Paths to QUALITY Evaluation

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Indiana QRIS Evaluation (2008-Present)

- (2008-2013) Implementation, validation research.
  - Elicker et al. (2013). Early Education and Development


- Voluntary “building block” structure. Policy implications and program changes ongoing through evaluation.
Longitudinal Provider Study: What factors predict quality improvement?

• 5 provider interviews over 2 years with 179 randomly selected providers at Levels 1, 2, 3. 150 completed the 2-yr study (83%).

• 3 interviews with each provider’s coach

• Focus: plans to advance, provider-coach relationships, motivation to advance, types of assistance provided
Average PTQ Rating Over 2 Years

- .05 levels per year
- .29 levels per year
- .33 levels per year

PTQ Level vs. Months

0 6 12 18 24

Months
Provider Subgroups

1. Center-Based, Engaged, High Rate of Advancement (42%)
2. Moderately Engaged, Moderate Rate of Advancement (24%)
3. Family Child Care, Lower Engagement, Little or No Advancement (29%)
4. Highly Motivated, Highly Engaged, Highest Rate of Advancement (5%)
What factors predicted more provider advancement?

Provider Characteristics:

• Provider’s beginning PTQ Level
• Provider had advanced degree (MS+)
• Years of child care experience
• Provider’s number of professional organization memberships
What factors predicted more provider advancement?

Provider Attitudes:

- Provider’s intention to advance
- Provider’s level of motivation to advance
- Provider’s rating of how helpful the coach was to the director/owner

Coach Perceptions:

- The provider was motivated to advance
- It is likely that the provider will advance
Obstacles to advancement

- “The largest obstacle is staffing - hiring new staff that have the education and training that is required of PTQ. Also, keeping current staff up to date with training hours.”
  (Center director, Level 2)

- “We have long-standing staff so it can be difficult to motivate them to go to training or to get their CDA.”
  (Ministry director, Level 1)

- Also: Paperwork, Time, Waiting for Coach
Policy Implications

• Develop strategies tailored to attitudes and needs of distinct provider subgroups.
  ◦ Some coaches already individualize assistance, but more systematic approach may improve provider outcomes.

• Re-examine advancement incentives and type of coach assistance for providers with low advancement rates.
  ◦ Family child care homes, Level 3 “plateau.”
Child Development Outcome Study: Does quality of care impact child outcomes?

• 3 child development assessments over 2 years with 221 randomly selected children (146 preschool; 75 infant-toddler). 177 completed the 2-yr study (80%).

• Parent phone interviews every 6 mo. documenting demographics, child care placement, and “dosage.”

• Provider survey at each child assessment documenting demographics, parent communication.

• Focus: Does quality of care (PTQ level and CLASS) influence children’s cognition, language, social-emotional development?
Toddler Early Learning: Mullen Standard Score

* Global CLASS quality ratings did not predict gains in toddlers’ early learning
Toddler Social-Emotional Competence: BITSEA Caregiver Ratings

PTQ low  PTQ high
Preschool Social Competence: SCBE Average Caregiver Ratings

PTQ low

PTQ high
• Both toddlers and preschoolers who were in regulated child care using CCDF vouchers experienced significant gains in cognition, language, and social-emotional skills.

• For toddlers, gains in learning were more pronounced in higher rated care (PTQ 3 or 4). Toddlers with fewer hrs. care gained more in social competence.

• For preschoolers, gains were seen in cognitive, language, and social skills, but neither PTQ level nor CLASS consistently predicted these gains (CLASS associated with school readiness and receptive language at 36 mo. but not at 60 mo.)
Policy Implications

• Closer examination of toddler and preschool CLASS quality data is needed (including of separate domains and interactions between PTQ ratings and CLASS ratings). Planned for publication.

• Did CLASS quality reach threshold levels sufficient to affect children’s gains? More attention in PTQ standards and coaching to process quality is needed.

• Program leaders should consider strengthening quality standards at Levels 3 and 4, using teacher education, in-service training, and evidenced-based curricula to increase possible child outcome gains.
Implications for Policy Researchers

• How have our findings been used?
  ◦ Early results in both provider and child outcome studies have prompted “midstream adjustments” in program policies

• What would we fund in future evaluations?
  ◦ Close studies of curriculum use in QRIS
  ◦ RCT within QRIS to determine the effects of consistent use of evidence-based curricula on child outcomes
  ◦ Study of child outcomes and quality using an individual child measure of ECE quality

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