

2010 CCPRC Annual Meeting
Plenary Session 3
October 21, 2010, 1:15 p.m.

Progress toward Supporting High-Quality Care and Education: Goals, Strategies, and Continuous Improvement

Description

This plenary presented a framework for integrated quality improvement and professional development systems to support positive outcomes for children, families, providers and systems. Questions addressed were designed to lead to more in-depth discussion in the breakout sessions. Questions included: What quality features are needed to support positive child outcomes; what professional development strategies support changes in practices; how effective are system-wide strategies such as Quality Rating and Improvement Systems in promoting overall quality improvement; and, what guidance can be provided on quality indicators that can be used as performance measures in State systems?

Facilitator

Kathryn Tout, Child Trends

Presenter

Martha Zaslow, Society for Research in Child Development and Child Trends

Discussant

Deborah Cassidy, North Carolina Department of Health and Human Services

Scribe

Valerie Krajec, National Child Care Information and Technical Assistance Center

1. Documents in Session Folder

- “Progress Toward Supporting High Quality Early Care and Education: Goals, Strategies, and Continuous Improvement,” Martha Zaslow.
- “Child Care Dosage, Threshold, and Features: State Administrator Policy Perspective,” Deborah Cassidy.

2. Summary of Presentations

- **Summary of Presentation #1: Martha Zaslow**
 - This presentation is intended as the “hors d’oeuvres” for the “full meal” on the quality theme during this meeting. Three key areas of investigation are included: quality dosage, thresholds and features; on-site individualized quality improvement approaches; and targeting of quality improvement approaches.
 - Child Care and Early Education Quality Features, Thresholds and Dosage and Child Outcomes (Q-DOT) is a project being completed by Mathematica Policy Research with funding by OPRE.

- Key findings from the literature review about dosage: a small set of studies indicate that when children participate in higher-quality care and education to a greater extent, child outcomes are more positive (outcomes that were considered include both academic achievement and social and emotional competence). Next steps for secondary data analyses will address selection effects and definitional issues (dosage has been defined in varying ways).
- Research about quality thresholds has evolved over time. Emerging research raises the possibility that the relationship between child outcomes and quality is non-linear and that the relationship is stronger in higher ranges of quality. Next steps will examine these nonlinear relationships and whether the relationship of quality and child outcomes is stronger in certain quality ranges. Careful consideration will be needed about how quality ranges should be identified and analysis should include both global and specific measures of quality.
- Observational measures: there is some evidence that the relationship between quality measures and child outcomes may be stronger when there is a closer alignment between features of quality and child outcomes considered. Three levels of specificity in measures are being considered: broad global measures of quality; interaction-specific (e.g., emotional or instructional support); and domain specific (e.g., stimulation for language and literacy development). Next steps for secondary data analyses need to look at alignment across levels of quality specificity using newer datasets with the most specific measures.
- Joint consideration: promising findings involve joint consideration of quality thresholds and dosage.
- On-site, individualized approaches: four presentations during the breakouts involve randomized control trials and extension to home-based as well as center-based settings. Key issues include use of on-site approaches nationally; lack of agreement on terminology; assumption that all approaches show positive effect. We need to determine which approaches are effective and go beyond thinking that one approach fits all. Work on definitions is being initiated by NAEYC and NACCRRRA and will link to the renewed CCPRC Working Group on Professional Development and the Workforce.
- Work is occurring to differentiate among on-site individualized approaches (Tout, Halle, Zaslow and Starr 2010). Identified features varied across on-site approaches in 18 programs. These included whether goals were set collaboratively or predetermined, whether the focus was on specific quality feature or overall quality, and whether or not a quality measure was used to guide the work.
- Do we really know what is occurring during on-site individualized approaches? Is the process occurring as anticipated? Need direct observation of the processes involved in on-site individualized approaches (Sheridan and colleagues). Are we trying to shape behavior before early educators have a clear picture of the practice they should be working toward?
- Targeting quality improvement approaches for the needs of both individuals and programs. Quality improvement approaches are costly; do we differentiate amount and type needed for different settings, individuals? Do we need

qualitatively different approaches for different individuals? Shira Peterson's work suggests that we need to match our approach to readiness stage.

- Improving quality in home-based care: emerging thinking suggests that we need to differentiate among subcategories of home-based providers. Analysis in progress uses profile analysis with ECERS, ECERS-E and CIS data to identify quality profiles. Groups differ in terms of background characteristics and attitudes toward providing care (higher quality providers more likely to view work as profession and have more child-focused beliefs).
 - Conclusion: ask participants to consider with us issues around durations of exposure to care, thresholds of quality and specific quality features (how might policy efforts differ using these lenses?); whether we need to differentiate among on-site approaches; and how different approaches might provide a better fit with individuals and settings.
- **Summary of Presentation #2: Deborah Cassidy**
 - State Perspective: from the policy context, budget factors require comprehensive cost/benefit analysis. From the regulatory perspective, States must apply research findings across the system (varying settings and levels of quality).
 - Dosage: what does this mean for subsidy children, particularly children in part-time care? Are they more at-risk and need even higher dosage of quality? Continuity of care – how do we control for?
 - Thresholds: child outcomes are stronger at higher levels of quality. Should we limit use of subsidies to high quality programs? Does this increase the need for tiered reimbursement? How do we reconcile restrictions with parental choice?
 - Features of quality: whether we measure for global quality, teacher-child interactions, or domain-specific quality is critical to the development and enhancement of QRIS. Currently our focus is predominately on global quality rather than interactions. Change would require us to reassess the assessments/tools that are being used, the infrastructure that supports these tools, and our one-size-fits all approach to regulation.
 - Relationship-based approaches: can States support this? Do they have the ability to gauge readiness for change and adapt approaches to needs and developmental stage of practitioners?
 - North Carolina is implementing consultant re-training and a monitoring efficiency study and is exploring partnerships with other TA to ensure cost-effectiveness.
 - Research is critical to everyday work: States must find ways to apply findings to the real world context of regulation and subsidy to create quality changes needed for all children.

3. Summary of Discussion with Presenters and Participants

- Importance of program contextual factors, funding, and how they impact the ability to implement professional development.
- Importance of buy-in from directors for individualized approaches.
- Are there other ways to inform parents about quality (besides QRIS), such as culturally supportive environments?

- Allow providers to pick and choose among assessments that best measure the quality of the program as influenced by program philosophy.
- Professional preparation, supports, and career advancement opportunities for professional development providers.