### III. Building Resilient Children Project Model

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#### ***Development of Model***

This project's design was borrowed from competencies identified in the document “Trauma-Informed and Developmentally Sensitive Services for Children: Core Competencies for Effective Practice.”<sup>3</sup> This model was initially developed to guide professionals in child welfare work, so it was relatively easy to apply to early childhood educators. Also, the award-winning book Reaching and Teaching Children Exposed to Trauma by Barbara Sorrels<sup>4</sup> guided both the design of the model and the content of training and coaching.

The model's focus was on building and sustaining competencies of early childhood educators that support building resilience among children in their classroom by developing trusting relationships with the children and their families, creating a safe and nurturing environment, and practicing appropriate routines and learning activities.

The program addressed eight areas:

1. Building a relationship
2. Greetings
3. Teacher self-regulation
4. Child self-regulation
5. Environment
6. Family engagement
7. Transitions
8. Play-based interactions

#### ***Components of the Project***

Multiple reinforcing strategies were developed based on adult learning principles to maximize the project's impact. The model focused on both the adult as a possible survivor of childhood trauma and the adult's role in providing care and education to build preschool-age children's resilience. Strategies included: 1. intensive trauma and resilience training; 2. expert coaching, including professional learning communities; and 3. parent workshops (Figure 2). Also, each classroom had a budget to purchase the desired supplies and equipment. The model was supported by a clinical child trauma practitioner who would provide support with training, classroom observation, and referrals as needed to clinical services.

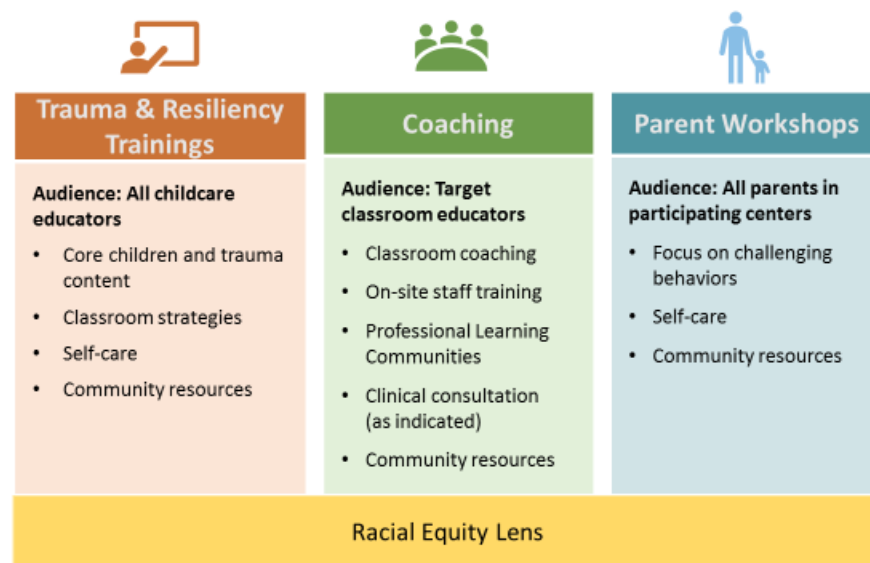
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<sup>3</sup> Multiplying Connections. <https://www.multiplyingconnections.org/become-trauma-informed/tools-become-trauma-informed>. Retrieved: June 1, 2020.

<sup>4</sup> Reaching and Teaching Children Exposed to Trauma (2015). B. Sorrels. Gryphon House publisher. September 1, 2015



Figure 2. *Intervention Approach*



## ***Trauma and Resilience Training***

Initially, day-long training sessions were held to establish a foundation of trauma-informed knowledge, attitudes, and practices in the context of equity-based early education and care. The training included lectures, self-reflection, modeling, and demonstration of various developmentally appropriate learning activities and materials for the classroom. The morning session focused on child-centered learning and the end of the day included 1.5 hours of teacher self-care and mindfulness. The training was co-facilitated by a social worker with expertise in trauma and an experienced early childhood educator/coach. A mindfulness instructor led the final component of the training.

## ***Coaching***

Early childhood coaching was implemented based on the model of “practice-based” coaching.<sup>5</sup> The coaches used a data-gathering tool based on observation of the classroom and interviews with the classroom teachers, and this information was used to develop an action plan. Each classroom developed a plan that focused on no more than three of the eight resiliency areas. Specific action steps were agreed upon, and the coach used various techniques to build educator competency, including modeling and processing observed teaching and educator self-reflection. Educators participated in two-hour biweekly coaching sessions with an opportunity to participate in a monthly Professional Learning Community (PLC) with peers from other participating child care centers. PLCs were co-facilitated by one coach and the early childhood mental health clinician.

<sup>5</sup> “Supporting implementation of evidence-based practices through Practice-based Coaching”. (2015). P.A. Synder et al. Retrieved from (<https://files.eric.ed.gov/fulltext/ED577101.pdf>).

Experienced early childhood coaches participated in a three-hour training before their first classroom visit. Coaches' training initially focused on the content in the Sorrels book. Two of the coaches had already participated in the one-day trauma training. Once coaching began, coaches met monthly with the Coaching Supervisor and discussed successes and challenges in implementing the classroom action plans, and focused on additional training topics including:

- FLIP IT Parent Training Model<sup>6</sup>;
- The relationship of a coach's stance and documentation from *Leading for Children and Coaching with Powerful Interactions* (author - Judy Jablon); and
- *Treating Traumatic Stress in Children and Adolescents: How to Foster Resilience Through Attachment, Self-Regulation, and Competency* (Margaret E. Blaustein & Kristine M. Kinniburgh. 2010).

Each training was centered around presenting on-going coaching experiences and practicing techniques relevant to support the teaching team and parents. As coaches identified effective strategies and learning activities, they developed a Resiliency Toolkit that focused on resiliency areas. The toolkit became a product of the project to create a sustainable impact for other child care programs, teachers, and classrooms.

All participating child care programs were encouraged to offer in-service training on child trauma, building resilience, and self-care during the remainder of the grant period (January – May). These trainings provided more in-depth and targeted content and techniques for educators. Most of the trainings were 1.5 to 3 hours in length. Participation in the overall program's PLC component was another way to share feedback on effective practices, attitudes, and knowledge gained, and other learning opportunities. It was anticipated and desired that peer relationships would develop and that educators might rely on each other for support and learning to sustain the program's impact after the coaches stopped coming to the classrooms. In addition to educators that received coaching, the training and PLC were open to all teachers at the program site.

## ***Parent Workshops***

Parent Education was considered an integral component of the project and essential to building resilience in children. Topics were designed to help identify effective parenting techniques to build child resiliency and engage educators as effective partners. It was anticipated that some parents might identify their child's challenging behaviors and request resources for further diagnosis and treatment. It also was noted that attendance at parent trainings is usually small. To address these barriers to parent participation, trainings were scheduled March through May at the end of the child care day (pick-up time) and included free child care and refreshments.

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<sup>6</sup> Meehan, D.C. (2016). A Multi-Tiered Evaluation of the Effectiveness of the FLIP IT Model.

## ***Supplies and Materials***

In 2019, a pilot program at the YWCA of Central Massachusetts identified specific equipment and supplies to help children dealing with sensory and emotional overload. The current project arranged with Lakeshore Learning Company to extend an offer to each program to purchase \$750 worth of supplies to enhance their classroom. Coaches were available to advise classroom teachers in ordering materials and provide training for their effective use.

## ***Impact of COVID19***

In March 2020, as the COVID-19 pandemic began to affect Central Massachusetts, it became apparent that schools and child care programs in the region would be closed, which had an immediate impact on plans for conducting the program. Seven of the participating child care programs closed on March 13, 2020. Two of the programs subsequently re-opened to provide emergency child care to essential personnel, but resuming coaching was impossible. Most families became disengaged from their former child care program. However, most programs tried to connect remotely with families using various methods, including telephone, online meetings, phone apps, or mailing information or activity packets.

The Building Resilient Children project adapted to the situation by moving the trainings and PLC sessions to online platforms. Due to uncertainty in the COVID-19 environment, PLCs were moved to a weekly format during April to share information and resources, engage in discussions about successes and challenges in maintaining contact with families, and plan for re-opening child care centers.

The following immediate challenges disrupted planned program services:

- **Furloughed staff** – Most programs were closed, and the staff was at home. While many remained paid employees, the project had only work contact information. The project relied on directors to facilitate communications for staff. However, directors were busy assessing their plans and programming and anticipating immediate and future child care changes.
- **Inability to provide face-to-face coaching in the classroom** – The interruption of coaching was an unexpected hurdle.
- **Barriers to contact with parents** – Though the project could not work directly with parents, training was implemented for classroom teams on methods to meet parents' and children's needs around trauma resilience and goals.

Despite these challenges, the following opportunities were identified for the continuation of the project:

- **Reframing of coaching to be effective in the virtual environment** – An assessment of available tools and methodologies was conducted to help each program maximize its effectiveness in providing resources and mindfulness supports.
- **Availability of early childhood educators** – Furloughed staff were available for training and expressed a strong interest in resiliency and trauma topics.

- **Need for discussion** – Interest by staff in sharing with families their daily personal experiences coping with COVID-19 was identified, along with the desire to understand available community resources. Monitoring the “new normal” was implemented to understand better how child care programs might adapt over the long-term.
- **New concerns** – New concerns included emerging issues for programs providing emergency child care and appropriate curricula for delivering care to mixed-age groupings and new children.

The project took the following action steps to adapt to the new situation while maintaining focus on the overarching goals of the project:

- Conducted a survey to assess the needs of directors, staff, and families.
- Moved training to a virtual platform, including scheduling some trainings for daytime and adding new topics to address the greater need for coping skills and self-care.
- Increased frequency of PLCs to weekly meetings to share concerns, successes, and resources for building community.
- Focused coaching on self-care and preparing of classrooms, and communication with parents about current resources and preparation for return to the child care classroom.
- Reviewed current team goals and classroom spaces to prepare a calm, comforting environment during the first stage of re-opening programs and classrooms.

The COVID-19 crisis was a community-wide trauma that challenged this project to be flexible, adaptable, and creative to manage day-to-day operations and develop plans (and contingency plans) for moving forward into the “new normal.” It became clear that the Building Resilient Children project was a timely and effective support service. The work of building resiliency in young children and their families was noted as a foundational goal for ensuring safe, healthy, and appropriate care and education as we raise our future citizens.

## IV. Evaluation

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The Child and Family Unit within Public and Private Health Solutions of Commonwealth Medicine UMass Medical School contracted with Family Services of Central Massachusetts (FSCM) to develop and implement the trainings described above. FSCM would also help evaluate processes and outcome measures used to showcase successes and identify the future needs of teachers and the children served in their classrooms, along with their parents/caregivers.

As described in detail in the previous section, the trainings consisted of four components (Figure 3):

1. Teacher trauma and resilience trainings (November 2019);
2. Teacher coaching (January – June 2020);
3. Teacher Professional Learning Communities workshops (March – June 2020); and
4. Supplemental parent workshops (planned for April - June 2020).

*Figure 3. Project Timeline*



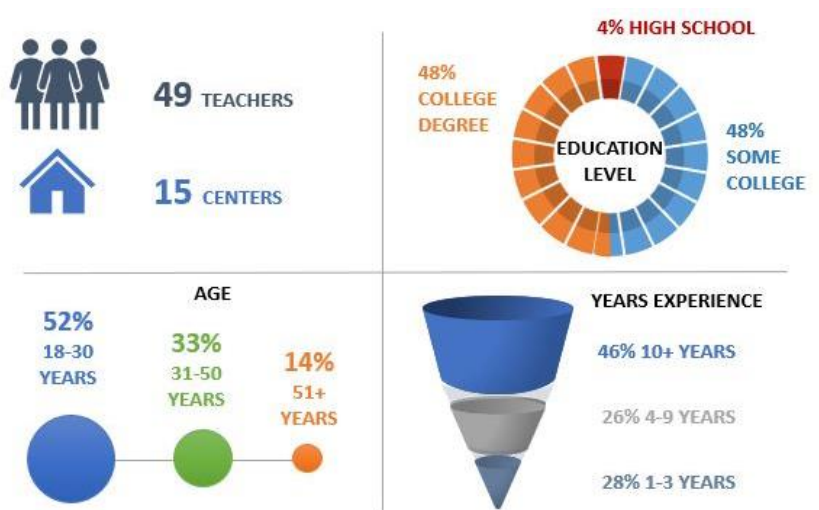
Each training was evaluated using both cross-sectional (at the time of training) and longitudinal (throughout the training) methodologies. Process and outcome measures were collected from participating teachers, coaches, and parents. Where possible, data collection was done electronically to obtain data in real-time. Where not possible, data was collected via paper/pencil and subsequently entered electronically, and verification processes were put in place to minimize possible human error and potential double data entry.

Detailed below are the evaluation results of these trainings within the four project components. Analyses were initially completed for overall training components and broken down by demographics (e.g., age, years of education, years of experience in early childhood education, race/ethnicity, etc.). These trainings could serve as a needs assessment for future efforts targeting particular populations of teachers, parents, etc.

## Full-Day Teacher Trainings

Two all-day teacher trainings occurred in November 2019. Training content included: children and trauma, a racial equity lens; classroom strategies; self-reflection and self-care; and community resources. From the 33 targeted centers in Central Massachusetts (Worcester-based programs serving families who received DCF services) invited to participate in these trainings, a total of 49 teachers representing 15 different child care centers participated in either the first or second one-day trainings. Data were collected on a pre/post basis to evaluate the training's goals and objectives and assess changes in teachers' knowledge. However, not all teachers completed both pre- and post-training evaluations; thus, the data below may illustrate evaluations from slightly less than all 49 attendees. The large majority of teachers were child care center administrators, lead teachers (in infant/toddler/preschool classrooms), teachers, and teaching assistants (Figure 4).

Figure 4. Full Day Training Participant Demographics



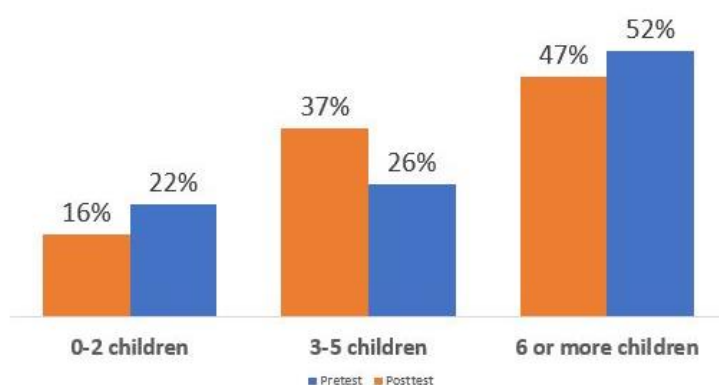
Nearly all attendees (96 percent) had at least some college education. Of those, one-half (48 percent) were studying or had a degree in early childhood education, and an additional one-quarter (26 percent) were studying in a related area (elementary education, arts education, social work, human services, etc.). Approximately one-half of training participants (46 percent) were seasoned educators with ten or more years of early childhood education experience. With a mean age of 36 and a range of 19-78 years, one-half (52 percent) of the teachers were 18-30 years of age; one-third (33 percent) were 31-50 years of age. Of interest, 14 percent of the teachers were over 50 years of age. Lastly, a majority of training participants (65 percent) self-identified as white while an additional 20 percent self-identified as Hispanic/Latinx.

When asked about examples of Adverse Childhood Experiences (ACEs) from studies by Kaiser and the CDC, the percent of teachers who answered the question correctly increased from 53 percent at the pre-assessment to 73 percent at the post-assessment (an increase of 38 percent). Teachers were asked to rate on a scale of 1-10 (with 10 reflecting the highest level of agreement) their understanding of the

causes of childhood trauma. While the pre-assessment score was relatively high (Mean: 8.02; SD: 2.05), post-assessment scores significantly increased from baseline (Mean: 8.98; SD: 1.44;  $t=3.19$ ;  $p=.003$ ).

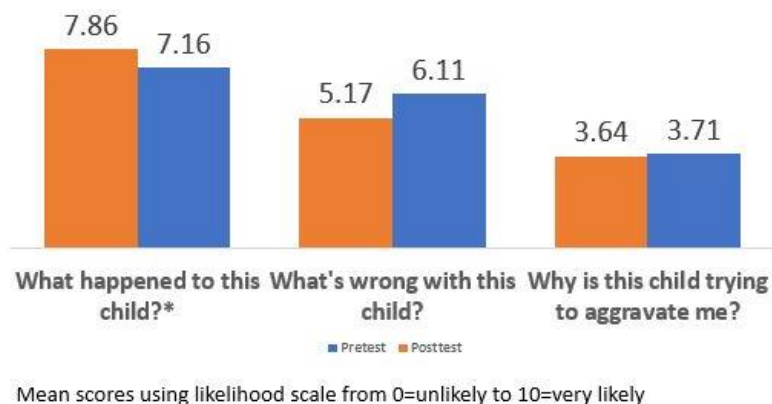
Interestingly, teachers' estimates of the number of children with trauma in their classroom changed throughout the one-day training (Figure 5). For example, the percent in the 0-2 children decreased from 22 percent to 16 percent, as did the percent of six or more children from 52 percent to 47 percent. However, the percent in the 3-5 children increased by 42 percent, from 26 percent (pre-training) to 37 percent (post-training). This might indicate that the training helped teachers more accurately estimate the number of children in their classrooms who have experienced trauma, such that under- or over-estimates were reduced with an increased understanding of children with trauma histories.

**Figure 5. Number of Children with Trauma in Classroom: Pre- vs. Post-training**



Of interest was the change in teacher self-reflection regarding each of three questions (pre- and post-training: 1. What's wrong with this child?; 2. What happened to this child?; and 3. Why is this child trying to aggravate me?). As Figure 6 shows, whereas questions 1 and 3 seem to "point the finger" at the child, the second question allowed the teacher to reflect on what might have occurred in this child's life to result in challenging classroom behavior. To support this, the pre- vs. post-reflections scores—also asked on a scale of 0 (very unlikely) to 10 (very likely)—did not significantly change over time for questions 1 and 3, with scores in the "unlikely" to "neutral" range. However, scores increased dramatically in the teacher's self-assessment regarding "What happened to this child?" (pre-Mean: 7.16; SD: 2.45; post-Mean: 7.86; SD: 2.28;  $t=1.98$ ;  $p=.05$ ).

Figure 6. *Teachers Asking Themselves about Challenging Behaviors by Children: Pre- vs. Post-training*



When asked the most critical factor in helping a child heal from trauma, the number of teachers who answered correctly increased from 44 percent to 54 percent. Also noted was a 20 percent increase in the number of teachers who correctly identified the collection of strategies that educators can use to help children who have experienced trauma. While this pre- vs. post-assessment seems positive, there is room for improvement. However, one-day trainings may not provide adequate educational time for this important topic. Additionally, while there were positive changes noted in asking about “room for improvement because teachers treat children differently based on their gender, race, and/or family economic status,” and “I regularly examine my own behavior to assess if I am fair and equitable in the way that I treat each child in my care,” the changes were not significant over time. Again, it is likely that a single day of training does not provide adequate time to absorb and reflect on all of the content being taught.

However, even with limited training time, teachers did significantly increase their reflection on “providing important support in helping children have a positive development and experience, even children who have experienced trauma” (pre-Mean: 7.93; SD: 1.81; post-Mean: 8.67; SD: 1.65;  $t=2.39$ ;  $p=.022$ ). Additionally, while the percent change was minimally significant, teachers did report an increase from pre- to post-training on how important it is to engage in self-care or stress reduction techniques for themselves while at work (pre-Mean: 8.72; SD: 1.79; post-Mean: 9.21; SD: 1.17;  $t=1.74$ ;  $p=.090$ ). When asked in follow-up to describe strategies they regularly use for relaxation/mindfulness at work, teachers’ replies included the following: breathing exercises; exercising/working out during lunch breaks; confidential “talk therapy” with other teachers; self-monitoring regarding positive attitudes and cognitive awareness; meditation and relaxation exercises; and healthy eating/sleep habits.

Before the training ended for the day and they were asked to provide feedback about these training events, teachers were asked to complete the Maslach Burnout Inventory<sup>7</sup> – a nationally recognized, validated instrument that assesses three specific measures of burnout: emotional exhaustion,

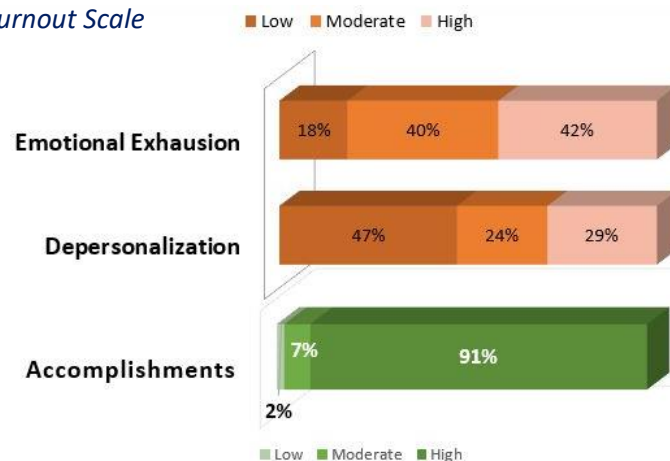
<sup>7</sup> Maslach, C., Jackson, S. E., & Leiter, M. P. (1997). Maslach Burnout Inventory: Third edition. In C. P. Zalaquett & R. J. Wood (Eds.), *Evaluating stress: A book of resources* (p. 191–218). Scarecrow Education.



depersonalization, and accomplishments. In the healthcare industry, this often is used with medical trainees and providers. There is also a version of this tool used for those working in childhood education. The survey includes 22 questions that tie back to each of the domains noted above. In addition to a continuous scale/overall score, each of the domains includes a sub-score of low, moderate, and high levels.

On the sub-score measuring emotional exhaustion, four out of five teachers (82 percent) scored in the moderate to high range (Figure 7). More than one-half of the teachers (53 percent) scored moderate to high for depersonalization. While these scores indicate that teachers are reporting significant emotional exhaustion and depersonalization, at the same time, they are reporting a very high level of accomplishments (91 percent). When addressing the important outcomes of burnout, it may be necessary to better understand why teachers note both significant negatives and feel high levels of accomplishment and provide early childhood educators with more opportunities to address burnout.

**Figure 7. Training: Burnout Scale**



At the end of the one-day training, teachers were asked to evaluate the program's usefulness in their current work environment and what additional training needs they had. For each of the curricular elements, teachers rated the program very highly. Rating the usefulness of this one-day training in their current work environment on a scale of 1-10 (with 10 being very useful), the mean score was 9.00 (SD: 1.81). Slightly more than one-half of the teachers (51 percent) noted qualitative comments on the positive nature of the training:

- *“Very useful even though I have been in the field a long time, it's important to keep learning new ways to help children deal with trauma as ways to me mindfully of my own needs.”*
- *“This training helped give many ideas on how to help children cope with trauma. Knowing to take care of myself.”*
- *“It was useful to think about the whys of children’s behaviors and how we can respond to them.”*
- *“Helped me understand why children act a certain way and help me as a caregiver look at children from their perspective.”*
- *“Helpful tips for managing the classroom.”*
- *“Extra incite on how we view things from a teacher’s standpoint.”*

All three curricular components of the training received very high scores from the teachers, including Introduction to Child Trauma and Resiliency (mean: 9.17; SD: 2.15); Introduction to Building Resilient Classrooms and Programs (mean: 8.86; SD: 1.73); and Introduction to Self-reflection and Self-care for Educators (mean: 8.98; SD: 1.83).

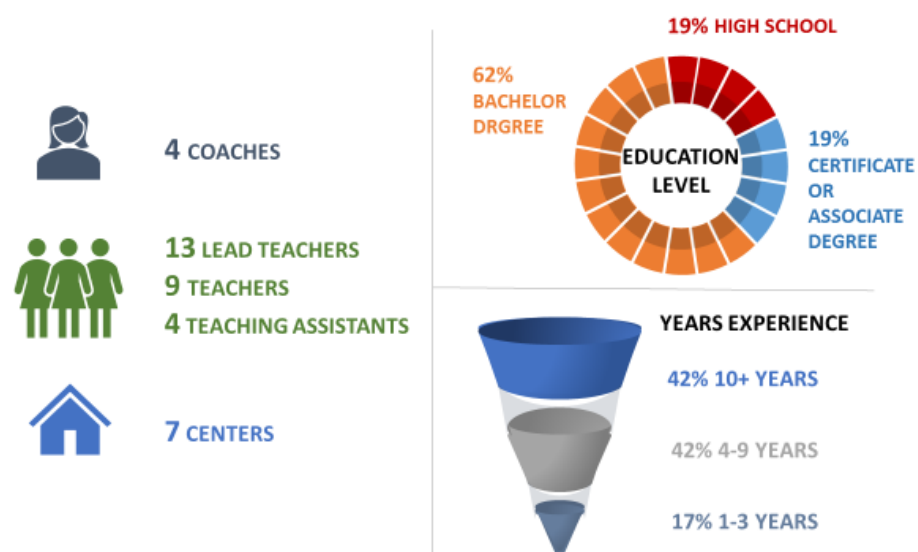
Lastly, teachers were asked to identify any additional topics in early childhood education and/or trauma-informed care for which they would welcome further training. Among the 12 topics outlined for additional training, one-quarter to one-third were nearly equally endorsed, indicating that more training would be helpful. The top five topics selected included: Impact of Family Violence, Sexual Abuse and Addictions on Young Children; Strategies for Building Resilient Children; Secondary Trauma, Burn Out, and ACEs; Effective Group Management, Communication, and Structure for Challenging Children; and Mindfulness and Coping Strategies.

**Appendix 1**, at the end of the report, provides detailed data for all questions asked to evaluate the teachers' one-day training.

## Teacher/Classroom Coaching

Following the one-day teacher training, some teachers from the early childhood education centers who participated in that training were offered an opportunity to participate in a longitudinal coaching program developed by the Family Services of Central Massachusetts. These coaching sessions ran from January 2020 until March 13, 2020, when centers closed due to COVID-19. Coaching then transitioned to a virtual mode from April to June 2020. This component of the overall training program included classroom coaching, on-site staff training, professional learning communities (PLC) workshops, and discussions about community resources. Specifically, coaches worked with teachers (lead teacher, teacher, and teaching assistant) to build trusting relationships with children, deal with difficult/challenging behaviors, and set up resilient classrooms. Together, each coach/teacher team developed an individual classroom plan. Additionally, materials were provided to each classroom.

*Figure 8. Coaching Participants*



Up to 10 early childhood education centers, 14 classrooms, and 30-36 teachers made up the recruitment sample. A total of seven centers, 12 classrooms, and 26 teachers comprised the cohort that ultimately participated in the coaching sessions. Figure 8 above describes the coaching participants. As this activity was planned for a six-month duration, it provided the evaluation team with an opportunity to look at both process and outcome measures at three points in time: baseline, mid-way through the coaching, and when the coaching ended. Some of the specific assessments included:

- core learning;
- mentoring;
- awareness of community resources;
- learning communities;
- feedback from both coaches as well as teachers (evaluating their coaches);
- self-evaluations; and
- future training needs.

Several outcome measures were also collected on an on-going basis throughout the coaching timeframe. These included:

- behavior plans developed;
- classroom attendance;
- staff turnover;
- child out-of-class incidents;
- in-class incident reports;
- call to families regarding challenging behaviors; and
- child suspensions/expulsions/terminations.

Because some of the data might be considered sensitive for a particular child care center, data was reported in the aggregate. No individual child care centers were identified in our evaluation summaries or reporting.

## **Teacher Self-Evaluation**

When coaching sessions began, teachers were asked to complete a baseline self-evaluation. This was followed up with a mid-point repeat evaluation and a final evaluation at the coaching program's conclusion. The data reported herein includes the baseline data, which we hoped to compare to mid-program and end-of-program evaluations to form a longitudinal assessment of changes in teachers' self-evaluation. In January 2020, 25 teachers completed the baseline self-evaluation tool constructed by the evaluation team. These 25 teachers represented seven programs and 12 classrooms.

Survey questions asked teachers to evaluate their knowledge in key areas, their classroom activities, and their communication with children and families. Highlights are noted below. Details for each of the evaluation questions can be found in Appendix 2 at the end of this report.

When asked to report their level of knowledge of the classrooms' children/family's faith, culture, and bias knowledge, slightly more than one-half (56 percent) noted a high level of knowledge, followed by

36 percent reporting a moderate level. Baseline questions regarding children, trauma, and challenging behaviors also asked teachers to rate their knowledge on the effects of trauma and the developing brain. Only one teacher gave him/herself the highest rating, yet one-half (52 percent) of teachers gave the second-highest rating. Almost one-half (44 percent) of the teachers indicated having only “some” or “half” of the knowledge related to this crucial area at baseline.

When asked to rate themselves on their ability to recognize behaviors that cause emotional responses from “rarely” to “always,” 80 percent of the teachers noted “most of the time” or “always” at baseline. No teachers indicated that they were “rarely” capable of doing this. Teachers also responded similarly to the frequency with which they use techniques to decrease reaction to strong emotions; i.e., 80 percent also noted “most of the time” or “always.”

Regarding classroom activities, teachers were asked to report what percent of the time (on average) they greet children/families upon entry into the classroom on a scale from “some of the time” (25 percent) to “all of the time” (100 percent). Most teachers (88 percent) noted greetings happened “most of the time” or “all of the time.” Teachers were also asked what percent of the time did he/she take the emotional temperature of those children upon entry into the classroom. Similar to the responses above, 82 percent noted that they take this temperature “most of the time” (75 percent) or “all of the time” (100 percent). And in rating their classrooms in terms of how often the classroom is “calm,” at the baseline, nearly three-quarters (72 percent) of teachers noted their classroom is calm “sometimes,” and the remaining one-quarter (28 percent) stated this occurs “most of the time.”

Teachers also were asked about their use of a developmentally-appropriate toolkit. When asked to indicate how often teachers use the toolkit regarding accepted behavior management strategies in the classroom, more than one-half (57 percent) noted using this toolkit “most of the time,” and the next most common response (30 percent) was “sometimes.”

When asked how many attempts at communication with families were typically made in a given week (through phone calls, daily notes, texts, and/or meetings), at baseline, all teachers noted at least three communication attempts. Slightly more than half (56 percent) of teachers reported three or four communication attempts, and the remaining 44 percent reported five or more attempts. The coach manager/trainer felt strongly that these numbers were very positive at the coaching program's initial period. In assessing communication in the classroom, teachers were asked about their daily back and forth conversations with children. The large majority of teachers (84 percent) noted communicating with children in their classroom “most of the time” or “all of the time.”

When asked to what extent teachers created written behavior plans for children with consistent patterns of challenging behaviors, at baseline, two-thirds of teachers (68 percent) reported doing this “most of the time” or “all of the time.” The majority of the remaining teachers (28 percent) noted developing written behavior plans only “sometimes.”

The final survey question asked teachers, “how often would you rate your learning of or referral of community resources.” Approximately one-half of teachers (54 percent) noted “most times” or “always.” The majority of the remaining half of teachers (44 percent) reported doing this “sometimes.”

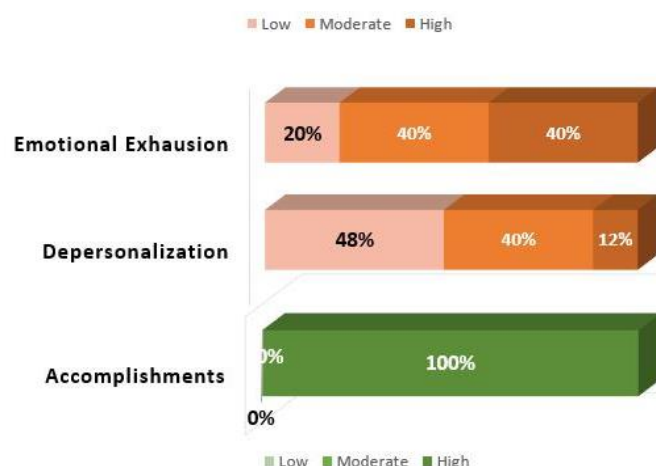
The main evaluation questions were followed by teachers completing the Maslach Burnout Inventory (MBI) – Educators Survey, a nationally recognized assessment tool of burnout specifically designed for educators. As described in the teachers’ one-day trainings, the MBI has three sub-scores: Emotional Exhaustion, Depersonalization, and Accomplishments, each of which is scored on a continuous scale from low to high. The developers of the MBI also created cut-offs to measure low, moderate, and high levels within each domain. In using this tool for the coaching program, the goal was to determine if the teacher’s scores changed positively in concert with the additional coaching they received over five to six months.

Table 1 below shows the baseline measure of the three domains derived from the MBI. Of interest, 25 teachers reported being in the “moderate” to “high” score for Emotional Exhaustion (80 percent). For Depersonalization, approximately one-half of the teachers (48 percent) scored “low,” while most of the other half of the teachers (40 percent) scored in the “moderate” range. However, all teachers (100 percent) scored in the “high” range for reporting Accomplishments. The Maslach data is displayed below in the table in Figure 9.

**Table 1: Maslach Burnout Inventory Scores from Self-Evaluation Completed by Teachers in the Coaching Program (January 2020)**

	Emotional Exhaustion	Depersonalization	Accomplishments
<b>Mean (SD)</b>	24.1 (8.6)	7.9 (3.3)	50.6 (3.7)
<b>Range</b>	10-40	5-18	43-55
<b>Possible Range</b>	9-63	5-35	8-56
<b>Median</b>	23	8	51
<b>Recoded: Low score [N (%)]</b>	5 (20.0)	12 (48.0)	0 (0.0)
Moderate score [N (%)]	10 (40.0)	10 (40.0)	0 (0.0)
High score [N (%)]	10 (40.0)	3 (12.0)	25 (100.0)

**Figure 9. Teachers in Coaching: Burnout Scale**



## Coaches Observations

As part of the overall Building Resilient Classrooms and Children initiative, one evaluation component was a “Coaches Observation Form” to be completed by the coaches during three periods in the six-month coaching portion of this project: January/February, March, and May 2020. To date, complete data from January and February, collectively, and half of the March midterm classroom assessments have been captured. This is due to changes in the overall program resulting from the COVID-19 pandemic and the closing of several early childhood care centers throughout Worcester.

Between January 10 and February 26, 2020, the four coaches completed 23 observations in nine classrooms across six programs. The majority of observations were 1.5 – 2 hours in length, and all but three were done early- to mid-morning hours. Among the nine classrooms observed, the average number of children registered was 14 (range: 7 – 20). And among those same nine classrooms, the average number of children present that day was 11 (range: 6 – 19).

Coaches were often meeting/observing a teaching “team” made up of two persons that included a lead teacher and/or a teacher or a teaching assistant. The large majority of lead teachers (85 percent) had a bachelor’s degree, and more than three-quarters of them (83 percent) had been in the field for seven or more years (one-half of them had been early childhood educators for ten or more years). The non-lead teachers had at least an associate degree, if not a bachelor’s degree, in two-thirds (67 percent) of these assessments. They, too, had significant experience in early childhood education (75 percent) for seven or more years. Teaching assistants were divided evenly between having a high school diploma, a teaching certificate, or an associate’s degree. All of them had been in the field of early childhood education for between one and six years.

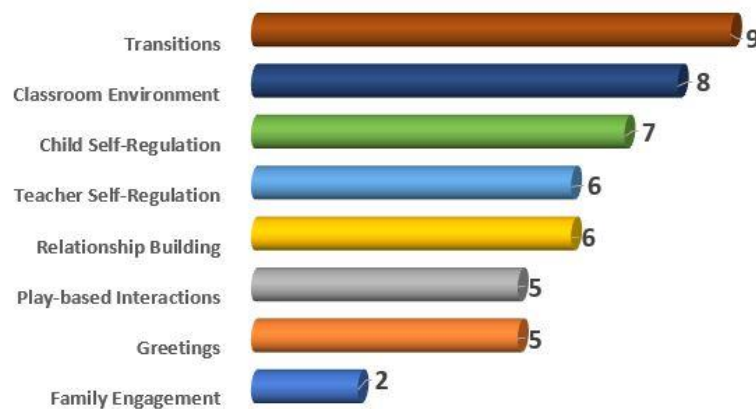
There were eight goals that teachers and coaches initially reviewed to determine the four focus areas for coaching sessions. Of these eight, the top five goals teachers identified included: transitions (39 percent), classroom environment (35 percent), child self-regulation (30 percent), teacher self-regulation (26 percent), and building relationships (26 percent) (

Figure 10). Table 2 identifies the goals that teachers were going to be working on with their coaches. For each goal, coaches assessed whether it was “not met,” “partially met,” or “fully met.”

Since this was the first set of coaching observations completed at the start of the teacher-coach engagements, it was no surprise that very few of the goals were deemed to have been “fully met” (only one occurrence in one goal) (see Table 2). For the most part, coaches’ observations were recorded as “not met” (i.e., 0-2 occurrences were observed within the classroom). This was true particularly for “transitions” and “play-based interactions,” followed by child self-regulation and teacher self-regulation. This process identified several key areas where coaches could review their observations with classroom teachers and develop opportunities to achieve their goals. The one goal identified by the coaches as have been “partially met” (3-8 occurrences) was in the goal of building a relationship. This might be because it is an easier goal to achieve compared to the other seven. In reviewing Table 2, the results don’t control for the time of day that a coach was making observations. From viewing the various goals below, there are likely specific activities at key times during the day. Therefore, there are likely missed opportunities, especially during the first observation, to gather observations for particular goals based

on a one-time occurrence. The purpose of collecting data over the additional two timeframes is to see how teachers met these goals over a day, including observation periods.

*Figure 10. Rank Order of Goals to Pursue – Identified at Baseline from Teachers in Coaching Program*



*Table 2. Baseline Assessment of Goals Used to Identify the Focus of Coaching Sessions (January 2020)*

Goals	Not Met 0-2 Times N%	Partially Met 3-8 Times N%	Fully Met 9+ Times N%
<b>Building a Relationship</b> – (Positive affirmation; Child background, culture, faith; Teacher culture; Reciprocal conversation exchange; Positive communication to family; Touch connection)	4 (17.3)	13 (56.5)	0 (0.0)
<b>Greetings</b> – (Eye contact; Emotional temperature – address child’s feelings at entry; Positive compliments; Child’s direction of interest to integrate into classroom; Family reciprocal exchange)	10 (43.5)	7 (30.4)	0 (0.0)
<b>Teacher Self-Regulation</b> – (Hot button triggers – elicit strong emotional response; Take time options; Voice modulation; Leisurely-paced classroom; Job delegation)	11 (47.8)	6 (26.0)	0 (0.0)
<b>Child Self-Regulation</b> – (Label the emotions for the children; Create meters the children can use to describe Happy, Fear, Mad, and Afraid; Cognitive regulation; Do-overs)	11 (47.8)	6 (26.0)	0 (0.0)
<b>Classroom Environment</b> – (Soothing entry; Non-stimulating areas; Cozy spaces; Emotion charts; Materials organization; Autonomy)	9 (39.0)	7 (30.4)	0 (0.0)
<b>Family Engagement</b> – (Phone conversation/text; Daily notes/pictures; Parent conference; Parent engagement)	7 (30.4)	8 (34.8)	1 (4.3)
<b>Transitions</b> – (Advanced warning; Visual cues; Pictorial schedule; Memory recognition; Sensory diet needs)	14 (60.8)	2 (8.7)	0 (0.0)
<b>Play-based Interactions</b> – (Dramatic play – behavior rehearsal, situation role play; Memory recall games; Scripted stories)	14 (60.8)	3 (13.0)	0 (0.0)



For each goal that was assessed, coaches provided open-ended comments from their observations, which were then collated by goal and aligned within each goal's sub-categories as outlined in Table 2. Rank ordering identified one or two key themes within each goal. Details of those themes are provided in **Appendix 3**. Noted below is a summary of the eight themes and the goals that coaches identified as positive and those where teaching staff needed to improve consistency. The coaches' feedback within the eight goals was substantive and enlightening, especially given the short time allowed for observation. Each set of goal observations were summarized by major themes.

The goal of **building relationships** had two overarching themes: positive observations and those that focus on changing behavior. Coaches' positive observations concerning building relationships included (in rank order of frequency observed): conversations with children, touch, the affirmation of children, positive attention, and family culture – including native language communication. Main themes focused on building or changing behavior centered on the use of “good job” rather than specific conversation or description about the activity mentioned, not using children's names to personalize interactions, and positive family communication at drop off (need was not often observed). Themes for building relationships that need further discussion include increasing family interaction with direct, affirmative phrases for children.

Within the greetings goal, positive observations were impressive since coaches were required to observe many classroom activities at once. Positive observations included (in rank order of most frequently observed): eye contact/smile at the greeting, arrival used as an opportunity for welcoming and warm greeting, exchange of information with a parent, compliment or positive statement to a child or parent about child's day, and teacher is taking time to integrate the child into the classroom routine and activities. Coaches also noted missed opportunities in greetings, which were identified as recommendations for change or competency building, including arrival as an opportunity for the warm greeting of child and exchange of info with a parent, using the time to integrate the child into a routine, and use of greeting to exchange information with the parent. Coaches observed greetings of student/family into the classroom with eye contact with positive exchanges at pick up and drop off. Teachers took time to assist children in the classroom routines, using compliments and positive statements regarding their day with parents. There was a recognized need for increased use of greetings along with easing children into the group environment.

The third goal that coaches observed was **teacher self-regulation**. Positive observations included: positive voice modulation and identifying feelings and instances of teacher self-calming. Teacher self-regulation was observed in the form of voice modulation to self-calm and to calm the classroom. Positive examples of self-calming techniques were observed to reduce triggering. Areas noted to require change or capacity building included: negative voice modulation, talking across the room to children, and negative comments to self or other staff. There was also an observed need for teachers to improve their ability to recognize and present a sense of calm in the classroom during engagements.

Following teacher self-regulation was the goal of **child self-regulation**. The many positive actions that coaches observed included: teachers are helping children to identify their feelings, teachers validating children's feelings, teachers modeling by labeling their own feelings, teachers using emotions chart in the classroom, teachers giving directions broken down into steps (and repeated as needed), and



teachers supporting children to use “do-over” strategy. Areas identified for change or competency included: teachers putting their own label on a child’s feelings, teachers ignoring behavior/feelings and focusing on a task, teachers not using feeling charts, and teachers not following through after request about a child’s behavior. In all, child self-regulation was observed in labeling and identifying the teacher and child’s emotions during the moment. Teachers used “do-over” strategies to de-escalate a situation and a walk-through strategy to adjust feelings. A deficit identified during the observation was in the area of children identifying emotions and teacher acknowledgment.

For the fourth goal of the **classroom environment**, coaches made fewer observations which characterized this theme, but still noted several positives, including cozy, relaxed spaces, labeled organized shelves which were easily accessible, and autonomy. The few observations suggesting change or competency building included the need for more cozy spaces and an organization of materials. In general, observations of classroom environments were far more positive than negative.

The goal of **family engagement** being met was reflected in the coaches’ positive observations. These included formal (parent-teacher conference) and social family engagement activities; teachers send notes, pictures, and progress charts home to share details of the child’s day or planned activities; and daily communication engagement. Areas of family engagement identified for improvement or competency building included: parent engagement occurred with only some parents or only using one technique, parent engagement was neutral (information) or was negative (call about a sick child), lack of consistent and effective means of parent communication, and communication was one-way from teacher to parent. Programs appeared to connect using conferences and social events.

The next goal observed by coaches was **transitions**, which generated both positives and opportunities for change. Positive observations included: clearly posted/used pictorial schedule, clear verbal and visual cues given for classroom expectation for transitions, and opportunities provided for reset. Areas noted for improvement or competency building included: lack of or few verbal or visual advance warnings of transition, pictorial schedules not posted, overly long waiting times for bathroom, lining up to go outdoors, nothing to do while waiting, and using only one type of cue (e.g., verbal) and no repetition.

The last (eighth) goal that coaches observed in the classroom was **play-based interactions**. As with all other goals, both positive observations and areas needing redirection were observed. Positives noted within many of the classrooms included: opportunities for teacher play-based modeling, interactions in areas of play-based interaction, and use of verbal cues to recall routines. A need to recognize when these interactions might be the most influential was observed. Areas identified as needing attention included: increases in teacher-assisted play-based interactions, story retelling, and difficult private scenarios.

Finally, the coaches and teachers discussed the need for additional materials or workshops. Materials identified by the teaching team included: diversity activities, copies of Sorrels’ book, sensory containers, sensory diet information, charts to help with daily schedules, ideas on mindfulness, learning communities, materials (e.g., “Teachers have hot buttons, too,” “Uncovering the roots of challenging behaviors,” and “busy bags” for transition time. Topics of interest for future workshops included:

building relationships with families, communication with families, strategies for teaching children various approaches to join play, and webinars based on materials in Sorrels' book (e.g., emotional temperature tracking). Full data from the Coach Observation survey are presented in **Appendix 3**.

## Baseline and Regular Outcomes Identified by Coaches

As part of the effort to evaluate the Building Resilient Children and Classrooms initiative, data were collected at the time of coaching sessions with the teachers. The initial survey, which was completed at the first coaching visit, asked for baseline data accrued over the past month. The “regular” on-going surveys asked the coaches to think back to the last coaching sessions, which, in most instances, would have been over approximately two weeks. Between January and March of 2020, four coaches worked with seven programs and 12 classrooms within those programs. Children registered in these classrooms ranged in age from 7 to 21 during the intervention period and the number of children present during the coaching sessions ranged from 0 to 20.

To reduce risk to teachers, children, and their families, data collection was halted in mid-March when daycare centers closed due to the COVID-19 pandemic. Noted below is a summary of the outcomes data, which incorporates both baseline survey data and data from two regular coaching sessions. Because the two initial coaching sessions were only two weeks apart, we combined data for both sessions to establish a baseline “look-back” of one month. A continuation of outcomes data through “regular” coaching sessions covers one month (two sessions each looking back two weeks). While the combined data from the coaching sessions may differ somewhat, there were no significant differences that would suggest the combination (for the sake of equal time frames) would be an issue. Samples sizes were relatively small (12-13 coaching sessions with reported survey outcomes data), suggesting that changes over time need to be viewed cautiously and avoid generalizing these findings. Graphics highlighting the significant changes between the two initial time frames of coaching can be found below (Figure 11 and Figure 12).

*Figure 11. Preliminary Findings/Outcomes as a Result of Coaching (1 of 2)*

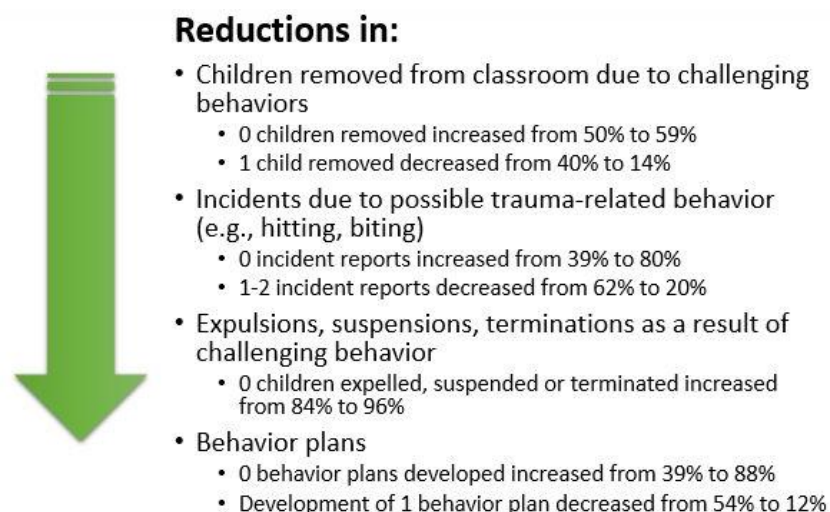
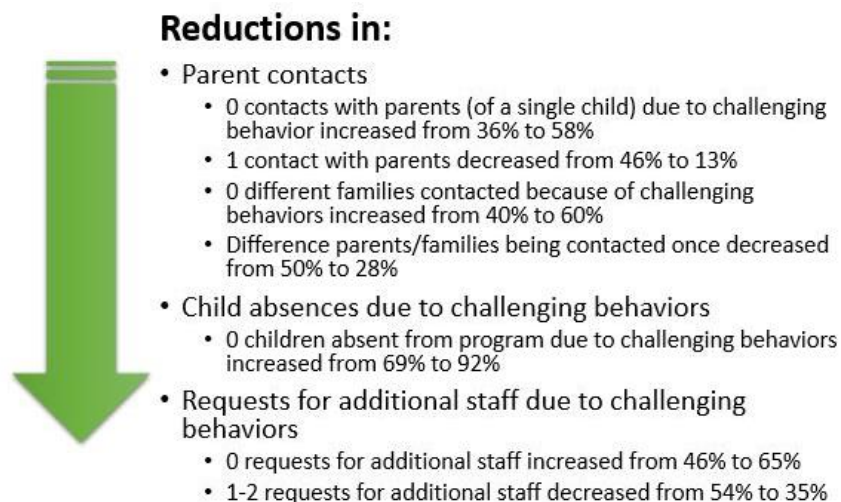


Figure 12. *Preliminary Findings/Outcomes as a Result of Coaching (2 of 2)*



The various outcomes which were assessed through the coaching program fit into 2 categories: children and staff. The goals specifically assessed:

<u><b>Children:</b></u>	<u><b>Staff:</b></u>
Children removed from the classroom	Additional staff requested
Child's parent contacted	Additional staff entered room
Behavior plans developed	Staff absent due to child's behavior
Absence due to behavior (# days)	Staff room changed due to child's behavior
Incident reports filed	Staff left due to child's behavior
Child suspended, expelled, terminated	

In addition to the highlighted information provided below, there are three additional Appendices; **Appendix 4** and **Appendix 5**, which offer significantly more detail describing the question-by-question review of the data comparing baseline to regular timeframes in terms of the outcomes of interest. **Appendix 6** provides a set of charts and graphs visually projecting the summary outcomes data by timeframe.

## Removals of Children from Classrooms

Coaches identified the number of times a child was removed from the classroom due to challenging behaviors. Baseline data showed 50 percent "0 children," with 40 percent removed once. At follow-up (i.e., the two coaching sessions after the initial visit), "0 children" removed increased from 50 percent to 59 percent with a concomitant drop in the number of children removed once (from 40 percent to 14 percent - the increase in "0 children" and the decrease in "1 child" are both in a positive direction).

Subsequently, coaches identified (based on consultation with the teachers) the number of different children removed from the classroom due to challenging behavior. As in the direction above, the number of different children removed from the classroom being “0 children” nearly doubled from 33 percent at baseline to 58 percent at follow-up. The number of different children removed from the classroom being “1 child” decreased significantly from 50 percent at baseline to 29 percent at follow-up.

## **Parental Contacts**

Coaches were asked to record the number of times a single child’s parent was contacted about challenging behavior in the classroom. At baseline, “0 times” was noted by one-third of the coaches (36 percent). This significantly increased (a positive direction) to 58 percent at follow-up. Contacting a parent once at baseline was noted to be 46 percent. However, the prevalence of one contact decreased significantly to 13 percent at follow-up. The number of times a parent was contacted “twice” was 18 percent at baseline and increased to 33 percent at follow-up. More frequent contact with a child’s parent might not only be indicative of more challenging behavior but could also include a positive reaction from the teacher, upon being coached, to reach out to the parent to discuss this behavior – something the teacher may not have felt compelled or confident to do before the coaching sessions.

When asked how many different families were contacted (via phone, in-person, electronic, or paper) about their child’s challenging behavior, 40 percent of the coaches noted “0 children/families” at baseline; this increased to 60 percent at follow-up (a positive direction). One-half (50 percent) of the coaches recorded that only one family was contacted at baseline, which decreased (a positive direction) to 28 percent at follow-up. Again, these positive contacts may have resulted from the coaching received by the teachers. While the coaching sessions might have increased the teacher’s awareness of the need to contact a family, reaching out to those families would be one of the first steps toward reducing challenging behaviors in the classroom.

## **Development of Behavior Plans**

When asked to identify the number of times a behavior plan was developed for a child, 39 percent of coaches reported no baseline occurrences, increasing significantly to 88 percent at follow-up. One-half of the coaches (54 percent) noted that behavior plans were developed once at baseline, which decreased considerably to 12 percent at follow-up.

In addition to the number of times a behavior plan was developed for a child, coaches reported how many different children had developed behavior plans. At baseline, 42 percent of the coaches reported “0 children,” which more than doubled to 92 percent at follow-up. One-half (50 percent) of the coaches noted “1 child” with a behavior plan developed in the past month (at baseline), which decreased significantly to only four percent at follow-up.

## Incident Reports

Among the many outcomes for which coaches collected data are incident reports filed due to possible trauma-related behaviors (e.g., biting, hitting, injuries from thrown objects, physical fights, etc.). At baseline, the number of incident reports was nearly equally divided between “0 times” (39 percent), “1 time” (31 percent), and “2 or more times” (31 percent). However, these numbers changed dramatically after two coaching sessions: 80 percent “0 times,” 12 percent “1 time,” and 8 percent “2 or more times.” When assessing the number of different children for whom incident reports were filed, a similar positive change over time was noted. Nearly one-half of coaches (46 percent) indicated “0 children,” one-third (39 percent) indicated “1 child,” and 15 percent noted “2 or more children.” At follow-up, the number of different children being “0” nearly doubled from 46 percent to 84 percent. The number of incidents with “1 child” decreased significantly from 39 percent to 12 percent. And the number of “2 different children” dropped from 15 percent to 4 percent - all positive changes.

## Child Expulsions, Suspensions, or Termination

One of the significant adverse outcomes that might occur in an early childhood education center due to challenging behaviors is the expulsion, suspension, or termination of a child from the program. Coaches collected this data both at baseline and for the subsequent month (incorporating two coaching sessions). When asked at baseline, 84 percent of the coaches reported no children had been expelled, suspended, or terminated from the center in the past month. This increased to 96 percent at follow-up. In the few instances where this outcome did occur, teachers noted reasons that included: “Ability for parents to get services – ignored behavior,” “Assaultive behavior to children and staff, leaving group without permission, and attitudes which negatively impacted learning environment,” and “Spitting at the teacher, threw a chair at the teacher.”

## Staffing Changes

As a result of children’s challenging behaviors, teachers sometimes requested additional or substitute staff in the classroom. When queried how many times this happened, coaches noted no requests at baseline 46 percent of the time, which increased positively to 65 percent at follow-up. One request was recorded at baseline by 36 percent of the coaches, which decreased (positively) to 26 percent at follow-up.

Coaches were also asked to identify the number of times additional or substitute staff entered the classroom due to a child’s challenging behavior. At baseline (i.e., in the past month), more than one-half of the coaches (56 percent) collected data on “0 times” this occurred, which increased to 71 percent at follow-up. One-third of the coaches (33 percent) noted that additional staff entered the classroom one time at baseline, decreasing to 24 percent at follow-up.

In addition to the number of requests for additional staff, coaches also collected data on the number of children involved in this request by the teacher. At baseline, 22 percent of coaches indicated “0 children,” this increased to 36 percent at follow-up. More than half of coaches (56 percent) noted “1 child” at baseline, which decreased slightly to 50 percent at follow-up.

## **Absences from the Program**

At baseline, two-thirds of coaches (69 percent) indicated “no” in response to tracking whether teachers thought children were absent from the program due to challenging behaviors, and an additional 23 percent noted “not sure.” At follow-up, these numbers increased to 92 percent (up from 69 percent) and 8 percent (down from 23 percent), respectively. Only one response of “yes” (8 percent) was reported at baseline, but no affirmative responses were noted at follow-up. When asked the number of times a child was absent from the program due to challenging behaviors, 92 percent of the coaches stated no occurrences of this at baseline. This number was only slightly higher (96 percent) at follow-up.

When asked in slightly different terms how many different children were absent from the program due to challenging behaviors, again, 92 percent of the coaches noted “none” at baseline, while 100 percent reported “none” at follow-up. Only one instance of “1 child” (8 percent) was noted at baseline, which did not reoccur during the follow-up time frame.

The last question in this section asked coaches to identify whether co-teachers or teaching assistants were absent from the program due to children’s challenging behaviors. Coaches were given the responses options of “yes,” “no,” and “not sure.” If they indicated “yes,” coaches were asked to describe the circumstances briefly. At baseline, nearly all coaches (92 percent) noted “no,” and the remaining eight percent noted “not sure.” At follow-up, 100 percent of the coaches noted “no.”

## ***Professional Learning Communities***

Professional Learning Communities (PLCs) were offered to all teachers from the seven programs participating in coaching. Of those invited, 24 teachers participated, and evaluation data were obtained from 12 of those participants. The 12 teachers represented six early childhood education centers and seven classrooms within those centers. Multiple sessions were held during this training/networking series of sessions. More than one-half of the participants (7; 58.3 percent) participated in four or more sessions; one-third (4; 33.3 percent) participated in two or three sessions; one teacher was only able to attend one session. The evaluation itself was relatively short compared to other program evaluations. As COVID-19 resulted in most early childhood centers closing, it was unclear how long PLCs would be able to continue. However, as mentioned throughout this report, there were still many successes noted by participants of the various program components (including the PLCs), which outline what can be accomplished in a short time using this new mode of training.

When asked about their goals for participating in the PLCs, there was quite a range of responses from the teachers, including:

- connecting and networking with other educators and identifying resources and tools to help children and their families recover from trauma;
- gaining successful strategies and techniques;
- improving the quality of care provided to children at their center;
- gaining strength in understanding childhood trauma to promote positive outcomes;

- learning about best practices, especially during the unprecedented times amidst the COVID-19 pandemic;
- gaining skills in setting up a trauma-informed resilient classroom; and
- learning more mindfulness activities.

Participants were asked about seven specific program objectives and the extent to which these were achieved during their time with other PLC participating teachers. As Table 3 showcases below, very few participants felt they had not achieved the program's goals. The three objectives which were rated the highest in terms of achievement were: 1. facilitator providing an opportunity for reflection on current perceptions and work; 2. taking better care of myself to help me continue to support others, and 3. building my commitment to support children to develop resilience and heal from trauma.

**Table 3. PLC Participants Level of Achievement for Specific Program Objectives**

	Exceeded Expectations	Achieved	Partly Achieved	Not Achieved
I shared successes & challenges from my classroom at today's session.		6 (50.0)	4 (33.3)	2 (16.7)
I learned from the strategies, successful practices and challenges described by others to better build children's resilience and support their healing from trauma.	4 (33.3)	4 (33.3)	4 (33.3)	
I met someone in the group that I want to stay in touch with because I think we can help each other continue to improve our classrooms.	1 (9.1)	4 (36.4)	1 (9.1)	5 (45.5)
This group helped build my commitment to support children in my program to develop resilience and heal from trauma.	3 (25.0)	8 (66.7)	1 (8.3)	
After participating in this group, I feel that I am taking better care of myself to help me continue to support others.	3 (25.0)	8 (66.7)	1 (8.3)	
The facilitator provided the opportunity for reflection on my current perceptions and/or work.	5 (41.7)	7 (58.3)		
With the knowledge obtained, I feel successful in setting a new goal for my classroom/myself.	3 (25.0)	7 (58.3)	2 (16.7)	



Given the importance of reflection, teachers were asked to reflect on the effectiveness of their classroom practices. Key among the many responses included:

- learning techniques exerted in the classroom (e.g., teaching children about wearing a mask);
- importance of continuing efforts to support children in developing resilience and healing from trauma;
- revising classroom practices to remove those strategies that were tried but determined to be ineffective;
- implementing tools and gaining great resources inherited through these sessions;
- remaining calm even when a child is acting out;
- understanding the importance of being aware of facial expressions and tone; and
- understanding the importance of visual schedules so that children know what's coming next in developing a routine for the classroom.

At the end of the PLC sessions, teachers were asked to identify where additional resources were needed. The richness of resource requests included:

- ways to communicate effectively with a child who may be experiencing anger/ frustration, especially if the child is acting out physically (i.e., how to help soothe the child);
- identifying how to help children get services he/she needs (e.g., screening by a developmental pediatrician);
- specific books that would be helpful to have/use within the classroom setting; and
- identifying the needs of families and staff in addition to children specifically.

## ***Parenting Workshops***

Two initial parent workshops scheduled for March 2020 were canceled due to a lack of enrollment. The remaining workshops could not be held due to the closure of five child care centers during the COVID-19 pandemic. The two centers that remained open transitioned to become emergency child care for essential workers. The original set of families and children were not the population being cared for.



## V. Summary

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Childhood trauma is a deep, complex, and pervasive societal issue that requires a multitude of coordinated strategies for it to be addressed effectively. Children grow to their optimal learning ability as they develop a trusting relationship with a caregiver/educator. For children who have experienced trauma, including racial inequity, early childhood educators have a unique opportunity to provide the tools they need to develop resilience. Mutual support and scaffolded learning opportunities for staff are essential for building an effective system that addresses the impact of childhood trauma.

This pilot project trained 49 early childhood educators in the foundations of trauma-informed knowledge, attitudes, and practices in the context of equity-based early education and care and self-care. As an extension of the training, a subset of those teachers (26) self-enrolled in one-on-one coaching, developing goals to alter behaviors and change the classroom structure related to critical areas that support children impacted by childhood trauma and racial inequity. Each classroom developed a plan that focused on multiple goals within the eight areas of resilience. To help build educator competency, specific action steps were agreed upon, and coaches used various techniques including modeling, processing observed teaching and educator self-reflection. Educators participated in biweekly coaching sessions. Many also participated in a monthly Professional Learning Community, which included peers from all seven centers and were co-facilitated by one coach and the early childhood mental health clinician.

Preliminary findings showed significant reductions in:

- children removed from classrooms due to challenging behaviors;
- incidents due to possible trauma-related behavior;
- expulsions, suspensions, and terminations as a result of challenging behaviors; and
- child absences due to challenging behaviors.

The COVID-19 pandemic forced closures of child care centers, so the project shifted to other modalities to offer continued support to the teachers involved in coaching and the professional learning communities. After this extended period away from the routine and the security that school provides for many children, projects such as this have become even more critical in building resilience and enhancing racial equity.

## VI. Recommendations

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This project highlighted the positive effects of intensive training on trauma, resilience, racial equity, and targeted teacher coaching on the mindset and behaviors of early childhood educators. Based on the finding of this project, the following actions are recommended:

- Offer intensive training on early childhood educators in recognizing:
  1. the impacts of trauma and racial inequity;
  2. building resilience through teacher interactions and environment; and 3. highlighting the importance of teacher self-care.
- Provide coaching to early childhood educators building on the trauma, resilience, racial equity, and self-care training to work stepwise by developing goals based on best practices to enact change.
- Develop professional learning communities across programs for peer learning and sharing of best practices.
- Build connections between early childhood educators and families through parent workshops.

## Appendix 1. Full Day Teacher Trainings (Pre & Post)

1. Training date:	N (%)
Nov 11 <sup>th</sup> , 2019	24 (40.0%)
Nov 23 <sup>rd</sup> , 2019	25 (51.0%)

2. Which of the following is not an example of an Adverse Childhood Experience (ACE) from the Kaiser and CDC study? (choose one; **highlighted item is correct answer**)

	Pre N (%)	Post N (%)
Living with someone who abuses drugs or alcohol	0	0
Physical, emotional, or sexual abuse	0	0
<b>Repeating a grade in school</b>	<b>24 (53.3%)</b>	<b>32 (72.7%)</b>
Incarceration of a household member	0	0
All of the above	14 (31.1%)	12 (27.3%)
Don't know	7 (15.6%)	0

3. Which of the following are common reactions to a traumatic event? (check all that apply; **highlighted item is correct answer**)

	Pre N (%)	Post N (%)
Unwanted, negative thoughts	8 (16.3%)	2 (4.1%)
Withdrawal	8 (16.3%)	3 (6.1%)
Avoidance of specific situations or activities	8 (16.3%)	5 (10.2%)
Increased anxiety	8 (16.3%)	3 (6.1%)
Hypervigilance – not able to relax	6 (12.2%)	1 (2.0%)
Unemotional or emotions not connected to situation at hand	6 (12.2%)	1 (2.0%)
<b>All of the above</b>	<b>44 (89.8%)</b>	<b>39 (79.6%)</b>
Don't know	0	0

4. Thinking back to the time before this training, on a scale of 1-10 (1=Strongly Disagree, 5=Neutral, 10=Strongly Agree), how much would you have agreed or disagreed with the statement: "I understand the causes of childhood trauma."

	Mean (SD)	Median	Range
RetroPre:	8.02 (2.05)	8.0	3 – 10
Post:	8.98 (1.44)	10.0	5 – 10

Paired T-test (comparing 2 means among those with pre and post data): **T=3.19; p=.003**

5. Please estimate the number of children with trauma in your classroom:

	Pre N (%)	Post N (%)
a. 0	5 (10.9%)	2 (4.7%)
b. 1	3 (6.5%)	2 (4.7%)
c. 2	2 (4.3%)	3 (7.0%)
d. 3	5 (10.9%)	7 (16.3%)
e. 4	3 (6.5%)	4 (9.3%)
f. 5	4 (8.7%)	5 (11.6%)
g. 6 or more	24 (52.2%)	20 (46.5%)

0-2 children	10 (21.7%)	7 (16.3%)
3-5 children	12 (26.1%)	16 (37.2%)
6 or more children	24 (52.2%)	20 (46.5%)

6. On a scale of 1-10 (1=Very Unlikely, 5=Neutral, 10=Very Likely), when you work with a child with challenging behaviors, how likely or not are you to ask yourself: “What’s wrong with this child?”

	Mean (SD)	Median	Range
Pre:	6.11 (2.59)	5.0	1 - 10
Post:	5.17 (3.08)	5.0	1 - 10

Paired T-test (comparing 2 means among those with pre and post data): T=1.05; p=.303

7. On a scale of 1-10 (1=Very Unlikely, 5=Neutral, 10=Very Likely), when you work with a child with challenging behaviors, how likely or not are you to ask yourself: “What happened to this child?”

	Mean (SD)	Median	Range
Pre:	7.16 (2.45)	7.0	1 - 10
Post:	7.86 (2.28)	8.0	1 - 10

Paired T-test (comparing 2 means among those with pre and post data): T=1.98; p=.055

8. On a scale of 1-10 (1=Very Unlikely, 5=Neutral, 10=Very Likely), when you work with a child with challenging behaviors, how likely or not are you to ask yourself: “Why is this child trying to aggravate me?”

	Mean (SD)	Median	Range
Pre:	3.71 (2.84)	3.0	1 - 10
Post:	3.64 (2.78)	3.0	1 - 10

Paired T-test (comparing 2 means among those with pre and post data): T=0.85; p=.402

9. The most important factor in helping a child heal from trauma is (choose one; highlighted item is correct answer):

	Pre N (%)	Post N (%)
A calm classroom environment	9 (20.0%)	8 (18.6%)
Low child-to-teacher ratio	0	0
Positive child relationship with a caregiver	20 (44.4%)	23 (53.5%)
Trauma-informed classroom curriculum	4 (8.9%)	4 (9.3%)
Use of specific behavior strategies	7 (15.6%)	5 (11.6%)
A teacher who uses developmentally appropriate curriculum	3 (6.7%)	3 (7.0%)
Don’t know	2 (4.4%)	0

10. Which of the following are strategies that can be used by educators to help children in your classroom who have experienced trauma? (check all that apply; highlighted items are correct answer)

	Pre N (%)	Post N (%)
Model positive coping skills	26 (53.1%)	23 (46.9%)
Timeout	0	1 (2.0%)
Help them gain competence and feel successful	21 (42.9%)	21 (42.9%)
Creating a consistent, predictable classroom schedule	22 (44.9%)	22 (44.9%)
Offering the child the chance to use a quiet, soft space	18 (36.7%)	24 (49.0%)
All of the above	19 (38.8%)	17 (34.7%)
Don't know	0	0

11. For each of the following, on a scale of 1-10 (1=Strongly Disagree, 5=Neutral, 10=Strongly Agree), please rate how much you agree or disagree with the statement:

"I believe there is room for improvement because teachers treat children differently based on their gender, race, and/or family economic status."

	Mean (SD)	Median	Range
Pre:	3.63 (2.78)	2.5	1 - 10
Post:	4.37 (3.19)	4.0	1 - 10

Paired T-test (comparing 2 means among those with pre and post data):  $T=1.11$ ;  $p=.275$

"I regularly examine my own behavior to assess if I am fair and equitable in the way that I treat each child in my care."

	Mean (SD)	Median	Range
Pre:	7.33 (2.46)	7.5	1 - 10
Post:	7.98 (2.42)	8.0	1 - 10

Paired T-test (comparing 2 means among those with pre and post data):  $T=1.69$ ;  $p=.098$

"I can provide important support in helping children have a positive development and experience, even children who have experienced trauma."

	Mean (SD)	Median	Range
Pre:	7.93 (1.81)	8.0	4 - 10
Post:	8.67 (1.65)	10.0	5 - 10

Paired T-test (comparing 2 means among those with pre and post data):  $T=2.39$ ;  $p=.022$

12. On a scale of 1-10, (1=Not at all Important, 5=Neutral, 10=Very Important), please tell us how important or not it is to engage in self-care or stress reduction techniques for yourself at work?

	Mean (SD)	Median	Range
Pre:	8.72 (1.79)	10.0	4 - 10
Post:	9.21 (1.17)	10.0	6 - 10

Paired T-test (comparing 2 means among those with pre and post data):  $T=1.74$ ;  $p=.090$

13. Please describe up to two strategies that you currently use regularly for relaxation/mindfulness at work:

- Breathing in and out/ Deep breathing/ Breathing techniques/ Breathing exercises/ Use deep breathing/scheduled on my phone (19 - # of time this was recorded)
- Breathing exercises with the kids together/ Breathing techniques with the children as well (2)
- Walk/ Walk Dog/ Walking on lunch break (8)

- Exercising/Working out/ Exercise at lunch (6)
- Talk w/ co-workers, teachers/ Talk w/ others about experience/ Confiding in co-workers for help (5)
- Yoga/Morning Stretches/Meditation (4)
- Read/ Reading/Read book to children (4)
- Play music when possible/ Music/ Play relaxation music in class (3)
- Positive attitude/ Cheerfulness/ Look for positive notes to smile about (3)
- Get another teacher to intervene the situation/ Have a teacher step in/ I will also ask another teacher to step in for me so I can take a step outside (3)
- Taking breaks (2)
- Talk about feelings/ Talking it through (2)
- 15 minutes in the sauna room/ Team room half hour everyday (2)
- Counting down from 10/ counting to three (2)
- If a child is having a hard time, I will do my best to help the child calm down by taking them to a quiet area and talk calmly
- Crosswords
- Close eyes for a few minutes while kids sleep
- Tense and relax hands
- Realizing that they are children and they are still learning
- I examine my own behavior and try to adjust it
- Organized room
- In nap time I have some relaxing time
- Control myself
- As a Director, I take 5 minutes to focus on myself and relax my mind
- Speaking to boss
- Go to the bathroom allows me to be alone
- Eating healthy
- Sleep
- Cognitive awareness (checking thought patterns)
- Ask the child to go for a walk
- My Apple Watch has a feature of taking your heartbeat
- When I feel myself getting frustrated, I take a break with the students to do a meet on the rug for a yoga session
- Dance
- Travel
- Processing what is going on slowly
- Thinking of something to make me laugh
- 4-4-4
- Move away from situation

14. On a scale of 1-10, (1=Not at all useful, 5=Neutral, 10=Very Useful) Please rate how useful or not this one-day training was to your current work.

	Mean (SD)	Median	Range
Post (ONLY):	9.00 (1.81)	10.0	2 – 10

15. Please tell us a little more about why or why not the training was useful (or not) to you.

Positive:

- I learned a lot
- Concrete practices and tools
- Lots of ideas/Lots of information
- It was useful because it involved strategies to help the wellness of a teacher and also, strategies to help with children who have suffered trauma.
- To help children/ Help children
- Increase in childhood trauma children in the program
- Useful because most children endure a lot of stress and trauma in today's life.
- Very useful even though I have been in the field a long time, it's important to keep learning new ways to help children deal with trauma as ways to me mindfully of my own needs
- This training helped give many ideas on how to help children cope with trauma. Knowing to take care of myself
- Very useful
- I work with a lot of children who present trauma
- It was useful to think about the whys of children's behaviors and how we can respond to them
- It was useful because now I have an understanding of what trauma really means
- Helped me understand why children act a certain way and helps me as a caregiver look at children from their perspective
- The training specifically pertains to the situations we experience at the YMCA. It was useful to visualize our children during the training
- Helped me understand that these children need support
- Helpful tips for managing the classroom
- It was very useful because I know what to do now that if a problem happens
- It helped give me new methods
- The training offered a lot of information and strategies that I have used and currently do use in the classroom
- It's very important to teach STAFF to work with kids
- Extra incite on how we view things from a teacher's standpoint
- The breathing and relaxation techniques are very helpful

Constructive:

- The 2nd morning speaker did not adhere to the time restraints and lost her audience by talking too much then we were unable to see and hear from the 2nd slide show
- Not a lot of new information. Lots of common sense. Instructor repeated themselves and dragged out simple topics, seemed like she was reading from a script and not speaking from the heart which disappointed me a little. I was hoping for insuring words
- We already use all these techniques. The training was good for those who don't already know about different things
- I already implement a lot of this information in my classroom

16. Please describe up to two strategies that you plan to use in your classroom that you learned at this training:

- Breathing/ Breathing techniques, exercises/ Breathing and pausing (6)
- Busy bags/ Create a busy bag for children during transition (5)

- Yoga/ Yoga at circle more (4)
- New Tucker Turtle puppet/ Puppets/ Learning ways of puppet (4)
- Visual schedule for predictability/ Set up visuals for the children to follow/ Learning ways to implement a visual schedule (3)
- Walking/ Shift walking (3)
- Meditation (2)
- Mindfulness (2)
- Set up a place where children can be alone/ Setting up areas that allow for quiet time (2)
- Positive Coping Skills/ Provide coping tools for children who are angry (2)
- Calming box/bag
- Calm voice/ Quieter voice
- Make my classroom less stimulating
- Try to imagine where the child is coming from and take time to sit quietly with them
- Positive Reinforcement
- Relaxation activity (sensory and busy box with choice of items)
- Building attachments and nurturing relationships
- Showing the children healthy ways to interact in a safe environment
- Provide additional comfort to angry children
- Chew toys
- Quiet rest toys
- Sensory bottles
- Thinking of individual child
- I will use yoga cards that were used as an example in my calm down area
- Response don't react
- Continue with team building
- Kindness band
- Teaching emotional regulation techniques
- Offering children choices
- I will use yoga cards that were used as an example in my calm down area
- Letting kids know I'm there for them and they're loved
- Giving specific children specialized attention is sometimes necessary
- Being stern without yelling shall be implemented
- Talking it through
- Working out
- Behavior chart
- Work with family to identify triggers
- Have a space available for troubled children
- Thinking about the situation
- Inclusive activities
- Learning to calm down
- Calm down activities
- Learned about the child's past life
- Control body
- Hugs, smile
- Good stories to read
- Building trust with students



- Slow it down
- We already implement a lot of these strategies in the classroom
- We already offer several strategies we were given in this course
- We already implement several strategies mentioned during this training

17. Please describe up to two strategies that you plan to use regularly for relaxation/mindfulness for yourself at work now that you've completed this training:

- Breathing/ Breathing techniques/ Deep breathing when stressed (17)
- Meditation exercise/ Guided meditation/ Meditation when time allows (5)
- Walks with friends/ Walking/ Slow walk/ Walking slow (shift, lift, place) (7)
- Mindfulness/ Being more mindful (3)
- Yoga positions/ Yoga/ Teaching the children yoga poses (5)
- Stopping to take deep breaths/ Stop & Breathe (2)
- Getting more sleep/ Rest (3)
- Taking time to be grateful/Taking time to think/ Taking a moment (3)
- Writing/ Writing out ideas (2)
- Reading (2)
- Exercise (2)
- I plan to use the tucker the turtle/ Using the puppet to self-regulate (2)
- Relaxing (2)
- Body centering exercises
- Eyes rest closed for a few minutes
- Taking time out and destress by doing things I enjoy
- Drawing
- Taking time with friends
- Set goals and reach them
- I have my own coping mechanisms I don't plan on changing with anything I learned today, respectfully
- Emotion cards
- Daily affirmations
- Stretching
- Breathing with or without children
- Hand rubbing activity with or without children
- Singing songs
- Chill-out time
- Coping strategies
- I will try to make time for 2 minutes of grounding time for myself
- Take care of yourself
- Control my body
- Participate in calming activities with the class
- Focus on my breathing while observing the room
- I will use the breathing techniques to better myself. I will help my kids to better themselves as well

18. For each of the three components of the training, on a scale of 1-10 (1=Strongly Disagree, 5=Neutral, 10=Strongly Agree) please rate how much you agree or disagree that the instructor communicated in a way that was easy for you to understand.

Introduction to Child Trauma and Resiliency

	Mean (SD)	Median	Range
Post (ONLY):	9.17 (1.25)	10.0	5 - 10

Introduction to Building Resilient Classrooms and Programs

	Mean (SD)	Median	Range
Post (ONLY):	8.86 (1.73)	10.0	2 - 10

Introduction to Self-Reflection and Self-Care for Educators

	Mean (SD)	Median	Range
Post (ONLY):	8.98 (1.83)	10.0	1 - 10

19. On which of the following early childhood education and/or trauma-informed care topics would you like to receive further training? (check all that apply)

	Post ONLY N (%)
a. The Impact of Caregiver Neglect on Children's Attachments, Development & Personality	11 (22.4%)
b. The Impact of Family Violence, Sexual Abuse & Addictions on Young Children	17 (34.7%)
c. Child Abuse and Neglect: How to file a Report with Dept. of Children & Families	5 (10.2%)
d. Developing an Effective Educator/Child Relationship	11 (22.4%)
e. Effective Group Management, Communication, and Structure for Challenging Children	13 (26.5%)
f. Let's Talk About Feelings: Social Emotional Learning	12 (24.5%)
g. Resiliency (1-hour film and discussion)	6 (12.2%)
h. Addressing Equity and Diversity in Early Childhood	9 (18.4%)
i. Strategies for Building Resilient Children	14 (28.6%)
j. Secondary Trauma, Burn Out, and ACES	14 (28.6%)
k. Compassion Fatigue and Resiliency Solutions	11 (22.4%)
l. Mindfulness and Coping Techniques	13 (26.5%)
m. Other topic: _____	0

20. Maslach Inventory for Educators: 22 questions are grouped into 3 categories.

	Emotional Exhaustion N (%)	Depersonalization N (%)	Accomplishments N (%)
Low	8 (17.8%)	21 (46.7%)	1 (2.2%)
Moderate	18 (40.0%)	11 (24.4%)	3 (6.7%)
High	19 (42.2%)	13 (28.9%)	41 (91.1%)
Mean (SD)	26.71 (12.21)	9.87 (5.48)	48.33 (6.12)
Median	23.0	8.0	50.0
Range	9 – 54	5 – 23	29 – 56

## Appendix 2. Coaching: Teacher Self-Evaluation (Baseline)

### 1. Program name:

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Children's Friend	1	4.0	4.8	4.8
	Children's Nest	2	8.0	9.5	14.3
	Guild	6	24.0	28.6	42.9
	Rainbow	3	12.0	14.3	57.1
	Webster Square	4	16.0	19.0	76.2
	First Friends	5	20.0	23.8	100.0
	Total	21	84.0	100.0	
Missing	System	4	16.0		
Total		25	100.0		

### 2. Classroom name:

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Preschool D	1	4.0	4.8	4.8
	PS	1	4.0	4.8	9.5
	Pre K	2	8.0	9.5	19.0
	PS 1	3	12.0	14.3	33.3
	PS 2	3	12.0	14.3	47.6
	PS 3	3	12.0	14.3	61.9
	PS 4	2	8.0	9.5	71.4
	Purple	3	12.0	14.3	85.7
	Red	3	12.0	14.3	100.0
	Total	21	84.0	100.0	
Missing	System	4	16.0		
Total		25	100.0		

### 3. How would you rate your ability to recognize behaviors that cause emotional responses in you?

	N (%)
Rarely	0 (0)
Sometimes	5 (20.0)
Most of the time	17 (68.0)
Always	3 (12.0)

### 4. How often do you use techniques to decrease your reaction to strong emotions?

	N (%)
Rarely	0 (0)
Sometimes	5 (20.0)
Most of the time	14 (56.0)
Always	6 (24.0)

5. On any given day, how many children/families would you say you greet upon entry into the classroom?

	N (%)
Some (25%)	1 (4.0)
Half (50%)	2 (8.0)
Most (75%)	11 (44.0)
All (100%)	11 (44.0)

6. Of those children, how many do you take the emotional temperature of?

	N (%)
Some (25%)	1 (4.0)
Half (50%)	3 (12.0)
Most (75%)	12 (48.0)
All (100%)	9 (36.0)

7. How would you rate your classroom in terms of calm?

	N (%)
Rarely	0 (0)
Sometimes	18 (72.0)
Most of the time	7 (28.0)
Always	0 (0)

8. How would you rate the use of “toolkit” of developmentally appropriate and accepted behavioral management strategies in the classroom?

	N (%)
Rarely	1 (4.3)
Sometimes	7 (30.4)
Most of the time	13 (56.5)
Always	2 (8.7)

9. How would you rate your knowledge of the classrooms children/families faith, culture, and bias knowledge?

	N (%)
Some (25%)	2 (8.0)
Half (50%)	9 (36.0)
Most (75%)	10 (40.0)
All (100%)	4 (16.0)

10. How many communication attempts with each family are made in a week’s time? (i.e. phone calls, daily notes, text, meetings)

	N (%)
0	0 (0)
1	0 (0)
2	0 (0)
3	8 (32.0)
4	6 (24.0)
5	6 (24.0)
6 or more	5 (20.0)

11. How would you rate your knowledge on the effects of trauma and the developing brain?

	N (%)
Some (25%)	6 (24.0)
Half (50%)	5 (20.0)
Most (75%)	13 (52.0)
All (100%)	1 (4.0)

12. How often do you practice with the children using techniques like first/then or games like memory to help the child recognize predictability per week?

	N (%)
0	0 (0)
1	2 (8.3)
2	2 (8.3)
3	3 (12.5)
4	8 (33.3)
5	6 (25.0)
6	0 (0)
7	3 (12.5)

13. How many times in a week do you get to join the children in the dramatic play area?

	N (%)
0	0 (0)
1	0 (0)
2	4 (16.7)
3	5 (20.8)
4	6 (25.0)
5	9 (37.5)

14. How many areas in the classroom would you classify as calming spaces?

	N (%)
1	4 (16.0)
2	15 (60.0)
3	5 (20.0)
4	1 (4.0)
5	0 (0)

15. On a typical day, I have a back and forth conversation with how many of the children?

	N (%)
Some (25%)	2 (8.0)
Half (50%)	2 (8.0)
Most (75%)	10 (40.0)
All (100%)	11 (44.0)

16. Does your classroom create a written behavior plan for a child with consistent pattern of challenging behaviors?

	N (%)
Never	1 (4.0)
Sometimes	7 (28.0)
Most times	8 (32.0)
Always	9 (36.0)

17. How often would you rate your learning of or referral to community resources?

	N (%)
Never	1 (4.0)
Sometimes	11 (44.0)
Most times	9 (36.0)
Always	4 (16.0)

18. Maslach Burnout Inventory (higher scores = more 'positive' endorsement of the scale)

	<b>Emotional Exhaustion</b>	<b>Depersonalization</b>	<b>Accomplishments</b>
Mean (SD)	24.1 (8.6)	7.92 (3.3)	50.6 (3.7)
Range	10-40	5-18	43-55
Possible range	9-63	5-35	8-56
Median	23.0	8.0	51.0
Low	5 (20.0%)	12 (48.0%)	0 (0)
Moderate	10 (40.0%)	10 (40.0%)	0 (0)
High	10 (40.0%)	3 (12.0%)	25 (100.0%)

## Appendix 3. Coaching: Observation (Initial Visit)

### 1. Program name

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	WCEC (Worcester Comprehensive)	2	8.7	9.5	9.5
	Children's Friend	3	13.0	14.3	23.8
	Guild	6	26.1	28.6	52.4
	Rainbow	4	17.4	19.0	71.4
	Webster Square	5	21.7	23.8	95.2
	First Friends	1	4.3	4.8	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
Total		23	100.0		

### 2. Classroom name

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Preschool D	1	4.3	4.8	4.8
	PS	1	4.3	4.8	9.5
	PreK	2	8.7	9.5	19.0
	PS 1	1	4.3	4.8	23.8
	PS 2	1	4.3	4.8	28.6
	PS 3	5	21.7	23.8	52.4
	PS 4	4	17.4	19.0	71.4
	Purple	2	8.7	9.5	81.0
	Red	4	17.4	19.0	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
Total		23	100.0		

### 3. Start and end times of observation

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		4	17.4	17.4	17.4
	1-2:30 p.m.	2	8.7	8.7	26.1
	10:00	2	8.7	8.7	34.8
	2:30-4:30	1	4.3	4.3	39.1
	8-10 a.m.	1	4.3	4.3	43.5
	8:00am-10:00am	1	4.3	4.3	47.8
	8:30-10	2	8.7	8.7	56.5
	8:30-10:00	3	13.0	13.0	69.6
	8:30-10:30	1	4.3	4.3	73.9
	8:30am-10:00am	1	4.3	4.3	78.3
	9-10:30 am	1	4.3	4.3	82.6
	9-10:30am	1	4.3	4.3	87.0



9:00 am - 10:30am	1	4.3	4.3	91.3
9:00am-10:30am	1	4.3	4.3	95.7
9:40-10:40	1	4.3	4.3	100.0
Total	23	100.0	100.0	

4. # of Children Registered # Children Present

Range	7 – 20	6 – 19
Mean (SD)	13.5 (4.7)	11.3 (4.5)
Median	14.0	11.0

5. Goal Development; open-ended comments from the coaches regarding observations from each grouping of goals:

Building a Relationship:

- Some children addressed the teacher as “teacher” rather than their name. Children hugged teachers.
- Good job was used frequently when the children followed directions to pick up materials as they moved from one free-choice activity to another in a one-hour period. Casual conversations about the immediate play activities happened.
- Good job was a standard comment. The 6 children were asked to state their last name at circle, the only instance of reference to the child. Each child was cautioned frequently to give only one anecdote to share about a personal experience.
- Teachers are attentive to children, lots of touch connection and one instance of positive family communication. Teachers seem to speak the language of many children in the classroom.
- Needs improvement: teachers positioned where they can see the whole classroom. Teachers need to speak to the behaviors and not the child; instead of good job/good boy, say “I like the way you added the circles to your structure.”
- There were many casual conversations between both of the teachers and children. The children were gently touched in 5 observed and there were 3 instances-of positive affirmation. One teacher smiled and laughed often in conversation with the children.
- The teacher had multiple conversations with the children at the water table and the art table that centered around science and social emotional issues. There were 3 to 4 “good jobs” where the teacher could have elaborated on the project itself.
- “Wake up” with hand placed gently on back. Much positive affirmation observed, teachers engaged in dramatics, construction, and game facilitation. Teacher and child leaning into each other; “Fresh, fresh food for the baby”; “It’s alright, they like to share ideas”; Child asks “Can I give a hug?”; Child and teacher hug, release, child begins playing; “Can you fold your blanket” (help each other).
- Teacher asked questions regarding home life. Teacher also commented on child’s clothes and hair in positive ways. Teacher sits with children, engages in play and conversations.
- Team wants to build relationship among children; Observed: “You can do it”, “That’s so nice of you to share your playdough”, “I saw this (book) and thought of you!”, conversations at writing table, ice, playdough, building megablocks, and during snack preparation.
- Teacher gave several hugs throughout the observation and sat with children during play. Positive affirmations, such as “thank you”, clap for (child) when he urinated in the toilet for the first time, and many “I like it”. In terms of missed opportunities, I counted 20 “good jobs” and 5 “good boy/good girl” responses. Suggestions were given to work on elaborating the behaviors of the children rather than the children themselves. I modeled this concept when one child

asked me to come over to his play area. I commented on the color and size of the structure, asked questions about various parts of his structure and encouraged this reciprocal conversation. In this sense, I am saying that I value this child, I am interested in what this child is doing, and I want to know more. We are building relationships and making connections.

- There were 5 instances of positive affirmation during free play from two teachers; they were 6 of us and as a touch connection with children were upset upon arrival or during play; they were 3 instances of positive communication children and families upon arrival to room.
- There were 3 instances of positive affirmation from educators and touch connection.
- The teacher sat down with children at the breakfast table, chatting and conversing. She also sat with 4 children closely around her while reading a story.
- Teacher displays many positive affirmations, such as “you did an amazing job on your structure”. The teacher also demonstrates reciprocal conversation exchange and the touch connection (fixing a child’s hair upon request).
- Teachers demonstrated many positive affirmations, such as, “that’s a really cool idea. Show your friends how you did it.” Teachers brought in conversations about home experiences during play interactions, such as asking a child about her car when child initiated the conversation. The teachers sat in close proximity to the children, playing and interacting with them.

#### Greetings:

- Not observed.
- Eye contact happened frequently at calendar time. Opportunities for meaningful greetings were missed. Comments on what was brought from home were made between a parent and teacher. The teacher reported that a newly enrolled child does not have a first visit before enrollment.
- Though not able to observe greetings, I scored one for making eye contact with the children as they were being given directions.
- One greeting was observed. There was immediate contact of teacher to parent. Child was greeted and welcomed into room. She was allowed to hold teacher's hand when departing from mom. Parent and teacher had small conversation about child's night.
- 3 out of 4 families who entered the classroom were not immediately greeted and the children needed help integrating into the classroom.
- Eye contact and speaking with the children at their eye level is routinely practiced by both teachers. 4 families delivered children later and all were greeted by one teacher where relevant information about the child was exchanged. One child left sick and the same exchange occurred. All children smoothly integrated into the classroom and washed hands.
- The teacher greeted each child (observed 3) and their parent. One parent shared information about the child’s morning. The teacher helped to integrate the child by making sure the child washed his hands and found an activity to do.
- Dismissal: Reciprocal exchange with parent (observed with 3 children dismissed); Child’s interest for doing activity tomorrow was acknowledged; several positive “You can...” messages; Much eye contact during both play and dismissals observed.
- Coach modeled entry into class with enthusiastic greetings, discussions, and gentle touch when asked. Teacher discussed end of day plans for a child (pick up process).
- Teachers gave eye contact to the children and families and greeted them as they entered the classroom. I only observed 3 greeting opportunities so I will try to make my next observation at an earlier time in order to see more. We discussed being in closer proximity to the child if

possible and engaging the family in more meaningful conversation, such as “How did the morning go?”.

- There were 6 instances from 2 teachers of iContact during play and during one child’s behavior.
- There were 4 instances of iContact between the children and teacher along with family exchange from drop off.
- The teacher went over to the parent to greet them and talked to both child and parent. She took the child’s hand to guide her to sink.
- This teacher smiles at those coming in the classroom, gives positive compliment, and integrates children into the classroom by having the children wash hands and finding something to play with. There were only 2 greetings observed.
- There were only 4 greetings witnessed but each one showed eye contact, family reciprocal exchange, and positive compliments. The teachers demonstrated a welcoming attitude.

#### Teacher Self-Regulation:

- Teachers regulated voice levels as needed. There were many opportunities to identify feelings and emotions. Teachers used strategies to help some children with self-regulation (breathing, jumping, music).
- Comments and corrections by the stationary teacher were made from a seated position from across the room.
- One instance of job delegation was given for the 5-minute hand to a randomly chosen child (absent jobs chart) at transition to clean up. The teacher was stationary for the time of observation and called across the room with voice modulation when a child who was directed to tidy up a certain area did not react immediately.
- Teachers seem overwhelmed with certain children and appeared to regulate room during times specific children are in distress. Teachers are firm at times. Some teachers step away, however, may not always be appropriate in the classroom. Teachers do not always seem to know job delegation.
- At times the room was very loud. Teacher’s voice was getting loud as the room was getting louder.
- One child presented with challenging behavior and one teacher spent 1-1 time with him. The teacher was prepared with strategies with time, voice and job delegations. Rather than join group at breakfast and circle, the child ate at a table for 2 and worked at the Computerworld circle time.
- The teacher implemented small, large, and individual group play. Children were engaged and calm for most of the morning. It was a bit chaotic when it was getting to be lunch time. One child began to demonstrate oppositional and aggressive behaviors (trying to hit another child playing in a different area, ripping signs off the wall, not cooperating with teacher directions). Reminders of a star sticker on her chart brought her back into compliance. Another child cried for no apparent reason. Teacher used her voice to help with positive classroom environment. Teacher sounded a bit frustrated at times by tone of voice and several eye rolls.
- Voice modulation soothing child and self with a song - 2 different times with different children; Sips of water; Emotional response about a bump, child asks teacher to check, teacher does and calms self as she replies “it’s just dry skin so not anything to worry about”, child also calms, accepting; Teacher looks to where loud sound occurred, saw it was collapsed magnetiles, states “That’s okay; they’re just magnets”

- Teacher needs to quiet voice at times. Teacher also needs to be actively engaged when lead teacher is in the classroom.
- One teacher used a bathroom break and breathing in order to self-regulate. Another teacher used humor. On one occasion, I noticed 1 of the teachers getting anxious about a child having a difficult time in an area across the room. Another teacher was handling the situation. I stopped the anxious teacher from running over to take over and suggested that she observe the other teacher instead. She picked up on several positive examples, such as, being firm, following through with the discipline, and then talking to the child about the conflict once the child was calm. I asked 1 of the teachers to smile more, perhaps helping her and the children feel more relaxed and positive.
- There were 2 instances of voice modulation from 2 teachers in 2 instances of teacher sitting and initiating activities that children could do at their leisure
- They were 2 instances of voice modulation from teacher classroom along with activities.
- The teacher gave jobs to children on 2 occasions. She tried to engage children in leisurely-paced activities and to use her voice to modulate the energy in the room. The teacher is a self-talker in that she makes negative comments out loud, gives negative movements (eye rolls), and sighs a lot.
- The teacher did less self- talk (negative attitude), less eye rolling, and sighs. The teacher stated that she started a journal and began writing down self-observations. Great idea!
- The teachers dealt with challenges in a timely manner and used their voices in appropriate manner. They shared housekeeping duties without interrupting the classroom flow.

#### Child Self-Regulation:

- The teacher made comments identifying children's feelings without asking the children themselves about what/how they were feeling. The feeling was identified as an explanation for behaviors.
- The teacher labeled her emotion of sadness: I feel sad when you don't clean up an again, I feel sad when you throw things and play in the bathroom. One child was crying and was asked: M' why are you crying? I only understand words. At circles to control children's behavior to sit still rather than provide strategies, the teacher suggested: Shake your brains, get 'em going" and "Shake your head. Get those ears open".
- There is a sign of in book areas that state emotions. This seems to be the only source of self-regulation.
- Children were asked how they feel.
- The child and other children were asked on 3 occasions: how are you feeling. What is bothering you without waiting for a response. Group time song's verse was I'm very happy for each child. Story included a teacher comment about a character who was feeling sad, but no response was elicited from any child in the group of 12.
- There are feelings charts in the room but were not applied or used for reinforcement. There were several occasions when a direction was given but no follow through.
- "Thanks for being patient"; Child having difficulty so teacher moves closer and suggests steps, child succeeds; do-over is expected with eye contact and "just push it gently, press it again, press it gently" (playing game Trouble); Teacher helps child regulate to help child regain composure and ask a peer for something calmly.
- Children were told to take belly breaths and calming measures on several occasions. One child was upset about another child "spitting" on him. Teacher didn't really solve the problem, so he

continued to be upset. Coach modeled appropriate behavior by calling him out of circle to handle the problem; discuss what is wrong, wash “spit” off neck, and let him have alone time with a book. He was ready for play after that.

- Child self-regulation team goal is to add emotion meters and increase do-over experience. A teacher mentioned it's hard to wait. Another child was negotiating a toy, and a teacher stated, "I'm not going anywhere, don't worry". Cognitive regulation: "He's asking to use it when you're done", "You can find a spot (to sit)".
- Teachers labeled the emotions of the children on several occasions. We talked about labeling the positive emotions as well as the more sullen emotions. Children need to be in the moment and be able to recognize how the joyful, more positive emotions feel too. The room needs emotion signs and emotion meters for visual context.
- There were 6 sentences where 2 teachers were able to help children describe their emotions during drop off during free play and during an argument between the children.
- There were 2 instances from a teacher to help children identify emotions and creating visual is to help children identify motives.
- The teacher tries to have children become aware of their emotions and uses some strategies to help with self-regulation. The teacher needs to work on follow through with requests for appropriate behavior.
- The teacher helped the children label their emotions and engaged the children in “do over” strategies. The children had a yoga enrichment class today.
- Teachers labeled and recognized when emotions were displayed by the children, one of the teachers kept validating a child’s anger, offered choices, and very quietly de-escalated the situation.

#### Classroom Environment:

- They have an alone space but not very soft, cozy, and inviting.
- There were 5 cabinets with labeled materials. Books were stacked on the bookshelf. Puzzles were stacked as well in the shelf. There were 2 carpets used for manipulative but no cozy space. One shelf was covered with a sheet and inaccessible. The emotion chart was hidden from view and not used. Children entered and crossed the room to the cubbies.
- There were 3 tables and cubbies located at the entry with no adult chair. There was a cozy corner with enough space for 1 child but congested with table and chair and cushions thrown in a box. Some shelves were organized. Location of the double-sided shelves blocked the view of dramatic play and some of the rest of the room. Curtains to the outside were drawn. The environment was generally controlled. Some manipulatives were visible but inaccessible until the other materials were stored. Children were remotely directed to put things back in storage throughout the observation period. No emotion chart.
- Classroom environment is hectic and unorganized. Children are allowed to play wherever and cozy spaces are not used for quiet activities or alone time. Children appear frustrated when entering room. Children do display some autonomy and do display a sense of order within the classroom. Materials seem unorganized and some areas lack stimulation.
- Materials need to be labeled. Cozy areas are book area and water table.
- Entry was smooth and welcoming for 4 families there are 4 cozy spaces and an emotion chart which was not referred to. Two children helped to set breakfast and children moved at will from one play center to another. Materials were organized with easy access.
- Areas are labeled and there are at least 3 cozy areas including one alone space.

- Children can choose to sit for activity facing away from high stimulus, e.g. at the table with magnetiles; Autonomy, such as area choice and selection of materials; “We’re at a restaurant “a child said while relaxing at dramatic play table.
- Many soothing and calming activities when needed; play dough, art table, kinetic sand.
- The environment was more relaxed than the previous visit mostly because (the) 2 of the children with the most challenging behaviors were transitioned to another classroom this week. More time was given to other children and it was less chaotic because of this action. We discussed the need to practice teacher self-regulation skills because in order to help children learn coping skill and self-regulation skill. Teachers need to in control of their feelings and actions first. Just because these two children are no longer in the room, others will come into the environment that they will find difficult to deal with. The teachers are working very hard on cleaning and organizing their environment.
- Classroom created and posted in a motion bulletin board and teachers worked with students using pictures to show how they felt today. Activities set up in quiet areas of children can play along space was not cozy
- The classroom has improved on materials organization and there were 3 instances of autonomous play from 3 children.
- Children have opportunities to choose materials and interest centers. Children tend to wander at times or go from area to area without spending much focused time in that area.
- An emotions chart is behind a shelf but a smaller one is located in the alone space. Children are given opportunities to choose their own activities.
- The teachers used many sensory activities, such as, sand table and slime with shaving cream. Children had many opportunities to choose activities and also how they could use the materials. There was ample experimentation when using slime and also many peer to peer exchanges.

#### Family Engagement:

- Did not observe.
- No engagements were visible or apparent.
- None observed but also failed to ask.
- One observation with family engagement was observed and families seemed content and welcomed to classroom.
- The program takes many pictures during the day. The program has an engaged inter-generational component. Family engagement activities are held once a month. Parent conferences are held 4 times a year. Families need to attend at least 2 or they are terminated.
- Daily notes are sent home for children who need it. Pictures of the children were above the cubbies. One call to-a family was made for a sick child.
- This program calls or contacts parents when needed. Parents are required to attend 2 conferences per year. Family engagement is a big part of the program at least 4 times per year (graduations, cooking classes, art exhibits, cook outs).
- We talked about planning a future classroom family engagement event, perhaps lunch on Valentine’s Day.
- This program continues to try to engage families and children with family breakfast, classroom Valentine’s Day celebration and a Friendship Celebration with their neighbors (patients at the nursing home).
- Parents were spoken to during drop off, ask questions and giving information on the day.

- Six instances as a peer and drop off the observe and parent phone conversations involved engagement in daily routines
- Along with parent conferences and phone conversations when needed, the teacher sends home a sticker tally sheet to inform (2) families on their child's day. They are also planning a "Friendship Party" for the end of the week with parent's invited.
- Two parent conferences were held for one of the children. One involved the parent, teacher, and mental health clinician. The other one was less formal and involved the director, parent, and teacher. The meetings were a bit stressful since mom did not want to comply with the suggestions for change. They agreed that the Sticker chart was not working for the parent so they would report daily positive behaviors and call parent with issues when needed.
- The teacher reached out to a child's mother for information (medical records). The mother responded in a positive manner. In another situation, the program helped one family by providing transportation. This in turn helped the child by having him come for a shorter day which eliminated some of his behavioral challenges.

#### Transitions:

- Transition very chaotic
- Children moved from one group activity to the next without visual or auditory cues. The pictorial schedule was not in view
- Pictorial schedule was stored and hidden. A random child was asked to use the 5-minute hand for clean-up. 2 other children went to shake the hand and were corrected for that. No other strategies other than verbal were evident.
- Advanced warning was given for transitions however, visual cues or pictorial schedule were not observed within the classroom space.
- There are few advanced warnings. The classroom doesn't have any visual cues or a picture schedule.
- There were 4 verbal advance warnings to transition to 3 group activities and dramatic play area required sign in. Children were accustomed to washing hands before breakfast with casual prompts.
- There is an elaborate picture schedule, but it was not used. Auditory cues were used most of the time; bell to signal breakfast, songs reinforce circle time rules and clean up). Scarves and music were used to compensate for not being able to go outside. One child was given a bit more time for finishing tasks and puppets were used for reinforcement of Second step activities.
- Time to get up to have snack"; Remembering letters "even when they're not in order"; Child wanting additional snack was offered water and an activity.
- Children waited a long time to brush teeth and play.
- Team goal is to increase visual cues, pictorial schedule, sensory diet provisions. Observed: Teacher calls out to group for restroom; Another teacher "P1 we have 5 more minutes"; Children select job chart; Display art when it's drying; "This is the last book"; Reading books (although in block area); Sleep conversation "Did you sleep good?"
- Even though the children waited to toilet/ coats on and line up a bit more than necessary, the children waited quietly talking with each other and helping each other with their coats. Applause and recognition were given! We discussed having toileting done during free play so that the children did not have to wait long. The teachers are in the process of creating a picture schedule.



- They were visual cues for children, so they are aware of transition times in classroom and children are reminded.
- Not observed.
- The teacher used auditory cues, words and a timer, to inform children of transitions. At one point the teacher asked one child if she needed a break. The coach also took this child for a break when needed. The teacher also uses reminders of appropriate behavioral responses.
- Teacher needs to give “visual cues”. She gives many strategies for children who are having a difficult time; time alone, calm down box, make a list for play area, and time out of circle time.
- The teachers gave many advanced warnings, auditory cues (bell), and reminders for appropriate behaviors and rules. They also used calm down songs, movement and music for wiggles, and rehearsed steps for clean-up routine/ transition to rug.

#### Play-based Interactions:

- One child briefly went into dramatic play.
- None of the above occurred other than remote verbal interactions.
- None of the above strategies were used. One child pretending he was a cat was warned 3-4 times to not touch others when using his paws.
- Children were seen in all areas of classroom including dramatic play, block area, small manipulatives and art. Children to children play was observed and shown to be effective throughout the classroom. Teacher to child play was limited and some opportunities for scaffolding were missed.
- Very active dramatic play. Several opportunities for problem solving rehearsals were missed but several were exhibited.
- There were 2 telephone interaction with no further conversation on those calls but hello. One teacher asked the child what his phone number was but without follow through.
- Two children spent over 30 minutes in the dramatic play area role playing mom and baby. Scripted stories and calming activities would be a possible strategy for the child who was losing self-control towards the end of the morning.
- Cooperative dramatic play getting “ready for a trip”; “Show me which you could do”; Behavior rehearsal when dice roll is unfavorable (playing dice game Trouble.”
- Child was given opportunities to be alone if needed. Lights turned off to remind children to quiet voices.
- Dramatic play, behavioral rehearsals and a bit of situation role play was used for play based interactions.
- Nothing observed.
- There were two instances of dramatic role-play between the teacher and two children.
- The dramatic play area is used for role playing and behavioral rehearsal.
- The teacher engaged the children with behavioral rehearsals, first-then experiences, and a memory recall game,
- Teachers gave reminders for appropriate tone of voice, rules for play, used memory recall for routine songs.

6. Teaching Team & Coaches Areas of goal interest:

<b>Teacher Self-Regulation</b> N (%) 6 (26.1)	<b>Classroom Environment</b> N (%) 8 (34.8)	<b>Transitions</b> N (%) 9 (39.1)	<b>Family Engagement</b> N (%) 2 (8.7)
<b>Greetings</b> N (%) 5 (21.7)	<b>Building Relationships</b> N (%) 6 (26.1)	<b>Play-based approach</b> N (%) 5 (21.7)	<b>Child Self-Regulation</b> N (%) 7 (30.4)

7. What is the level of education for each member of the teaching team? N (%) in each cell

<b>Lead Teacher</b>	HS diploma 2 (15.4)	Certificate 0 (.0)	Associates 0 (0.0)	Bachelors 11 (84.6)
<b>Teacher</b>	HS diploma 2 (22.2)	Certificate 1 (11.1)	Associates 1 (11.1)	Bachelors 4 (44.4) Post-graduate 1 (11.1)
<b>Teaching Assistant</b>	HS diploma 1 (25.0)	Certificate 1 (25.0)	Associates 2 (50.0)	Bachelors 0 (0.0)

8. How many years of early education experience does each of the team members have? N (%) in each cell

<b>Lead Teacher</b>	< 1 year 0 (0.0)	1-3 years 1 (8.3)	4-6 years 1 (8.3)	7-9 years 5 (41.7)	10 or more years 5 (41.7)
<b>Teacher</b>	< 1 year 1 (12.5)	1-3 years 0 (0.0)	4-6 years 1 (12.5)	7-9 years 1 (12.5)	10 or more years 5 (62.5)
<b>Teaching Asst.</b>	< 1 year 0 (0.0)	1-3 years 2 (50.0)	4-6 years 2 (50.0)	7-9 years 0 (0.0)	10 or more years 0 (0.0)

9. Specific goals for the teaching team and the coach to work on moving forward (chosen from the 8 groupings):

Goal 1

- Transitions (3)
- Classroom Environment - soothing entry, cozy spaces, emotion chart, materials organization
- Classroom environment
- Transitions increase visual cues, pictorial schedule, sensory diet provisions
- Creating visual schedule for children to see daily schedule
- Splitting groups in the morning to help ease transitions to breakfast and morning gym
- Building relationships (affirmations and reciprocal conversations)
- Build classroom environment
- Continue splitting group during lead teachers maternity leave to help with the transitions
- Teacher self-regulation
- Greetings re emotional temperatures

Goal 2

- Greetings (2)
- Transitions - visuals, pictorial schedule, sensory diet needs

- Family engagement
- Building relationships
- Building relationships among children more
- Splitting circle time to allow for smaller waiting periods and easier transition
- Build strong relationships between staff and children
- Create a visual schedule large enough for children to see day-to-day activities
- Child self-regulation
- Teacher self-regulation
- Child self-regulation re emotion meters

### Goal 3

- Transitions (2)
- Play based approaches
- Play-based interactions
- Child self-regulation add emotion meters and increase do-over experiences
- Role playing emotions using puppets to help children identify emotions
- Help children with self-regulation
- Create opportunities for children to role-play to work on identifying feelings
- Play based strategies
- Child self-regulation
- Classroom environment re: non-stimulating areas

### Goal 4

- Classroom environment
- Greetings
- Play-based approach
- Visual cues of emotions to help children identify their emotions
- Child self-regulation
- Building relationships
- Play based interactions
- Building relationships

## 10. Coach Agenda/Notes

- Talk to teacher about being fully engaged even though another strong teacher is in the room.
- Where will pictorials work best? Sensory diet - what and how? Job choices - organization and autonomy; classroom environment changes - which and how?
- We discussed team self-evaluations and my observations on 1/20. Suggestions for goals were elicited with review of our discussions. The camaraderie of Brittany and Destiny is refreshing with shared laughter. For example, when asked about the cubbies' location across the room from the entrance, they both burst into laughter since the cubbies are built into the wall. They recognize the location could be at the entrance for the families' convenience. I suggested they keep handy their toolkit for reference to dig out strategies to boost resilience.
- We discussed opportunities that may have been missed on the first observation day of 1/21. Lori has experience and knowledge of ECE as an early educator and understood the references I pointed out in the observation. We discussed all the goals observed and her self-evaluation

responses from which Lori selected the above 4 goals. I stressed the difference between controlling behaviors and supporting children's learning of self-regulation skills to bolster resilience.

- What is a sensory diet? What can change in the environment for first impact, when and how? Also discussed helping children learn how to join play. Emotions board and an emotions flip book.
- Classroom seems to be doing well with primary goals but wants to continue on having safety practices in gym.
- Visit went well; not all kids in attendance because of weather. Was able to meet with Lead, one-on-one to discuss goals while she is gone.
- Teacher needs to be aware of self-talk and negative body language.
- The journal was a great idea and encouraged to continue. The teacher needs to "pick her battles" and focus on priority challenging behaviors.
- Review observation data. Which changes could cause first impact and how could it be implemented? Consider tracking emotional temperatures, add a visual schedule arrow/star indicating segments of daily activity. Shift from behavior management mindset to resiliency-building mindset.

#### 11. Additional Materials or Workshops requested by the teaching team

- Diversity activities.
- Team would like a copy of Sorrels book; Colleen has many resources from a recent class. She will begin bringing them to the environment; Choices for sensory containers sent by email to the team.
- This team would like a workshop on building relationships with families. Brittany will speak with Summer about parent conferences since Destiny stated that in her 4 years of working at Children' Friend, she had never seen or heard of a parent conference.
- Lori expressed the need for a workshop on communication with families to work as a team to better support the child (without putting the parents on the defensive).
- A copy of Sorrels book and link to the webinar (link will be sent to team via email). Strategies for teaching children various approaches to join play. Sensory diet information.
- Team looking for help with creating areas within the classroom. Looking for different charts to help with daily schedule.
- Schedule of the day template; Mindfulness for teacher ideas.
- Shared PLC opportunity with teams.
- Discussed PLC.
- Building relationships PLC Article: Teachers Have Hot Buttons Too (p.111) Uncover The Roots of Challenging Behavior by Michelle Salcedo Figure 5.1 The MoNSTer Response to Challenging Behavior (p. 104) Uncover The Roots of Challenging Behavior
- Building relationships - PLC Sorrels book; Rethinking Group Time (p. 194-198) Visual pictures Activity - Is this being a good friend? Social story - How to be a good friend. Busy bags for transition time.
- Webinar link to teachers, sensory diet ideas from Sorrels book ~ p. 96. Emotional temperature tracking tool.

## Appendix 4. Coaching: Initial Outcomes (Jan 2020)

### 1. Program name

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Children's Friend	1	7.7	9.1	9.1
	Children's Nest	1	7.7	9.1	18.2
	Guild	2	15.4	18.2	36.4
	Rainbow	3	23.1	27.3	63.6
	Webster Square	3	23.1	27.3	90.9
	First Friends	1	7.7	9.1	100.0
	Total	11	84.6	100.0	
Missing	System	2	15.4		
Total		13	100.0		

### 2. Classroom name

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	PS	1	7.7	9.1	9.1
	PreK	1	7.7	9.1	18.2
	PS 1	1	7.7	9.1	27.3
	PS 2	1	7.7	9.1	36.4
	PS 3	2	15.4	18.2	54.5
	PS 4	3	23.1	27.3	81.8
	Purple	1	7.7	9.1	90.9
	Red	1	7.7	9.1	100.0
	Total	11	84.6	100.0	
Missing	System	2	15.4		
Total		13	100.0		

	# of Children Registered	# Children Present
Range	7 – 21	0 – 20
Mean (SD)	15.5 (4.8)	12.5 (4.8)
Median	16.0	14.0

### 3. How many times was a child removed from the classroom due to challenging behavior (not physical illness) in the last month:

	N (%)
0 times	5 (38.5)
1 time	4 (30.8)
2 times	1 (7.7)
>2 times	3 (23.1)
If greater than 2 times, how many:	
4 (1) NOTE: This indicates that 1 person noted 4 times	
6 (1) NOTE: This indicates that 1 person noted 6 times	
10+ (1) NOTE: This indicates that 1 person noted 10+ times	

4. How many different children had to be removed from the classroom due to challenging behavior (not physical illness) in the last month?

	N (%)
0 children	4 (30.8)
1 child	6 (46.2)
2 children	2 (15.4)
>2 children	1 (7.7)
If greater than 2 children, how many:	
3	(1)

5. How many times was a single child's parent contacted about challenging behavior in the program:

	N (%)
0 times	4 (30.8)
1 time	5 (38.5)
2 times	2 (15.4)
>2 times	2 (15.4)
If greater than 2 times, how many:	
4	(1)
10+	(1)

6. How many different families were contacted (phone, in-person, electronic or paper) about their child's challenging behavior in the last month?

	N (%)
0 children	4 (30.8)
1 child	5 (38.5)
2 children	1 (7.7)
>2 children	3 (23.1)
If greater than 2 children, how many:	
3	(3)

7. How many times was a request for additional staff or substitute staff in the classroom due to child's challenging behaviors in the last month?

	N (%)
0 times	5 (38.5)
1 time	4 (30.8)
2 times	1 (7.7)
>2 times	3 (23.1)
If greater than 2 times, how many:	
3	(1)
4	(1)
20	(1)

8. Of the challenging behavior requests, how many children were involved in the last month?

	N (%)
0 children	2 (15.4)
1 child	5 (38.5)
2 children	2 (15.4)
>2 children	4 (30.8)
If greater than 2 children, how many:	
3	(4)

9. How many times did additional staff or substitute staff enter in the classroom due to the child's challenging behavior in the last month?

	N (%)
0 times	5 (38.5)
1 time	3 (23.1)
2 times	1 (7.7)
>2 times	4 (30.8)
If greater than 2 times, how many:	
3	(2)
4	(1)
20	(1)

10. Has there been a child expelled, suspended or terminated from the program in the last month?

	N (%)
No	11 (84.6)
Yes	2 (15.4)
If Yes, how many:	
1	(2)

If a child has been expelled, suspended or terminated from the program in the last month, could you please briefly describe the reason?

- Ability for parents to get services – ignored behavior.
- Assaultive behavior to children/staff. Leaving group without permission. Attitudes which negatively impact learning environment.

11. How many times had there been a behavior plan developed for a child in the last month?

	N (%)
0 times	5 (38.5)
1 time	7 (53.8)
2 times	1 (7.7)

12. How many different children had behavior plans been developed for in the last month?

	N (%)
0 children	5 (38.5)
1 child	6 (46.2)
2 children	1 (7.7)
>2 children	1 (7.7)
If greater than 2 children, how many:	
3	(1)

13. Do you think that children were absent from the program due to challenging behaviors?

	N (%)
No	9 (69.2)
Not sure	3 (23.1)
Yes	1 (7.7)

14. How many times had a child been absent from the program due to challenging behaviors in the last month?

	N (%)
0 times	11 (91.7)
1 time	1 (8.3)
Missing values: 1	

15. How many different children been absent from the program due to challenging behavior in the last month?

	N (%)
0 children	11 (91.7)
1 child	1 (8.3)
Missing values: 1	

16. Were you or your co-teacher/teaching assistant absent from the program in the last month due to children's challenging behaviors?

	N (%)
No	12 (92.3)
Not sure	1 (7.7)
Yes	0 (0)

17. Have you filed any incident reports due to possible trauma-related behavior issues such as biting, hitting, injuries from thrown objects or physical fights in the last month?

	N (%)
0 times	5 (38.5)
1 time	4 (30.8)
2 times	1 (7.7)
>2 times	3 (23.1)
If greater than 2 times, how many:	
3	(1)
5	(1)
5+	(1)

18. How many different children have you filed incident reports due to possible trauma-related behaviors for in the last month?

	N (%)
0 children	6 (46.2)
1 child	5 (38.5)
2 children	0 (0)
>2 children	2 (15.4)



If greater than 2 children, how many:

3+ (1)

5 (1)

If you have filed incident reports due to possible trauma-related behavior in the last month, can you please describe the circumstances?

- Assaultive behavior to teacher/peers. Attitudes which negatively affect learning environment.
- Child bit 2 children when area was busy/other child had something they wanted. Possibly trauma-related due to fairly recent change in family structure (divorce).
- Disagreement between 2 children. One child scratched the other on the face, refused to discuss the problem with peer or teacher. This escalated to hiding in an area sectioned off from children, and the child start hitting and kicking staff.
- Flight.
- Hitting teachers and other children. Physically over assertive (i.e., grabbing toys). Aggressive in play, hitting.
- Throwing toys. Hitting children and teachers. Biting.
- 

19. Have there been any changes in staff in this classroom in the last month?

N (%)

No 7 (53.8)

Yes 6 (46.2)

If Yes, did the staff get transferred to another classroom?

- In this classroom, 1 teacher transferred and one stayed in the classroom.
- Maternity, study abroad.
- No.
- No, staff holiday time off coverage was the temporary staffing change.
- Rotating schedules.
- Staff holiday scheduling.

20. If staff had left the program in the last month, was it due (in whole or in part) to children's challenging behaviors?

N (%)

No 11 (100.0)

Yes 0 (0)

Missing values: 2

If staff have left the program due in whole or in part to children's challenging behaviors in the last month, can you please describe the circumstances?

- Staff remain in the same classroom, however, in the last month staff changes were due to substitute for holiday time off coverage.

Note: While no one said 'yes' to the above question, one person chose to complete the open-ended follow-up question.

## Appendix 5. Coaching: Regular Outcomes (Jan & Feb 2020)

### 1. Program name

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	WCEC (Worcester Comprehensive)	2	8.0	8.3	8.3
	Children's Friend	8	32.0	33.3	41.7
	Guild	2	8.0	8.3	50.0
	Rainbow	4	16.0	16.7	66.7
	Webster Square	5	20.0	20.8	87.5
	First Friends	3	12.0	12.5	100.0
	Total	24	96.0	100.0	
Missing	System	1	4.0		
Total		25	100.0		

### 2. Classroom name

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Preschool D	1	4.0	4.2	4.2
	PS	5	20.0	20.8	25.0
	PreK	3	12.0	12.5	37.5
	PS 1	4	16.0	16.7	54.2
	PS 2	1	4.0	4.2	58.3
	PS 3	2	8.0	8.3	66.7
	PS 4	6	24.0	25.0	91.7
	Purple	1	4.0	4.2	95.8
	Red	1	4.0	4.2	100.0
	Total	24	96.0	100.0	
Missing	System	1	4.0		
Total		25	100.0		

3. # of Children Registered	Session #2	Session #3
Range	7 – 20	7 – 20
Mean (SD)	13.3 (4.8)	12.7 (4.9)
Median	14.0	11.5

4. # Children Present	Session #2	Session #3
Range	0 – 18	7 – 17
Mean (SD)	9.9 (4.3)	10.3 (3.8)
Median	8.0	8.0

### 5. How many times was a child removed from the classroom due to challenging behavior (not physical illness) since the last coaching visit:

	N (%)	Session #2	Session #3
0 times	13 (52.0)	7 (53.8)	6 (50.0)
1 time	3 (12.0)	1 (7.7)	2 (16.7)

2 times	6 (24.0)	3 (23.1)	3 (25.0)
>2 times	3 (12.0)	2 (15.4)	1 (8.3)

If greater than 2 times, how many:

3 (2) *NOTE: This indicates that 2 people noted 3 times.* [from session #2]

6 (1) *NOTE: This indicates that 1 person noted 6 times.* [from session #3]

6. How many different children had to be removed from the classroom due to challenging behavior (not physical illness) since the last coaching visit?

	N (%)	Session #2	Session #3
0 children	14 (56.0)	7 (53.8)	7 (58.3)
1 child	7 (28.0)	4 (30.8)	3 (25.0)
2 children	3 (12.0)	2 (15.4)	1 (8.3)
>2 children	1 (4.0)	0 (0)	1 (8.3)

If greater than 2 children, how many:

3 (1) [from session #3]

7. How many times was a single child's parent contacted about challenging behavior since the last coaching visit?

	N (%)	Session #2	Session #3
0 times	13 (52.0)	6 (46.2)	7 (58.3)
1 time	3 (12.0)	1 (7.7)	2 (16.7)
2 times	8 (32.0)	5 (38.5)	3 (25.0)
>2 times	1 (4.0)	1 (7.7)	0 (0)

If greater than 2 times, how many:

3 (1) [from session #2]

8. How many different families were contacted (phone, in-person, electronic or paper) about their child's challenging behavior since the last coaching visit?

	N (%)	Session #2	Session #3
0 children	15 (60.0)	6 (46.2)	9 (75.0)
1 child	7 (28.0)	4 (30.8)	3 (25.0)
2 children	3 (12.0)	3 (23.1)	0 (0)
>2 children	0 (0)	0 (0)	0 (0)

9. How many times was a request for additional staff or substitute staff in the classroom due to child's challenging behaviors since the last coaching visit?

	N (%)	Session #2	Session #3
0 times	15 (60.0)	9 (69.2)	6 (50.0)
1 time	6 (24.0)	2 (15.4)	4 (33.3)
2 times	2 (8.0)	2 (15.4)	0 (0)
>2 times	2 (8.0)	0 (0)	2 (16.7)

If greater than 2 times, how many:

3 (1) [from session #3]

4 (1) [from session #3]

10. Of the challenging behavior requests, how many children were involved since the last coaching visit?

	N (%)	Session #2	Session #3
0 children	8 (33.3)	6 (46.2)	2 (18.2)
1 child	11 (45.8)	5 (38.5)	6 (54.5)
2 children	3 (12.5)	1 (7.7)	2 (18.2)
>2 children	2 (8.3)	1 (7.7)	1 (9.1)
If greater than 2 children, how many:			
3 (1)	[from session #2]		
4 (1)	[from session #3]		

11. How many times did additional staff or substitute staff enter in the classroom due to the child's challenging behavior since the last coaching visit?

	N (%)	Session #2	Session #3
0 times	15 (60.0)	10 (76.9)	5 (41.7)
1 time	5 (20.0)	1 (7.7)	4 (33.3)
2 times	1 (4.0)	1 (7.7)	0 (0)
>2 times	4 (16.0)	1 (7.7)	3 (25.0)
If greater than 2 times, how many:			
3 (3)	[1 from session #2 and 2 from session #3]		
4 (1)	[from session #3]		

12. Has there been a child expelled, suspended or terminated from the program since the last coaching visit?

	N (%)	Session #2	Session #3
No	23 (95.8)	13 (100.0)	10 (90.9)
Yes	1 (4.2)	0 (0)	1 (9.1)

Missing values: 1

If Yes, how many:

1 (1) [from session #3]

If Yes, please describe the reason:

- Spitting at teacher, threw chair at teacher.

13. How many times had there been a behavior plan developed for a child since the last coaching visit?

	N (%)	Session #2	Session #3
0 times	22 (88.0)	10 (76.9)	12 (100.0)
1 time	3 (12.0)	3 (22.1)	0 (0)
2 times	0 (0)	0 (0)	0 (0)
>2 times	0 (0)	0 (0)	0 (0)

14. How many different children had behavior plans been developed for since the last coaching visit?

	N (%)	Session #2	Session #3
0 children	22 (91.7)	10 (83.3)	12 (100.0)
1 child	1 (4.2)	1 (8.3)	0 (0)
2 children	1 (4.2)	1 (8.3)	0 (0)
>2 children	0 (0)	0 (0)	0 (0)
Missing values: 1			

15. Do you think that children were absent from the program due to challenging behaviors?

	N (%)	Session #2	Session #3
No	23 (92.0)	11 (84.6)	12 (100.0)
Not sure	2 (8.0)	2 (15.4)	0 (0)
Yes	0 (0)	0 (0)	0 (0)

16. How many times had a child been absent from the program due to challenging behaviors since the last coaching visit?

	N (%)	Session #2	Session #3
0 times	24 (96.0)	13 (100.0)	11 (91.7)
1 time	1 (4.0)	0 (0)	1 (8.3)
2 times	0 (0)	0 (0)	0 (0)
>2 times	0 (0)	0 (0)	0 (0)

17. How many different children been absent from the program due to challenging behavior since the last coaching visit?

	N (%)	Session #2	Session #3
0 children	25 (100.0)	13 (100.0)	12 (100.0)
1 child	0 (0)	0 (0)	0 (0)
2 children	0 (0)	0 (0)	0 (0)
>2 children	0 (0)	0 (0)	0 (0)

18. Were you or your co-teacher/teaching assistant absent from the program since the last coaching visit due to children's challenging behaviors?

	N (%)	Session #2	Session #3
No	24 (96.0)	13 (100.0)	11 (100.0)
Not sure	0 (0.0)	0	0
Yes	0 (0.0)	0	0

Missing values: 1

19. Have you filed any incident reports due to possible trauma-related behavior issues such as biting, hitting, injuries from thrown objects or physical fights since the last coaching visit?

	N (%)	Session #2	Session #3
0 times	20 (80.0)	11 (84.6)	9 (75.0)
1 time	3 (12.0)	1 (7.7)	2 (16.7)
2 times	0 (0)	0 (0)	0 (0)
>2 times	2 (8.0)	1 (7.7)	1 (8.3)

If greater than 2 times, how many:

3 (1) [from session #2]

6 (1) [from session #3]

20. How many different children have you filed incident reports due to possible trauma-related behaviors for since the last coaching visit?

	N (%)	Session #2	Session #3
0 children	21 (84.0)	11 (84.6)	10 (83.3)
1 child	3 (12.0)	2 (15.4)	1 (8.3)
2 children	1 (4.0)	0 (0)	1 (8.3)
>2 children	0 (0)	0 (0)	0 (0)

If you have filed incident reports due to possible trauma-related behavior since last coaching visit, can you please describe the circumstance?

- This child did harm another child when upset and angry. There were toys thrown that hurt another child.

21. Have there been any changes in staff in this classroom since the last coaching visit?

	N (%)	Session #2	Session #3
No	18 (72.0)	9 (69.2)	9 (75.0)
Yes	3 (12.0)	2 (15.4)	1 (8.3)
Yes, staff	4 (16.0)	2 (15.4)	2 (16.7)

transferred to another classroom?

If staff transferred to another classroom, please describe:

- No/teacher on medical leave for 1 week. [from session #3]
- Some staff were out due to cold/flu. [from session #2]
- Yes. [from session #3]
- Yes, the staff member is in "classroom 1" which is a toddler class. [from session #2]

22. If staff had left the program since the last coaching visit, was it due (in whole or in part) to children's challenging behaviors?

	N (%)	Session #2	Session #3
No	24 (96.0)	13 (100.0)	11 (91.7)
Not sure	1 (4.0)	0 (0)	1 (8.3)
Yes	0 (0)	0 (0)	0 (0)