# 2015 CCPRC Annual Meeting Session Summary: Workshop B-5

**Session:** Workshop B-5 New Directions in Assessing Program Quality and Implementation: Updates from Two Measurement Development Projects. 12.02.15

# 1. Descriptive Information

Workshop B-5 Lafayette Park/Farragut Square

New Directions in Assessing Program Quality and Implementation: Updates from Two Measurement Development Projects.

This workshop will introduce new tools that rely on implementation science for assessing different aspects of program quality: (1) Early Childhood Quality Improvement Pathway System (EquiPS), and (2) Assessing the Implementation and Cost of High-Quality Early Care and Education (ECE-ICHQ). Each tool is designed to assess quality features in both center-based and family child care programs.

#### **Facilitator**

 Rena Hallam, University of Delaware

#### **Presenters**

- Deborah Cassidy, University of North Caroline-Greensboro
- Gretchen Kirby, Mathematica Policy Research (MPR)
- Kimberly Boller, MPR
- Pia Caronongan, MPR

#### **Discussant**

#### Scribe

• Danielle Hegseth, Child Trends

- 2. Documents in Session Folder (Please list any electronic documents or web links used during the session.)
  - PowerPoint slides
  - Implementation science workgroup contacts and publications were linked/referenced
  - Project contact information provided

## 3. Brief Summary of Presentations

Introduction to implementation science:

(OPRE implementation science workgroup that's open for anyone to join). This is the study of how programs get done in the real world, how programs are really operating in practice, in the "messy" world. What does the adaptation or translation look like? What does it take to make it happen? And how does this happen in different settings, what are the supports? Today we'll focus on organizational readiness, climate, and leadership – and supports for implementation, capacity building.

Why do we use the term "implementation science?" Other disciplines have used this term which has resulted in a whole field of study. Implementation science is the study of the processes for how evidenced-based practices can be embedded into the real life of programs.

# Summary of Presentation #1: An Approach to Measuring Implementation from the ECE-ICHQ Project

Gretchen Kirby – this project explored the key implementation factors necessary to deliver high quality child care. We know centers vary in their capacity to implement different aspects of quality. One goal is to measure the cost of implementation and within center-based programs serving child birth to 5.

The project has completed a literature review and framework – these products guided the development of data collection tools. We are piloting these tools in a small group of sites in early 2016. This work will inform measures and instrument development, a field test of these instruments will be conducted in the fall of 2017, a user's manual will be created and dissemination of tools and manual will happen in 2019.

These measures of implantation and cost will be used together to shed light on what it really takes to achieve high quality in a center – not to assess quality. A cost measure will include how centers allocate their resources. The goal is to help the field decipher why quality is achieved and how – this may occur in implementation with a different allocation of resources even

with a similar total cost. What does it take to make quality happen, what is the relationship between implementation and costs, and what are the variations in organizational capacity to support implementation?

### Conceptual Framework:

Shows that we'll be measuring how what happens inside a center can lead to high quality. This framework includes the key functions of a center and their cost. We expect to see all of these in centers. We expect the size of each "gear" or function may vary from center to center, while being tied together by the overarching organizational capacity to support implementation.

### This capacity factors include:

Openness to change (ability to change and adapt; use of staff input), work climate (shared goals and decisions making, supported by communication), and supports and infrastructure (clear org leadership and responsibility; individuals are held accountable for specific tasks; commitment of resources including but not limited to financial resources). These are rough categorizations and have lengthier lists than what is presented here.

It is difficult to isolate any one of these factors to identify how they contribute to implementation; the combination of factors can be very different from center to center. For example, a center with very strong leadership can overcome weaker resources in other areas. However we know some key activities:

- Staff selection
- Selection and use of tools
- Training
- Coaching and TA
- Quality assurance/quality improvement

These activities are integrated and compensatory – there can still be a mix of level of each factor – with intentional hiring but less training support. Measuring consistency, prevalence, and the stage of implementation are keys for measuring overall program implementation. For data collection, we're using document review, questionnaires, interviews – all tools are structured around elements of the conceptual framework.

A lot of information is needed to determine where the key elements of implementation reside. We can measure how, but not so much "how well." We will get as much information about the processes, but we can't necessarily assess quality – for example, we'll know how training is implemented but not how well it's working.

This project will yield a set of measures that will need to be tested in the field by other studies, larger studies, but will be a great resource.

# Summary of Presentation #2: EQuIPS: Early Childhood Quality Improvement Pathway System

This intent of this project is to develop a program quality measure designed for use in QRIS. This work is based on implementation science but today we're going to look further down the road with where we're going. The intent of EQuIPS is to identify pathways for center-based and family child care programs to improve experiences for children and families.

# Conceptual Framework:

Key areas include child experiences as central focus, factors that affect child experiences (relationships, continuity of services, etc.), and program administration and organizational climate (so often it is frustrating not to measure the connection between policies and practice in a program), family and community partnerships, support for children's development and learning, planning and assessment, daily interactions and routines, learning opportunities, and materials and space. The idea is that these all fit together to provide a portrait of activities that support a high quality center.

Sources of evidence for implementation include:

- Document review activity planning, assessment, all documented processes; evaluated using rubrics, the idea is to look at these things as a mechanism to help programs improve.
- Interviews directors, teachers; length is a bit of an issue, open-ended questions have draft rubrics which will be continually refined as they're used.

• Observations – teachers and children, classroom; partially time sampling, global ratings across the whole time period, identify any red flags (centers and FCCs).

We anticipate that the EQuIPS tool will include as assessment of current practices by the program, an off-site review, followed by an on-site verification process. We are attempting to design to tool to be useful to both technical assistance providers and programs.

Examples of questions used in data collection followed.

# 4. Brief Summary of Discussion

**EQuIPS:** Do you have a composite score for the different elements to make one final cores? No. We've talked about it but the idea of a portrait which displays a programs level of implementation across different practice areas.

**ECE-ICHQ:** Not going to look at the link to improved child outcomes? This is really a measures development project – so we're taking a step back and trying to develop measures for what's behind the checklist – what does it mean to have curriculum and assessment? We want to put the whole implementation story together.

But somewhere in the model, shouldn't there be a link to child outcomes? The implementation piece is really drawing from implementation science and then we also looked at the literature around high quality child care – plus the cost of quality relationships. This is really a measurement framework – not a logic model.

What kind of programs are you planning on? The important thing we want to do in the case study is capture all the variation out there, so there are a couple key dimensions: 1) Funding sources, no public or mixed funding and high subsidy; 3) Whether they serve infants and toddlers or not; and 3) The level of quality based on QRIS ratings. We thought this would show the most variation in how centers are implementing quality as well as the cost variations.

HS with performance standards, CQI is a common topic, the assessors and TAs will need some help moving to this too – can you all speak to this? The short answer is yes. The long answer is that this is something we really need to give a lot of thought to. It has a lot to do with how we think about implementing QRIS, doing TA – across the country. We hope any state that wants to use this can take it away and make it fit within their state. TAs are not currently trained to think about things in a flexible way or supportive way in the sense of a formative process. In many states this will be a huge re-training and a closer entanglement of the assessment process and the TA going on in the resource and referral networks. Ultimately the measure matters, whatever it is it matters and drives practice. If we can take baby steps towards focusing on the measure or assessment package building capacity we'll make progress, change our language in how we support quality.

**EQuIPS:** thinking about global ratings, they seem like very big picture items – how do you define them and train people on them? One of the issues is that different data collection provides very different information and we're not sure if we'll see a lot of variation in those data. Our main focus is to train to reliability and ensure that our data collectors are in the field collecting the most reliable data available to really know whether variation is captured or present. We have practice profiles that are sent out in advance to be sure they are thinking of all the pieces and ley practices we have defined to avoid the "gotcha" visits, etc. This can be an initial self-assessment.

Program management and implementation data should be funneled to programs can use it for monitoring and evaluation and plain old program evaluation, but it's been a harder sell than expected to get folks to use these tools and data for management practices or purposes. How to get people to use information like this for data-driven decision making? Programs don't often look at QRIS data as research data or in the sense of a research study – it's still high stakes, but it doesn't have the burden of that term. The overall issue of creating a culture of using data in the program, it can be very powerful to change practice, but it's really a culture shift. We also thought about this when developing the interview questions – not just having response categories that were yes or no, but questions that really made people think about the responses and their work and practices. Hopefully this prompts them to think about things they've never thought of before.

- **5. Summary of Key issues raised** (facilitators are encouraged to spend the last 3-5 minutes of workshops summarizing the key issues raised during the session; bullets below are prompts for capturing the kinds of issues we're looking for)
  - Emerging findings that may be of particular interest to policy-makers and ACF?
  - Methodological issues including innovative methodologies that may help maximize resources available for research and evaluation?

Within the program types, there are multiple program standards that impact their quality or quality improvement standards – so when developing your measures it will be interesting to see how they account for that.

- Follow-up activities suggested to address questions and gaps (e.g., secondary analyses of data, consensus meetings of experts, research synthesis or brief, webinar, etc.)?
- Recommendations about future ACF child care research directions and priorities?

# Overall Purpose:

- Capture "flavor"
- Major focus
- New developments
- Controversial topics
- Implications for future research

This project will yield a set of measures that will need to be tested in the field by other studies, larger studies, but will be a great resource.

Any direct connection to current legislation