

## **“Reaching for the Stars” Center Validation Study**

### **Executive Summary**

November 2003

The Early Childhood Collaborative of Oklahoma (ECCO) recently completed Phase I of a longitudinal research project designed to evaluate the “Reaching for the Stars” program. The Stars program is an Oklahoma Department of Human Services (OKDHS) Division of Child Care initiative which establishes enhanced quality criteria beyond licensing criteria for child care facilities to meet in order to receive higher rates of reimbursement for the provision of child care services. The enhanced quality standards focus on staff education and training, compensation, learning environments, parental involvement, and program evaluation. Child care programs may earn one of four Star ratings under this initiative: 1-Star, 1-Star Plus, 2-Star, and 3-Star. The higher the Star rating a center holds, the higher the reimbursement rate received for children with subsidized enrollment. The longitudinal study is funded by the OKDHS Division of Child Care. This report presents highlights of findings obtained from the sample of 336 child care centers across the state.

### **Sample**

During the fall and spring of 2001-2002 a statewide representative sample of 1-Star, 1-Star Plus, and 2-Star child care centers was randomly selected from OKDHS licensing lists. Due to the small number of 3-Star centers, both 3-Star and Accredited centers choosing not to apply for 3-Star status were recruited to form a “3-Star/Accredited” group. The sample included 98 1-Star centers, 85 1-Star Plus centers, 97 2-Star centers, and 56 3-Star/Accredited centers. When available, one classroom of each of the following age groups was randomly selected from each center to be observed: infant/toddler, preschool, and school-age.

Where appropriate, data from this validation study have been compared with findings from an earlier observational study<sup>1</sup> of 72 child care centers conducted in 1999. Thirty-eight of the centers observed in 1999 were also observed as part of the 2001-2002 Center Validation Study. Comparisons over time are based on data from these 38 centers at each time period.



### **Measurement**

This report describes differences in centers by Star category on a variety of commonly used measures of child care quality. Data sources include director interviews, teacher and director surveys, and classroom observations. The sensitivity subscale of the Arnett Caregiver Interaction Scale (CIS) was used to observe caregiver-child interaction. The CIS is a 4-point

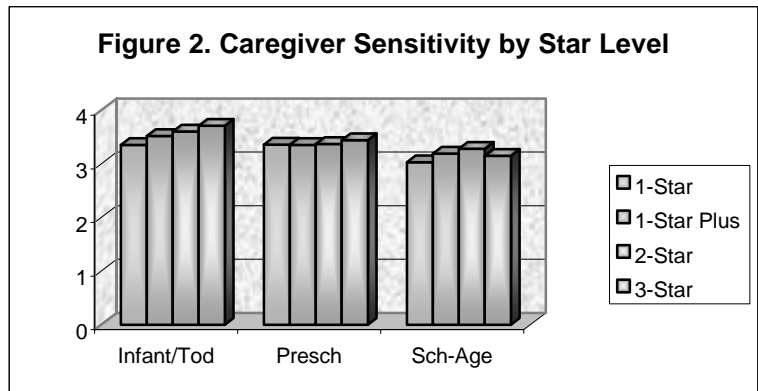
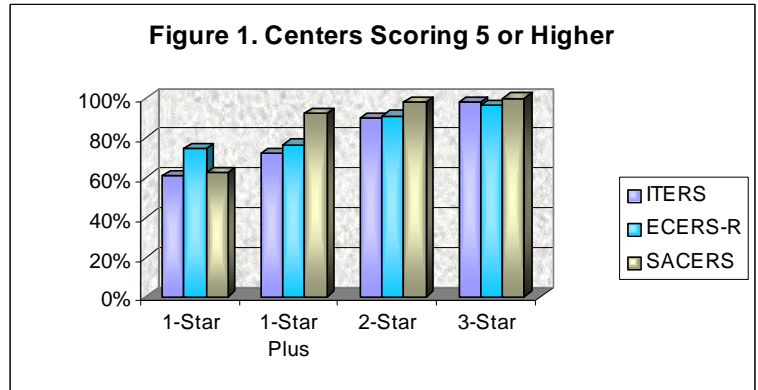
scale with 4 indicating high caregiver sensitivity. Observations of the global quality of the classroom environment were made using rating scales appropriate to the age of children served. Possible scores range from 1-7 with 1 representing inadequate, 3 minimal, 5 good, and 7 excellent quality. The instruments used are listed here.

- Infant-Toddler Environment Rating Scale (ITERS),
- Early Childhood Environment Rating Scale (ECERS-R – preschool classrooms),
- School-age Environment Rating Scale (SACERS).

## Major Findings

### Good News for Oklahoma:

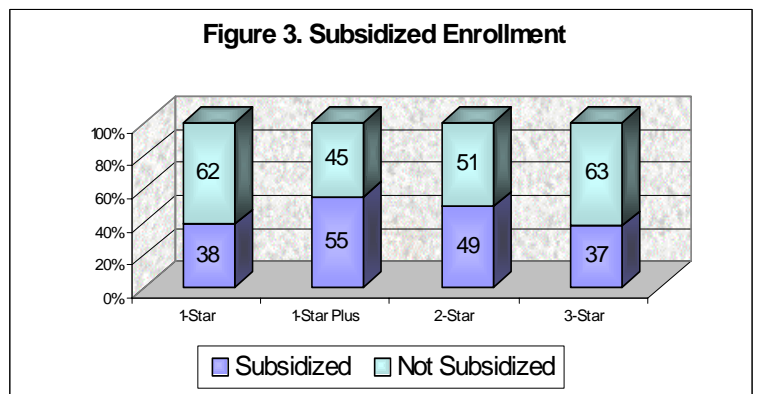
- The quality of care available to **all** preschool-age children in OKDHS licensed centers is better today than it was in 1999. Average 1999 ECERS-R scores = 5.19. Average 2002 ECERS-R scores = 5.75<sup>2</sup>.
- 80% of the preschool classrooms had global quality scores of 5 or higher: 5 represents good to excellent care.
- Most caregivers interact sensitively with children regardless of Star level of their center.
- Many centers have raised their Star level since 1999. Of the centers observed during both data collection periods, 75% that were 1-Star in 1999, moved up to 2-Star in 2002, 27% that were 2-Star in 1999, moved up to 3-Star/Accredited status<sup>2</sup> in 2002.



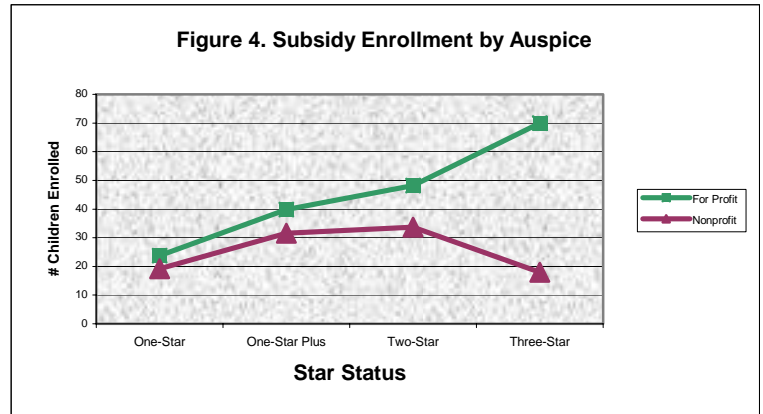
- Staff turnover rates were lower in 2002 than in 2001. The average turnover rate in 2- and 3-Star centers was 45% in 2001<sup>3</sup>. In 2002 average turnover rates were 38% in 2-Star centers and 23% in 3-Star centers.

### Subsidy Enrollment Patterns

- As intended by the creators of the Reaching for the Stars program, children receiving subsidies are experiencing better quality care.
- The percentage of OKDHS subsidized children enrolled in 1-Star Plus and 2-Star centers is higher than in 1-Star centers. Subsidy enrollment is higher in 1-Star Plus than 3-Star centers.



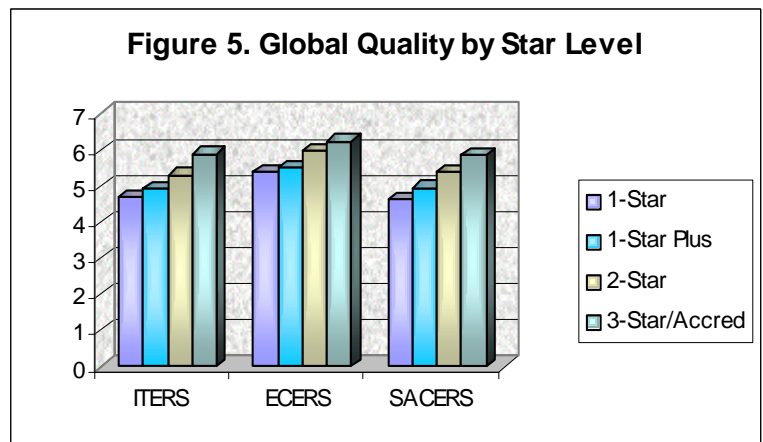
- More children received OKDHS subsidy in 2002 than in 1999. The average DHS enrollment for the 38 centers visited in both time periods increased from 32% in 1999 to 44% in 2002<sup>2</sup>. This is consistent with a statewide increase in subsidy enrollment over the past five years<sup>4</sup>.



- For-profit facilities with 2- and 3-Star/Accredited status enroll more children on subsidy than other centers. The difference is particularly striking for 3-Star/Accredited centers.

### How Does Tiered Reimbursement Translate into Different Levels of Quality in Oklahoma Child Care Centers?

- ITERS, ECERS-R, and SACERS scores in 2-Star and 3-Star/Accredited centers are significantly higher than in 1-Star and 1-Star Plus centers.



- The lowest rated global quality subscales in infant/toddler, preschool and school-age classrooms were those assessing learning activities.

- Directors in 3-Star/Accredited centers have more years of formal education than their colleagues in centers with lower Star levels. Directors in 3-Star/Accredited and 2-Star centers have higher levels of specialized education in child development/early childhood education than directors in 1-Star and 1-Star Plus centers.

- Caregivers of infant/toddlers in 3-Star/Accredited centers have higher levels of general education than those in 1-Star Plus centers. Caregivers of preschoolers in 3-Star/Accredited centers have higher levels of both general education and specialized education than those in 1-Star and 1-Star Plus centers. Caregivers of preschoolers in 2-Star centers have more specialized education than those in 1-Star centers.

- 3-Star/Accredited centers pay teachers significantly higher salaries than centers of other Star levels. Staff turnover is lower in 3-Star/Accredited centers than in 1-Star Plus centers.

- Staff in 3-Star/Accredited centers participate in significantly more professional development initiatives than staff in 1-Star centers. Two-Star center staff participate in more than 1-Star and 1-Star Plus center staff.

- 1-Star centers: average = 3.8 initiatives
- 1-Star Plus centers: average = 5.1 initiatives

- 2-Star centers: average = 6.4 initiatives
- 3-Star/Accredited centers: average = 5.6 initiatives

## Enhancing Quality Through Policy

### What is Most Important for Global Center Quality?

Child care quality is strongly influenced by both licensing regulations and the criteria that centers must meet to achieve a 2- or 3-Star rating. To learn how these factors lead to higher quality programs a statistical hierarchical regression model was computed. Composite quality scores were created for each center by averaging ITERS, ECERS-R and SACERS scores. This produced a center-wide quality score for each center. Three sets of predictors were entered one after the other to determine their influence on composite center quality.

Because the centers with the highest percentages of DHS subsidy enrollment were also those with the lowest quality scores, subsidy density was included as the sole variable in the first predictor set. The next set of predictors included three key child care licensing indicators: caregiver-child ratio and group size in preschool classrooms, and director's level of specialized education.

The third set of predictors included variables representing each of the major components of Oklahoma's 2-Star criteria. These were parent involvement, 20 hours of staff training yearly, presence of a salary scale, written staff evaluations, directors' completion of 40 hours of management training, presence of clearly defined learning centers, staff reading to children regularly, and Master Teacher-child ratio. Note that the Stars policy defines Master Teachers as those who have specialized education in the field (ex. CDA Credential, Associate's degree).

The findings from the regression analysis indicated that each set of predictors, subsidy density, licensing variables, and the 2-Star criteria, had a statistically significant influence on child care quality. The 2-Star criteria were the most powerful predictors, accounting for 29% of the variance in composite quality. Of the 2-Star criteria, the most important were 1.) **Master teacher-child ratio**, 2.) **parent involvement**, and 3.) **clearly defined learning centers**.

### Implications for Policy and Practice

- Child care staff need more formal education and specialized education. Centers need more caregivers who meet the Stars criteria for Master Teacher status. Strategies to assist staff in attaining additional education need to be investigated.
- Staff turnover needs to be reduced, particularly in 1-Star Plus centers. Therefore, strategies to reduce turnover need to be identified and implemented.
- Centers need to develop and implement a variety of purposeful parent involvement strategies. Caregivers throughout the state need training on developing and implementing parent involvement in their centers.
- Centers with high percentages of DHS subsidized enrollment and low Star levels need strategies to assist them in improving the quality of care provided.

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<sup>1</sup> Norris, D., & Dunn, L. (October, 2000). *Taking a closer look: Tiered licensing and differential quality*. Oklahoma State University, Stillwater & University of Oklahoma, Norman.

<sup>2</sup> Based on the 38 centers visited at both data collection periods.

<sup>3</sup> Penn, D. (2001). *Market rate survey*. University of Oklahoma, Norman.

<sup>4</sup> Personal Communication, Nancy vonBargen, OKDHS Division of Child Care, July 16, 2003.