## 1. Descriptive Information

# C5: Collaboration and Coordination Across the Early Care and Education System. 10:15 AM – 11:30 AM | Monticello West

Description: This breakout will highlight three perspectives in collaboration and coordination across the ECE system. The first presentation will examine a particular type of collaboration, EHS-CCPs, sharing early findings from a national survey of EHS-CCP directors to describe how these partnerships are unfolding. The second presentation will focus more broadly on collaboration (e.g. participation in QRIS or preK), noting the various types of child care collaboration efforts and links between collaboration and quality. The third presentation will focus on the child care program or provider level and will highlight a newly developed tool to help program administrators coordinate the multiple standards and expectations from various funders. The breakout will provide time for a discussion of the various ways that programs and providers work together and the research needed to inform our understanding of the opportunities and challenges to move toward a more integrated, coordinated ECE system.

## **Facilitator**

- Kelly Maxwell, Child Trends
   Presenters
- Jamie Thomas, Mathematica Policy Research
- Meghan Broadstone, Education Development Center, Inc.
- Amie Lapp Payne, Consultant with the National Center for Early Childhood Quality Assurance

## **Scribe**

• Jennifer Cleveland, Child Trends

#### 2. Documents in Session Folder

• Each presenter prepared and presented a PowerPoint presentation.

# 3. Brief Summary of Presentations

## Introduction:

- Overarching Questions that to discuss after the presentations:
  - o What kinds of collaborations are evident or emerging in early care and education?
  - What are the best ways to measure collaboration and measure components of collaboration?
  - o What research is needed to better understand collaboration?
  - O How do we measure the effects of collaboration?
- Summary of Presentation #1: Child Care Partnerships: How Do Partnership Programs Provide High-Quality
   Child Care and Comprehensive Services to Low-Income Families with Infants and Toddlers? (Jamie Thomas)
  - o Jamie Thomas presented about Early Head Start-Child Care Partnerships. The presentation cannot be shared or summarized at this time.
- Summary of Presentation #2: Collaboration at the Provider Level and How It Relates to Indicators of Program Quality (Megan Broadstone)
  - Megan Broadstone presented about overall project, recent findings, and next steps
  - Child Care Collaboration Study: We work with partners at MD Department of Education and VT Department for Children and Families
  - Goals of collaboration:
    - Describe collaboration
    - Talk about the activities of the collaboration
    - Examine the association between collaboration and structural indicators of quality at the provider and program level
  - The next slide is about study methods

- What do we want to know about collaboration at the provider level? Do collaborative programs differ from those that are not collaborating in terms of characteristics and in terms of structural indicators of quality?
- Defining formal collaborations:
  - Collaborating programs and non-collaborating programs are described on a slide. Noncollaborative programs may however be involved in collaboratives outside of this definition and part of the study is to parse that out.
- Sample
  - The program type match was very close in VT
  - In MD the sample had more centers than the state overall
- Funding sources
  - See slide for funding sources in VT and MD. Most programs report a mix of public and private sources of funding
- Size of program and characteristics of children served
  - o Collaborating programs tend to enroll more children than non-collaborating programs
- Collaborating programs that serve diverse populations
  - o MD served more children of ethnic and racial diversity
  - In VT, they are exploring the economic diversity of children served
- Research Question: Do programs in collaboration differ in terms of structural indicators of quality?
  - Yes. See slide for how they differ.
  - QRIS ratings are higher in collaborating programs
  - In VT, programs earn a higher QRIS rating to be a Preschool Development Grant (PDG) center
  - o Programs in collaboration report offering more employee benefits
  - o Programs in collaboration offer more comprehensive services than comparison programs
  - o Programs in collaboration are more likely to use a standard curriculum
- Next Steps
  - Analyze data between program type
  - Examine relationships between state level collaboration and provider level indicators of quality
  - Provide state stakeholders with briefings and materials to support efforts to strengthen collaboration and remove barriers to participation
  - o Engage with other researchers to publish findings from our respective studies on collaboration.
- Question from audience: Can you give an example of collaborations and types of interactions?
  - We used the level of collaborations scale to measure collaboration. Within that there are networking
    and cooperation constructs. We found that those categories weren't distinguishing and there wasn't the
    qualitative difference between those categories. We think they were saying that yes or no we worked
    with this group.
  - We don't know much about the intensity of how much a program collaborated
  - We tried to ask people about collaboration, but you also look at the data and you wonder how they viewed the question. Maybe people like the word cooperation better even though it's lower than collaboration in the scale. That is something we are playing with. We thought we could tease out by what do the programs mean by collaboration and by the professional development that they are getting for example.
- Question from audience: When you look at family child care providers versus center-based, a lot of times we as researchers put up the scores and see that the family child care provider score is lower than the center score, but instead can we look at what they are offering that is just as good as centers, but just different?
  - Our sample size is not robust enough for that type of analysis, but instead we plan to do some follow up interviews.
- Summary of Presentation #3: Strengthening Compliance with Various Health and Safety Standards Across the Early Care and Education System (Amie Lapp Payne)

- This presentation focuses on how a provider or program can better manage meeting the various standards and requirements that come from their multiple collaboration partners (i.e., funders)
- o Conducted this work as a consultant with the National Center for Early Childhood Quality Assurance
- Strengthening Compliance with Health and Safety Standards (SCHSS)
- Training tool that can be used with many providers across different funding streams.
- o Providers coming into the same room to be trained at the same time took immense collaboration
- O What is the SCHSS Training?
  - Three-part series
  - Support ECE providers across settings (ensure health and safety and deliver higher quality care)
  - Seven key topics
    - Health and safety
    - Children's safety and well-being
    - Maintaining compliance
    - Health and safety monitoring visits
    - Reporting requirements and investigation
    - Communication with families
    - Child care, Head Start, and pre-k partnerships
  - It was important at the provider level to create a safe space to describe challenges. Many of them had been involved in "gotcha" experiences.
  - We want to help them to talk about engaging families about health and safety and about how they can talk about it with each other so that it isn't a one-way conversation.
  - This is also an opportunity for providers to access partnership opportunities.
- Pilot test results
  - Evaluation at end of each session
    - Semi-structured 5-point Likert scale
    - Open-ended questions
  - Collected:
    - Demographics
    - Curriculum-specific
    - Participant knowledge, skills and abilities
    - Training methods
  - We wanted unprompted feedback and we got that.
  - Participants included family child care providers, Head Start teachers, TA providers, child care directors and teachers, pre-k teachers, and others.
  - Measured change in knowledge from pre to post
  - Findings were somewhat unique to each city (San Antonio and Los Angeles)
  - Participants loved the examples. They wanted more, especially the family child care providers. They talked about how helpful it was to get out of their isolating environment. What we were trying to do was change their understanding. We were hoping to also change the WHY of why this important.
  - Providers reported a high degree of change in their knowledge
  - The training in the way it was delivered was helpful to them
  - Participants wanted more time to keep delving into training sessions and more training
  - They were not compensated. They showed up time and time again and they did ask for more. Providers exhibited incredible participation.
- The center has been exploring the possibility of expanding the pilot and possibly extending the pilot.
- Question from audience: Was it one cohort? It was one cohort but two separate sites. The examples
  that were used were developed in a train-the-trainer format.
- Question from audience: Were these in different cities and did you take into account the state standards? If so how do you prepare this for a national webinar? There are tools now that are available where you can plug in your state and can be directed to your state's standards. States compare their

topic area standards to Head Start performance standards for example. We provided these resources to our trainer so they had that available before the training.

Kelly Maxwell [facilitator]: It's great that we're highlighting that collaboration is good, but it also highlights some challenges: programs that collaborate with other organizations/funders may have to meetmultiple standards.

- Overarching Questions guiding our concluding discussion:
  - o What kinds of collaborations are evident or emerging in early care and education?
  - o What are the best ways to measure collaboration and measure components of collaboration?
  - o What research is needed to better understand collaboration?
  - O How do we measure the effects of collaboration?

## 4. Brief Summary of Discussion: Concluding Questions from the Audience:

- Question from audience: Thinking about family child care readiness for collaboration and talking to them about what might be expected if they were invited into a collaboration?
  - Amie Lapp Payne: Providers were very interested in how to go about partnering and wanted to talk about expectations and the relationship.
- Comment from audience [Diane Schilder]: One question we had is about the number of meetings providers had
  with their partners before they signed the agreement. It was about 20-30% who reported that they had one or
  fewer meetings and they were the ones most likely to end a partnership. It was more like a subcontract than a
  partnership and we had a lot of meetings about expectations and agreement of goals. These providers had
  infrequent communication. In some cases, it was because the partnership has just formed.
- Question to Megan Broadstone and Diane Schilder: You used a measure of collaboration in some of your work. Can you talk about it and how it worked?
  - Megan Broadstone: We used a Hicks Scale, Fries Level of Collaboration, and Thompson Scale. Most of these were mentioned in a 2010 meeting on measuring collaboration that OPRE hotested, and there is a 2013 document about measuring collaboration that is on Research Connections. There is a brief we're working on right now. We looked at people who described their collaborations as formal and with that in mind the providers rated their collaborations: organic to formal. On one measure they were better for the formal and on another measure they were better on the informal. These measures are so dependent on the context of these arrangements and what the purpose of the arrangement. The word trust came up a lot and there are measurements of that component and that may be dependent on two items of a scale and those two items are supposed to measure trust. I go back and forth about these measures. Want to talk to providers to learn more about these arrangements. There is something about these scales that is like an interpretive dance (laughter).
  - O Diane Schilder: Some of these scales measure collaboration, but they are getting at other underlying constructs. One might measure marriage and that may be yes/no, and then you might look at the quality of the arrangement. With Hicks we're looking at trust. The Fries scale is getting at collaborating/cooperating. These are temporal constructs. This will be helpful to tease out in further case studies. When we conducted research about 10 years ago, we asked questions about frequency of communication. And we found that the scales had good internal reliability. One item was "I feel like I can pick up the phone and I can call my partner." That item was predictive of the quality of the partnership.
- Question from audience: I'm struck by the morning plenary. How will we open up the bi-directional conversations upward? How do we bring this to scale?
  - Diane Schilder: I think there are a series of questions about the power relationships as well. The sub grantee felt at times like their voice isn't heard and they don't have the power to renegotiate the relationship.

- Kelly Maxwell: Doing more research will at least inform folks about modifications they need to make in terms of their expectations and guidelines.
- Diane Schilder: Another interesting concept is around the dynamics of a partnership agreement. The EHS-CCP form an agreement to serve children; even though the partnership may last for a prolonged period, the players may change. We need to think about churn and turnover at the program and state level; this can only be captured in a longitudinal study.

# 5. Summary of Key issues raised

- Longitudinal partnership studies are needed to capture the complex system of players at the state and local level and the extent to which turnover at the state level may impact partnerships at other levels.
- More research is needed to determine how best to measure partnership collaboration and cooperation.
- It is important to ensure that partner organizations understand the expectations and guidelines before entering a partnership.
- It may be important to assess a program's readiness prior to their entering into a partnership arrangement to ensure resources are targeted toward providers and programs who are interested and engaged.
- When programs enter partnerships with multiple organizations or programs, they may be required to meet multiple standards.