

3 Systemic Quality Improvement

Standards, Supports, and Incentives that Strengthen Professional and Provider Capacity to Promote Child Well-Being in Early Care and Education

EC 2010 keynote speakers emphasized the importance of ensuring high quality, well-implemented early care and education programs, especially for the least advantaged children. Among state participants, current economic conditions and political pressures may have contributed to a sense that every dollar should be well spent. Some worried that current and future financial resources that help professionals and providers meet higher standards are not adequate to the task. Despite this challenge, EC 2010 state team participants spent significant time talking about how integrated quality improvement systems can and must support continuous quality improvement.

For states to improve quality of early care and education, they must account for the diversity of settings and practitioners young children experience. Among children birth to age 5, more are in the care of relatives (41 percent) than are in the range of organized settings (32 percent), typically thought of as child care and early education (child care, preschool or nursery school, and Head Start or Early Head Start). Some are in the care of other non-relative caregivers (13 percent are in a range of settings including their home, the home of a friend or neighbor, or a licensed family

child care home).⁶⁸ Federal data indicate, however, that financial assistance may play a factor. For example, 61 percent of low-income children birth through age 12 receiving child care subsidies through the Child Care and Development Fund (CCDF) are in child care centers. Because children are in a range of settings and may experience multiple caregivers and programs, it is not possible to calculate an unduplicated count of children served (see *Young Children's Participation in Federal- and State-Funded Early Care and Education Programs, 2008 Data*, p. 35).⁶⁹

Ensuring the quality and effectiveness of services that young children and their families receive was a recurring theme in EC 2010 state team discussions. State team participants talked about designing standards to connect systems (e.g., early learning; health, including behavioral health; family engagement and support; and early intervention). Discussion about quality improvement jumped from one system component to another, including early learning standards and guidelines, program standards, workforce and professional development, and use of assessment. Many EC 2010 participants noted engagement in state activities that strengthen and implement strategies to improve standards, including licensing, quality rating and

improvement systems (QRIS), and practitioner standards. State team members recognized that maintaining a stable, skilled, and qualified workforce was fundamental to success. Many talked about the challenge of ensuring access to effective professional development to meet rising program and practitioner standards required in state QRIS (see *Quality Rating and Improvement Systems in the States*, p. 36) and federal Head Start and Early Head Start regulations. EC 2010 participants processed implications of evolving research findings on social-emotional development and teacher interactions with children and how state policies could respond. Other gaps in professional development content (e.g., linguistic and cultural competence, inclusion, and infant and toddler care) were common threads in EC 2010 discussions. Concern that quality improvements include providers who care for and educate the least advantaged children was another common theme.

Innovative efforts described in EC 2010 discussions and the subsequent exploration of related issues for this report include:

- Developing and implementing research-based, cross-cutting program standards.
- Creating an integrated professional development system that is linked to standards and that provides pathways and rewards for advancement.
- Ensuring that low-income and vulnerable children have access to high quality early care and education programs.

Developing and Implementing Research-Based, Cross-Cutting Standards

EC 2010 participants recognized that strong, integrated standards are the backbone of state quality improvement efforts. Early learning standards and guidelines describe what is reasonable

to expect children to know and be able to do at each stage of development and learning. State participants use them to improve professional development systems and programs, and inform families, although they clarified that they are not used to measure child or program success or failure. Program standards are requirements that define the condition of children's care and education, including health and safety precautions, ratios and group sizes, practitioner qualifications, and supports for families. States use mandatory and voluntary program standard strategies in classroom-based (e.g., child care, prekindergarten, and Head Start and Early Head Start) and licensed family child care settings, noting that states usually support legally unlicensed care in homes through different approaches.

Many discussions at EC 2010 touched on how to most effectively use standards to change the quality and consistency of early care and education programs and to create positive early experiences for young children. Participants represented different constituencies but often shared hopes that their states could use standards to promote similar quality levels across different types of early care and education programs. Some state participants thought that it would be helpful to have some shared articulated federal minimum standards across programs.

Developing a birth-through-age 8 continuum of early learning standards and guidelines:

While 50 states have developed learning standards and guidelines for K-3 and 3 to 5 year olds, only in the last few years have they moved to include or develop separate guidelines for children birth to age 3 (31 states now have them).⁷⁰ States may have worked to align two out of the three age sets of standards and guidelines, but aligning across the full age range is an emerging practice that requires sensitivity across developmental stages. For example,

in **Pennsylvania**, the Office of Child Development and Learning (OCDEL) hired a team of national experts⁷¹ to review state early learning standards and assessment tools for vertical and horizontal alignment from birth through grade 3. The team found a “relatively high” degree of alignment and made recommendations to ensure sequential and well-rounded skill development from birth through grade 3 while aligning with Pennsylvania’s outcome reporting tools.⁷² Pennsylvania revised the [Learning Standards for Early Childhood—Birth through Kindergarten](#) in 2009.

Implementing early learning standards and guidelines in professional development and family and community engagement efforts:

Early learning standards and guidelines must be more than a written document. States are trying to make innovative approaches accessible and integrated throughout state quality improvement efforts and public education. For example, **California** contracted with the [Program for Infant Toddler Caregivers at WestED](#) to produce DVDs in English and Spanish that depict stages of infant and toddler development as well as relevant skills enumerated in the state early learning guidelines for infants and toddlers. **Wisconsin** maintains a [web page to share stories](#) about professional use of the Wisconsin Models Early Learning Standards in a wide variety of settings.

Policies can integrate early learning standards and guidelines into state required in-service training for child care providers and into required coursework for credentials as well as QRIS systems (see Quality Rating and Improvement Systems (QRIS) in the States, p. 36). For example, **Ohio** integrates its infant toddler guidelines into all levels of the “[Step Up to Quality](#)” QRIS. Participating programs must have a plan to implement the guidelines and train staff. At the highest levels, Ohio requires an annual assessment of providers and an aligned curriculum.



YOUNG CHILDREN’S PARTICIPATION IN FEDERAL- AND STATE-FUNDED EARLY CARE AND EDUCATION PROGRAMS, 2008 DATA

There are **25 million** children under age 6; approximately **10 million** live in families earning twice the federal poverty level (FPL) or less.

1.6 million children, birth through age 12, were served through the Child Care and Development Fund (CCDF) in an average month; two-thirds were under age 6.

1.2 million children, mostly age 4, were enrolled in state-operated prekindergarten programs in the 2008-2009 school year.

906,992 children, birth through age 5, were enrolled in Head Start, including 11 percent under age 3.

709,004 children, aged 3 through 5, received Individuals with Disabilities Education Act (IDEA) Part B, Section 619 services.

324,544 infants and toddlers received IDEA Part C early intervention services.

Sources: National Center for Children in Poverty, Office of Child Care; Office of Head Start; National Institute for Early Education Research; Data Accountability Center, (n.d.).



QUALITY RATING AND IMPROVEMENT SYSTEMS (QRIS) IN THE STATES

At least 30 states have or are developing QRIS systems to rate the level of quality in early care and education programs according to program standards set by the state. Results of initial research funded by the Office of Planning, Research and Evaluation (OPRE) on 26 QRIS were [presented at EC 2010](#), including:

- Almost all include child care centers, Head Start and Early Head Start, and family child care homes. Fewer include state prekindergarten (18) and school-age programs (13).
- 20 QRIS systems are voluntary.
- Six states (**New Mexico, North Carolina, Oklahoma, Oregon, Pennsylvania and Tennessee**) reach 60 percent or more of eligible child care centers; 13 reach under 30 percent.
- Licensing compliance is included as a foundational quality standard in all 26 QRIS systems.
- Staff qualifications are a quality standard for all systems; 23 reported that training is available or aligned with the system.
- 18 states pay higher rates to child care providers who work with the QRIS system and who serve children receiving child care subsidies.
- All 26 QRIS systems include on-site consultation or assistance, varying in frequency, length, and duration.
- 19 QRIS systems have been evaluated.

Source: Tout and Boller, 2010. Retrieved from http://www.earlychildhood2010.org/NRCFiles/File/QRIS_research.pdf.

States are using early learning standards and guidelines to educate family and community members on children's growth and development. For example, **Kentucky** developed [parent companion guides for its birth to age 3 and preschool age standards](#) in English and Spanish to provide information on developmentally appropriate activities for their children at home. **Pennsylvania** developed [Learning is Everywhere](#), an online calendar aligned with the state learning standards for young children that provides ideas in English and Spanish for activities and resources specific to stages of child development, birth through kindergarten.

Requiring linkages across the early learning and development system in program standards:

EC 2010 participants talked about how to build linkages to health (including behavioral health), family engagement or support, and early intervention through early care and education program standards. For example, 19 states require licensed child care centers to have health consultants available to staff.⁷³ [Iowa's quality rating system](#) provides additional points toward program ratings for completing injury prevention and health and safety assessments. Participation in the Child and Adult Care Food Program is mandatory for all programs at levels two to five, and those programs also receive [achievement bonuses](#). **Colorado** state licensing rules for family child care allow regular consultation with a child mental health consultant to satisfy three hours of state continuing education requirements on social-emotional health. In an effort to integrate health with child care and early education, **Ohio's** QRIS system requires programs to screen children for developmental delays within 60 days of enrollment and to refer them to appropriate follow-up services within 90 days. **Idaho** integrated family support concepts into the IdahoSTARS QRIS, using the protective factors approach to strengthening families.

Reexamining the strength, reach, and enforcement of state child care licensing standards:

EC 2010 participants talked about issues in improving state licensing policy for facilities. State licensing standards, which usually establish basic health and safety requirements, rarely meet nationally-recognized recommendations set forth in [Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs](#). These standards were developed by the American Academy of Pediatrics, American Public Health Association, and the National Resource Center for Health and Safety in Child Care and Early Education (NRC). The NRC is funded by the Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services.

For example, in each age group category for which 2008 state child care licensing data were collected, the majority of states did not meet the recommended staff-child ratios and group sizes.⁷⁴ Some states that recently tried to improve staff-child ratios faced strong opposition from provider groups and state legislators.⁷⁵ Many children are not in licensed care at all and most states do not require licensure of home-based care until three or four children are in the home. This situation provides a shaky foundation when a state relies on compliance with licensing for the health and safety components as the entry step in its QRIS system (although some states do encourage better ratios through QRIS).⁷⁶

Some EC 2010 participants (for example, **Arkansas**, **Missouri**, and **Oklahoma**) are in the process of reviewing and improving licensing standards to raise quality and foster integration with other sectors of their early learning and development systems. There may be lessons

learned from other state experiences. For example, **Delaware** released [revised regulations for child care centers](#) in 2007 that made significant changes to program standards and caregiver practice, including better staff-child ratios, integration of early learning guidelines into curriculum, and higher nutrition standards. Throughout this year, **Ohio** conducted a review of all statutes, rules and regulations to streamline the system of regulation with a core focus on health, safety, and quality in all settings. Over 100 people sat on one of seven writing teams, each charged with a specific area of concentration: Care of Infants and Toddlers; Health and Nutrition; Licensing; Program; Records, Reports, and Postings; Safety and Environment; and Staffing. They are now [soliciting feedback](#) through an online process.⁷⁷ **Oklahoma** plans to combine center, school age, and part-day requirements into one set of licensing standards with addendums for each type of program with differing requirements.⁷⁸

Some states are considering how to ensure well-implemented licensing standards. **Washington** is conducting a process called a “[licensing reboot](#).” The Department of Early Learning licensing division is soliciting input from providers and parents to improve the licensing process. Goals include increasing cooperation between licensors and providers and clarifying how providers can meet standards. Previously, the state commissioned [an analysis of the licensing workforce and workload](#) from the National Association of Regulatory Administration.

Making state early learning and program standards align with research and nationally recognized quality standards: Several EC 2010 discussions touched on how state standards align with nationally recognized quality standards designed for different sectors of the early care and education field (such as Head Start Program

Performance Standards, National Association for the Education of Young Children [NAEYC] accreditation standards or National Association for Family Child Care [NAFCC] accreditation standards). The Office of Head Start recently released [revised Head Start Early Childhood Development and Learning Outcomes Framework](#) for 3-to-5 year olds that is a resource for state efforts for that age group. One example of state action is in **Arkansas**, where an “[Association of Measurements](#)” document crosswalks standards from the federal Head Start Outcomes Framework, Kindergarten Readiness Indicators, Arkansas’ Department of Education English Language Arts Framework, the Creative Curriculum Developmental Continuum for Ages 3–5, Work Sampling System Developmental Guidelines for Preschool 4, and Arkansas’ early learning guidelines for infants and toddlers.

In 2002, **Maine** received a data capacity grant from the Administration for Children and Families (ACF) to conduct research and link administrative data sets to plan for a statewide QRIS program. After an exhaustive crosswalk process, a group of Maine stakeholders decided that every QRIS program standard should be linked to an existing standards framework (i.e., Federal Head Start Performance Standards, NAEYC, NAFCC and the National AfterSchool Association [NAA]).⁷⁹

Making early learning and program standards inclusive of children with disabilities or special needs:

Addressing principles of inclusion in early learning and program standards is an emerging concern for states. A [joint position statement on inclusion](#) from the Division for Early Childhood (DEC) and NAEYC can guide state activities. According to state CCDF plans for FY 2010–11, four states (**Colorado, Indiana, Oregon, and Wyoming**) used national resources

to guide development of inclusive early learning standards and guidelines that consider [child outcomes collected for children participating in Part C and Part B, Section 619 of Individuals with Disabilities Education Act \(IDEA\)](#), and [personnel standards](#) developed by the DEC.⁸⁰ At least eight states (**Delaware, Idaho, Indiana, New Hampshire, New Mexico, Ohio, Pennsylvania and Vermont**) have specific indicators in their QRIS about inclusion of children with disabilities or other special needs.⁸¹

Making early learning and program standards culturally and linguistically appropriate and accessible:

Some EC 2010 participants mentioned how important it is to have stakeholder input on developing standards that reflects the diversity of children and providers in the state. There is a growing awareness that native language is critical in early child development, in that it facilitates later learning and development.⁸² For example:

- The **Minnesota** Early Learning Foundation commissioned a study of parents and providers in African American, American Indian, Hmong, Karen, Latino, and Somali communities to guide the development of its state QRIS program.⁸³ Minnesota has also translated forms, checklists, and brochures available to family child care providers into multiple languages.⁸⁴ The state child care agency plans to distribute videos on seven early childhood health and safety issues in multiple languages to make information available to child care providers and parents. Many materials are available on the Minnesota Department of Human Service’s [E-docs](#) service for public use.⁸⁵
- The **Massachusetts** Department of Early Education and Care, in collaboration with the Head Start State Collaboration office, has drafted [policies and guidelines](#) for children who are English Language Learners (ELLs).⁸⁶ The

state has already incorporated specific provisions on respecting cultural background and working with dual language learners into state core competencies.⁸⁷ Introducing and supporting multiple languages in early care and education programs take advantage of the language readiness of all young children.

- **Illinois** is unique in designing its QRIS program to include unlicensed family, friend, and neighbor caregivers, typically a culturally and linguistically diverse group. There are three tiers of training (for a total of 48 training hours) that license-exempt caregivers may take in English or Spanish through local child care resource and referral agencies. Completion of each tier earns a quality bonus of 10, 15, or 20 percent to the standard payment rate if they care for low-income children in the child care subsidy system.⁸⁸ Completion of all three training tiers results in the award of the Level 1 early childhood education credential through the Illinois Gateways to Opportunity career lattice.

Creating an Integrated Professional Development System that is Linked to Standards and Provides Pathways and Rewards for Advancement

An area that Early Childhood Advisory Councils (ECACs) may focus on is planning and implementing statewide professional development systems and career ladders for early childhood educators. Many states are working on this issue as they align standards requirements within this infrastructure. Several EC 2010 participants have begun implementing existing plans. Others spent time at EC 2010 sharing information across team members about what currently exists and talking about how to better integrate professional development efforts.

According to state CCDF plans for FFY 2010–11, many states already have early care and education professional development plans, although just 18 reported entering the implementation stage at the point of submitting that plan.⁸⁹ Data from CCDF plans show that the majority of states reported having one or more key components of professional development systems,⁹⁰ including career lattices, training or trainer approval processes, registries, and state credentials, but it is less common for these initiatives to be codified in state law and effectively integrated into a coherent system.⁹¹ For example, **Connecticut's Charts a Course** system was put into law in 2004⁹² and **Illinois' Gateway to Opportunity** professional development credentials system was codified in 2010.⁹³ ACF's Office of Child Care (OCC) provided resources to help develop a **tool** to assist states in aligning one kind of standard (those in the QRIS program) with a state professional development system.

Cross sector planning across state and federal early care and education systems is growing in importance. Federal policy developments can increase demands on state professional development systems (e.g., education requirements in Head Start and Early Head Start or the need for qualified home visitors in response to new federal Maternal, Infant, and Early Childhood home visiting funds). Federal resources can also be integrated with or guide state systems. For example, each state has a Head Start-funded Training and Technical Assistance Center for federal grantees with which states can coordinate. The federal Office of Head Start (OHS) recently developed a national network of specialized centers that includes the topics of Early Head Start; quality teaching and learning; cultural and linguistic responsiveness; parent, family, and community engagement; health, mental health, oral health, and nutrition; and program management and fiscal operations.⁹⁴ It is important

to integrate the work of these new centers with other federal- and state-level early learning technical assistance efforts. For example, the federally-funded [Center on the Social Emotional Foundations of Early Learning](#) (CSEFEL) and [Technical Assistance Center on Social Emotional Intervention for Young Children](#) (TACSEI) are working closely with teams in some states to address these issues. Another federal project, the [Expanding Opportunities Initiative](#), which is led by four federal agencies (OCC, OHS, Administration on Developmental Disabilities [ADD], and Office of

Special Education Programs [OSEP]) provides technical assistance to a team of state leaders from each program to promote high-quality inclusive opportunities for all children. Since 2005, 20 state teams have participated (see Appendix D: Federally Funded National Technical Assistance Centers, p. 127).

Creating statewide professional development systems that enable movement from entry level to advanced degrees and higher levels of compensation:

Forty-four states reported a continuum of training and education opportunities or career lattices that allows for vertical movement for early childhood professionals in CCDF state plans for FFY 2010–11.⁹⁵ At EC 2010, presenters and state participants repeatedly articulated the goal of connecting professional development systems with career lattices that have professional development supports and financial incentives or rewards for practitioners and providers. Some raised equity concerns with regard to distribution of currently scarce resources (for scholarships, professional development, financial incentives, and practitioner compensation), depending on which part of the system they work in. Expectations, supports, and rewards often differ across the federal Head Start and Early Head Start, public school, private child care, and early intervention or special needs fields. Another recurring concern was alignment of state licensing requirements for training with the career lattice. States have different approaches to system building. For example:

- **North Carolina** was an early innovator in professional development, with programs such as the [T.E.A.C.H. Early Childhood](#) model of sequenced scholarships and assistance for professionals working in licensed centers and family child care homes. This program is being



INTEGRATED STATE PROFESSIONAL DEVELOPMENT SYSTEMS

According to NAEYC's Early Childhood Workforce Systems Initiative, comprehensive systems should:

- Provide information about available career opportunities, support, training, and education;
- Help individuals plan for and have access to a continuum of professional development offerings;
- Ensure that offerings are responsive, high quality, and have the potential to lead to credentials or degrees; and
- Link increased qualifications with increased compensation.

Source: Sarah LeMoine, Professional Development System Policy Overview, Early Childhood Workforce Systems Initiative, National Association for the Education of Young Children, 2010. Accessed at http://www.naeyc.org/files/naeyc/NAEYC_WorkforcePolicyOverview_2010.pdf.

replicated in 21 states and the District of Columbia. The [Child Care WAGES](#) statewide wage supplement program provides semiannual payments to child care teachers based on education. Education qualifications are embedded in the state-rated license (the state rating system is integrated into licensing). In 2010, legislation passed that required certification of all professionals working in licensed child care settings, including teachers and assistants, faculty members, consultants, directors, and school age professionals. Over 75 percent of the teaching workforce applied to become certified by September 2010. Over the summer in 2010, the Division of Child Development funded a [regional early childhood professional development planning process](#) to collect input from stakeholders and to develop a statewide plan. The effort was conducted in partnership with the North Carolina Institute for Early Childhood Professional Development.⁹⁶

- **Illinois'** [Gateways to Opportunity](#) career lattice includes pathways to credentials in early childhood education, an infant and toddler specialization, school-age and youth development, and center directorship. Resources and services provided by Gateways to Opportunity also include a scholarship program, professional development advisors, a wage supplement program, a professional development registry, and a trainers' network. The Illinois model starts with a "Level 1" credential that is available in English and Spanish through child care resource and referral agencies and the trainers' network. Level 1 is designed to be entry level but is aligned with the core knowledge and higher education course work required in steps 2 to 6 of the career lattice. The Level 1 credential training also satisfies the [state QRIS requirements for license-exempt family child care caregivers](#).

- **Florida** is using American Recovery and Reinvestment Act of 2009 (ARRA) CCDF funding to upgrade the entire professional development system⁹⁷ based on recommendations from a Professional Development Steering Committee made up of agency and external stakeholders.⁹⁸ The components of the state system will include core competencies, career pathways, and supports for professionals advancing in the formal and informal education systems, community collaboration for successful system implementation, and a professional development registry database to collect critical professional development.⁹⁹ The professional development system upgrade is a strategic component in building a statewide data system and continuous improvement systems to assess child progress and program quality.¹⁰⁰

Developing an integrated professional development system in coordination with leaders from outside early learning and development: EC 2010 participants talked about professional development integration in terms of connecting standards, supports, and compensation. State team members raised issues about how to engage higher education, the public school system, and the health sector. Some were starting to think about integrating across sectors. For example, **Iowa** brought together leaders from the early learning, special needs, early intervention, family support, health, mental health, and nutrition sectors (using the four oval framework from the Early Childhood System Work Group) to jointly create a professional development policy framework (modeled on [NAEYC's policy blueprint](#)). The framework will be used to guide system development. The state used federal Early Childhood Comprehensive Systems (ECCS) funds along with state professional development funds to hire a facilitator and support staff. The [initiative](#) continues now with four leadership teams under

the coordination of a steering committee cochaired by representatives from the Iowa Department of Education and the Iowa Head Start state-based Training and Technical Assistance Office. The four teams, one for each sector, are implementing plans for each of the areas while continually studying ways to integrate and share resources. Federal Early Childhood Advisory Council (ECAC) funds will be used to help staff the project as it moves forward.¹⁰¹

Requiring core competencies for all professionals working directly and indirectly with children: States are considering defining core skills across practitioner roles in early childhood settings. For example, **Florida's** new [Core Competencies for Early Care and Education](#) includes directors, trainers, and coaches or mentors along with practitioners. The state has created formal, informal, and hybrid pathways to encourage all types of early childhood providers to engage in further training and education.¹⁰² Targeted competencies for inclusion of children with disabilities or special needs and for career advising are under development.¹⁰³ **North Carolina** has established competencies in its rules for public teacher licensure with a birth through kindergarten license approved by the state board of education. **Virginia's** home visiting programs are working with state and private partners to revise the four-level professional competencies matrix originally developed for early child care and education, which will expand to a meaningful set of cross-system early childhood professional competencies with four levels applicable to all early childhood professional fields (i.e., home visiting, dental care, nutrition, and infant behavioral health). In **Wisconsin**, the Department of Health Services provided federal ECCS funding to the Children's Trust Fund to support development of [family support core competencies](#) for those who work directly with children and families as well as for managers and supervisors.

Promoting credentials to recognize specialized expertise that cuts across sectors:

Several state teams mentioned that they had or were exploring the idea of state credentials. For example, **Michigan's** [Association for Infant Mental Health](#) developed a set of competencies and an endorsement credential that is now licensed for use in 13 other states. It provides a framework of knowledge and skills for professionals working with infants and toddlers that is applicable across a range of disciplines (e.g., practitioners in child care and early education, nursing, therapy, social work, and special education). **Colorado's** [Office of Professional Development](#) developed a [social-emotional credential](#) that is interdisciplinary and open to a range of applicants (including teachers, child welfare consultants, nurses, home health care providers, social workers, mental health consultants, coaches and mentors, therapists, home visitors, and parent educators).

Building the capacity of higher education:

Some states are collaborating with leaders of higher education institutions to encourage the advancement of the early childhood field. At EC 2010, presenters on this topic discussed three key state issues: 1) helping early childhood practitioners access higher education; 2) increasing resources for and quality of early childhood faculty and institutions; and 3) rethinking the professional development infrastructure as a whole to support these needs.¹⁰⁴ States want to improve the quality of offerings to current evidence-based practice and to make higher education more accessible to nontraditional students. Meeting the needs of ELL students was a key issue in some states. Racial and ethnic minority students face multiple barriers and are more likely to be enrolled in two-year rather than four-year institutions.¹⁰⁵ ELLs often have unique bilingual or multilingual capabilities and cultural knowledge critical to

working with diverse young children. In the 21st-century global economy, these linguistic and cultural skills are important for a competitive workforce in early childhood and beyond.

States may need multipronged approaches that draw on outside resources to address all these issues. For example, **Massachusetts**' Department of Early Education and Care commissioned a project to [map higher education offerings](#) in early care and education throughout the state to identify gaps and make information on available course work more accessible to the field. One project goal is to provide a searchable course work database. Massachusetts also used information and other resources from a SpecialQuest partnership to educate higher education faculty on best teaching practices for including children with disabilities ages birth through 5 in early care and education programs.¹⁰⁶ Massachusetts is one of 11 states partnering with the federally funded CSEFEL to update the skills of higher education faculty about child social and emotional health (see Figure 1: CSEFEL/TACSEI Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children, p. 69).

Many states are working to improve opportunities for early childhood professionals to enter and carry forward credits earned in two-year colleges. In **North Carolina**, early childhood education courses are now offered at all 58 community colleges. State leaders have been developing a statewide articulation agreement between varying levels of education that include high school and credential-granting entities between two- and four-year early childhood degree-granting programs, and between national and state providers of Child Development Associate (CDA) certificate.¹⁰⁷



Some states are using accreditation standards developed by NAEYC to guide efforts to improve higher education quality and consistency across the state. For example, **Pennsylvania** and **Connecticut** use NAEYC accreditation of associate degree programs and recognition of baccalaureate programs to improve program quality and build statewide articulation agreements. **South Carolina** will soon be the first state in which all early childhood associate degree programs in public community colleges are accredited.¹⁰⁸

Finally, states are considering how to provide other assistance to nontraditional students. **Tennessee** has developed mentoring and coaching services to assist students pursuing a CDA. A “cohort” approach is being piloted in multiple **California** counties. Small groups of current early care and education practitioners who are not native English speakers receive support services, peer support, and coaching while pursuing their bachelors’ degrees. Two years of evaluation in California have shown promising results.¹⁰⁹

Standardizing quality of training, on-site consultation, and support: Some early care and education workforce researchers argue that ongoing support models should complement traditional professional development strategies similar to the “induction year” concept of first-time teachers in the public school arena.¹¹⁰ This idea was discussed at EC 2010. A number of states are implementing relationship-based professional development strategies that use a variety of names (consulting, coaching, mentoring, or technical assistance) connected to training, higher education, QRIS programs, or other state initiatives.¹¹¹ NAEYC and the National Association of Child Care Resource and Referral Agencies (NACCRRRA) collaborated on a [glossary of definitions](#) for “professional development specialists” in order to clarify a variety of strategies (including training, education, coaching, mentoring, consulting, and advising). One state team leader said that all training should be linked to coaching.



Current terminology differs by state as do the models. One study found that many state technical assistance initiatives connected to state QRIS systems lacked intensity, observations, and modeling that help teachers learn and practice effective strategies in teacher-child interactions or use of a standardized model and other features found in effective models.¹¹² Thrive by Five Washington commissioned a random control trial of **Washington’s Seeds to Success** QRIS in two demonstration sites. The approach included intensive coaching, grants, and professional development assistance. The evaluation found significant increases in observed quality and reduced turnover in center teachers. Most state initiatives have not been rigorously evaluated due to lack of resources.

Some states are developing quality assurance systems to bring more consistency to technical assistance efforts. For example:

- Public agencies and private stakeholders partnered in **South Carolina** to develop a [statewide technical assistance network](#) that certifies early care and education consultants according to knowledge and skills and aligns with existing program standards, early learning guidelines, and state regulatory requirements. Certified Technical Assistance Providers (TAP) work in a range of settings that include child care, Head Start and Early Head Start, public school, and special needs care. The [South Carolina Center for Child Care Career Development](#) (CCCCD) certifies individuals and also identifies course work and professional development necessary to earn and maintain certification.¹¹³
- Six states (**Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont**) worked with staff in the ACF Region I Office of Child Care and the National Infant and Toddler Child Care Initiative at ZERO TO THREE to

create three infant or toddler modules for consultants from multiple disciplines working with child care settings that serve infants and toddlers. Using the modules, states plan to integrate research-based infant or toddler knowledge into existing consultant networks such as child care health, mental health, nutrition, family support, and home visiting.¹¹⁴ Leaders from Region I also developed a [guide to the core knowledge and competencies for consultants working in infant or toddler settings](#).

- **Florida** recently developed [core competencies](#) for coaches, mentors, and trainers. Trainers are encouraged to participate in a regional six-day (partially web-based) Outcomes Driven Training (ODT) Facilitator Training Program aimed at increasing skills and knowledge of adult learning. The evidence-based ODT model, developed in Palm Beach, is intended to maximize participant learning. The process will result in a network of approved trainers, who are eligible to join a registry that is under development in Florida. State officials hope to match trainer skill levels (associate to content expert level) to those being trained.¹¹⁵

Making Sure Low-Income and Vulnerable Children Have Access to High Quality Early Care and Education

Many state leaders want to ensure that children who are at risk of poor early learning and development have the opportunity to benefit from high-quality, comprehensive early care and education programs. Positive early learning experiences and responsive care promotes child development while low-quality programs can negatively impact children who are already vulnerable due to other risk factors.¹¹⁶ State leaders want children who rely on state- and

federally-funded early care and education programs to have access to the best possible care. Some EC 2010 participants noted that current economic conditions make this more difficult. Job losses and parental instability as well as public funding freezes have been shown to lead to instability of many programs that serve vulnerable children and families. Some states are focused on policies and resources that build and maintain program capacity in order to provide high quality comprehensive services to vulnerable children.

Helping providers meet and maintain high quality program standards in settings serving vulnerable children: Some states have initiatives that increase the supply of high-quality early care and education for vulnerable children and low-income communities.¹¹⁷ One approach is increasing access to programs that meet federal Head Start Performance Standards. Most state initiatives require planning and formal agreements across state child care subsidy and Head Start State Collaboration offices as well as input from federal regional offices.¹¹⁸ For example, **Kansas** Early Head Start uses a mix of federal CCDF and state funding to give grants to local Head Start and Early Head Start agencies in order to expand services in partnership with community child care centers and family child care providers. Child care partners must meet federal Head Start Performance Standards as specified in a Memorandum of Agreement or Understanding. Local grantees usually have dedicated staff to support their child care partners.¹¹⁹ A new [federal Early Head Start for Family Child Care Demonstration Project](#), underway in 24 communities, supports planning and learning about how to expand Early Head Start partnerships with community child care providers through the Family Child Care Option. The project will facilitate local partnerships between federal grantees and community-based

family child care homes as it develops lessons learned for local programs and state-level systems that support such partnerships.

Some states are expanding the reach of state-administered prekindergarten programs by partnering with child care, Head Start, and other community programs. One-third of children in state prekindergarten programs are served in nonschool settings that meet state standards, including Head Start, child care centers, and family child care homes.¹²⁰ Some states determine what entities receive funding at the state level in exchange for meeting state prekindergarten standards. Others provide funding to local education agencies or collaborative groups to facilitate partner selection and to ensure that they meet program standards. For example:

- More at Four is a program in **North Carolina** that recently met all 10 quality benchmarks used by the National Institute for Early Education Research (NIEER). It placed about half of the children in public schools and the rest in private child care and Head Start in the fall of 2008.¹²¹ The local More at Four county (or regional) Planning or Advisory Committee must sign off on a plan that demonstrates support by key community agencies that includes public schools; local Smart Start partnerships; county departments of human services, health and mental health; Head Start; child care resource and referral; private child care providers; and other relevant service delivery organizations. Planning or Advisory committees must be co-chaired by the local superintendent of schools and the local Smart Start board chair.¹²²
- In **Wisconsin**, school districts receive funding for the 4-year-old prekindergarten program called “4K,” which is based upon the public school funding formula. School districts have significant local control but are encouraged to

use “community approaches,” in which districts assemble an array of community leaders representing business, schools, child care, Head Start, parents, recreation, and parent education to plan 4K by building on existing programs. Districts using this approach receive preference when applying for start-up grants and public and private funds maintain a cadre of “collaboration coaches” to facilitate the process.

Reserving high quality child care slots for low-income children receiving child care

subsidy assistance: Some states are distributing funding directly to early care and education providers for services to low-income children that meet additional standards beyond state licensing. Five states reported using grants or contracts for slots in high-quality or comprehensive early care and education settings for children eligible for child care assistance through CCDF in FFY 2010–11 state plans. For example, **California’s** Department of Education contracts with centers and family child care home networks to provide early care and education services that exceed certain licensing requirements and meet the same program standards as those in the state preschool program.¹²³ **Pennsylvania** provides grants to center-based programs through an initiative called Keystone Babies that give infants and toddlers in the state child care subsidy assistance program access to three- or four- star QRIS level programs. Program standards for the initiative were modeled after federal Head Start Performance Standards, offering supportive resources to families.¹²⁴ In **Wyoming**, the Department of Education and Department of Family Services are coordinating efforts for a Temporary Assistance for Needy Families (TANF) funded Preschool Grant program to place low-income children in high quality programs and link college course work to higher teacher salaries.

Ensuring access for low-income children to highly rated programs in the state QRIS program:

Some states are working to assure that their QRIS model reaches low-income children, families, and communities. Initial research on early QRIS models found that intentional policies and tracking are critical to ensuring that children receiving state child care assistance have an opportunity to attend top-rated programs.¹²⁵ There are different approaches. For example, three states (**New Mexico**, **North Carolina**, and **Tennessee**) require all licensed programs to be rated by making the first rung of the QRIS ladder equal to compliance with state licensing. Moving to higher levels of rating is voluntary, but this policy makes information about program quality available to consumers in all licensed programs. Twenty-three states reported linking financial incentives (such as tiered payments for children receiving child care assistance) to their QRIS in FFY 2010–11 state CCDF plans.¹²⁶ **Oklahoma** child care subsidy policies do not provide payment for care in one-star centers except in certain circumstances, although one-star family

child care homes may be used.¹²⁷ **Wisconsin** plans to require providers who wish to participate in the new YoungStar QRIS program to sign a contract stating that they will serve children who receive child care subsidies.¹²⁸

States are developing **standards, supports, and incentives to strengthen professional and provider capacity** to promote child well-being in early care and education by:

- Developing and implementing research-based, cross-cutting program standards.
- Creating an integrated professional development system that is linked to standards and provides pathways and rewards for advancement.
- Making sure that low-income and vulnerable children have access to high-quality early care and education.