Executive Summary:

Quality Improvement Initiative Evaluation

“We have to be prepared to give children a learning environment and a safe environment, and you have to have a quality environment that meets licensing requirements and school readiness standards. We are educators and not babysitters. To meet the standards of our competition, we have got to be ready to have a structured program. In order to do that, you have to have the tools. With the grant, I was able to get the quality and quantity of materials I needed without going into debt. It made me committed to what I was doing.”

–FCC Provider and QII Participant

Prepared for:
Every Child Counts First 5 Alameda

Prepared by:
LFA (LaFrance Associates, LLC)

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**Introduction**

Every Child Counts’ Quality Improvement Initiative (QII) provides a full set of quality-improvement resources to participating child care programs: a nationally recognized assessment tool, group trainings, one-on-one onsite training, a collaborative planning effort, and funding to make suggested improvements. Since 2001, 38 centers and family child care homes, accounting for 46 classrooms, have participated in the program. Every Child Counts engaged the services of LFA (LaFrance Associates, LLC) to answer the following research questions, using the methods listed below.

**Evaluation Questions**

1. To what degree was the development of QII a useful and/or effective process, from the perspective of various stakeholders?
2. What changed at participating child care programs as a result of the initiative?
3. How did the initiative change the understanding of, and perception of, quality child care among staff at participating agencies?
4. What should the next steps be for QII?

**Program Results**

LFA found that QII developed through a useful and effective process, that there were positive changes in the quality of childcare environments at participating centers and FCC homes particularly in the areas of arrangement and use of space and appropriate furnishings, and participants in the QII program have experienced change in terms of their sensitivity to and understanding of “quality” child care. The following page provides a summary of findings organized by evaluation question.

**Research Methods**

- Seven interviews with a diverse set of informants, including staff, Advisory Board members, and consultants.
- Survey translated into Chinese and Spanish, with interpretation available: 102 of 150 surveys returned, for 67% response rate
- Four focus groups; two in English, one each in Cantonese and Spanish.
- Analysis of initial and follow-up scores of ECERS-R/FDCERS scale for 41 classrooms from 2001-2002 grant cycle.

**Purpose of QII:**

Participants Have a Clear Understanding

According to participants, the purposes of QII include:

- Improving the environment for quality child care
- Providing quality equipment and learning materials for children
- Improving the quality of providers through education and training
- Financially supporting the field to improve the quality of care
- Increasing awareness of the standards of quality child care
Evaluation Question #1: To what degree was the development of the Quality Improvement Initiative in Alameda County a useful and/or effective process, from the perspective of various stakeholders?

- Stakeholders involved in the initial development reported that their roles were clear and appropriate.
- Working in ECC’s experiment-friendly environment allowed staff the flexibility to adjust to realities of implementation.
- QII program design was modified based on what QII learned during implementation.

Evaluation Question #2: What changed at participating child care programs as a result of the initiative?

Changes to both centers and FCC programs followed a similar pattern in terms of ECERS-R and FDCERS scores for the 2001-2002 grantees (see table below). Scoring variance among assessors (or, inter-rater reliability) is a known issue when using Harms scales. Other localities, here in the Bay Area and nationwide, have experienced similar issues. ECC has increased the number of group trainings required of assessors in an effort to improve inter-rater reliability.

“Once we had to meet certain criteria for funding, and we were able to write other grants, we found out we could get a grant for another purpose, to do something else to improve the program. It is a stepping stone, recognizing that you have this skill. Once you’ve done it once, you can do it a million times.”

–QII Participant

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<tr>
<th>Center Changes</th>
<th>FCC Changes</th>
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<tr>
<td>25% of classrooms’ ECERS-R Space &amp; Furnishings subscale scores increased by &gt;1.0 point</td>
<td>Results similar to centers with regard to changes in subscale scores: Space scores improved dramatically, while Language scores decreased for over half of FCCs</td>
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<td>83% of classrooms’ ECERS-R Language &amp; Reasoning subscale scores decreased</td>
<td>FCC staff reports (like centers) indicate that all areas measured by FDCERS improved</td>
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<td>Survey respondents reported improvement in all subscales and items measured by ECERS-R</td>
<td>New &amp; age-appropriate materials &amp; furnishings and changes to processes &amp; space arrangement</td>
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Evaluation Question #3: How did the initiative change the understanding of, and perception of, quality child care among staff at participating agencies?

One teacher noted that having all of the centers’ classrooms assessed had changed the way teachers think about what’s available to them and the children. Rather than viewing each classroom as a separate entity, the Director reports that teachers now have more of a center-wide vision.

For this center, participation in the Quality Improvement Initiative has brought to teachers a sense of the center as a system of care.

Other changes participants noted include:

- **Over half (58%)** of center-based respondents say they have learned more about how to provide high quality care. Another third (34%) said they had learned “somewhat” more.
- **Seven in ten (70%)** center-based respondents report that they talk more about high quality care at their center.
- **Nearly all (96%)** FCC respondents say they have learned more about how to provide high quality care.

**Looking Ahead**

As Every Child Counts continues to refine the Quality Improvement Initiative, staff should:

- Continue to pay attention to language issues, particularly as they impact the application process;
- Continue to find ways to streamline application & reporting processes; and
- Consider separating the assessor & consultant roles as another strategy to improve inter-rater reliability.

As the program design is adjusted, ECC should ensure that there is alignment with its other quality child care efforts and keep in mind budget issues as the Partners for Inclusion Model is implemented so that QII can continue to satisfy participants and attain desired results.

By building on the solid foundation established in the pilot years of QII, ECC can continue to strengthen and influence the system of early care and education in Alameda County for the benefit of our community’s children and families.

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**Building a Shared Understanding of Quality**

When asked “How do you define ‘quality child care?’” center-based staff and FCC providers said it includes:

- A safe and loving environment
- Experienced, professional staff/caregivers who understand child development
- A focus on education and children’s learning
- A comprehensive approach to childcare
- Meeting the needs of parents and families