2011 STAM – CCPRC Meeting Workshop D3 November 17, 2011, 10:15-11:45 am

Parent Engagement with QRIS

Description

The goal of this workshop was to engage participants in a dialogue in response to four types of questions: (1) What do we know about parent awareness or parent recognition of quality rating and improvement systems (QRIS); (2) what do we know about parental interest in enrolling their children in programs that are part of a QRIS initiative, and what do we know about parental decision-making and QRIS; (3) what do we know about parent perceptions of quality and satisfaction with services, and how are they being measured; and (4) what are the methods that researchers are using to collect and analyze data in this area of interest? Brief presentations responded to these questions and were followed by a facilitated dialogue with participants.

Facilitator

Kelly Maxwell, University of North Carolina at Chapel Hill

Presenters

Michel Lahti, University of Southern Maine Karen Ruprecht, Purdue University Tabitha Isner, Child Trends Rebecca Starr, Child Trends

Scribe

Amy Blasberg, Child Trends

1. Documents in Session Folder

 "Parents and QRIS: Cross-State Findings," Michel Lahti, Karen Ruprecht, Rebecca Starr, Tabitha Isner and Kelly Maxwell

2. Summary of Presentations

- Overview: Kelly Maxwell
 - Session will address: What might we want to know from parents? Can we get this information from parents through a survey: What kind of results are States seeing? What information have participants gathered from parents?
 - Session addresses parent surveys that have been completed in Indiana, Kentucky, Maine and Minnesota which focused on parents with children in QRIS-rated programs.
- **Summary of Presentations**: Michel Lahti, Karen Ruprecht, Rebecca Starr and Tabitha Isner.

- In Indiana and Minnesota, we asked parents with children in QRIS-rated care if their child is with a QRIS-rated provider. We didn't assume that parents were aware their child's provider was QRIS-rated.
- o In other States, we asked parents if they had heard of the QRIS. In Indiana, we had a checklist of methods by which parents could have heard about QRIS. In some States we asked if parents used the information and, if so, how helpful it was; we also asked whether parents were satisfied overall with the information they received.

o Findings

- Awareness: Across States, most parents had not heard of QRIS. In Minnesota, awareness increased between 2008 and 2010. In Indiana, we separated our pilot sites to see if awareness was greater in areas where the QRIS had been around longer, and we found that awareness was considerably higher here. From this we concluded that awareness takes time.
- Helpfulness and User-Friendliness: Among parents in Kentucky who reported using QRIS information, most parents (more than 90%) answered that Kentucky STARS was somewhat or extremely helpful in making their child care decisions. Even though very few had actually used the QRIS, those who did reported that it was helpful.
- Impact of QRIS on Child Care Decision Making: We asked how important a program's QRIS level would be to parents' future decision making. In Kentucky, after we explained what STARS was, parents tended to say that a provider's rating would be somewhat or very important. In Indiana, parents have increasingly reported that a provider's rating would be important in making their child care decisions.
- *Helpfulness*: When asked, "How helpful would it be if your community had a child care rating system that would give you information you could use for selecting child care?" most parents responded that it would be very or somewhat helpful to have this information available.
- Parental Satisfaction with Quality of Child Care: Parents tend to overestimate the quality of care their children receive, so we tried to address the question of parental satisfaction as, "If you could change one thing about your provider so that it better met your needs or your child's needs, what would you change?" and "If a friend of yours with a child the same age as your child was thinking about using [provider] to care for his or her child, would you recommend this provider?"
 - O There was not much variation in what parents reported as their priorities and perceptions relative to satisfaction. More variation was achieved when we asked parents to rate the importance of aspects of care and compared this to their ratings of providers. With such questions, we created a satisfaction measure and got more variation.
- Perceptions of Parent Engagement: In Maine, with higher ratings, providers are expected to do more with families. Questionnaires are sent to providers for distribution to the parents with self-addressed envelopes. Survey responses are then mailed directly to the University. The data indicate that most parents were given a handbook (93%), almost half of parents were given information about local services (49%), almost half have children at a program with a parent

advisory group (47%), and almost half of parents received daily written communications about their child's day (46%).

3. Questions and Group Discussion

- How much did you explore the issue of whether parents know about QRIS versus knowing what QRIS really does?
 - o In Minnesota we started at the open-ended level and then got more specific. We asked if parents know where to go to get a list of providers, and then asked them where they would go to get information about the quality of child care providers.
 - o In Indiana we asked, "Is your child's provider in Paths to Quality?" If we needed to follow-up, we could identify what Paths to Quality was. After our first wave, which included pilot sites where parents were much more aware of QRIS, we added that question "Is your provider in the Paths to Quality-rated system?"
 - o When you ask parents how they found out about child care, what did they say? Word of mouth or driving around. In North Carolina, we have had QRIS built into licensing for 10 years. When we did the Smart Start evaluation, and asked parents how they get their information, it was not at all what States think about investing in: they said they asked their friends and neighbors and/or members of their church community.
 - o For those of you who have data, can you disaggregate data about awareness being higher where there are more programs rated?
 - In Indiana, parents told us that they heard about QRIS from their providers. This taught us that we need to have very good materials to give to providers.
 - There may be differences between family-based providers and center-based care. In Minnesota, when family child care providers were asked about being stuck at levels 1 or 2, they said this doesn't matter to parents, what they care about is me and my relationship with their child. In centers, there is more advertising, and there's a difference in terms of awareness.
 - In California, we find that it is the first person who talks to parents who makes the most difference. How do we get first-line folks to spend a little time helping that parent at think about some options? A couple of States now stipulate that R&R's make initial referrals to providers in QRIS.

o Marketing strategies:

- In North Carolina, all providers are rated and parent awareness is built-into the performance standards for the Smart Start partnerships—early-on posters and cards were blanketed to pediatrician offices, libraries and social services departments and providers who got good ratings received a press release to send out.
- In Minnesota, parent awareness strategies included a campaign with radio, web pop-ups and newspaper ads; data is available about an increase in website hits after the campaign. After the campaign stopped the hits decreased. Minnesota is creating a separate 501c3 as it goes statewide to fund marketing and evaluation.
- In a study with low-income parents, 21-percent had heard of Parent Aware, which was higher than the general population. Parents identified their caseworker as a source of information.
- Indiana piloted a program (which is now being implemented in other areas of the State) that involved training R&R employees in how to talk about QRIS; parents

- are only being referred to QRIS-rated providers. There are also plans to work with nurses and pediatricians to talk about the QRIS.
- O Would you talk about parent satisfaction? Child Trends found an underlying factor which they called "education" which referred to using a curriculum, having formal education, etc. This held together as a factor and more variation was observed, particularly with center-based care.
 - In Minnesota, cognitive testing was done. For example, "Use of a curriculum or planning tool" was an item aligned directly with the QRIS. If parents are using a center-based provider, they're much more likely to say the provider is using a curriculum, etc. Parents were more ambivalent about items such as wanting the provider to talk to them every day.
 - Need to remember that when States began to develop QRIS, they had other motivations including wanting to clearly articulate the definition of quality. And in some States, the State is a primary purchaser of care, and the State is calling for a mechanism to encourage parents to choose what we know is quality.
 - Concerns expressed: about being forced to pick an acceptable level of satisfaction; parent satisfaction being the only indicator; linking QRIS to child outcomes (selection bias); and possible conflict between the "R" and "I" in QRIS.
 - In Utah, with pressure from providers, instead of QRIS, they have a campaign that recognizes child care providers for the great work they're doing.
- O How are you measuring parental engagement or parental awareness in your QRIS?
 - Washington State received parent input in the beginning to get a sense of what's important to parents (as well as community perspectives).
 - In Virginia, the parent can look at the rating across the categories, across a particular provider, and add comments if they choose.

4. Summary of Discussion with Presenters and Participants

- This session was about parents' knowledge of and engagement with QRIS.
 - o Kelly noted that QRIS is intended to be a tool for parents, so they are trying to get data from States regarding parents' use of QRIS.
 - Michel Lahti, Karen Ruprecht, Tabitha Isner, and Rebecca Starr presented data from Minnesota, Indiana, and Kentucky, which suggest that there is not widespread awareness of QRIS among parents (less than 20 percent in three States). However, awareness is increasing over time and does seem to be higher in areas with more QRIS-rated programs.
 - O The discussion covered a variety of topics, including the importance and difficulty of assessing parents' awareness and use of QRIS. In Maine, a parent survey was used as a way to validate aspects of the program standards. Marketing strategies, incentives, and best investments for QRS outreach were also discussed.