Improving Quality for Child Care Centers in Greater Philadelphia:

An Evaluation of Success By 6®

Program Design Appendix

Mallory Warner-Richter, M.P.P., Claire Lowe, B.A., Kathryn Tout, Ph.D., Dale Epstein, Ph.D., Weilin Li, Ph.D.

Table of Contents

INTRODUCTION

The Success By 6® (SB6) initiative is designed to support early care and education centers in improving and sustaining quality in Pennsylvania's Keystone STARS Quality Rating and Improvement System (QRIS).[1] Keystone STARS is a statewide QRIS that is comprised of four levels, STAR 1 through 4. Achieving high quality early care and education is a critical activity to promote positive development of children in Philadelphia and the nation, particularly for children from low-income families. SB6 was launched in 2007 by the United Way (UW) of Greater Philadelphia and Southern New Jersey with funding from the William Penn Foundation, United Way, and other community partners. Centers engaged in the 18 – 24 month initiative receive intensive technical assistance, program improvement funds, and other resources that target movement in Keystone STARS from a STAR 2 to a STAR 3. In addition, SB6 supports sustainability at the centers by offering leadership development as well as financial awards for centers that achieve a STAR 3 or 4.

SB6 is at a point in implementation that is ideal for reflection and evaluation. In the past eight years, SB6 has recruited 368 centers to participate in the initiative and has achieved an overall success rate (center movement to a STAR 3 or higher within 24 months of participation) of 60% regionally and 46% in Philadelphia. From the inception of SB6, the management team at UW, with partners from the Delaware Valley Association for the Education of Young Children (DVAEYC), Montgomery Early Learning Centers (MELC) and Saint Joseph's University, has engaged in shared decision-making and a continuous improvement process to revise and update service components in response to feedback from the centers that participate and the technical assistance consultants working in the field. To supplement this ongoing internal review of SB6 activities and progress, Child Trends was engaged in 2014 to conduct an evaluation of SB6 design, implementation and results. **The purpose of the SB6 evaluation report is to describe key findings and to offer a set of recommendations for SB6 stakeholders to consider for improvement. The report is intended to inform discussions about quality improvement within SB6 and nationally.**

The main report (available at www.childtrends.org) is structured to provide key themes and findings from the evaluation with minimal description about the methods and analyses. The main report includes the following:

* Background information about quality improvement initiatives similar to SB6 and what is known nationally and in Pennsylvania about movement up the quality levels in a QRIS
* A description of SB6 and its components (including a logic model)
* A brief overview of the evaluation questions and methods
* Evaluation findings related to SB6 design, implementation and success rate
* A synthesis of key themes and recommendations

This Program Design appendix accompanies the report and analyzes whether and how the key components of SB6 align with effective practices in early care and education quality improvement. We also provide recommendations for SB6 design.
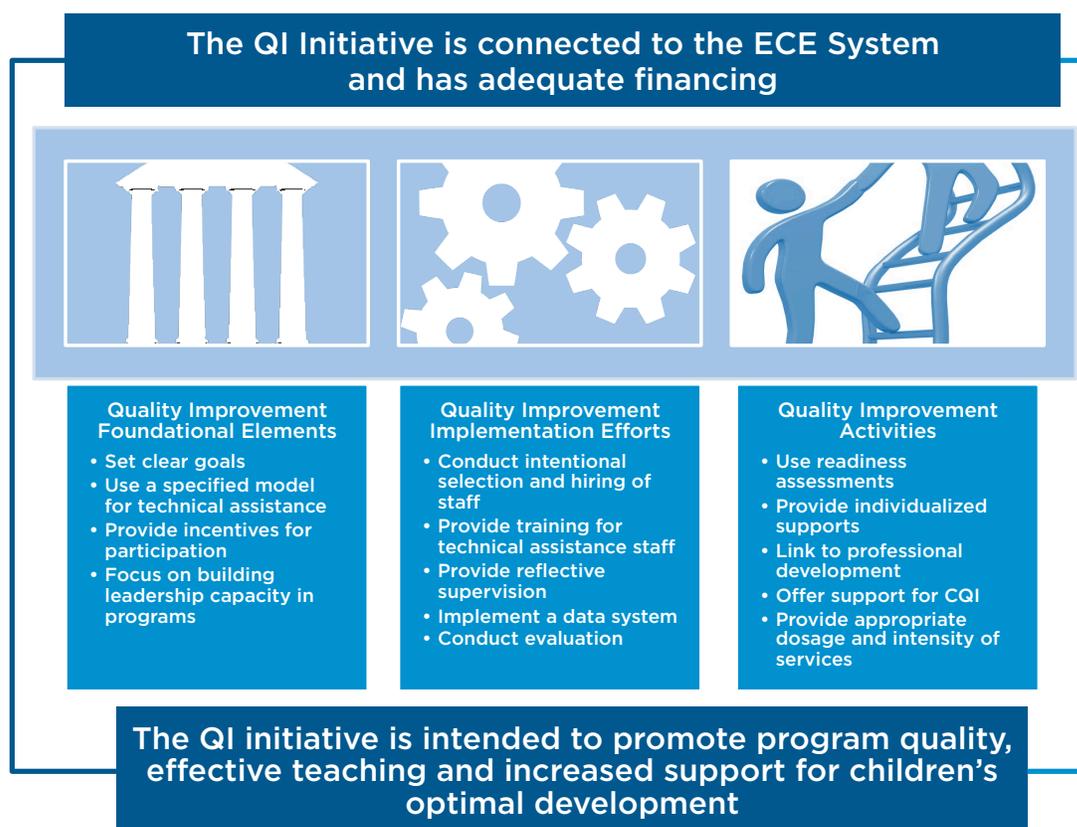
---

[1] Keystone STARS is an initiative of Pennsylvania's Office of Child Development and Early Learning (OCDEL).

BACKGROUND

Success By 6® provides a multi-faceted approach to quality improvement in child care centers. Participating centers receive consultation and professional development supports accompanied by quality improvement funds. To determine how well the design of SB6 aligns with best practices in the field of early care and education (ECE) quality improvement, Child Trends completed two activities. The first step was to conduct a synthesis of existing research literature and input from national ECE experts. The practices and considerations identified in the synthesis were described in the *Blueprint for Quality Improvement Initiatives in Early Care and Education* (Tout, Epstein, Soli & Lowe, 2015).

Next, Child Trends conducted an analysis of the SB6 program design to determine to what extent SB6 components matched effective practices identified in the Blueprint. Practices and considerations were reviewed in three groups: Quality Improvement Foundational Elements, Implementation Efforts, and Activities. In addition to these three groups identified in Figure 1, we considered the connection of the quality improvement (QI) initiative to the larger ECE system, including the financing of the initiative. We also examined the relationship between the practices and considerations and the intended outcomes to promote program quality, effective teaching, and increased support for children's optimal development.

Figure 1: Components of the Blueprint for Quality Improvement Initiatives in Early Care and Education

The QI Initiative is connected to the ECE System and has adequate financing

Quality Improvement Foundational Elements	Quality Improvement Implementation Efforts	Quality Improvement Activities
• Set clear goals • Use a specified model for technical assistance • Provide incentives for participation • Focus on building leadership capacity in programs	• Conduct intentional selection and hiring of staff • Provide training for technical assistance staff • Provide reflective supervision • Implement a data system • Conduct evaluation	• Use readiness assessments • Provide individualized supports • Link to professional development • Offer support for CQI • Provide appropriate dosage and intensity of services

The QI initiative is intended to promote program quality, effective teaching and increased support for children's optimal development

Source. Tout, K., Epstein, D., Soli, M., & Lowe, C. (2015). A Blueprint for Early Care and Education Quality Improvement Initiatives. Final Report. Prepared for the William Penn Foundation. Minneapolis, MN: Child Trends.

This report, describes how the SB6 service model aligns with the practices and considerations identified in the Blueprint, and provides recommendations and considerations for next steps. Descriptions of the SB6 model were developed based on information shared through documents and personal communications with SB6 staff. Findings from other SB6 evaluation activities are also included in this report to clarify why and how design elements are working well and which elements can be strengthened.

RESEARCH QUESTIONS

In collaboration with the William Penn Foundation and UW leadership, Child Trends developed research questions to address SB6 design:

- How does SB6 align with the Blueprint for Quality Improvement?
- Are there any national or regional quality improvement initiatives utilizing particularly effective approaches that could be applied to SB6?
- Are all of the components of SB6 shown to be effective in improving child care center quality? Is there anything that is not needed or that should be added?
- What SB6 components are most strongly related to child development and learning?
- What SB6 components demonstrate best practices in technical assistance?
- Are there other approaches to assist providers in maintaining quality after successful completion of SB6?

KEY FINDINGS
How does SB6 align with the Blueprint for Quality Improvement?

To review briefly, the Blueprint identifies practices and considerations that emerge from the literature on effect QI initiatives (see Figure 1).

- The first group provides the foundational elements recommended for a QI initiative. These features set the stage for the clarity and focus of the initiative. Practices such as having 1) clear goals, 2) a specified model for the QI initiative, 3) incentives for participation, and 4) a focus on leadership are all important foundational elements in QI initiatives.
- The second group of practices includes efforts that allow for effective implementation of QI initiatives. These features are "drivers" of QI implementations and include elements such as 1) the selection, training, and supervision of TA providers, 2) effective use of data systems, and 3) evaluation of QI initiatives. Implementation research across different fields identifies these as key implementation drivers (Fixsen et al., 2005).
- The third group of practices includes the activities that create relationships between the quality improvement staff and the centers themselves. Features such as 1) assessing a center's readiness, 2) implementing strategies to meet individuals' needs, 3) linking on-site technical assistance to professional development activities, and 4) engaging in continuous quality improvement are all essential to a QI initiative and its effectiveness. Other quality improvement activities include tailoring 5) decisions about the dosage and 6) the intensity of technical assistance. Emerging empirical evidence and expert consensus in the field suggest that these quality improvement activities are central to a successful initiative.
- The initiative is "anchored" to the broader ECE system and financing and it has an explicit goal to promote program quality, effective teaching and support for children's development.

Table 1 provides an overview of the Blueprint and how SB6 practices align with each element. We highlight insights from the implementation and outcome evaluation results and offer recommendations for strengthening each element.

SB6 incorporates many of the Blueprint practices into the program design and implementation. For example, SB6 connects its program to the larger early care and education (ECE) system, enhances leadership in child care centers, and assesses the readiness levels of centers entering the program. SB6 also utilizes data systems and evaluation as a means of tracking the quality of child care center services and outcomes. In this section we highlight the Blueprint elements, how SB6 components align with each and recommendations for strengthening SB6.

Blueprint anchor points:

Access to adequate financing and connections between the QI initiative and the ECE system

Funding for SB6 has been provided by the William Penn Foundation since 2007. In addition, SB6 is closely aligned with Keystone STARS in Pennsylvania through its explicit goal of moving centers from a STAR 2 to a STAR 3 or 4. The SB6 management team includes representatives from two regional keys which allows for coordination and planning between SB6 and Keystone STARS. The connection with STARS also provides centers with access to technical assistance in areas not addressed by SB6 (for example, school-age care) and STARS awards. Moving forward, SB6 can continue identifying efforts that can strengthen system connections and options for bolstering financial support. For example, the evaluation report recommends that SB6 consider opportunities to support the workforce in SB6 centers through the provision of financial incentives such as scholarships and wage supplements. These efforts will need additional funding and financing strategies.

Focus on program quality, intentional teaching and support for children's development
An essential feature of a QI initiative is a focus on practices that increase support for children's optimal development. This priority on children's development serves as a guiding principle for decision-making, goal-setting and outcome measurement, all key elements in a QI model. SB6 has included a focus on children's development in their logic model in which children's school readiness is identified as the ultimate outcome of the initiative. We recommend providing more explicit articulation of the *practices* that will be implemented by teachers as a result of participation in SB6 that are expected to promote children's development.

Foundational Elements:

Clear Goals for Quality Improvement

While SB6 works towards a broad goal of moving centers to a STAR 3 or 4, TA consultants also work with centers to set individualized, intermediate goals. They use a customized approach to reach those goals, which emerges through TA consultation content. TA consultants report that they spend the majority of their time with centers focused on the ERS. Other topical focal areas include curriculum/observation/ assessment, business practices and continuous quality improvement. We recommend that SB6 engage in discussions with partners about the content of the goals that are being set. Are centers focusing on ERS components with strong connections to children's development, or are the goals focused on materials and facilities? It is possible that goals could be more targeted to instructional practices and strategies that support child development. Because the Keystone STARS indicators required at STAR 3 level span a variety of quality areas, it is important to understand whether and how TA consultants prioritize supporting practices that matter most

for improving instructional quality and promoting children's development. These priorities will need to be revisited based on the revisions made to Keystone STARS.

Specified Model

Developed in partnership with United Way staff and partnership agencies, the SB6 model derives from a previous program called Early to Learn. By using and adapting an existing quality improvement model, SB6 was able to address known challenges and develop new strategies for working with centers. The model continues to be adapted as new challenges and priorities emerge. SB6 has provided a manual for TA consultants that outlines key features, activities and resources for the SB6 model. As noted, the current model is heavily focused on the ERS as a cornerstone for assessment and quality improvement. SB6 may benefit from inclusion of a more explicit component focusing on intentional teaching and interactions.

Incentives for Participation

Incentives play a core role in the SB6 model. SB6 offers financial incentives at the center-level through Program Improvement Funds (PIF) and High Quality Awards, both of which support continuous quality improvement. In addition, the professional development offerings and individual TA can be considered non-financial incentives that promote participation and QI at the provider-level. To promote further support for the workforce, SB6 can consider identifying additional non-financial incentives such as free or low-cost trainings or provision of classroom materials as well as financial incentives to support attainment of higher Career Lattice levels and educational qualifications.

Focus on leadership

Directors play a central role in ECE centers' quality improvement through their leadership and capacity to support and maintain high quality practices and learning environments. SB6 embeds a leadership focus by offering Director Learning Circles and requiring director participation in site visits with TA consultants. Keystone STARS also promotes director leadership by including requirements such as the Director's Credential at STAR 3. Evaluation results suggest that the Director Learning Circles are viewed positively by directors, but the uptake could be higher. SB6 can examine the Learning Circles to identify areas for improvement and refreshment of the curriculum.

Implementation Efforts:

Selection, training and supervision of TA providers

The selection, training and supervision of SB6 TA consultants is done through a partnership with two TA agencies: the Delaware Valley Association for the Education of Young Children (DVAEYC) and Montgomery Early Learning Centers (MELC). For selection, all TA consultants must be approved through the Pennsylvania Quality Assurance System (PQAS registry) and must meet Keystone STARS TA qualifications standards, including minimum education requirements. To ensure that all three organizations (United Way, DVAEYC and MELC) are in alignment, the SB6 program has staff from each agency serve on the SB6 management team. This partnership is an important dimension of the program because it ensures cross agency agreement in expectations of the TA consultants. In addition to this alignment at the management level, SB6 should consider consistency across TA consultant levels and areas of expertise. TA consultants can choose from 10 areas of expertise and though they are often qualified in multiple areas, they are only required to be qualified in one area. By requiring one or more of these areas of expertise, greater consistency in TA service delivery could be ensured.

In addition to consistency in TA expertise, TA training can increase consistency in service delivery. Because QI in is an ongoing activity, it is important to consider both initial and

ongoing trainings. Initial TA consultant training is done primarily through DVAEYC and MELC with United Way staff hosting select meetings to orient consultants to the SB6 program. For ongoing training, the United Way staff conduct two SB6 TA meetings annually to provide professional development training and program updates. TA consultants are further required to attend each Cohort Welcome Meeting. A combined 71% of TA consultants found these cohort welcome meetings very or somewhat effective in helping them provide TA. Between UW and the TA agencies, TA consultants report receiving an average of 15.5 hours a year of ongoing SB6 related PD. When asked what additional training they would like to receive, 50% of TA consultants reported wanting PD on conflict resolution, business practices, change management, or leadership management. SB6 can consider these results when planning upcoming training for TA consultants. It will be important to also consider the revisions to Keystone STARS standards and the training needs associated with changes to the standards.

Reflective supervision, another important practice in a QI initiative, refers to the oversight of TA providers by a supervisor or TA agency. Reflective supervision for the TA consultants in SB6 primarily takes place within the partner agencies, DVAEYC and MELC, rather than through United Way or SB6. However, UW does provide feedback to the TA consultants about their support in moving centers to a STAR 3 rating and also provides an annual review of the data by looking at the success rates of the TA consultants overall. When TA consultants were asked what they spent most of their time on during supervision meetings, over half (57%) reported that they reviewed paperwork requirements. When meeting with other consultants, 64% reported discussing consultation strategies. Based on these findings, we recommend that SB6 gather information about how partner agencies engage in reflective supervision with TA consultants and consider providing training on reflective practices. TA consultants may benefit from more reflective discussion with supervisors in addition to reflection already occurring with their peers.

Data Systems
Data systems provide a systematic method of collecting, tracking, storing, and analyzing information. In a QI initiative, data elements can include records of TA contact, assessment scores, or state rating data. Currently, a comprehensive and extensive data collection process exists within SB6. Information from the initial SB6 application, director's reports, contact logs, and quarterly reports on each center are all collected and stored in either an online data base, which can then be exported into excel, or in Word and PDF files. Further descriptive data on centers and their progress is stored in a master excel list, which gets updated regularly. SB6 uses the data regularly by compiling quarterly Data Summary tables on all the SB6 cohorts. These methods are used for internal checks to evaluate the extent to which centers are enhancing or maintaining certain levels of quality. However, these data are stored separately in individual documents and not in a comprehensive data system, making it difficult to extract the data and collectively analyze the progress of the centers in the SB6 program. Furthermore, data gathered as part of Keystone STARS are not integrated with the SB6 data, aside from periodic files that are requested by SB6. If identified as a priority, we recommend that SB6 bolster their data infrastructure by developing direct access to reports from Keystone. We also recommend that SB6 invest in a web-based data system that can further facilitate the progress monitoring that already occurs.

Evaluation
In addition to internal processes used to monitor progress of SB6, William Penn and UW have engaged an external evaluation partner (Child Trends) to conduct a comprehensive analysis of SB6 effectiveness. It will be important to share the results of the evaluation with key stakeholders and with the larger field of ECE quality improvement.

Quality Improvement Activities:

Readiness assessment process

SB6 conducts several assessments for participating centers that help the UW staff and TA consultants determine the readiness and needs of centers. For example, UW conducts a review of each center's application to determine if they need more support and capacity building before entering into the main cohort. Directors in this "Readiness Group" meet monthly as a workgroup to help build leadership skills and capacity for QI. Additionally, all SB6 centers receive an initial ERS visit to assess the quality of the learning environment in classrooms and establish baseline scores. These baseline scores are then used to develop the center's Service Plan which outlines improvement goals plans. These practices align well with the way readiness assessments are described in the literature, and TA consultants identify the ERS Assessment as a topic they spend the most time on with centers. For next steps, it will be useful to track the effectiveness of the Readiness Group approach. It may be that the needs of centers in new cohorts require the formal development of new approaches in addition to the Readiness Group.

Individualizing TA strategies and linking on-site TA with professional development

The SB6 consultation model allows for the use of different strategies depending on the type of technical assistance needed by centers. In collaboration with the center, TA consultants create a Service Plan that identifies the areas a center needs to work on in order to move up to a STAR 3. TA consultants then use a range of strategies and tools to define, support and evaluate their consultation. These tools can include results from the ERS assessment, the Service Plan, the Program Improvement Fund budget, and the SB6 Quarterly Report. A consideration for SB6 is to track and record a prioritized set of strategies TA consultants use during their on-site visits. While TA consultants currently track objectives for each visit and write up summary notes, consultants are not asked to identify, track, or list all the strategies or approaches that they use (modeling, reflection, etc.). Training and clear definitions would need to be provided for each strategy to ensure consistency of documentation.

Along with individualization, emerging evidence shows that on-site technical assistance may be most effective when linked with other professional development (Zaslow et al., 2009). Professional development opportunities exist within SB6 through the Director and Peer Learning Circles, and the Institute for Family Professionals (IFP) courses. However, the extent to which these opportunities are linked with the content provided on-site with the TA consultants is not clear. Few directors (8%) report participating in IFP courses and only 34% report being satisfied with the courses. One consideration is for SB6 to identify more opportunities to connect onsite TA consultant activities with the other professional development opportunities.

Focus on Continuous Quality Improvement (CQI)

Continuous quality improvement (CQI) is a newly emerging process in quality improvement initiatives. The intent of a CQI approach is to promote ongoing reflection and change as a way to support continued improvement. The SB6 model aligns well with a CQI approach. TA consultants and center directors work together to create center Service Plans, which are revised throughout the consultation process based on the changing priorities and needs of the center. In addition, centers are eligible to receive Program Improvement Funds (PIF). These funds support the center in making enhancements, thus supporting continuous improvement. At the end of their participation, directors attend a meeting to review the challenges and achievements that arose during program and work to identify strategies to ensure CQI. These program components help maintain quality after completion of SB6. To facilitate ongoing CQI in SB6 centers, it may be helpful to develop a web-based version of the Service Plan that centers can use even after participation in SB6 is complete.

Dosage and intensity of technical assistance

The dosage of services refers to the amount of technical assistance given to a particular center, teacher, or director in a quality improvement initiative. Specifically, dosage is measured by determining the frequency of technical assistance (i.e., how often or how many times the TA consultants meet with staff), as well as the length of the on-site visits (i.e., how long the TA consultants meet with the staff when they are on-site). SB6 has a pre-determined set of technical assistance hours for each center that are determined based on the size of the center (i.e., number of classrooms and number of children). However, the frequency of the site visits varies. According to the TA survey, 69% of TA consultants visited centers twice per month, while 23% visited once per month. Frequency of visits is determined by the TA consultant in partnership with the center staff, depending on what the center needs in order to achieve and sustain a STAR 3 rating.

Intensity is assessed through a calculation of the dosage of on-site support and the duration of the intervention over time. Each cohort in SB6 typically runs on an 18 month cycle. However, some centers are determined by the SB6 staff to need additional readiness before beginning the cohort program, and are part of a Readiness Group, which incorporates an additional six months prior to entering the 18 month cycle cohort. The dosage and increased intensity of the Readiness Group is a useful addition to SB6 as it allows SB6 staff more time to work with specific centers on leadership skills and building capacity in order to help them be better prepared for the program.

Evaluation results suggested that TA consultants have some concerns about the efficiency of time spent with centers. It will be useful to collect feedback from TA consultants to understand their concerns about efficiency. Overall, we recommend that SB6 continue to develop program adaptations that allow different levels of intensity and duration depending on centers' needs.

Are there any national or regional quality improvement initiatives utilizing particularly effective approaches that could be applied to SB6?

Quality improvement (QI) initiatives vary widely depending on the goals and available resources including staff and funds to provide financial incentives for participants. SB6 shares similar features with other QI initiatives linked closely with a state or local Quality Rating and Improvement System. These initiatives typically use Environment Rating Scales to assess classroom quality. Consultants use the information from the assessment to work jointly with classroom teachers/directors to develop an improvement plan. Of the models in place with these basic features, SB6 stands out from others with the availability of relatively generous awards for the purchase of materials and facility improvements that align with the quality improvement plan developed between the TA consultant and the center.

The evaluation results suggest that a focus on improving qualifications and competencies of center staff would be an important complement to the TA consultation and Program improvement. Staff career lattice levels were noted as the most prevalent challenge to moving from a STAR 2 to a STAR 3. QI initiatives similar to SB6 have included access to TEACH scholarships and other resources to promote access to credit-bearing coursework and degree completion programs. One model in California shows promising results of a degree completion program, though study findings also indicate other concerns in higher education programs for the early care and education workforce (Whitebook, Kipnis, Sakai & Almaraz, 2011).

Overall, when reviewing possible enhancements for SB6, it is important to consider pending changes to Keystone STARS standards and how these will shape the needs of centers in SB6.

Are all of the components of SB6 shown to be effective in improving child care center quality? Is there anything that is not needed or that should be added?

The design of the SB6 outcomes evaluation does not permit a statistical examination of each SB6 component and its contribution to centers' quality improvement and movement in Keystone STARS. However, the implementation results provide insights into the SB6 components that are valued by center directors and that TA consultants believe are most effective in supporting quality improvement.

- Nearly all (94%) of directors previously in SB6 agreed that their center is higher quality as a result of participating in SB6, compared to 67% of directors who are still in process with SB6. Current and previous SB6 directors reported that the SB6 TA consultation and Program Improvement Funds are/were the most helpful in achieving their Service Plan goals. Current and previous SB6 directors generally reported being very satisfied with the various SB6 activities. Among previous SB6 directors, however, lower satisfaction levels ("somewhat satisfied") or reports of "no opinion" or "not applicable" were noted for Directors' Learning Circles, Peer Learning Circles, and Institute for Family Professionals Courses.
- TA consultants reported that the ERS results are the most useful tool they use in quality improvement, followed by the SB6 Service Plan (a jointly developed plan for improvement structured around the Keystone STARS quality standards) and the Program Improvement Funds. All TA consultants reported that they have positive relationships with the centers they serve and believed that SB6 is beneficial for centers.

Among the services provided by SB6, participants and consultants agree that the most valuable are the TA consultation (based on ERS results and delivered in alignment with the individually developed Service Plan) and the Program Improvement Funds.

The Director and Peer Learning Circles and the coursework available for participants are not perceived as positively as the consultation process and the Program Improvement Funds, and it is clear that some directors choose not to participate. It will be useful to take steps to understand these activities further to make decisions about their value to SB6.

What program components are most strongly related to child development and learning?

The SB6 logic model identifies children's school readiness as the ultimate desired outcome for the initiative. The logic model highlights improved staff qualifications and higher STAR rating as the mechanisms through which improved children's outcomes will be achieved. While these are reasonable mechanisms to include in the logic model, it will be helpful to identify a more specific set of teacher practices that (a) are expected to be changed by SB6 and (b) have been shown to promote children's positive development. Ideally, these practices should align with the new Keystone STARS standards. Practices that could be called out in the logic model and targeted explicitly in TA consultation to support children's development include intentional teaching (i.e., ensuring that interactions with children are consistent with their individual needs as identified through observations and assessments) and instructional supports (i.e., provision of developmentally-appropriate models and questions to promote learning).

What program components demonstrate best practices in technical assistance?

Findings from the SB6 implementation evaluation indicate that SB6 implementation is generally effective and achieves high levels of satisfaction among participants. A review of SB6 implementation highlighted several ways in which SB6 is aligned with best practices and also areas which could be strengthened:

- The SB6 management team provides strong, collaborative leadership for the initiative. They offer a forum for reviewing feedback and the flexibility to make changes as needed.
- TA consultants spend the majority of their time with centers on topics related to the ERS. This topical focus aligns with centers' Service Plans, and directors perceive that their centers are higher quality as a result of participating in SB6.
- TA consultants spend the majority of their time on-site with centers asking and answering questions. They report that providing feedback and encouraging reflection are two of the most important TA strategies they use (in addition to relationship building). TA consultants report engaging in some modeling, observation and teaching, but these strategies are used less often than asking and answering questions. It will be helpful to consider whether and how opportunities to observe best practices (either through video or in-person demonstrations) can be incorporated into consultation to promote the application of new practices.
- Research demonstrates that technical assistance paired with professional development (such as coursework or training) can support change in practices. SB6 can consider how opportunities for knowledge-building (through training and coursework) can be paired more effectively with opportunities for skill-building (through consultation).

Are there other approaches to assist providers in maintaining quality after successful completion of SB6?

The literature is limited on maintenance of quality improvements after participation in an initiative like SB6. The most promising practices for maintaining quality relate to development of leadership capacity and engagement in continuous quality improvement processes. SB6 has acknowledged the important role of leadership in quality improvement through inclusion of the Learning Circles. As noted, it will be useful to examine the curriculum and strategies used in the Learning Circles to make sure they are engaging more participants and promoting new leadership practices. Additionally, SB6 could consider the development of a Service Plan to use after centers complete SB6 and that would them centers to engage in their own quality improvement activities and track their success using pre-defined metrics.

CONCLUSION

Overall, SB6 encompasses a majority of the practices and considerations involved in an effective quality improvement initiative. Table 1 provides a summary of each Blueprint element and recommendations for improvement.

Table 1: Alignment of SB6 Practices with the Blueprint and Recommendations from the Evaluation

	Dimensions	What is it?	Why is it important?	Success By 6 Practices
ECE System Financing and Connections	Access to adequate financing and connections between the QI initiative and the ECE system	Financial supports at all levels (system, programs, workforce and families). Linkages between the QI initiative and ECE system through formal or informal partnerships.	Stability and adequacy of funding are critical to QI initiatives. Connections between the QI initiative and the ECE system ensure common standards for quality improvement, access to system resources that can support quality improvement (e.g., coaching, consultation and other technical assistance; coursework; training) and motivation for participation (e.g., recognition in a QRIS, eligibility for participation in state pre-kindergarten program).	• SB6 is funded by the William Penn Foundation, which has provided funding for the initiative since 2007. • SB6 is embedded in the larger ECE system through its connection to Keystone STARS. **RECOMMENDATION: Continue seeking sustained financial support for SB6. Consider including financial supports for the workforce in SB6 centers including scholarships for college tuition, wage supplements and other professional development**
QI Foundational Elements	Clear goals for quality improvement	A clearly articulated theory of change for how a QI initiative supports program quality, effective teaching and children's development.	QI initiatives often have the goal of improving child outcomes but may inadequately specify the mechanisms to achieve this goal. Research suggests that quality interventions with well-focused goals that are clearly linked to children's development are more likely to result in measureable gains for children than interventions with only a general goal to improve program quality. A QI initiative can also promote individualized goals within set parameters.	• SB6 has a clear overarching goal of achieving and maintaining a Keystone Star rating of 3 or above. • SB6 has a logic model that demonstrates how SB6 connects activities to improved center quality, effective teaching and children's development. • Each center service plan sets individualized goals for achieving a higher STAR rating. **RECOMMENDATION: Assess the extent to which center goals contain explicit language about practices that support children's development. Plan for adaptations to overall SB6 goals that may emerge from revised Keystone STARS standards.**
	Specified model	The use of a well-specified model (either formal or project-developed) to guide the delivery of QI supports.	A specified model is critical to ensure that quality improvement supports are delivered with consistency. The model may be a formal, evidence-based model or it may be a project-developed approach that blends components of various models or theories and aligns with the goals of the initiative.	• The SB6 model was developed specifically for the project, but was based on and adapted from a previous research-based project. • SB6 developed a manual for centers and TA consultants to guide the service delivery with programs. • The model and delivery emphasize improvements based on the Environment Rating Scales. **RECOMMENDATION: The current model may benefit from a more explicit component based on supporting intentional teaching and interactions.**

	Dimensions	What is it?	Why is it important?	Success By 6 Practices
	Incentives for participation	The financial and non-financial incentives offered at the program- or provider- level to motivate participation and improvement in the initiative.	Incentives are a helpful and straightforward method for engaging participants in a QI initiative. It is important to set parameters around how incentives may be used, align incentives with the goals of the QI program, and support programs in accessing the incentives.	• SB6 has center level-incentives (Program Improvement Funds and High Quality Awards) and staff- level incentives including professional development opportunities and technical assistance. • SB6 requires a budget that shows how funds align with Service Plan goals. **RECOMMENDATION: Consider the inclusion of developing additional staff level incentives to support attainment of Career Lattice levels and educational qualifications.**
	Focus on leadership	A focus on supporting and developing the leadership capacities of directors or program administrators.	Directors play a central role in ECE programs. Research has shown that their education, experience, and training directly influence their ability to facilitate quality improvement and maintain a high quality program. Given the vital role of the director and the growing body of literature on leadership, it is important that QI initiatives provide activities that are designed to support and develop the leadership skills and capacities of program directors or administrators.	• SB6 holds Director Leadership Circles. • SB6 created a Readiness Group to acknowledge the need for capacity-building in centers. • SB6 holds meetings with board members and owners of the centers to involve them in the program. • Directors report lower levels of satisfaction with Learning Circles and rank them lower than other SB6 components in their effectiveness. **RECOMMENDATION: Examine Learning Circle curriculum and format. Propose revisions to improve uptake and satisfaction among directors.**
QI Implementation Efforts	Selection and hiring of TA providers	Qualifications for selecting and hiring TA providers, such as years of experience, education level, and prior training.	Empirical evidence is limited about the criteria for selecting TA providers and what their minimum qualifications should be. QI initiatives typically hire TA providers who have educational qualifications at higher levels than teachers and who have experience working in ECE programs, especially with the QI model used in the initiative. Job descriptions and the hiring process can emphasize skills in working with adult learners and demonstration of competencies using role playing and vignettes. The literature does suggest that minimum qualifications should be set and standardized across the initiative.	• TA consultants come from two agencies, DVAEYC and MELC, and their qualifications are based on the agencies' requirements. • All TA consultants must be certified in at least one area of expertise. • If an area of expertise is needed in a center where their assigned TA consultant is not certified, another TA consultant who is certified to provide technical assistance can be brought in for support. • Some partners express concern about a limited pool for TA consultant recruitment. **RECOMMENDATION: Assess how areas of expertise shape the hiring process. Offer TA training to ensure that more areas of expertise are covered by the cadre of consultants.**

	Dimensions	What is it?	Why is it important?	Success By 6 Practices
	Training of TA providers	Ensuring that TA providers carry out the various quality improvement activities through provision of training and resources.	Training of TA providers and other staff in the QI initiative is an essential activity. It is important that staff receive initial training before they begin working with programs and ongoing training to ensure they stay up to date on QI practices that impact children's early learning and development.	• TA consultants attend initial meetings for the SB6 program, but all other trainings occur within the TA agencies rather than through SB6. • SB6 conducts two SB6 TA meetings/trainings annually. • SB6 partners report a need for TA consultants to have more experience in certain areas of consultation such as business practices. • About 30% of TA consultants found their initial training and onboarding very unhelpful. • TA consultants express an interest in more training on conflict resolution, business practices, change management, or leadership management **RECOMMENDATION: Develop a revised training plan for TA consultants to incorporate the focal topics of interest. Ensure that new training for TA consultants is developed on the revised Keystone STARS standards.**
	Reflective supervision of TA providers	Supportive oversight of TA providers by a supervisor or agency.	Reflective supervision ensures that meaningful services are delivered and provides a means for TA providers to debrief, share resources, and problem solve. It is important that regular supervision occurs through meetings with opportunities for sharing and reflection, peer interactions, and direct observations in the field.	• TA consultants meet with supervisors at least once per month and focus time on reviewing paperwork requirements and discussing specific centers. • TA consultants debrief with others in their agency at least once per month and quarterly with consultants in other agencies. They discuss STARS related topics and consultation strategies. **RECOMMENDATION: Develop training and support on reflective practice to encourage additional resource sharing and problem solving across TA consultants and supervisors.**
	Data systems and case management	A method of collecting, tracking, storing and analyzing information related to the QI initiative.	Data systems can support decision-making and program management. Data systems should include the following: 1) unique ID numbers for programs to facilitate linkages with other data systems; 2) case management features that allow TA providers to enter service delivery information and track their caseloads; 3) historical tracking of information to facilitate evaluation of effective strategies; and 4) access to a variety of users so the work of the QI initiative is informed by common data.	• SB6 has comprehensive data collection which includes data such as center applications, quarterly reports, contact logs, director reports, service plans, etc. • Many of these data are stored in individual files and documents making it difficult to assess and evaluate the data. • Data from SB6 and Keystone STARS are not integrated, and are only combined when there is a specific request to do so. **RECOMMENDATION: Invest in a web-based data system that facilitates progress monitoring. Explore opportunities for data sharing with Keystone STARS.**

	Dimensions	What is it?	Why is it important?	Success By 6 Practices
	Evaluation	Systematic collection and analysis of information to inform decisions, and increase understanding about how the program is working.	Evaluation is crucial for shaping QI program design and implementation, promoting accountability, determining effective strategies that lead to quality improvement, and informing continuous improvement of the QI program. An evaluation plan can articulate a "wish list" of short- and long-term evaluation questions.	• A master list is updated routinely that tracks the star levels and ERS scores for all previous and current programs. In addition, data summary tables are produced to evaluate how the centers are doing. • William Penn has hired an outside evaluator to engage in a formal evaluation of SB6. **RECOMMENDATION: Develop a plan for sharing evaluation results with key stakeholders and the larger field of ECE quality improvement.**
QI Activities	Readiness assessment process	An assessment to determine whether a program has the capacity to engage in a QI initiative (or component of the initiative).	Assessment of a program's readiness to engage in quality improvement activities is useful for identifying needs and targeting resources. QI initiatives may use a formal observation of the environment, a checklist during an intake interview, or other informal methods to gather information about a program. Information from the tools can guide decisions about whether programs need additional supports before beginning their participation.	• All applications are reviewed for level of readiness of the center. • Every center receives an initial ERS assessment. • There is a 90 day provisional period for all centers. • Centers that are determined to need more support are included in a 6-month readiness group to prepare them for entering the regular SB6 cohort. **RECOMMENDATION: Track outcomes for the Readiness Group to determine its effectiveness and whether additional modifications are needed to the supports for the newest cohorts of centers.**
	Strategies used to meet the individualized needs of programs	Activities used to individualize technical assistance to meet the distinct needs of programs/providers.	The heart of individualized work with programs is the flexibility to use different strategies to support the needs of programs, classrooms and teachers in meeting the goals for improvement. Specific TA strategies include modeling, observation, assessment, reflection and provision of feedback.	• TA consultants use a range of strategies in their "toolkit" depending on needs of the center, but SB6 does not track the different strategies that are used. **RECOMMENDATION: Maintain the flexibility for TA consultants to use multiple strategies but consider opportunities to support more modeling and observation, perhaps through video. Tie new strategies to content related to improving intentional teaching.**
	Linking on-site technical assistance with other PD	Linking on-site technical assistance with other professional development, such as training, coursework, group meetings, or resource sharing.	Research confirms that adults learn best when they have the opportunity to practice applying new knowledge and skills in the presence of a supportive coach or consultant who can scaffold their learning. Promoting continuity between the TA provided on-site and other PD opportunities can foster new skills and practices.	• SB6 offers several professional development opportunities for center staff such as the Director and Peer Learning Circles, and the IFP courses (for STAR 3 centers). • TA consultation does not appear to be linked directly with training or coursework. **RECOMMENDATION: Identify opportunities to intentionally link training and coursework to the TA provided for directors and teachers.**

Dimensions	What is it?	Why is it important?	Success By 6 Practices
Focus on continuous quality improvement (CQI)	A program culture that promotes reflection, goal-setting, positive change and continual assessment of strengths and needs.	CQI is a data-driven process used to create an environment that supports ongoing reflection and change that can support program improvement and build program capacity over time. While there is strong consensus among experts in the field regarding the importance of CQI, the literature on CQI within the ECE field is limited.	• Service Plans are jointly developed with the director and TA consultant to identify goals and specific plans for achieving goals. Revisions are made to the plan if needed. • Program Improvement Fund awards are designed to support CQI. • At the end of SB6 participation, the center directors meet with SB6 management to identify CQI strategies to support sustainability or advancement of star level. **RECOMMENDATION: Continue using the Service Plan as the foundation for work between the center and the TA consultant. A web-based version of the plan would facilitate data entry and updating.**
Dosage	The amount or quantity of technical assistance that is provided to a particular program, center, teacher or director in a QI initiative.	The ECE literature does not specify the amount of support needed to achieve positive outcomes; however, some studies have found positive associations related to a higher dosage of support. It is recommended that dosage for on-site support be matched with the specific goals of the initiative.	• The amount of TA is pre-determined and set based on the center's size (i.e., number of children and classrooms). However, the frequency of the TA varies and is determined by the TA and center directors. • Nearly two-thirds of TA consultants did not fully agree that their time with centers is spent efficiently. **RECOMMENDATION: Collect feedback from TA consultants to understand their concerns about efficiency of time spent with centers. Update guidance on TA hours to allow greater flexibility.**
Assessment of intensity	A calculation of the dosage (i.e., frequency and length of sessions) of on-site support and the duration of the intervention over time.	The limited ECE literature indicates that QI initiatives with higher intensity are more effective at producing better outcomes. Similar to dosage, intensity should be matched to the goals and needs of the program and initiative.	• SB6 centers are part of a cohort for 18 months. Some centers are determined to need more support and participate in a 6-month readiness group before entering into the main cohort. **RECOMMENDATION: Continue offering different levels of intensity that take into account centers' needs and capacity to engage in SB6.**

	Dimensions	What is it?	Why is it important?	Success By 6 Practices
Improved Outcomes for Programs, Teachers and Children	A focus on outcomes for programs, teachers and children	A priority to focus on improvements to program quality and teaching that will support children's development.	It is important to ground quality improvement work in changes that have the potential to promote meaningful gains in children's skills and competencies across developmental domains. The QI initiative should also take into account the unique context and population of children and families in the initiative and articulate how the work will support children from different racial, cultural, and linguistic backgrounds as well as children with special needs. Development of a theory of change for the QI initiative can help articulate how the initiative will target children's development through direct and indirect pathways.	• The primary focus of SB6 is to support centers moving from a STAR 2 to STAR 3 in Keystone STARS. The logic model for SB6 includes children's school readiness as an explicit, ultimate goal of SB6. • The logic model lists increased staff qualifications and improved STAR ratings as primary outcomes leading to improved school readiness. **RECOMMENDATION: Identify TA consultation and other professional development opportunities to incorporate that will include a more explicit focus on intentional teaching and interactions that support children's positive development. Consider how practices can be incorporated for children of different ages and diverse cultural and linguistic backgrounds.**

Source. Blueprint report; Child Trends interviews and document review

REFERENCES

Early Childhood Systems Working Group (2013). Retrieved from
http://www.buildinitiative.org/Portals/0/Uploads/Documents/
ECSWG%20Systems%20Planning%20Tool_2014.pdf

Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005).
Implementation research: A synthesis of the literature. Tampa, FL: University
of South Florida, Louis de la Parte Florida Mental Health Institute, National
Implementation Research Network. (FMHI Publication No. 231).

Tout, K., Epstein, D., Soli, M., & Lowe, C. (2015). A Blueprint for Early Care and
Education Quality Improvement Initiatives. Final Report. Prepared for the William
Penn Foundation. Minneapolis, MN: Child Trends.

Whitebook, M., Kipnis, F., Sakai, L., & Almaraz, M. (2011). Learning together: A study of six
B.A. completion cohort programs in early care and education: year 3. Berkeley, CA:
Center for the Study of Child Care Employment, University of California at Berkeley

Zaslow, M., Tout, K., Halle, T. & Forry, N. (2009). Multiple Purposes for Measuring
Quality in Early Childhood Settings: Implications for Collecting and
Communicating Information on Quality. Washington, DC: Child Trends and
Office of Planning, Research and Evaluation.