

**A Compilation of Initiatives to
Support Home-Based Child
Care**

March 31, 2010

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A COMPILATION OF INITIATIVES TO SUPPORT HOME-BASED CHILD CARE

Introduction

Home-based child care—regulated family child care and family, friend, and neighbor care exempt from regulation—is a common child care arrangement for many young children in the United States, especially those from low-income families and families of color (Porter, Paulsell, Del Grosso, Avellar, Hass, & Vuong, 2010a). Research also suggests that home-based care may be the predominant form of non-parental care for infants and toddlers (Brandon, 2005). Further, it represents a significant proportion of the child care for children whose families receive subsidies (Child Care Bureau, 2006). Parents use these arrangements for a variety of reasons including convenience, flexibility, trust, shared language and culture, and individual attention from the caregiver.

Regulated family child care has been an issue for research and policy since the 1980s, when states actively began to invest in efforts to expand its supply and improve its quality. In contrast, family, friend, and neighbor child care did not emerge as a focus of research and policy until the mid-1990s, after the enactment of welfare reform. In the past decade, growing recognition of the role that these unregulated settings play in the child care supply has prompted many studies and an increasing number of initiatives that aim to support these caregivers.

Information about the quality of home-based child care is fairly sparse; however, there are more studies of quality in family child care than in family, friend, and neighbor care. Moreover, the available studies vary in their sample sizes, characteristics of caregivers observed, and the observation measures used to assess quality. This variation may account, at least in part, for the mixed picture of quality that emerges from this set of studies. Some research suggests that home-based child care environments are relatively safe, and that caregivers are affectionate and responsive (Layzer & Goodson, 2006; Paulsell, Mekos, Del Grosso, Rowand, & Banghart, 2006; Tout & Zaslow, 2006). Other studies using standard environmental rating scales, such as the Family Day Care Rating Scale (FDCRS; Harms & Clifford, 1989), have found low levels of quality. Similarly, other studies have found that little time is spent on learning activities such as reading or higher-level talk and engagement with children (Layzer & Goodson, 2006; Paulsell et al., 2006; Tout & Zaslow, 2006).

Many state and local agencies, foundations, and the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services (DHHS) have explored strategies for improving quality in home-based child care settings. However, relatively little is known about the effectiveness of these strategies, making it difficult for states to make informed policy and program decisions about how to best support home-based providers. To begin a process for filling this knowledge gap, the Office of Planning, Research, and Evaluation (OPRE) contracted with Mathematica Policy Research (MPR), along with its subcontractor, Bank Street College of Education, to carry out the study *Supporting Quality in Home-Based Care*.

The purpose of this two-year project was to review the literature and gather information about strategies with the greatest potential for improving the quality of care provided by home-based child care providers who serve children from low-income families, and then to develop design options for home-based care initiatives. The final products of the project are:

- **A literature review** of more than 135 articles—primary literature on home-based child care, related literature on family support and home visiting, and potentially related literature on parent well-being, work-family issues, and child development—that summarizes what is known about home-based child care and identifies knowledge gaps (Porter, Paulsell, Del Grosso, Avellar, Hass, & Vuong, 2010a).
- **A compilation of brief summaries** of 96 home-based care initiatives identified through a scan of the field that included reviews of state Child Care and Development Fund plans, the research literature, internet searches, and contacts with experts to solicit nominations (Porter, Nichols, Del Grosso, Begnoche, Hass, Vuong, & Paulsell, 2010b).
- **A compendium of detailed profiles** of 23 well-established initiatives from the compilation with diverse goals, target outcomes, caregiver characteristics, program auspices, service delivery strategies, and intensity and duration of services. (Porter, Paulsell, Nichols, Begnoche, & Del Grosso, 2010c).
- **A report on design options for home-based child care** that describes potential strategies for supporting quality in home-based child care settings as well as considerations for design and ongoing evaluation of home-based care initiatives (Paulsell, Porter, Kirby, Boller, Martin, Burwick, Ross, & Begnoche, 2010).

Purpose of the Compilation

This compilation provides brief profiles of a wide range of initiatives, either currently underway or recently implemented, to support quality in home-based child care. It is the result of an extensive scan for information on existing and recent initiatives that are no longer in operation to examine the breadth and depth of strategies aimed at supporting home-based child care. It includes initiatives developed for licensed family child care and family, friend, and neighbor care.

Its purpose is twofold. First, the profiles provide information about the range of initiatives and the variety of strategies that can be useful to policymakers, program administrators, and practitioners interested in supporting this population of child care providers. Second, it is the first step in developing a compendium of the most promising strategies for supporting quality in home-based care. The compendium contains in-depth profiles of a subset of initiatives contained in this compilation.

The compilation contains profiles of 96 initiatives that support home-based child care. We compiled an initial list of 141 initiatives, but we did not include 45 of these in the final list for one of five reasons: (1) they were duplicated on the list under different names (12 initiatives);¹ (2) they were no longer in operation or had not yet been implemented (9 initiatives)²; (3) they were similar to other

¹ These included: the Arizona Kith and Kin Project; the California License-Exempt Care Project; First Five Family, Friend and Neighbor Project; Denver County Project; the Brighter Futures Initiative; All Our Kin; Learning to Grow; Maryland's Informal Caregiver Project; Project REACH; the Nebraska Early Childhood Training Center; Caring for Quality; and Tennessee Family Child Care Training. All Our Kin, for example, had been proposed by three organizations. Learning to Grow had been identified in the literature review and proposed by one of the organizations.

² This category includes Alaska's Rural Outreach Program, the Connecticut Commissioner's Initiative; Illinois's License-Exempt Pilot and Relative Care Pilot; Kansas's Family Child Care Training; New Jersey's Home Provider

initiatives such as those implementing Play and Learn programs or implementing widely-used approaches such as career lattices (14 initiatives)³; (4) they did not offer direct services to caregivers (1 initiative)⁴; or (5) we could not obtain any data on them despite repeated attempts (9 initiatives)⁵. The rest of this section describes our data collection methods and the organization of the compilation.

Data Collection Methods

We used multiple strategies to conduct a broad scan for information on existing and recently suspended initiatives to support quality in home-based child care settings. These included document reviews, electronic searches, and consultation with experts. Specifically, we reviewed state Child Care and Development Fund (CCDF) plans, extracted information from articles reviewed for the literature review conducted as part of this study (Porter et al., 2010a), and contacted individuals and organizations with expertise in home-based child care or quality improvement initiatives.

CCDF Plan Review. We searched the FY2008-2009 state CCDF plans for information about initiatives implemented in states and territories. To conduct the search we used the following terms: family child care, license-exempt care, relative care, in-home care, and informal care. In addition, we reviewed Part 5: Quality Activities and Part 6: Health and Safety Regulations of each state plan for relevant information about possible initiatives for home-based caregivers. We looked for efforts that were specifically intended to serve home-based caregivers, including Quality Rating Systems (QRS) with particular components for this population of providers; orientations or trainings with a specific focus on home-based care; or other activities specifically designed to improve quality in these settings.

Literature Review. We examined articles included in the literature review for this project (Porter et al. 2010a) to extract information about initiatives for home-based caregivers that had been identified in other studies.

Contacts with Experts. We solicited nominations of initiatives to be included in the compilation from our Expert Advisory Panel for this project.⁶ In addition, because we aimed to be

(continued)

Program; Nevada's Distance Learning Program; Ohio's Early Literacy Program; and the Family Conservancy Quality Rating System in Kansas.

³ This category includes: Ninos in Mi Casa in Arizona; Connecticut Charts A Course, a career lattice; ; Illinois's Great Start and its career development lattice; Iowa's quality rating system; Kentucky's Registered Provider Program; University of Miami's Quality Rating System; Keystone Stars, a quality rating system; South Carolina's ABC program; South Dakota's Technical Assistance Initiative; and four Play and Learn initiatives in Seattle, Washington.

⁴ This initiative is the Good Beginnings Alliance, which focuses on advocacy for early childhood services in Hawai'i.

⁵ This category includes: Waterbury Youth Services in Connecticut; two initiatives (Family Child Care Home Program of the District of Columbia and Catholic Charities Model Cities Center) in the District of Columbia; the Infant Toddler Academy in Georgia; a Michigan Early Head Start program; Minnesota's Kith and Kin program; initiatives identified in the Guam and Northern Marianas CCDF plans; and Wisconsin's Infant/Toddler Credential.

⁶ Members of the Technical Working Group are: Linda Smith, National Association of Child Care Resource and Referral Agencies; Eva Marie Shivers, Indigo Cultural Center; Barbara Goodson, Abt Associates; Sue Williamson, National Association of Family Child Care; Brenda Jones-Harden, Institute for Child Study, University of Maryland;

as inclusive as possible, we also contacted relevant organizations to request nominations of initiatives designed to support caregivers who provide child care in their own homes for children ages birth to 12. These organizations included the National Association of State Child Care Administrators (NASCCA);⁷ the National Association for Family Child Care (NAFFC); the National Alliance for Family, Friend and Neighbor Child Care (NAFFNCC); the United Way of America; the National Association of Child Care Resource and Referral Agencies (NACCRRA); ZERO TO THREE; and the Early Childhood Funders Group. In some cases—such as United Way, the Early Childhood Funders Group, and NACCRRA— we asked the organization to distribute the request to their members’ organizations.

Based on the initial information from the scan of CCDF state plans, the literature review, and the responses from our contacts with experts, we created unduplicated lists of initiatives, which we then compiled into a single master list of 141 initiatives organized by state, contact information, and source. We eliminated 45 initiatives, because they were duplicates; they were similar to other initiatives or used generic approaches; they had not been in operation for more than three months or they were no longer funded; they did not provide direct services to caregivers; or no data were available on them.

We collected information on the resulting 96 initiatives using published and unpublished reports, articles, and web sites. When necessary, we conducted additional internet searches and followed up with initiative developers and operators by telephone to ask additional questions. We aimed to collect a preliminary set of information on each initiative, including a description of the initiative, requirements for implementation, availability of materials for replication, and evaluation methods and results (Table 1). The data were collected between June and October 2008.

We entered the information collected into initiative profiles and sent them back to the implementing organization for review and corrections. Detailed information was not available for some initiatives. For example, some initiatives did not have information about the characteristics of caregivers, children, and care characteristics. Others had did not have logic models or had not conducted evaluations. Few initiatives had fidelity standards for monitoring implementation. Missing fields are noted as “Not Available” in the profiles. We gathered these data as well as more detailed information about content and service delivery for the subset of initiatives included in the compendium.

(continued)

Dina Castro, Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill; Robert Bradley, Center for Applied Studies in Education, University of Arkansas; Margaret Burchinal, University of California, Irvine; Julia Henley, University of Chicago; Tammy Mann, Zero To Three; and Helen Raikes, University of Nebraska-Lincoln.

⁷ We also distributed fliers requesting nominations of initiatives at the State and Territories Annual Meeting in July, 2008, and we sent letters to state administrators asking for nominations.

Table 1. Supporting Quality in Home-Based Care, Information Collected for Compilation of Initiatives

Description of Initiative	Name of initiative
	Service provider who implemented the initiative
	Dates of operation
	Funding source and amount
	Description of initiative: types, intensity, and duration of services
	Recruitment strategies used
	Providers: characteristics and number served
	Children and families: characteristics, ages of children, and number involved
	Amount and qualifications of staff
	Curricula and other materials used
	Use of technology
	Use of community partners
	Fidelity standards
Requirements for Implementation	Agency type and structure
	Staffing levels
	Staff qualifications
	Partnering requirements
	Curricula requirements
	Cost of training, curricula, materials, and implementation
	Technology, equipment, and materials
Availability of Materials for Replication	Time needed to achieve fidelity
	Operations manuals
	Pre- and in-service training materials
	Qualified trainers
	Curricula
	Program forms
	Fidelity measures and procedures
Evaluation Methods and Results	Replication experience in other locations
	Logic model/theory of change
	Quality constructs targeted
	Provider outcomes targeted
	Child and family outcomes targeted
	Evaluation methods and design
	Process evaluation findings
	Outcome evaluation findings
Quality of evidence of effectiveness	

Organization of the Compilation

- The 96 profiles of initiatives included in the compilation are organized according to their primary goals. These are: (1) quality improvement, (2) certificate programs, (3) support for licensing, and (4) support for accreditation. Within each category, initiatives are organized by primary type of service delivery strategy:
 - Training through workshops offered as a one-time event or a series
 - Distribution of materials and equipment
 - Home visiting
 - Professional development through credit-bearing courses or courses leading to a certificate
 - Consultation, mentoring, or coaching

Peer support networks

- Play and Learn programs
- On-line training
- Warm lines
- Linkages to pre-kindergarten programs
- Other

We have also included two indices for the initiatives—one that lists the initiatives by state, and one that lists initiatives by type of provider served—to guide readers who are interested in seeking information on initiatives according to these characteristics (Appendices A.1 and A.2).

In addition, we have included three appendices for specific types of activities that aim to support home-based care for which we did not produce individual profiles. These are broad-based activities implemented in multiple locations. Although we did not produce individual profiles for them, we include them for two reasons. First, these activities are an important part of the current range of support available to home-based caregivers. Second, they are potential sources of information for developing future initiatives to support home-based care. Appendix B contains summaries of generic, broadly implemented initiatives such as Infant/Toddler Certificate Programs and Sparking Connections sites that support home-based caregivers. Appendix C contains brief profiles of 14 state Quality Rating Systems (QRS) that include home-based caregivers. Appendix D includes information from State CCDF plans on state activities that address health and safety in home-based care through required orientations or workshops.

Overview of Initiatives

This section provides an overview of the range of initiatives profiled in the compilation. We first describe the four major categories of initiatives identified, and then we discuss variation across initiative types.

Types of Initiatives

We identified four main types of initiatives according to their primary purpose: (1) quality improvement, (2) certificate program, (3) support for licensing, and (4) support for accreditation (Table A.1).

Quality Improvement. Eighty of the initiatives in the compilation aim to improve some aspect of quality in home-based care as their primary goal.⁸ The aspects of care targeted by these initiatives vary. Some initiatives intend to enhance providers' support for a single child development domain such as language (for example, Minnesota's Read-Mobile and Iowa's Read Rover) or health (Iowa's Child Care Nurse Consultant Program). Others, like Acre Family Child Care in Massachusetts and Louisiana's Family Child Care Visitation program, aim to strengthen providers' capacity to operate their own business. Still others—WHEDCO's Home-based Child Care Micro-

⁸ In addition, please see Appendix D for descriptions of mandated health and safety training and orientations

enterprise Network in New York, the Nurturing Homes Project in Mississippi, and the Child Care Improvement Project in Oregon, for example--intend to address many aspects of quality including children's development and responsible business practices.

Certificate Programs. We define certificate programs as those that offer college credits, lead to a degree (for example, an Associate's degree or a Bachelor of Arts degree), or result in a certificate such as a Child Development Associate (CDA).⁹ Also in this category are career development systems available to home-based caregivers—either regulated family child care providers or family, friend and neighbor caregivers, or both. The compilation includes four profiles of these types of initiatives. For example, Idaho Stars and Alaska's Professional Development system offer course work that leads to steps on their career development lattices.

Support for Licensing. This category includes seven initiatives that aim to help family, friend and neighbor caregivers become regulated providers. Typically these initiatives provide information about establishing a child care business, offer training that complies with state regulatory requirements, and provide support for improving the home environment to meet state standards. Examples include the California Child Care Initiative Project, which has been providing services for more than two decades, and All Our Kin in Connecticut, which uses a four-stage toolkit process to support providers who seek to become licensed.

Support for Accreditation. The compilation includes five initiatives that aim to help providers achieve accreditation from the National Association for Family Child Care (NAFCC) or a local accrediting agency. Provider Education and Services in Iowa is an example of the former; Satellite Family Child Care in Wisconsin is an example of the latter.

Variation Across Initiatives

In addition to their primary purpose, the initiatives we profiled vary widely in their target population, program auspice, funding sources, service delivery approaches, content, intensity and duration, size, and data collection and evaluation.

Target population.¹⁰ Of the initiatives targeted to home-based care for which information is available, 22 limit the target population to licensed or registered family child care providers, 38 are targeted to family, friend and neighbor caregivers, and 36 target a mix of both. In addition, 33 initiatives offer services to providers who do not speak English as their first language, especially caregivers who speak Spanish.

Program auspice and funding sources. In terms of auspice, 24 initiatives are offered by child care resource and referral agencies, but community-based organizations (26 initiatives) such as family resource centers and United Ways (5 initiatives) are represented as well. Some initiatives are offered by government agencies (19 initiatives) or other types of organizations (22 initiatives) such as institutions of higher education. Funding sources vary. Many of the initiatives, 34, are funded with CCDF quality set-aside funds. Another 22 initiatives are funded through government funding

⁹ In addition, Appendix B includes a description of an infant-toddler certificate program available in many states.

¹⁰ There was incomplete data for a large number of initiatives. The following numbers are based on those initiatives for which data were available.

through other sources, which may include CCDF dollars although they are not identified. Five initiatives are supported with United Way funding and four by private foundations. Thirty-one have a mix of funding from a variety of sources.

Service delivery approaches. The initiatives use a wide range of primary service delivery approaches to achieve their goals. Training through workshops is common (40 initiatives for which information is available), and 27 initiatives rely on one-to-one work with caregivers through home visiting, mentoring, consultation, or coaching. Two others use professional development through credit-bearing course work or certificate. We have also included five initiatives that use Play and Learn groups—opportunities for caregivers and children to interact together in activities and four initiatives that rely primarily on distribution of materials and equipment. Twenty-two initiatives use other approaches such as providing grants to caregivers or providing a web-based bulletin board. Many initiatives use a primary strategy supported with another strategy—often training supplemented by home visiting or distribution of materials and equipment.

Content. There is also wide variation in the content depending on the goals of the initiative. Many initiatives address a broad range of areas including health and safety, language and literacy, activities for children, and behavior management. Special focus topics related to infants and toddlers or children with special needs are offered as well. Some of the initiatives for family, friend and neighbor caregivers include information about regulation or licensing, while other initiatives for regulated providers include business practices or working with parents.

Intensity and Duration. The intensity and duration of the services varies widely. Some home visiting programs, for example, offer one or two 2-hour visits, while others offer weekly visits over the course of six months. Similar variation applies to initiatives that use workshops as a strategy. Some provide a single three-hour training workshop; others consist of several three-hour workshops for 15 weeks; and still others provide day-long workshops once a week for 7 months. One initiative that relies on distributing materials as a strategy provides a single packet of materials, while another sends a packet every month.

Size. The initiatives also range widely in size. In part, this variation is related to the initiative's funding, strategy, and tenure. Three initiatives, for example, are still in the pilot phase and serve fewer than 10 participants. Eighteen initiatives that have been in existence for several years reach between 11 and 74 participants, and 16 reach between 75 and 100 participants. Twenty-four serve more than 100 caregivers annually. The compilation also includes nine very large initiatives, particularly those that offer a single workshop or distribute materials as a primary strategy, that serve more than 1,000 participants.

Types of Data Collected and Evaluation. There is also wide variation in the type of data that are collected by initiatives and evaluation methods used, if any. The majority of the initiatives in the compilation (61) reported collecting data on the number of caregivers participating and their characteristics. Approximately four in ten (39) reported collecting data on caregiver satisfaction with services.

Less than half of the initiatives (40) reported conducting some kind of evaluation. Very few of the initiatives, however, reported using rigorous methods. Twenty-one reported conducting process evaluations and 28 reported examining caregiver outcomes. Many of the outcome evaluations reported conducting non-experimental pre-post assessments of caregiver knowledge or practice (12). Only three of the outcome evaluations reported using random assignment. In addition, most of the

evaluations did not assess changes in child outcomes as a result of the initiative. Only a few of the initiatives reported examining child outcomes, such as early literacy.

Data collection and evaluation activities reported by the initiatives provide descriptive information about caregiver characteristics, implementation processes, and caregivers' response to the services offered. This information may be useful at the initiative level for ongoing program assessment and planning activities. The lack of rigorous evaluation designs, however, limits the usefulness of the evaluations for making judgments about the potential effectiveness of the different kinds of initiatives profiled in the compilation.

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Table A.1 Matrix of Home-Based Care Initiatives and Service Delivery Approaches

Initiative (by State)	Quality Improvement	Certificate Program	Support for Licensing	Support for Accreditation
Alabama				
Alabama Kids and Kin Program	X			
Alaska				
Alaska Professional Development System for the Early Education Workforce		X		
Arizona				
Arizona Kith and Kin Project	X			
Arizona Self-Study Project	X			
The Early Childhood Partnership of Southern Pima County (ECPSPC)	X			
California				
LA Universal Preschool (LAUP)	X			
Provider Training Resource Activity Center	X			
The Supportive Teaching and Educational Programs for Understanding Preschoolers (STEP-UP)	X			
License-Exempt Assistance Project (LEAP)	X			
Family Child Care Business Training	X			
California Child Care Initiative Project (CCIP)	X			
CA Exempt Care Training Project (CECT)	X			
First Five LA Early Care and Education Workforce Development Initiatives Family, Friends, and Neighbors Training and Mentoring Project for Child Care Providers	X			
Colorado				
National League of Cities Informal Caregivers Initiative ^a	X			
LUMMA			X	
Connecticut				
All Our Kin (AOK)	X			
Brighter Futures Initiative Homelinks Project	X			
Bridgeport Kith and Kin Project	X			
Family Child Care Support Project	X			
Care to Care	X			
Caring for Children	X			
Delaware				
Relative Caregiver Training	X			

Table A.1 (continued)

Initiative (by State)	Quality Improvement	Certificate Program	Support for Licensing	Support for Accreditation
Hawaii				
Learning to Grow	X			
Tutu and Me	X			
Idaho				
Idaho Stars		X		
Illinois				
Community Connections	X			
Indiana				
Child Care Health Consultant Program	X			
Iowa				
Child Care Nurse Consultant (CNCC)	X			
Provider and Education and Child Care Services (PACES)				X
Read Rover II	X			
Kansas				
Informal Caregiver Pilot	X			
Accreditation Facilitation Project ^b				X
Louisiana				
Louisiana Child Care Home Visitation Program	X			
Maine				
CareQuilt	X			
Maryland				
Informal Caregivers Program	X			
Massachusetts				
Acre Family Day Care	X			
Universal Pre-Kindergarten (UPK) Pilot Program	X			
Michigan				
Michigan Better Kid Care Pilot (MiBKC)	X			
FUTURES Initiative	X			
Early Learning Community	X			
Minnesota				
Hands-On Teach to Learn	X			
Children's Readmobile Service	X			
Minnesota Family, Friend, and Neighbor Grant Program	X			
Neighborhood House	X			
Early Childhood Resource and Training Project	X			
Library Foundation of Hennepin County	X			

Table A.1 (continued)

Initiative (by State)	Quality Improvement	Certificate Program	Support for Licensing	Support for Accreditation
Northland Foundation	X			
Family, Friend, and Neighbor Outreach	X			
White Early Indian Reservation Tribe Council	X			
Missouri				
Educare	X			
Mississippi				
Rite from Birth	X			
Nurturing Homes	X			
Nebraska				
Early Childhood Training Center	X			
Nevada				
Nevada Accreditation Project				X
New Hampshire				
Provider Appreciation Day	X			
Monadnock Little Houses			X	
Child Care Boost		X		
New Jersey				
Monday Morning, Inc. Mentor Program	X			
New Mexico				
Conversations Pilot	X			
New York				
State University of New York (SUNY) Early Childhood Education and Training Program	X			
Caring for Quality	X			
The School Readiness Project Family Day Care Satellite Project	X			
Family Day Care Microenterprise/ Home Based Child Care Services	X			
Informal Child Care Training Project	X			
North Carolina				
Family Child Care Home Pre-licensing Workshops			X	
QUINCE/Partnerships for Inclusion ^c	X			
North Dakota				
Right From the Start	X			

Table A.1 (continued)

Initiative (by State)	Quality Improvement	Certificate Program	Support for Licensing	Support for Accreditation
Ohio				
Quality Child Care Initiative Funded by Sisters of Charity Foundation of Canton		X		
Child Care Connections	X			
Ohio Ready to Learn: Professional Development for Family Child Care Providers	X			
Ohio Pre-K/K State Institutes for Reading Instruction (SIRI)	X			
Oklahoma				
Cherokee Connections Relative Provider Child Care Programs	X			
Oregon				
Child Care Improvement Program (CCIP)	X			
Great Beginnings Quality Child Care Project	X			
Family, Friend, and Neighbor Toolkit Project	X			
Family, Friend, and Neighbor Orientations	X			
Family Friend and Neighbor Care Project	X			
Pennsylvania				
Better Kid Care Program	X			
YMCA Family Child Care Network Accreditation Initiative				X
Rhode Island				
Ready to Learn Providence (R2LP)	X			
South Dakota				
Family Child Care Professionals of South Dakota	X			
Tennessee				
Tennessee's Outstanding Providers Supported Through Available Resources (TN TopStar)	X			
Texas				
Registered Family Home Development Project			X	
Play and Learn (San Antonio)	X			
Utah				
Family Provider Start-Up Grants			X	

Table A.1 (continued)

Initiative (by State)	Quality Improvement	Certificate Program	Support for Licensing	Support for Accreditation
Vermont				
Starting Points Family Child Care Networks	X			
Virginia				
Infant Toddler Family Day Care	X			
Fairfax County Preschool Pilot Initiative	X			
Play Partner Program	X			
Washington				
Catholic Family and Child Service	X			
For the Love of Kids - Family, Friends, and Neighbor Child Caregiver Support Program	X			
Building Blocks: Laying the Foundation for Quality Family Child Care™			X	
Wisconsin				
Satellite Family Child Care				X
Madison Metropolitan School District Play and Learn	X			
Wyoming				
Training for Spanish-Speaking, Unlicensed Providers			X	
Multi-state				
Supporting Care Providers through Personal Visits	X			
Total	80	4	7	5

Sources: Information collected from document reviews, internet searches, and discussions with program operators and developers.

^aThe National League of Cities Informal Caregivers Initiative also has sites in Georgia, Iowa, Rhode Island, Tennessee, and Texas.

^bThis program also operates in Missouri.

^cAdditional Partnerships for Inclusion sites are California, Iowa, Minnesota, and Nebraska.

Table A.2. Matrix of Home-Based Care Initiatives by Type of Provider

Initiative (by State)	Home- or Center-Based Child Care	Licensed or Registered Family Child Care	Family, Friend, and Neighbor Care	Any Type of Home-Based Care (Regulated or Unregulated)
Alabama				
Alabama Kids and Kin Program			X	
Alaska				
Alaska Professional Development System for the Early Education Workforce				X
Arizona				
Arizona Kith and Kin Project			X	
Arizona Self-Study Project		X		
The Early Childhood Partnership of Southern Pima County (ECPSPC)				X
California				
LA Universal Preschool (LAUP)	X	X		
Provider Training Resource Activity Center				X
The Supportive Teaching and Educational Programs for Understanding Preschoolers (STEP-UP)			X	
License-Exempt Assistance Project (LEAP)				X
Family Child Care Business Training		X		
California Child Care Initiative Project (CCIP)				X
CA Exempt Care Training Project (CECT)			X	
First Five LA Early Care and Education Workforce Development Initiatives Family, Friends, and Neighbors Training and Mentoring Project for Child Care Providers			X	
Colorado				
National League of Cities Informal Caregivers Initiative ^a			X	
LUMMA				X
Connecticut				
All Our Kin (AOK)				X
Brighter Futures Initiative Homelinks Project				X
Bridgeport Kith and Kin Project			X	
Family Child Care Support Project		X		
Care to Care				X
Caring for Children			X	

Table A.2 (continued)

Initiative (by State)	Home- or Center-Based Child Care	Licensed or Registered Family Child Care	Family, Friend, and Neighbor Care	Any Type of Home-Based Care (Regulated or Unregulated)
Delaware				
Relative Caregiver Training			X	
Hawaii				
Learning to Grow			X	
Tutu and Me			X	
Idaho				
Idaho Stars				X
Illinois				
Community Connections				X
Indiana				
Child Care Health Consultant Program				X
Iowa				
Child Care Nurse Consultant (CNCC)	X			X
Provider and Education and Child Care Services (PACES)		X		
Read Rover II				X
Kansas				
Informal Caregiver Pilot			X	
Accreditation Facilitation Project ^b		X		
Louisiana				
Louisiana Child Care Home Visitation Program		X		
Maine				
CareQuilt			X	
Maryland				
Informal Caregivers Program			X	
Massachusetts				
Acre Family Day Care				X
Universal Pre-Kindergarten (UPK) Pilot Program		X		
Michigan				
Michigan Better Kid Care Pilot (MiBKC)				X
FUTURES Initiative		X		
Early Learning Community			X	
Minnesota				
Hands-On Teach to Learn			X	
Children's Readmobile Service				X
Minnesota Family, Friend, and Neighbor Grant Program			X	

Table A.2 (continued)

Initiative (by State)	Home- or Center-Based Child Care	Licensed or Registered Family Child Care	Family, Friend, and Neighbor Care	Any Type of Home-Based Care (Regulated or Unregulated)
Neighborhood House			X	
Early Childhood Resource and Training Project			X	
Library Foundation of Hennepin County			X	
Northland Foundation			X	
Family, Friend, and Neighbor Outreach			X	
White Early Indian Reservation Tribe Council			X	
Missouri				
Educare				X ^d
Mississippi				
Rite from Birth	X			X
Nurturing Homes				X
Nebraska				
Early Childhood Training Center				X
Nevada				
Nevada Accreditation Project		X		
New Hampshire				
Provider Appreciation Day			X	
Monadnock Little Houses			X	
Child Care Boost			X	
New Jersey				
Monday Morning, Inc. Mentor Program				X
New Mexico				
Conversations Pilot			X	
New York				
State University of New York (SUNY) Early Childhood Education and Training Program		X		
Caring for Quality				X
The School Readiness Project Family Day Care Satellite Project		X		
Family Day Care Microenterprise/ Home Based Child Care Services				X
Informal Child Care Training Project			X	
North Carolina				
Family Child Care Home Pre-licensing Workshops			X	

Table A.2 (continued)

Initiative (by State)	Home- or Center-Based Child Care	Licensed or Registered Family Child Care	Family, Friend, and Neighbor Care	Any Type of Home-Based Care (Regulated or Unregulated)
QUINCE/Partnerships for Inclusion ^c	X			X
North Dakota				
Right From the Start	X	X		
Ohio				
Quality Child Care Initiative Funded by Sisters of Charity Foundation of Canton				X
Child Care Connections				X
Ohio Ready to Learn: Professional Development for Family Child Care Providers				X
Ohio Pre-K/K State Institutes for Reading Instruction (SIRI)	X	X		
Oklahoma				
Cherokee Connections Relative Provider Child Care Programs			X	
Oregon				
Child Care Improvement Program (CCIP)		X		
Great Beginnings Quality Child Care Project				X
Family, Friend, and Neighbor Toolkit Project			X	
Family, Friend, and Neighbor Orientations			X	
Family Friend and Neighbor Care Project			X	
Pennsylvania				
Better Kid Care Program	X			X
YMCA Family Child Care Network Accreditation Initiative		X		
Rhode Island				
Ready to Learn Providence (R2LP)				X
South Dakota				
Family Child Care Professionals of South Dakota				X
Tennessee				
Tennessee's Outstanding Providers Supported Through Available Resources (TN TopStar)	X	X		
Texas				
Registered Family Home Development Project				X
Play and Learn (San Antonio)			X ^d	

Table A.2 (continued)

Initiative (by State)	Home- or Center-Based Child Care	Licensed or Registered Family Child Care	Family, Friend, and Neighbor Care	Any Type of Home-Based Care (Regulated or Unregulated)
Utah				
Family Provider Start-Up Grants		X		
Vermont				
Starting Points Family Child Care Networks		X		
Virginia				
Infant Toddler Family Day Care				X
Fairfax County Preschool Pilot Initiative		X		
Play Partner Program	X	X		
Washington				
Catholic Family and Child Service				X
For the Love of Kids – Family, Friends, and Neighbor Child Caregiver Support Program			X	
Building Blocks: Laying the Foundation for Quality Family Child Care™				X
Wisconsin				
Satellite Family Child Care		X		
Madison Metropolitan School District Play and Learn			X	
Wyoming				
Training for Spanish-Speaking, Unlicensed Providers			X	
Multi-state				
Supporting Care Providers through Personal Visits			X	
Total	9	22	38	36

Sources: Information collected from document reviews, internet searches, and discussions with program operators and developers.

^aThe National League of Cities Informal Caregivers Initiative also has sites in Georgia, Iowa, Rhode Island, Tennessee, and Texas.

^bThis program also operates in Missouri.

^cAdditional Partnerships for Inclusion sites are California, Iowa, Minnesota, and Nebraska

^dServices are available to all providers receiving subsidies.

Appendix B. Widely Implemented Quality Initiatives

Initiative	Description
Healthy Child Care America	Healthy Child Care America is the result of a campaign (1995-2005) that promoted the coordination of families, child care providers, and health professionals for the healthy development of children in child care and increased access to preventive health services and safe physical environments for all children. One outcome of the campaign was the Child Care Health Consultant (CCHC) position. CCHCs are health professionals who can provide health and safety education to facilities that provide child care and education. CCHCs are specifically trained to do their work through the National Training Institute for Child Care Health Consultants (NTI).
Infant/Toddler Certificates	Individuals who serve infants and toddlers and their families are expected to have specialized knowledge and skills to care for this population of children Certificate programs, which are generally offered by institutions of higher education, cover health and safety and nutrition as well as infant/toddler development and other topics specifically related to this age group of children.
PBS Ready to Learn	The Ready To Learn program, distributed by local public broadcasting stations, provides free educational children's television programming. Stations air at least six and one-half hours a day of children's programs that meet specific curricular goals. Most stations have at least a part-time outreach coordinator and some full-time staffers to train child care providers and parents in media literacy and educational uses of television. Services also include workshops for parents, childcare providers, and other early childhood professionals; distribution of children's books; and <i>PBS Families/Para la Familia</i> magazine. The Ready To Learn program is funded by a Ready To Learn Television Cooperative Agreement from the U.S. Department of Education through the Public Broadcasting Service.
Professional Development Programs	According to the National Child Care Information Center (NCCIC), comprehensive professional development programs for early care staff should be accessible and based on clearly articulated frameworks. Such programs should include a continuum of training and ongoing supports; defined routes that are tied to licensure and lead to qualifications and credentials; and should address the needs of individuals as adult learners. Professional development programs generally consist of interconnected components that fall under five broad categories: (1) core knowledge; (2) access and outreach; (3) qualifications, credentials, and pathways; (4) funding; and (5) quality assurance. Certificate programs, Quality Rating Systems, and other state-sponsored quality activities are usually connected in professional development programs.
Sparkling Connections	Sparkling Connections was a three-phased, four-year national initiative sponsored by the United Way of America, to demonstrate and evaluate strategies to support family, friend, and neighbor caregivers through various partnerships, particularly those with community businesses. In Phase I, the Families and Work Institute released a report in April 2003 that summarized its research findings and recommendations for how diverse community stakeholders can help this population of child care providers. The report also provided a menu of ways that diverse and often-unexpected community partners could connect with each other, retailers and other employers, and family, friend and neighbor caregivers. Phase II, the Sparkling Connections National Consortium—a two-year evaluation and demonstration project, began in December 2003. Pilot sites included: Henry County/ Martinsville, Virginia; Minneapolis-St. Paul, Minnesota; Oklahoma; and Seattle/King County, Washington. Other sites participating in project activities were Atlanta, Georgia; Brownsville, Texas; Greenville, South Carolina; and Hawaii. The Sparkling Connections initiative provided technical assistance to those sites participating in the Making Connections, an Annie E. Casey-funded initiative to strengthen communities.

Initiative	Description
T.E.A.C.H. Early Childhood® Project	In 1990, Child Care Services Association of North Carolina created the Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood® Project to address the issues of under-education, poor compensation, and high turnover in the early childhood workforce. The T.E.A.C.H. Early Childhood® Project provides scholarships to child care workers to complete coursework in early childhood education to increase their compensation. The T.E.A.C.H. Early Childhood® Project is also an umbrella for a variety of different scholarship programs for teachers, directors, and family child care providers working in regulated programs. T.E.A.C.H. operates in: Alabama, Colorado, Delaware, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, Nevada, New Mexico, North Carolina, Ohio, Pennsylvania, South Carolina, Virginia, and Wisconsin.

Sources: Healthy Child Care America (<http://www.healthychildcare.org/CCHC.cfm>); Infant/Toddler Certificates (http://www.nccic.org/ITCC/PDFdocs/IT_Credentials.pdf); PBS Reading to Learn Professional Development Programs (NCCIC website); Sparking Connections (<http://www.familiesandwork.org/sparking/home.htm>); T.E.A.C.H. Early Childhood® Project (<http://www.childcareservices.org/ps/teach.html>); and the 2006-2007 Annual Report (http://www.childcareservices.org/_downloads/TEACH%20annual%20report_07.pdf). All websites were accessed on October 3, 2008.

Appendix C. Inclusion of Home-based Care Providers in State Quality Rating Systems

State	Quality Rating System and Description (date system was implemented)	Licensed Family Care Provider or Home	Certified or Registered Family Care	License-Exempt Home-Based Care	Center-Based Only
Colorado	Qualistar Rating System (2000) is a four-star quality rating system that uses points to measure quality in licensed home- and center-based programs serving children from birth to kindergarten. The program uses the ECERS-R/ITERS and FDCRS ^a classroom environment tools and provides a detailed plan for continuous quality improvement.	X			
Delaware	Delaware Stars for Early Success (2007) is a five-level quality rating system, with the lowest level requiring programs to meet licensing rules.	X			
District of Columbia	Going for the Gold (2000) is a three-tiered reimbursement and quality system to increase quality in child care. Designation of gold means national accreditation; silver indicates providers are in the process of obtaining national accreditation from the National Association for the Education of Young Children (for centers) and the National Association for Family Child Care (for family child care providers); and bronze denotes providers that meet licensing requirements.	X			
Florida					
Broward County	Quality Rating System (2005) is a voluntary rating system, ranging from one to five stars, for licensed center and family providers. The system requires environmental ratings, quality improvement plans, and training, and offers technical assistance.	X			
Miami-Dade and Monroe Counties	Quality Counts is a voluntary, five-tiered quality rating program for centers and family care providers. The program is operated by the Early Learning Coalition and funded by Children's Trust.	X			

Appendix C (continued)

State	Quality Rating System and Description (date system was implemented)	Licensed Family Care Provider or Home	Certified or Registered Family Care	License-Exempt Home-Based Care	Center-Based Only
Illinois	Quality Counts (2007) is a four-tiered voluntary rating system. For license-exempt family child care providers, there are three tiers of training. Providers completing the training tiers and other eligibility requirements can receive an award certificate and quality add-ons ranging from 10-20 percent.	X		X	
Indiana	Paths to QUALITY (2008) is a voluntary system for child care providers interested in going beyond the minimum licensing requirements. Level 1 requires additional health and safety measures such as background checks and level 4 requires accreditation.	X			
Iowa	Iowa's Quality Rating System (2006) is a voluntary child care rating system that evaluates licensed and registered child development homes and centers along five levels of standards. Family care and Family, Friend, and Neighbor providers may participate if registered.		X		
Kentucky	STARS for Kids Now (2001) is a four-tiered voluntary quality rating system for child care facilities. Regulatory standards and the Family Day Care Rating Scale serve as the basis for all ratings.	X	X		
Louisiana	Quality Start (2007) is a voluntary five-tiered quality rating system for child care centers.				X
Maryland	Maryland Child Care Tiered Reimbursement Program (2001) is a voluntary four-tiered system measuring providers in areas such as credentialing, training, learning environment, parental involvement, and program evaluation. Participating providers must actively pursue accreditation.		X		

Appendix C (continued)

State	Quality Rating System and Description (date system was implemented)	Licensed Family Care Provider or Home	Certified or Registered Family Care	License-Exempt Home-Based Care	Center-Based Only
Minnesota^b	Parent Aware (2008) is a four-tiered rating system for licensed providers based on teaching, child safety, teacher education, and parental/family involvement.	X			
Missouri (Kansas City-area)	Quality Rating System Pilot Project (2004) uses a five-tiered system to indicate centers' and family care homes' scores on an assessment of practices and the learning environment. Unlicensed providers must become licensed to meet requirements of the first tier of the program.	X		X	
Montana	Star Quality Child Care Rating System (2001) includes three designations - registered/licensed, one star to indicate a near perfect inspection and high scores on other quality measures, and two stars to indicate accreditation.	X	X		
Nebraska^c	Nebraska Quality Rating System Pilot Study (2005) is modeled after the Missouri Quality Rating System. As such, this system uses a five-tiered system to indicate centers' and family care homes' scores on an assessment of practices and the learning environment. Unlicensed providers must become licensed to meet requirements of the first tier of the program.	X			
New Hampshire	Licensed Plus (2006) is a quality designation open to all licensed providers through application. Family Care providers are required to document compliance with 16 standards in the areas of learning environment, parental involvement, special needs, professional development, staffing, and program evaluation.	X			

Appendix C (continued)

State	Quality Rating System and Description (date system was implemented)	Licensed Family Care Provider or Home	Certified or Registered Family Care	License-Exempt Home-Based Care	Center-Based Only
New Mexico	Look for the Stars (2005) is a five-tiered quality rating system for licensed providers. One star indicates a provider is licensed and five stars indicate accreditation.	X			
New York^d	The Child Care Programs of Excellence Pilot (2003) is no longer in operation.	X			
North Carolina	North Carolina Star Rated License System (2000) provides ratings of one to five stars to licensed providers based upon staff education and program standards.	X ^e			
Ohio	Step Up to Quality (2006) is Ohio's three-step quality rating system for licensed centers and Type A homes (family care providers). Step three for licensed family care providers includes NAFCC or Montessori accreditation.	X			
Oklahoma	Reaching for the Stars (1998) is a four-tiered system of quality and reimbursement in which one star indicates minimum licensing requirements and four stars indicate national accreditation.	X			
Pennsylvania	Keystone STARS (2002) is a voluntary four-tiered system of quality improvement for centers, group day care, and family care providers. Accreditation is the highest level.	X	X		
Tennessee	The Child Care Evaluation and Report Card Program (2001) and Star-Quality Child Care Program (2001) are companion programs that measure quality in child care. Report Card is a mandatory assessment of all licensed providers. Star-Quality is a voluntary three-tiered program indicating quality efforts beyond regulatory requirements.	X			

Appendix C (continued)

State	Quality Rating System and Description (date system was implemented)	Licensed Family Care Provider or Home	Certified or Registered Family Care	License-Exempt Home-Based Care	Center-Based Only
Vermont	Step Ahead Recognition System-STARs (2003) is a five-tiered system open to registered and licensed child care providers. Initial ratings are based on self-assessments and the program offers a range of bonuses and increased reimbursements.	X	X		

Sources: National Child Care Information and Technical Assistance Center compilation (2007) and state websites.

^aThe Family Day Care Rating Scale (FDCRS, 1989) was revised in 2007 and is now known as The Family Child Care Environment Rating Scale–Revised Edition (FCCERS–R). See: Harms, T., D. Cryer, & R.M. Clifford. (2007). Family child care environment rating scale revised edition. New York: Columbia University, Teachers College Press.

^bThe system is available to providers in St. Paul, North Minneapolis, Wayzata School District, Blue Earth County, and Nicollet County.

^cThe system is available to providers in Wayne, Thurston, Madison, Stanton, Cuming, Burt, Platte, Polk, Colfax, Butler, and Lincoln/Lancaster Counties.

^dThe system is available to providers in Albany, Onongdaga, Ontario, Rensselaer, and Yates Counties.

^eNorth Carolina’s Quality Rating System includes licensed family child care providers serving five or fewer children.

Appendix D. Health and Safety Requirements for Home-Based Care Providers

State/Territory	Health and Safety Requirements for Home-Based Care Providers ^a
Alabama	Requirements not found in the state plan.
Alaska	Requirements not found in the state plan.
American Samoa	Requirements not found in the state plan.
Arizona	Non-certified relative providers and in-home providers must undergo state and federal fingerprint background checks (p.74). Local CCR&Rs are responsible for working with unregulated home providers in registering and meeting regulatory requirements such as background checks, proof of CPR training, and assurance that hazardous items and materials are properly stored and pools are fenced (p. 49). Community-based training, 54 hours of introductory early childhood coursework, is open to all providers (p.63).
California	Providers must show proof of TB testing (negative results) and completion of an environmental safety checklist (p.80). CCR&Rs receive funds through a contract to arrange for or provide reimbursement to licensed center-based staff, licensed family child care providers, and license-exempt family child care and in-home providers for health and safety activities (pp. 53, 72). Reimbursement to providers is for costs associated with completing health and safety training, including pediatric CPR, pediatric first aid, prevention and control of communicable disease in child care settings, safe handling of food, nutrition, disaster preparedness and mitigation, and other health- and safety-related subjects (p. 63).
Colorado	Requirements not found in the state plan.
Connecticut	Requirements not found in the state plan.
Delaware	License-exempt in-home providers are required to participate in state-sponsored CPR and first aid training; health, safety, and nutrition workshops; and must attend an initial orientation workshop (p. 77).
District of Columbia	New in-home providers are invited to all government-sponsored training, which includes CPR and first aid. A minimum of 12 hours of training a year is required. The District of Columbia has a grant with Catholic Charities Model Cities Center to provide the following for in-home and relative providers: home visits to demonstrate educational strategies for use with children; monthly support and training; bimonthly newsletter; annual group event; and equipment, educational materials, and library books.
Florida	Requirements not found in the state plan.
Georgia	Informal child care providers caring for children in the subsidy program are required to have eight state-accepted training hours per year (p.58). A health and safety packet specifically designed for informal providers is delivered at an initial monitoring visit at which smoke detectors and fire extinguishers are furnished if not present in the home (p. 58). Georgia links informal caregivers to Child and Adult Care Food Program sponsors (pp. 25, 85).
Guam	Unlicensed providers such as family and in-home providers must complete at least 15 hours of training and technical assistance activities annually on health and safety, nutrition, first aid, child abuse and detection, and caring for children with special needs (pp. 63-64).
Hawaii	Requirements not found in the state plan.
Idaho	One-time health and safety inspection (p. 61).
Illinois	License-exempt providers in the CCR&R database are advised of available training, including training related to health and safety (p. 74).
Indiana	License-exempt providers are inspected (announced inspections) annually by a state contractor (p. 73). License-exempt providers are also subject to a statewide, limited criminal history check and State Central Registry check for child abuse (p. 73).
Iowa	Iowa does not have mandatory regulation of all adults providing child care. Registration is required when caring for six or more children; otherwise, registration is a voluntary, self-certification process. In-home providers, those providing care in the residence of the child, must provide care to at least three children. In signing the provider agreement, they adhere to the same requirements as the nonregistered providers (p. 90).

State/Territory	Health and Safety Requirements for Home-Based Care Providers ^a
Kansas	All in-home or out-of-home relative and in-home nonrelative providers must complete a self-assessment checklist for health and safety (p. 70). Through a pilot program in 11 counties, providers can attend a 90-minute orientation and receive resources such as books and toothbrushes (p.60).
Kentucky	Requirements not found in the state plan.
Louisiana	In-home providers are required to have a criminal background check and CPR and first aid training (p. 26).
Maine	Requirements not found in the state plan.
Massachusetts	In-home and relative care providers must attend an orientation, which includes training on health and safety topics. The orientation session covers health, safety, and child growth and development, and information on resources to help providers care for young children appropriately.
Michigan	Relative care providers and day care aides are required to attend minimum training and education before being reimbursed by the state for subsidized services (p.12, Attachment: 2.1.2). The state provided incentive payments (\$150.00) in fiscal year 2007 to relative care and day care aides who completed 16 hours of documented infant and toddler care training (pp. 35, 49, 55). Providers formally and informally receive training materials about fire safety—how to prevent fires and what to do in an emergency—and child safety in the home, such as how to “childproof” the home and prevent accidents (p. 74).
Minnesota	Requirements not found in the state plan.
Mississippi	Requirements not found in the state plan.
Missouri	Requirements not found in the state plan.
Montana	All legally unregistered providers (care in the provider’s home) and legally unregistered in-home providers (care in the child’s home) are required to attend a new provider orientation, which includes health and safety topics.
Nebraska	Child care providers are provided training on health and safety through written materials, including but not limited to the Child Care Provider Handbook. This material includes the importance of immunization, guidelines on hand washing, tips on choosing healthy and safe food for young children, the health risks of second-hand smoke, and the importance of physical activity (p. 88). Family, Friend, and Neighbor providers caring for children receiving a subsidy fall into the license-exempt status, but are encouraged to access information to best prepare them for meeting a child’s medical needs by obtaining first aid and CPR training (p. 73). Unlicensed family child care providers (called license-exempt providers) complete a self-certification checklist in which they must certify that the home is kept clean and in good repair; free from fire hazards; with firearms, medications, poisons, furnace, and water heater inaccessible to children. An agency worker makes an initial visit to the home and follow-up visits every 36 months, or more frequently if there are problems (pp. 88, 55).
Nevada	All providers are required to attend regular workshops (three hours) or self-guided video training (pp. 53-54).
New Hampshire	Health and safety trainings are available through the CCR&R agencies. These trainings are advertised to and are available to license-exempt providers. The state distributes a brochure to each license-exempt provider at registration when parents inform the state that care will be given by that license-exempt provider. The brochure, <i>Child Care Health and Safety Information</i> , identifies procedures that are to be followed at the provider’s home.
New Jersey	For approved home providers and in-home providers in New Jersey, N.J.S.A. C. 30:5B-32 requires all prospective approved home or in-home providers and all members of the prospective provider’s household who are at least 14 years of age to provide written consent for DHS to conduct a Child Abuse Record Information (CARI) background check to determine whether an incident of child abuse or neglect has been substantiated against any such person (p. 91).
New Mexico	Primary caregivers are required to attend first aid training during their first year of registration. An 18-hour course that was previously required is currently a recommendation.

State/Territory	Health and Safety Requirements for Home-Based Care Providers ^a
New York	Legally exempt caregiver enrollment agencies conduct annual on-site inspections of 20 percent of enrolled, legally exempt family child care providers (p. 11). On July 31, 2006, New York State revised regulations to create legally exempt caregiver enrollment agencies. Legally exempt child care caregivers will be required to become enrolled through a legally exempt caregiver enrollment agency in order to be eligible to receive child care subsidy payments (p. 48). To receive the enhanced market rates, legally exempt family child care providers and legally exempt in-home child care providers must also complete 10 or more hours of training annually in the areas specified for licensed and registered providers and attend a training to inform them of legally exempt provider enrollment requirements, policies, and procedures (p. 60).
Northern Mariana Islands	License-exempt providers are required to self-certify adherence to health and safety requirements (pp. 51-53).
Ohio	Requirements not found in the state plan.
Oklahoma	In-home providers must complete a minimum of six clock hours of training within 90 calendar days from the date the county director signs and dates the approved plan of care. The training requirement must be met through attendance at workshops and/or formal training programs or viewing audio-visual aids and/or individual job-related readings such as <i>For Your Family's Sake TAKE TIME OUT</i> , <i>First Aid for Poisoning</i> , <i>Fire Facts for Kids</i> , and <i>Oklahoma Child Care Journal</i> . Providers are given written information to assist them in the prevention and control of infectious disease and an In-Home Provider Health and Safety Checklist.
Oregon	Exempt providers are not required to participate in health and safety training (p. 67).
Pennsylvania	Requirements not found in the state plan.
Puerto Rico	Requirements not found in the state plan.
Rhode Island	All noncertified providers must attend three hours of training related to children's development or children's health and safety annually for continuing approval.
South Carolina	Requirements not found in the state plan.
South Dakota	Requirements not found in the state plan. ^b
Tennessee	Unregulated family home providers exempt from licensing and participating in the assistance program are not subject to unannounced visits but are required to complete one annually scheduled visit by state staff or state contracting staff (p.70). Enrolled unregulated providers must complete a health and safety checklist (Attachment Part 3 B).. (p. 24).
Texas	Requirements not found in the state plan.
Utah	Training in basic health and nutrition, safety, CPR, first aid, and safety issues is available to license-exempt providers through CCR&Rs (p. 58).
Vermont	All in-home care providers must meet the minimum health and safety standards established by Vermont's requirements for Legally Exempt Child Care. All licensed centers, licensed homes, registered child care homes, and certified legally exempt providers are subject to routine, unannounced licensing visits. Unannounced visits occur when there has been a complaint or following a scheduled visit at which concerns have been identified. Random visits, as part of routine compliance monitoring, also occur.
Virginia	Providers or staff members on site must have current certification in first aid and CPR appropriate to the age of the children in care. The provider and other individuals who work directly with children must annually complete four hours of skills training relating to child health, safety, and/or development.
Virgin Islands	Unlicensed providers do not have to meet licensing requirements but must be registered with the government, agreeing to maintain an environment that will be clean and sanitary as well as to take precautions to ensure the health of each child in care.
Washington	Parents submit signed statements that show that providers attest to certain health and safety standards (p.88). The state will provide training to license-exempt providers on health and safety and the basics for providing a quality home-based setting for learning (p.59). Monetary incentives are available to providers who complete the health and safety training (p. 30).

State/Territory	Health and Safety Requirements for Home-Based Care Providers ^a
West Virginia	In-home child care providers are exempt from state regulatory requirements but are required to meet basic health and safety standards in order to participate in the state’s certificate system. The provider is required to meet the health and safety requirements that include criminal background checks, Child Protective Services/Adult Protective Services history checks, medical information, as well as training participation, which is included as part of the provider services agreement with the state.
Wisconsin	A parent can select a friend, neighbor, or relative as a child care provider if that individual is willing to become certified as meeting basic health and safety standards required during the certification process (p. 44).
Wyoming	All legally exempt providers have access to state health and safety training and technical assistance (p. 46).

Source: 2008-2009 Child Care and Development Fund plans.

Note: Health and safety requirements described here apply to license-exempt home-based providers receiving subsidies through the Child Care and Development Fund. Licensed home-based providers fall under the general health and safety requirements for all licensed providers.

^aStates use varying terminology for home-based care providers.

^bSouth Dakota does not have requirements for unlicensed home-based care providers. However, basic first aid training is provided as part of the first level in the state’s professional development curriculum (Appendix 5.2.5, p. 10).

PROFILES

ALABAMA

Name of initiative	Alabama's Kids and Kin Program					
State	Alabama					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Family Guidance Center						
Dates of operation						
2000 - Present						
Funding						
CCDF (funding amount not available)						
Description of initiative						
The goal of Kids and Kin is to meet the needs of relative caregivers and to raise their level of awareness about the importance of their caregiving role. This voluntary certification program offers incentives to caregivers who complete a specified number of training hours, up to a 20 total hours of training. After completing Level I training, the caregiver receives \$50 worth of toys, books, and educational supplies. After completing Level II, caregivers receive an additional \$100 worth of materials. In addition to the training and materials, the program provides a monthly newsletter and organizes an annual recognition day.						
<i>*Primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other : monthly news letter; annual recognition day	X		
Content of services						
The 20-hour voluntary certification program offers training workshops on health and safety, child development, language and literacy, First Aid, CPR, and working with children with special needs.						
<i>* Primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
The training workshops are offered twice a month for two hours.						
Duration of services						
Year round; caregivers participate in up to 20 hours of workshops						
Recruitment strategies						
Child care partners in the counties recruit caregivers through churches, schools, Head Start, and community organizations. Caregivers are invited to a focus group to learn about their interests and needs.						

Alabama's Kids and Kin Program (continued)

Caregiver characteristics				
<i>Relationship to children</i>	The typical caregiver in 2006 was a grandmother.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Kids and Kin served 703 caregivers in 33 counties in March 2008; more than 3,000 caregivers received newsletters from the program.				
Child characteristics				
<i>Ages of children in care</i>	Birth to 10			
<i>Group size</i>	In 2006, the average number of children in care was 3.2.			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	12 full-time; 4 part-time			
<i>Staff qualifications</i>	Qualifications range from a high school diploma to a bachelor's degree.			
Materials (curricula, other materials, technology)				
Workshop topics include: How Domestic Violence Affects Children; Keeping Children Safe from Drugs and Alcohol; Safely Transporting Young Children; How to Become a Licensed Child Care Provider; Diabetes in Children; Helping Providers and Children to Become Physically Fit; Helping Children Prepare for School Success; Working with Children with ADHD; Using Scrapbooking as a Tool for Developing Writing and Literacy Skills; Making and Using Puppets to Encourage Literacy and Creative Writing Skills; Creating a Safe Play Environment for Infants and Toddlers; Celebrating Cultural Diversity; First Aid; and CPR. Other training classes that have been offered include: Child Abuse and Neglect; Managing Life's Resources; Social Skills that Promote Success; Helping Children Cope with Loss; Children with Autism; Reading Readiness; Community Resources that Help Families; and Resources for Special Needs Children.				
Materials include toys, books, and other educational materials. One health and safety item is provided when providers enroll in the program.				
Community partners				
The Family Guidance Center works with child care voucher management agencies, which are CCR&Rs, to deliver services in the counties.				
Fidelity standards				
Not available				
Other versions				
Not available				
Logic model/Theory of change	Yes		No	X

Alabama's Kids and Kin Program (continued)

Collection of program data/information		Yes	X	No	
* <i>primary collection efforts</i>	Number of participants	X*			Quality outcomes (observations or ratings) X
	Caregiver characteristics	X			Parent satisfaction with care
	Child characteristics				Parent experience with care
	Care characteristics				Child outcomes
	Caregiver satisfaction with services				Other
Evaluation methods and design		Yes	X	No	
The evaluation used a pre/post design to assess observed child care quality in a sample of 12 caregivers with the Child Care Assessment Tool for Relatives (CCAT-R) as well as pre/post tests of changes in knowledge. The pre/post tests were administered in seven content areas: ages and stages, language development, money management, behavior management, quality child care, nutrition, and stress management.					
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes	X	No	
Of the 11 caregivers who completed the pre/post tests, 8 showed improvement. Observations with the CCAT-R showed improvement in two factors, nurturing and caregiver engagement with the child.					
Contact					
Kathy Camp, Family Guidance Center, Program Director Kids and Kin Program, kcamp@familyguidancecenter.org, 334-270-4100					
Date information collected					
8/21/08					

ADHD = Attention Deficit Hyperactivity Disorder; CCDF = Child Care Development Fund; CCR&R = Child care resource & referral; CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

ALASKA

Name of initiative	Alaska Professional Development System for the Early Education Workforce					
State	Alaska					
Initiative category	Certificate Program					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Alaska Department of Health and Human Services and University of Alaska Southeast						
Dates of operation						
July 1, 2008 - Present						
Funding						
Alaska Office of Children's Services, State Department of Early Education and Development, University of Alaska Southeast, Best Beginnings (funding amount not available)						
Description of initiative						
The initiative is a professional development/career lattice system that provides opportunities for early childhood educators to obtain additional education and training. The career lattice is based on Alaska's professional development plan, which was developed by Alaska's System for Early Education Development in 2008. The system includes multiple levels; license-exempt family, friend, and neighbor caregivers can enter the system at Level 1 and can move to Level 2 if they become licensed.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education	X*	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content is related to core knowledge elements of professional development areas and topics ranging from child development and health and safety to language and literacy and behavior management.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children		Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Varies						
Duration of services						
Varies						
Recruitment strategies						
Participants are recruited by CCR&Rs through mailings and newsletters.						

Alaska Professional Development System for the Early Education Workforce (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Regulated family child care providers; exempt family, friend, and neighbor caregivers; and child care centers				
<i>Other needs</i>	Some home-based caregivers speak Spanish.				
Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Birth to 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Some children speak Spanish.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Three full-time staff				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
The initiative does not provide any materials.					
Community partners					
CCR&Rs					
Fidelity standards					
Not available					
Other Versions					
None					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Marcey Bish, Department of Health and Social Services Division of Public Assistance Child Care Program Office, Acting Child Care Program Manager, Marcey.Bish@Alaska.gov, 907-269-4784					
Date information collected					
9/25/08					

CCR&Rs = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

ARIZONA

Name of initiative	Arizona Kith and Kin Project					
State	Arizona					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Association for Supportive Child Care (ASCC)						
Dates of operation						
1999 - Present						
Funding						
United Way, Bank of America, Season for Sharing, and other private foundations (\$300,000)						
Description of initiative						
The goals of the Arizona Kith and Kin Project are: (1) increase participants' knowledge and understanding of child development and (2) increase participants' knowledge and understanding of health and safety issues. Services are provided primarily through peer support groups. As of July 2008, there were six groups (with 20 to 25 participants per group) offered in convenient locations for caregivers such as Head Start centers, community centers, churches, and public schools. Groups are conducted in Spanish. The program provides caregivers with transportation and on-site child care.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other - Annual Health and Safety Training Day	X		
Content of services						
The program curriculum covers health and safety (First Aid, CPR, and car seats), nutrition, language and literacy, behavior management, and other child development topics. It also includes information about how to become a regulated provider, working with parents, business practices, stress reduction, and other special focus topics.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	X*
	Nutrition	X*	Activities for children	X*	Business practices	X
	Language and literacy	X*	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
12 to 14 2-hour sessions						
Duration of services						
14 weeks						
Recruitment strategies						
Arizona Kith and Kin partners with organizations such as Head Start, community centers, and public schools to recruit caregivers.						

Arizona Kith and Kin Project (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Many participants speak Spanish.				
Number of caregivers enrolled					
In July 2008, there were six groups with approximately 20 participants per group each session. In one calendar year the program serves a minimum of 320 family, friend, and neighbor caregivers.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 5, although most are infants and toddlers				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Many children speak Spanish.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	4 full-time (coordinator, assistant coordinator, injury prevention specialist, program assistant) and .75 FTE staff specialist.				
<i>Staff qualifications</i>	The coordinator and assistant coordinator must have bachelor's degrees or eight years related early childhood experience. The staff specialist must have an associate's degree or a minimum of four years related early childhood experience.				
Materials (curricula, other materials, technology)					
The program provides health and safety equipment and supplies such as car seats, socket covers, latches for cabinets, fire extinguishers, smoke detectors, and first aid kits.					
Community partners					
Community partners include Head Start, United Way, community centers, elementary schools, and churches.					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change		Yes	X	No	
Collection of program data/information		Yes	X	No	
Program participants complete a pre- and post-test of caregiver knowledge at the beginning and end of the 14-week training session. The program also collects narrative responses from caregivers at the end of the service period about changes they have made to the child care environment. Demographic characteristics of the participants are also collected					
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other - Caregiver knowledge		X

Arizona Kith and Kin Project (*continued*)

Evaluation methods and design	Yes	X	No	
The project uses a pre- post design that focuses on quantitative measures of changes in knowledge of early child development and health and safety issues. The test also includes self-reports of changes in behavior related to the quality and safety of care provided to children, in addition to qualitative feedback collected through open-ended questions on the post-test survey.				
Process evaluation findings	Yes		No	X
Not available				
Outcome evaluation findings	Yes	X	No	
Results from 2007 indicate statistically significant gains from pre- to post-test on knowledge of:				
<ul style="list-style-type: none"> - Safety in the home environment, particularly fire safety - the Child and Adult Care Food Program, which reimburses providers for meals served to children in their care - Establishing a daily schedule for the children in care - Procedures for joining the local library 				
In addition, 81 percent of providers indicated making specific changes in the care provided to the children after their involvement in the program.				
Contact				
Susan Wilkins, Association for Supportive Child Care, Executive Director, swascc@aol.com, 800-535-4599 x 126				
Date information collected				
7/10/08				

CPR = cardiopulmonary resuscitation; ELL = English language learner; FTE = full-time equivalent; HBC = home-based care; IT = infant toddler

Name of initiative	Arizona Self-Study Project					
State	Arizona					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Association for Supportive Child Care (ASCC)						
Dates of operation						
1993 - Present						
Funding						
CCDF and Valley of the Sun United Way (\$1.1 Million)						
Description of initiative						
The goal of the Arizona Self-Study Project is to help providers obtain accreditation. The program serves regulated family child care providers and staff from licensed child care centers by providing technical assistance and consultation during on-site visits and phone calls.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other - Annual Conference	X		
Content of services						
Content of services are based on the results of self-assessments from national accreditation tools completed by providers at program enrollment.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X*	Behavior management	X*	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Physical Environment Curriculum Staff Interactions	
Initiative intensity						
On-site visits at least four times a year and monthly phone consultation						
Duration of services						
24 months						
Recruitment strategies						
ASCC uses the Arizona Department of Employment Services' list of child care providers participating in the subsidy program to identify potential participants and reach out to them. ASCC also conducts outreach during community events. Providers are rated on the level of enrollment of subsidized children. DES funds 150 slots in the program and United Way funds 25 slots.						

Arizona Self-Study Project (continued)

Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Regulated family child care providers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
ASCC serves 175 child care facilities annually, including child care centers and family child care homes. Across these facilities, approximately 1,000 teachers and providers participate in the program.						
Child characteristics						
<i>Ages of children in care</i>	Birth to age 12					
<i>Group size</i>	Varies by program from 4 to 200+ children					
<i>Characteristics (ELL, special needs)</i>	Not available					
Care characteristics						
<i>Schedule and intensity of care</i>	Full-day, full-year					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	1 Coordinator, 1 Assistant Coordinator, 1 Trainer/Outreach Specialist, and 5 Program Specialists					
<i>Staff qualifications</i>	Bachelor's degree in early childhood development and at least five years of experience in the field					
Materials (curricula, other materials, technology)						
The program provides \$5,000 to each facility for purchasing materials.						
Community partners						
United Way						
Fidelity standards						
Not available						
Other versions						
Not available						
Logic model/Theory of change			Yes	X	No	
Collection of program data/information			Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)			
	Caregiver characteristics		Parent satisfaction with care			
	Child characteristics		Parent experience with care			
	Care characteristics		Child outcomes			
	Caregiver satisfaction with services	X	Other-National accrediting self-study materials as guide for individualizing quality standards.		X	
Evaluation methods and design			Yes	X	No	
The program administers pre- and post-tests to all providers to assess changes in caregiver knowledge and program improvements.						
Process evaluation findings			Yes		No	X
Outcome evaluation findings			Yes		No	X

Arizona Self-Study Project (*continued*)

Contact
Susan Wilkins, Association for Supportive Child Care, Executive Director, swasco@aol.com, 800-535-4599 x 126
Date information collected
07/10/08

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	The Early Childhood Partnership of Southern Pima County (ECPSPC)					
State	Arizona					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
United Way of Tucson and Southern Arizona's First Focus on Kids Impact Council						
Dates of operation						
October 2004 - Present						
Funding						
United Way (\$49,790 annually)						
Description of initiative						
The initiative offers mentoring, networking, and technical assistance to home-based caregivers to improve school readiness. House meetings, networking, and support meetings are offered monthly. Training workshops are offered through outside agencies. Monthly e-newsletters are also provided to subscribers.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X*	Other-Newsletters	X		
Content of services						
Content is related to school readiness and includes a variety of topics.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Family resource meetings are held monthly for two hours. The intensity of the other services is not available.						
Duration of services						
Not available						
Recruitment strategies						
Recruitment strategies include information at community events, word of mouth, referrals from program participants, and one-to-one outreach to caregivers.						

The Early Childhood Partnership of Southern Pima County (ECSPSC) (continued)

Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Regulated family child care providers and exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
In 2007-2008, 15 to 20 caregivers were enrolled; 148 subscribers received the newsletter.						
Child characteristics						
<i>Ages of children in care</i>	Birth to age 5					
<i>Group size</i>	4 to 10 children					
<i>Characteristics (ELL, special needs)</i>	Not available					
Care characteristics						
<i>Schedule and intensity of care</i>	Not available					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	1 full-time director and 2 part-time child care specialists					
<i>Staff qualifications</i>	Not available					
Materials (curricula, other materials, technology)						
Not available						
Community partners						
Arizona Succeeds, Child and Family Resource, Easter Seals						
Fidelity standards						
Not available						
Other Versions						
Not available						
Logic model/Theory of change			Yes	X	No	
Collection of program data/information			Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)			
	Caregiver characteristics		Parent satisfaction with care			
	Child characteristics	X	Parent experience with care			
	Care characteristics		Child outcomes			
	Caregiver satisfaction with services		Other- add description			
Evaluation methods and design			Yes	X	No	
Pre/post caregiver surveys are conducted.						
Process evaluation findings			Yes		No	X
Not available						
Outcome evaluation findings			Yes		No	X
Not available.						

The Early Childhood Partnership of Southern Pima County (ECSPC) (*continued*)

Contact
Vanessa Felty, Early Childhood Partnership of Southern Pima County, Program Manager, Vfelty@unitedwaytucson.org, 520-393-6415
Date information collected
8/23/08

ELL = English language learner; HBC = home-based care; IT = infant toddler

CALIFORNIA

Name of initiative	Los Angeles Universal Preschool (LAUP) - Family Child Care Providers					
State	California					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Los Angeles Universal Preschool						
Dates of operation						
2004-2014						
Funding						
First 5 LA, LAUP (\$7.1 million in FY2008)						
Description of initiative type						
LAUP funds preschool and child care centers to allot additional spaces for preschool children. As part of this larger program, LAUP funds licensed family child care providers to provide preschool services to eligible 4-year-old children and helps providers raise the quality of their learning environments. LAUP assesses providers' quality star rating by reviewing licensing information, FDCRS scores, and teacher qualifications. Licensed family child care homes that meet the criteria for three or more stars are eligible for LAUP funding. LAUP quality support coaches help providers increase program quality by developing individualized quality improvement plans that include the providers' goals for their programs. Coaches provide support by conducting site visits, calls, or trainings. Quality support is adjusted to help all providers achieve their goals and obtain the information and resources they need to be successful.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting		Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
Topics include health and wellness, English language learners, early identification of special needs, children's communication, workforce development, early literacy, foster care, parent leadership, and business management.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition		Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Funding	X
Initiative intensity						
Providers receive regular coaching visits that are tailored to provider and program needs. This may vary from once per month to once per quarter and last from one to three hours.						
Duration of services						
180 days a year						
Recruitment strategies						
Providers learn about LAUP through word of mouth, community agencies, radio and newspaper ads, and the website. Interested providers can apply directly with LAUP or a hub, which is a nonprofit, community-based agency with which LAUP contracts to recruit and work with groups of licensed family child care providers.						

Los Angeles Universal Preschool (LAUP) - Family Child Care Providers (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
125 licensed family care providers				
Child characteristics				
<i>Ages of children in care</i>	To participate in the LAUP program for any program year, children must be 4 years of age on or before December 2 of the September to June program year.			
<i>Group size</i>	Family child care providers must meet the minimum enrollment requirement of three eligible children per session, subject to the Provider's Planned Utilization Rate, to participate in the LAUP Program. Group size in three-star, four-star, and five-star programs may not exceed 8 children in a small home or 14 total children in a large home. Maximum group size may not exceed 6 LAUP-eligible children for a small family child care home and 12 LAUP children for a large family child care home.			
<i>Characteristics (ELL, special needs)</i>	Many children are English language learners. The majority of children speak English, Spanish, Korean, or Vietnamese as their first language.			
Care characteristics				
<i>Schedule and intensity of care</i>	3.5 hours per day for at least 175 days per calendar year			
<i>Purpose of care</i>	To provide pre-kindergarten instruction			
Staff characteristics				
<i>Number of staff</i>	5 family child care quality support coaches, 2 hub family child care coaches, 1 family child care manager			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Providers must choose a curriculum that is research-based, comprehensive, integrated, inquiry-based, responsive, sensitive, family-centered, articulated, and based on ongoing screening and assessment. Some of the curricula used by providers are High Scope, Creative Curriculum, Reggio Emilia, Montessori, and High Reach.				
Community partners				
American Institutes for Research; California Preschool Instructional Network; City of Los Angeles, Commission for Children, Youth and Their Families; City of Los Angeles, Workforce Investment Board; study on the "Economic Impact of the Early Care and Education Industry in Los Angeles County;" Community Care Licensing Division; Connections for Children (hub agency), Comprehensive Child Development (hub agency); LACOE-Parent Academy; Los Angeles County Public Health Nutrition Program; Children's Dental Group; Care-A-Van Mobile Health Care Unit; Child Development Institute; Health Consumer Center of Los Angeles; UCLA Center for Children, Families, and Communities; and Department of Children and Family Services				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change				
	Yes	X	No	
Research shows that children who attend quality preschool programs are more likely to succeed, in school and beyond, than those who do not.				

Los Angeles Universal Preschool (LAUP) - Family Child Care Providers (*continued*)

Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X		Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X		Parent satisfaction with care	X
	Child characteristics	X		Parent experience with care	X
	Care characteristics	X		Child outcomes	
	Caregiver satisfaction with services	X		Other	
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Susan Cooper, Vice President of Provider Operations, scooper@laup.net, 213-416-1393					
Date information collected					
10/9/08					

ELL = English language learner; FDCRS = Family Day Care Rating Scale; HBC = home-based care; IT = infant toddler

Name of initiative	Provider-Training Resource Activity Center					
State	California					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Choices for Children in collaboration with Bright Horizons						
Dates of operation						
October 1998 - Present						
Funding						
West Education for Cares E-3 Institute, California First Five funding (approximately \$80,000)						
Description of initiative						
The initiative offers training, home visiting, peer support networks, consultation, and a resource library to home-based caregivers.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other - College courses and site visits	X		
Content of services						
The content covers a wide variety of topics related to child development and providing high-quality child care.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-age children, or children with special needs	X	Other - Class on working with diversity, specifically sexual orientation	X
Initiative intensity						
The intensity of the services varies depending on provider needs.						
Duration of services						
The duration of the services varies depending on provider needs.						
Recruitment strategies						
Not available						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Many participants aim to provide better quality care or start a child care business.					
<i>Interest in professionalizing</i>	Varies					
<i>Training and education</i>	Varies from caregivers with bachelor's and master's degrees to caregivers who have not completed high school					
<i>Regulation status</i>	Regulated family child care and exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Some providers do not speak English as a first language.					

Provider-Training Resource Activity Center (*continued*)

Number of caregivers enrolled				
In 2008, 190 providers were enrolled as members; approximately 1,000 caregivers receive a service annually. Many non-member caregivers attend training workshops.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 12			
<i>Group size</i>	Varies			
<i>Characteristics (ELL, special needs)</i>	Varies by child care program; some providers specialize in caring for special needs children.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	1 full-time manager, 1 full-time resource specialist, 1 full-time CPR trainer, 2 part-time resource specialists			
<i>Staff qualifications</i>	The manager has a bachelor's degree in child development. The resource specialist has an associate's degree and a background in child development. The resource specialists have backgrounds in child development, teaching permits, high school degrees, and/or extensive experience working with youth.			
Materials (curricula, other materials, technology)				
Thematic curriculum kits; children's books and tapes; resource training books and videos for caregivers; college course textbooks, if caregivers cannot afford to purchase them; mobile lending library equipment; portable space containers; large equipment on loan; office equipment for members such as computer, fax, copy machine, lamination, and book binding machines				
Community partners				
Community colleges, provider associations, City of San Jose-Partner to Support Smart Start program, Center for Employment Training, Child Care and Licensing Office				
Fidelity standards				
Not available				
Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Araceli Lopez, Choices for Children, Director of Program, alopez@choices4children.org, 408-202-3497				
Date information collected				
7/03/08				

CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	The Supportive, Teaching, and Educational Programs for Understanding Preschoolers (STEP-UP)					
State	California					
Initiative category	Quality Improvement and Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Choices for Children						
Dates of operation						
2006 - Present						
Funding						
John S. and James L. Knight Foundation (\$936,000 over three years)						
Description of initiative						
The goals of STEP-UP are to: (1) help caregivers gain a better understanding of how they can provide age-appropriate environments and activities that support children's cognitive, social-emotional, and physical development; (2) help caregivers make progress toward obtaining a family child care license or obtaining qualifications required to work in a licensed child care program; and (3) offer equipment and resources through a lending library to enrich the learning environment and expand learning opportunities in caregivers' homes. The initiative offered three primary services in its pilot year: (1) Play and Learn groups, (2) group meetings with speakers; and (3) mobile teacher resource vans. STEP-UP also provided information and support for licensing. A home visiting component was planned for the second and third years.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs	X*	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Curriculum topics for meetings include: child development, behavior challenges, CPR, first aid, nutrition, health, safety, and information about starting a family child care business.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	X*
	Language and literacy		Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
The Play and Learn groups are offered weekly for two to three hours. The mobile teacher resource van is coordinated with the Play and Learn groups. The group meetings occur monthly.						
Duration of services						
Year round						
Recruitment strategies						
Family, friend, and neighbor caregivers are recruited through word of mouth, presentations at community groups, and through the program's website.						

The Supportive, Teaching and Educational Programs for Understanding Preschoolers (STEP-UP) (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Many participants are related to the children in their care.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Most caregivers have a high school degree or less.			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 5			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Many children speak Spanish.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Materials distributed through the mobile teacher resource van include curricula, kits, age-appropriate teaching materials, blocks, puzzles, equipment, and toys.				
Community partners				
Partners include DeAnza College; the National Hispanic University; Services, Immigration Rights, and Education Network (SIREN); and Franklin-McKinley Education Foundation.				
Fidelity standards				
Not available				
Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
The project aimed to assess the project through discussions at quarterly meetings of collaborating partners, pre- and post-activity caregiver surveys, periodic developmental assessments of children, and observations of child care quality using the Child Care Assessment Tool for Relatives (CCAT-R).				
Process evaluation findings			Yes	X
Not available				

The Supportive, Teaching and Educational Programs for Understanding Preschoolers (STEP-UP) (*continued*)

Outcome evaluation findings	Yes		No	X
Not available				
Contact				
Kathleen Duppong, Choices 4 Children, Step-Up Manager, kathleen@choices4children.org, 408-297-3295 x 303				
Date information collected*				
8/26/08				

CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	License-Exempt Assistance Project (LEAP)					
State	California					
Initiative category	Quality Improvement and Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Crystal Stairs						
Dates of operation						
2001 - Present						
Funding						
State Child Care Alternative Payment administrative dollars (\$200,000), California Department of Education (\$46,000 annually)						
Description of initiative						
The goal of LEAP is to encourage family, friend, and neighbor caregivers to become licensed family child care providers and to improve the quality of care provided by licensed providers. LEAP offers 60 hours of training; exempt family, friend, and neighbor caregivers are expected to complete 25 hours to achieve "trainee" status. Licensed family child care providers are eligible to participate in a retention program in which they must complete nine hours of training annually.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Training workshops cover a range of topics about child care, children's development, and operating a family child care business. LEAP's training series also includes the four California Exempt Care Training (CECT) modules. In addition to a core curriculum, some topics vary from year to year. In 2008, workshops were added on social-emotional development and play.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X*
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Two, 3-hour classes per month on Saturday mornings						
Duration of services						
Year round						
Recruitment strategies						
LEAP sends invitations exempt family, friend, and neighbor caregivers who participate in the child care subsidy program. If trainings take place in specific zip codes, fliers are sent to providers who live in that geographic area. The invitation indicates that the training is free and that it will help participants become licensed.						

License-Exempt Assistance Project (LEAP) *(continued)*

Caregiver characteristics					
<i>Relationship to children</i>	Most caregivers are related to the children in care.				
<i>Motivation for providing care</i>	Many caregivers are providing care to help their families.				
<i>Interest in professionalizing</i>	60 percent of enrolled caregivers are interested in becoming licensed family child care providers.				
<i>Training and education</i>	Most caregivers are high school graduates although some have college credits or degrees.				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers and licensed family child care providers				
<i>Other needs</i>	Many caregivers are monolingual Spanish speakers. Workshops are presented with simultaneous Spanish interpretation.				
Number of caregivers enrolled					
In 2008, a total of 130 unduplicated caregivers participated in the training workshops; 33 obtained a child care license. In addition, 32 caregivers reached "trainee" status, and 100 were invited back for "retention" training.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	1 to 3 children for exempt family, friend, and neighbor caregivers; family child care providers can care for up to 8 children or 14 if an assistant is present.				
<i>Characteristics (ELL, special needs)</i>	Many children speak Spanish; 20 to 30 percent have special needs.				
Care characteristics					
<i>Schedule and intensity of care</i>	Part-time and full-time				
<i>Purpose of care</i>	To care for children while parents are working, participating in school or training, or looking for work				
Staff characteristics					
<i>Number of staff</i>	3 full-time staff plus consultants to provide training				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
The LEAP curriculum was developed by Crystal Stairs based on materials it had developed for two earlier initiatives, Circles of Caring and Take Extra Care. In addition, it uses the CECT modules; Zero to Three's curriculum on social-emotional development; and <i>Family Child Care is Best</i> developed at the University of California-Davis.					
LEAP provides educational materials to participants at each workshop.					
Community partners					
LEAP has memoranda of understanding with the First 5 Los Angeles agencies that have funded School Readiness Initiatives to provide services at their sites.					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change					
			Yes	No	X
Collection of program data/information					
			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		

License-Exempt Assistance Project (LEAP) *(continued)*

Evaluation methods and design	Yes	X	No	
An implementation evaluation was conducted in the early stages of the program.				
Process evaluation findings	Yes	X	No	
A survey of 118 participants indicated that word of mouth was the most common recruitment strategy. Participants reported that they enrolled in the program because they wanted additional information (83 percent) and that they were interested in becoming licensed (69 percent). African American caregivers identified the workshops on business practices and positive discipline as most useful. Latinas identified workshops on activities for infants and toddlers and discipline as most useful. Both groups identified licensing as the most important step they could take to improve the quality of their care.				
Outcome evaluation findings	Yes		No	X
Not available				
Contact				
Sheila Wills, Crystal Stairs, LEAP Program Manager, swills@crystalstairs.org, 323-421-1420				
Date information collected:				
7/25/08				

CECT = California Exempt Care Training; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative		Family Child Care Business Training					
State		California					
Initiative category		Support for Licensing					
Target population		Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative							
San Mateo Child Care Coordinating Council							
Dates of operation							
September 2008							
Funding							
San Mateo County (\$19,000)							
Description of initiative							
The goal of the project was to encourage family child care providers to view themselves as businesswomen. The initiative offered business training workshops and materials for regulated family child care providers.							
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching		
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs		
	Home visiting		Warm lines		Online training		
	Peer support networks		Other				
Content of services							
The content for the training workshops focused on contracts with parents, record-keeping, liability and insurance, and taxes.							
<i>* primary content areas</i>	Health and safety		Child development		Working with parents		
	Nutrition		Activities for children		Business practices	X*	
	Language and literacy		Behavior management		Stress reduction		
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other		
Initiative intensity							
Four 2.5 hour sessions							
Duration of services							
Weekly for four weeks							
Recruitment strategies							
Fliers about the workshops were distributed in the community, and staff attended community care orientation sessions. Providers received gift cards as an incentive to participate.							
Caregiver characteristics							
<i>Relationship to children</i>	Not available						
<i>Motivation for providing care</i>	Not available						
<i>Interest in professionalizing</i>	Not available						
<i>Training and education</i>	Not available						
<i>Regulation status</i>	Licensed family child care providers						
<i>Other needs</i>	Not available						

Family Child Care Business Training (*continued*)

Number of caregivers enrolled					
The pilot intended to serve 50 providers, 10 in each of 5 sessions.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 full-time				
<i>Staff qualifications</i>	Family child care experience				
Materials (curricula, other materials, technology)					
The initiative developed its own curriculum. Information is not available about materials that were distributed.					
Community partners					
The Small Business Council					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Adela Alvarado, San Mateo Child Care Coordinating Council, Child Care Facilities Program Manager aalvarado@sanmateo4cs.org , 650-655-6770					
Date information collected					
7/01/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	California Child Care Initiative Project (CCIP)					
State	California					
Initiative category	Quality Improvement and Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
California Child Care Resource and Referral Network						
Dates of operation						
1985 - Present (statewide since 1995)						
Funding						
Funding source not available (\$6.3 million)						
Description of initiative						
The goal of CCIP is to increase the supply and quality of licensed family child care, especially for infants and toddlers, and to retain providers in the field. The initiative consists of five components: (1) assessing child care supply and demand; (2) recruiting individuals to become family child care providers; (3) training providers to improve quality of care and business practices; (4) providing technical assistance; and (5) providing ongoing support. Training is offered through workshops, home visits, conferences, and mentoring. Staff also provide technical assistance to help providers with the licensing process. In addition, individual CCR&Rs offer toy- and book-lending libraries and mobile training vans.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The training content focuses on topics related to child development, health and safety, nutrition, special needs, literacy, learning through play, behavior management, start-up a family child care business, and business practices.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children Preparation of healthy snacks and meals	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Serving families who use odd-hour care	X
Initiative intensity						
25-30 hours of introductory training offered for new providers, 9-12 hours of training for second- and third-year providers						
Duration of services						
12 months, with two years of less intensive follow up services available						

California Child Care Initiative Project (CCIP) (continued)

Recruitment strategies				
Participants are recruited through licensing orientations, subsidy lists, the organization's website, county CCR&Rs, advertisements or articles in local newspapers, and word of mouth.				
Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers who want to obtain a child care license			
<i>Other needs</i>	Many providers speak languages other than English including Spanish, Chinese, Vietnamese, Russian, and Hmong.			
Number of caregivers enrolled				
In 2006-2007, the program served 4,392 participants.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 12			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Many families speak languages other than English, including Spanish, Chinese, Vietnamese, Russian, and Hmong.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	2 full-time program managers, 4 project specialists, 1 administrative coordinator, 1 administrative assistant.			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
The initiative uses materials from, <i>Family Child Care at Its Best</i> , developed at the University of California-Davis, and WestED's <i>Program for Infant and Toddler Caregivers</i> . In addition, the Network has developed and distributed the following materials and training resources: <ul style="list-style-type: none"> • The <i>Family Child Care Handbook</i> (300 pages/7th Edition), provides information for family child care providers on how to offer a licensed, safe environment for children • <i>El Comienzo/The Beginning</i> in Spanish offers Spanish-speaking providers with practical information for providing safe, quality child care • <i>Look Who's Coming to Family Child Care</i> in English, Spanish, and Vietnamese, a training manual for infant and toddler care • <i>Look Again</i>, in English and Spanish, an advanced infant/toddler training manual • <i>Meeting the Needs of Working Parents: A Guide to Nontraditional Hour Child Care</i>, designed to assist providers serving families with nontraditional work hour child care needs. 				
Community partners				
Community Care Licensing, CARES Program, First 5 California, Local Child Care Planning Council, County Department of Education				
Fidelity standards				
Not available				
Other versions				
The CCIP model has been replicated in Massachusetts, Michigan, and Oregon.				
Logic model/Theory of change	Yes		No	X

California Child Care Initiative Project (CCIP) (continued)

Collection of program data/information		Yes	X	No	
* <i>primary collection efforts</i>	Number of participants	X*			
	Caregiver characteristics				
	Child characteristics				
	Care characteristics				
	Caregiver satisfaction with services				X
Evaluation methods and design		Yes	X	No	
In 1999, the American Institutes for Research (AIR) and Hornby Zeller Associates conducted an evaluation of the initiative's efficiency and effectiveness (Montgomery, Phillips, Zeller, & Hornby, 1999). In 2002, the California CCR&R Network examined CCIP's impact on retention of licensed family child care providers (California Child Care Resource and Referral Network, 2002). The AIR evaluation used a mixed methods design with document reviews, interviews, observations, and surveys with a sample of 23 CCIP programs. The Network evaluation consisted of telephone surveys conducted by CCIP staff of 787 current and former CCIP participants.					
Process evaluation findings		Yes	X	No	
The AIR evaluation concluded that CCIP was effective and recommended that the initiative take several steps to strengthen the project, including an observational study of provider quality, increased training emphasis on topics such as dealing with challenging parents who were identified by providers, and sharing successful strategies for recruiting staff and providers whose first language was not English. The Network survey found that 87 percent of the survey respondents were still working as family child care providers.					
Outcome evaluation findings		Yes		No	X
Not available					
Contact					
Jacqueline Lowe, California Child Care Resource and Referral Network, Senior CCIP Manager, Jacky@cnetech.com, 559-582-7033					
Date information collected					
7/10/08					

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	California Exempt Care Training (CECT) Project					
State	California					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
California Child Care Resource and Referral Network						
Dates of operation						
2005 - Present						
Funding						
CCDF funding through the California Department of Education (2005-2007 \$9.8 million, 2007-2008 \$2.5 million)						
Description of initiative						
The goal of CECT is to help exempt caregivers improve the school readiness of children in their care. CECT contracts with individual CCR&Rs in California to offer the services. Individual CCR&Rs use a range of service delivery strategies including training workshops, home visits, Play and Learn groups, and mentoring.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
CECT includes four modules: (1) The Vital Role of the Caring Provider: Health, Safety, and Nutrition; (2) Playing Is Learning; (3) Family Literacy; and (4) Discipline, Guidance and Family Support, which includes an additional workshop about Character Education. CCR&Rs are required to provide a minimum of eight hours of training developed directly from the modules. Individual CCR&Rs can offer additional hours of training, but content must be related to one of the CECT modules.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management	X*	Stress reduction	X
	Information about regulation or licensing (upon request)	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Individual CCR&Rs must provide 16 hours of training, of which 8 hours must be content from the modules. The CCR&Rs tailor services to meet caregiver' needs. In rural areas of northern California, CCR&Rs offer home visits and home-study kits. In other locations, CCR&Rs offer Play and Learn groups and workshops. Some CCR&Rs also distribute materials and then provide follow up home visits.						
Duration of services						
Year round						

California Exempt Care Training (CECT) Project (*continued*)

Recruitment strategies					
Participating CCR&Rs use a range of strategies, such as presentations at community events and distribution of fliers. Some offer “make it and take it” workshops at the end of the subsidy orientation as an introduction to the program; others conduct outreach through Play and Learn groups. Also, some collaborate with community resource centers, health clinics, and other departments within their own agencies to recruit participants.					
Caregiver characteristics					
<i>Relationship to children</i>	Grandparents, aunts, uncles, friends, and neighbors				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Some are interested in pursuing a family child care license.				
<i>Training and education</i>	Varies				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Many providers speak languages other than English.				
Number of caregivers enrolled					
In 2005–2006, 3,574 license-exempt caregivers completed at least two hours of training. In 2006–2007, 7,084 caregivers completed at least two hours of training.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Varies				
<i>Characteristics (ELL, special needs)</i>	Many children speak languages other than English.				
Care characteristics					
<i>Schedule and intensity of care</i>	Varies				
<i>Purpose of care</i>	To provide child care while parents are at work or school				
Staff characteristics					
<i>Number of staff</i>	2 project managers, 7 project specialists, 1 administrative coordinator, 1 administrative assistant,				
<i>Staff qualifications</i>	Varies				
Materials (curricula, other materials, technology)					
CECT developed training materials in English and Spanish. The program also distributes CDs, relevant articles, and other resources to participating CCR&Rs.					
Community partners					
Libraries, California First 5, clinics, schools, Head Start programs, community resource centers					
Fidelity standards					
Not available					
Other versions					
The current official name of the project is The California Exempt Care Training (CECT) project. Earlier, the program was called California Exempt Provider Outreach and Training Project. CCR&Rs and the California CCR&R Network often refer to the program as <i>Growing Learning Caring (GLC)</i> .					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services	X	Other		

California Exempt Care Training (CECT) Project (*continued*)

Evaluation methods and design	Yes		No	X
Not available				
Process evaluation findings	Yes		No	X
Not available				
Outcome evaluation findings	Yes		No	X
Not available				
Contact				
Ana M. Fernández-Leon, California Child Care Resource and Referral Network, Northern CCIP Manager, ana@rrnetwork.org, 415-882-0234 Domenica Benitez, California Child Care Resource and Referral Network, Project Coordinator, dominica@rrnetwork.org, 415-882-0234				
Date information collected				
7/10/08				

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	First Five LA Early Care and Education Workforce Development Initiative Family, Friend and Neighbor Training and Mentoring Project for Child Care Providers					
State	California					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
First Five LA						
Dates of operation						
June 2007- June 30, 2010						
Funding						
First Five LA (\$3.6 million over a three-year period)						
Description of initiative						
<p>The goals of the Family, Friend and Neighbor Training and Mentoring Project for Child Care Providers are (1) to enhance the skills and knowledge of the home-based caregiver workforce about child care and child development; (2) to enhance social connectedness among caregivers; and (3) to enhance caregiver knowledge and utilization of community resources.</p> <p>The initiative is delivered through six community-based agencies, each of which is required to provide training, mentoring through home visits, networking opportunities, and resources for caregivers. Each uses different approaches to deliver services.</p>						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
Required content includes health and physical development, social-emotional development, cognitive development and school readiness, home safety, child care management, and identifying disabilities and special needs in children.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Information about community resources; cultural competency training;	X
Initiative intensity						
The schedule of the services varies depending on the agency that delivers them.						
Duration of services						
Year round						
Recruitment strategies						
Caregivers are recruited through "natural leaders" in the community as well as through faith communities, community centers, city recreation departments, family support networks, schools, and grandparent networks. Word of mouth is the primary recruitment strategy.						

First Five LA Early Care and Education Workforce Development Initiative Family, Friend and Neighbor Training and Mentoring Project for Child Care Providers (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	40 percent of caregivers are related to the children in care.			
<i>Motivation for providing care</i>	40 percent of caregivers reported that income is their biggest motivation for providing care.			
<i>Interest in professionalizing</i>	90 percent of caregivers expressed an interest in obtaining a child care license; 64 percent view providing child care as a career.			
<i>Training and education</i>	50 percent of caregivers have at least a high school diploma; 20 percent have attended college.			
<i>Regulation status</i>	Exempt family, friend and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
220 caregivers were enrolled from June 2007 through June 2008.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 6			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Many children are Spanish-speaking ELLs.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Agencies use different curricula, including <i>Creative Curriculum</i> and locally-development curricula.				
Materials provided vary by implementing agency but include books, toys and other equipment. Some implementing agencies also provide financial incentives to encourage participation, child care, and transportation.				
Community partners				
The six community-based agencies that deliver services: (1) The Children's Bureau of Southern California, (2) El Proyecto del Barrio, (3) Long Beach Community College, (4) the Center for Non-Violent Education and Parenting, (5) North Valley Caring Services, and (6) the Children's Collective.				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
* <i>primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Evaluation data collection activities planned for 2008 were to conduct quality observations using the Child Care Assessment Tool for Relative Caregivers (CCAT-R), focus groups and in-depth interviews with caregivers, and in-depth interviews with grantees.				

First Five LA Early Care and Education Workforce Development Initiative Family, Friend and Neighbor Training and Mentoring Project for Child Care Providers (*continued*)

Process evaluation findings	Yes		No	X
Not available				
Outcome evaluation findings	Yes		No	X
Not available				
Contact				
Eric Cain, First Five LA, Research Analyst, ecain@first5la.org, 213-482-7531				
Date information collected				
8/21/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler; LA = Los Angeles

COLORADO

Name of initiative	Latinas Unidas Mejorando el Mañana con Amor (LUMMA; Latinas United Improving the Future With Love), The City of Boulder Spanish Family Child Care Licensing Project					
State	Colorado					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Housing & Human Services Department, Children, Youth & Families Division, Child Care Recruitment & Training Program, City of Boulder						
Dates of operation						
2004 - Present						
Funding						
2008 - City of Boulder (\$8,000), Boulder County (\$20,000); 2004-2007 - John S. & James L. Knight Foundation (\$55,000 annually); 2003 - Colorado Department of Human Services (\$10,000), John S. & James L. Knight Foundation (\$21,500).						
Description of initiative						
<p>LUMMA's goal is to improve the quality of the child care services available to Spanish-speaking families by increasing the number of licensed Spanish-speaking and bilingual family child care providers. To achieve this goal, LUMMA provides potential providers with four courses required for licensure and funding for equipment. In collaboration with Denver city government, LUMMA arranged for translation of the family child care licensing regulations into Spanish. Ongoing training is provided in Spanish, and Spanish interpretation is provided at selected English-speaking community training events and conferences. The project also pays for providers in its program to join the Family Child Care Association once they obtain a license, attend early childhood conferences, and take community college courses and training workshops (up to a maximum of \$300 per semester).</p> <p>Participants must be Spanish-speaking or bilingual individuals who live in Boulder County and who enjoy children. They must also have a home with a fenced yard or a yard that can be fenced; 18 or older with a valid Social Security number; able to verify that all adults who live in the home are able to pass a criminal background check (no convictions for domestic violence, child abuse or neglect, violent or drug-related crimes); and able to provide documentation of legal residency in the United States for self and spouse.</p>						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X	Other - Funding for materials and equipment	X		
Content of services						
<p>LUMMA provides the state-required prelicensing classes (conducted in English with Spanish interpretation but with written materials in Spanish) and health and safety classes in Spanish. Spanish-speaking coaches assist each participant through the application and licensing process and each participant receives a \$300 grant for equipment and materials after the licensing application has been confirmed by the state. Providers can use the \$300 to cover the \$180 cost of prelicensing training and fees and to purchase equipment and materials. New LUMMA providers also receive a bin of supplies including children's books, art supplies, and educational toys. Upon licensure, the program provides a monthly peer support group meeting for Latino providers.</p>						

The Boulder County Spanish Family Child Care Licensing Project (*continued*)

<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children		Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Cultural brokers and cultural competency training. Child vision, hearing and dental screening.	X
Initiative intensity						
Pre-licensing courses: Fifteen hours (five three-hour modules) Health and safety courses: First Aid (3.5 hours), CPR (3.5 hours), Universal Precautions (1.5 hours), Medication Administration (4 hours), Child Abuse & Neglect Reporting (2 hours) Support Group Meetings: Ten 3-hour meetings per year						
Duration of services						
The program provides the sessions at varying times over the course of twelve months. Most providers participate in the program for three to nine months before obtaining a license.						
Recruitment strategies						
LUMMA recruits caregivers primarily through word of mouth. The program posts fliers in community locations such as schools, churches, and social services agencies. It also places a monthly English/Spanish recruitment advertisement in the <i>Parenting Place</i> newsletter.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	To be home with own children and/or provide care for related children; to become a small-business owner					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Unlicensed (when entering the program) and licensed family child care provider at completion of the licensing portion of the program					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
As of August 2008, there were two caregivers in the licensing process and 12 licensed providers in the LUMMA program. The program's goal is help six individuals per year obtain a child care license.						
Child characteristics						
<i>Ages of children in care</i>	Birth to age 13					
<i>Group size</i>	Standard license allows 6 children under the age of 5 years (two may be under age 2), plus two school age children, for a total of eight children.					
<i>Characteristics (ELL, special needs)</i>	Spanish-speaking ELLs					
Care characteristics						
<i>Schedule and intensity of care</i>	Not available					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	3 full-time staff (a project manager; a cultural competency and coaching consultant; a recruitment and licensing coach); up to 4 peer mentors, depending on need and funding availability					
<i>Staff qualifications</i>	Recruitment and licensing coaches and mentors must speak Spanish. Mentors must be licensed child care providers.					

The Boulder County Spanish Family Child Care Licensing Project (*continued*)

Materials (curricula, other materials, technology)					
Spanish Videos: Program for Infant/Toddler Caregivers, I Am Your Child-Landlocked Films, The Enterprise Foundation - Many Right Ways, Indiana Bureau of Child Development - Child Care Collection series					
Spanish Curriculum: <i>Creative Curriculum for Infants & Toddlers, The Storybook Journey</i>					
Spanish Training Materials: Zero to Three, NAEYC, Redleaf Press, <i>Teaching Strategies</i> , Teachers College Press					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
* <i>primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other - Child care referral and health screening data		X
Evaluation methods and design		Yes		No	X
Not available					
Process evaluation findings		Yes		No	X
Not available					
Outcome evaluation findings		Yes		No	X
Not available					
Contact					
Annette Crawford, Recruitment & Training Program Manager, City of Boulder, Division of Children, Youth & Families, crawfordA@bouldercolorado.gov , 303-441-4411					
Dates information collected					
8/14/08 and 8/28/08					

CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler; NAEYC = National Association for the Education of Young Children

CONNECTICUT

Name of initiative	All Our Kin					
State	Connecticut					
Initiative category	Quality Improvement and Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
All Our Kin (AOK)						
Dates of operation						
2002 - Present for the Family Child Care Network; 2003 - Present for the Toolkit Box Project						
Funding						
Private funding, CCDF, Connecticut Charts A Course, the state career lattice (\$500,000)						
Description of initiative						
<p>All Our Kin is designed as a “quality highway.” Its goals are to help caregivers obtain child care licenses and improve and sustain the quality of care they provide. AOK offers three primary services: (1) the Toolkit Box Project, which takes individuals through the licensing process; (2) the Family Child Care Mentor Program, which provides support to new providers through intensive program visits for three months; and (3) the Family Child Care Network, which provides in-program consultation, mentorship, training workshops, CDA training and support for NAFCC accreditation, monthly network meetings that provide opportunities for social interaction, family child care entrepreneurship training, a zero-interest loan fund, one-on-one assistance and telephone support, and an annual conference. All services are provided in English and Spanish.</p> <p>The Toolkit Box Project, which aims to help caregivers become licensed, consists of four boxes of materials and paperwork as well as vouchers for CPR and First Aid workshops. Caregivers receive two home visits as part of this project—one to introduce the program and another after the licensing inspection.</p>						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines	X	Online training	
	Peer support networks	X	Other - Mornings at the Museum	X		
Content of services						
<p>The content of network services includes such topics as child development, curriculum development, developmentally appropriate practice, and operating a family child care business. Workshops are offered on CPR, First Aid, and medication administration. The four Toolkit boxes include information about the paperwork for becoming licensed and a fingerprint voucher (Box 1); materials related to training and a CPR workshop voucher (Box 2); information about working with children and a voucher for a First Aid workshop (Box 3); and materials for children (Box 4).</p>						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X*
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	

All Our Kin (continued)

Initiative intensity	
Network services include an annual conference; biweekly 3- to 4- hour program visits for a core group of 30 network members; 2-hour home visits at least once a year for additional members; biweekly visits for new members; monthly 2-hour meetings; 4 to 6 3-hour specialized trainings; 8 3-hour business trainings; CPR training offered every month; CDA classes three hours a week; Mornings at the Museum Play and Learn sessions 2 hours biweekly; and phone support available 9 a.m. to 5 p.m. daily. Toolkit services include 2 to 4 individual consultations; two 2-hour home visits; and a 2-hour concluding workshop.	
Duration of services	
Year round, with most of the services provided September through June	
Recruitment strategies	
Word of mouth is the primary strategy for both the Toolkit Box Project and the network. Participants are also referred by state agencies, churches, schools, and non-profit groups.	
Caregiver characteristics	
<i>Relationship to children</i>	Some of the family, friend, and neighbors are related to the children in their care. The majority of the licensed providers do not care for related children.
<i>Motivation for providing care</i>	Anecdotal evidence suggests a dual motive: a commitment to serving children, families and communities; and making a living as an independent businessperson.
<i>Interest in professionalizing</i>	Some licensed family child care providers are interested in obtaining a CDA, an associate's degree, or NAFCC accreditation.
<i>Training and education</i>	Ranges from high school through master's degree
<i>Regulation status</i>	The network serves licensed family child care providers; the Toolkit Box Project serves exempt family, friend, and neighbor caregivers.
<i>Other needs</i>	
Number of caregivers enrolled	
In 2008, 90 participants were actively engaged in network services. Another 50 to 60 were participating in occasional trainings and conferences. In 2008, 35 participants completed the Toolkit program and became licensed family child care providers.	
Child characteristics	
<i>Ages of children in care</i>	Birth to age 12
<i>Group size</i>	Not available
<i>Characteristics (ELL, special needs)</i>	Some children speak Spanish. Some have special needs.
Care characteristics	
<i>Schedule and intensity of care</i>	Not available
<i>Purpose of care</i>	Not available
Staff characteristics	
<i>Number of staff</i>	7 full-time staff
<i>Staff qualifications</i>	2 staff members have master's degrees and 3 have bachelor's degrees, all with specialization in early childhood; 1 has a CDA; 1 has a law degree.
Materials (curricula, other materials, technology)	
Materials for network members include books, learning materials, furniture and equipment, computers, software, and other business equipment when funding is available. The Toolkit includes toys, books, and materials for children as well as health and safety supplies such as a smoke detector, cabinet safety locks, and a fire extinguisher.	
Community partners	
Connecticut Community College, Connecticut Charts A Course, Connecticut Children's Museum, Read to Grow; New Haven Diaper Bank; St. Raphael's Hospital; Yale University; Yale Child Study Center	
Fidelity standards	
Not available	
Other versions	
Not available	

All Our Kin (continued)

Logic model/Theory of change		Yes	X	No	
By training, supporting, and sustaining community child care providers, All Our Kin hopes to ensure that all children and families have the foundation they need to succeed in school and in life. Each year we equip parents, relatives, and informal caregivers with the skills and resources to move out of poverty and open child care businesses in their communities. We build the capacity, quality, and viability of existing child care businesses, through individualized mentorship and support. We furnish working parents with the resources to find and keep high-quality child care.					
Collection of program data/information		Yes	X	No	
* <i>primary collection efforts</i>	Number of participants	X*			Quality outcomes (observations or ratings)
	Caregiver characteristics				Parent satisfaction with care
	Child characteristics				Parent experience with care
	Care characteristics				Child outcomes
	Caregiver satisfaction with services				Other
Evaluation methods and design		Yes	X	No	
The NAFCCA Accreditation Tool is used to assess changes in the child care quality of network members. AOK collects caregiver self-reports of changes in quality. In 2008, The Yale Child Study Center assessed pre/post changes in child care quality with a subset of caregivers using the FDCRS. In addition, an outside evaluator documented the increase in the number of licensed providers as well as the quality of AOK's services and participant satisfaction.					
Process evaluation findings		Yes	X	No	
Observation by Charts-A-Course Quality Assurance team of observers scored AOK trainer 99/100. Participants in AOK's workshops, classes, conferences and trainings consistently rate the quality as "very good" to "excellent." Surveys from Toolkit and Network participants indicate high levels of satisfaction with services.					
Outcome evaluation findings		Yes	X	No	
A 2006 survey of network providers (50 responses) found: 90 percent reported improvement in their practice with children; 82 percent reported improvement in business practices; 82 percent reported greater sense of connection to other providers; 92 percent reported greater access to community resources. In a 2007 survey of Toolkit participants, caregivers reported an increased sense of professionalism, decreased job stress, and anticipated greater revenues. NAFCC Accreditation Tool data for 2008 (beginning and mid-year evaluation) for 21 network providers indicated that all but two, who already had near-perfect scores, showed improvement. The Toolkit's primary outcome is licensure, which demonstrates compliance with state standards for health and safety: 131 providers have become licensed between 2003 and 2008.					
Contact					
Jessica Sager, All Our Kin, Inc., Executive Director, jessica@allourkin.org , 203-772-2294					
Date information collected					
6/13/08					

AOK = All Our Kin; CCDF = Child Care and Development Fund; CDA = Child Development Associate; CPR = cardiopulmonary resuscitation ELL = English language learner; FDCRS = Family Day Care Rating Scale; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care.

Name of initiative	Homelinks Project					
State	Connecticut					
Initiative category	Quality Improvement and Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Hartford Foundation for Public Giving <i>Brighter Futures Initiative</i>						
Dates of operation						
1997 - Present						
Funding						
Hartford Foundation for Public Giving (\$21,000); Hartford Making Connections Project of the Annie E. Casey Foundation from 2004-2008 (funding amount not available); Hartford Mayor's Office for Young Children (funding amount not available)						
Funding for four of five Homelinks program sites ended in June 2008.						
Description of initiative						
<p>The goal of the Homelinks project is to help home-based caregivers establish safe and healthy environments for children in their care; understand child development and how to support early literacy and school readiness; and implement appropriate learning experiences for the children in care.</p> <p>Until June 2008, Homelinks provided weekly home visits to family, friend, and neighbor caregivers through five neighborhood-based family centers; since June 2008 the services have been provided through one center. The program provides consultation on best practices in child care; information and support for licensing and Child Development Associate (CDA) credentialing; caregiver networking sessions; and books, writing materials, and safety equipment. In collaboration with the Hartford Public Library, librarians make three home visits to teach and model six key early literacy skills. In addition, the caregiver and children visit the branch library.</p>						
* <i>primary strategy</i>	Training through workshops	X	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks	X	Other - Play groups are available at the Family Centers	X	Other - Library visits Telephone support Assessments	X
Content of services						
The home visits focus on training and coaching in child health and safety, home environments, child development, early language and literacy, and appropriate learning experiences. Training offered through workshops includes First Aid; CPR; Ages & Stages Questionnaire; social-emotional, physical, cognitive, language and literacy development; music and movement; and financial education.						
* <i>primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	
	Nutrition		Activities for children	X	Business practices (for example, state child care subsidy)	X
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-age children, or children with special needs	X	Other - Physical environment	X

Brighter Futures Initiative Homelinks Project (*continued*)

Initiative intensity					
The home visits are offered weekly for 1.5 to 2 hours. Telephone support is provided as needed.					
Duration of services					
5 to 6 months, approximately 20 to 24 visits					
Recruitment strategies					
Caregivers are recruited primarily through the family centers, which are designed to provide a range of family support, parent education, and school readiness services to families with children ages birth to 8 years. Many caregivers learn about Homelinks through word of mouth.					
Caregiver characteristics					
<i>Relationship to children</i>	Some providers are related to some of the children in their care.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Some providers are interested in becoming licensed.				
<i>Training and education</i>	Some providers are interested in obtaining additional education or training.				
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Sixty caregivers are served annually. Fifteen providers obtained child care licenses and twelve obtained CDAs between 2005 and 2008.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Average 3.5 children per caregiver				
<i>Characteristics (ELL, special needs)</i>	30 percent of families speak Spanish as a home language; 5 percent speak another language other than English.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	2 full-time and 4 part-time				
<i>Staff qualifications</i>	CDA, FDA, or an associate's degree				
Materials (curricula, other materials, technology)					
Homelinks does not use a single curriculum. Home visits draw on a range of curricula, including Caring for Children in Family Child Care, Creative Curriculum, and Supporting Care Providers through Personal Visits.					
Materials provided through the Hartford Mayor's Office for Young Children, the Hartford Public Library, and other funders include safety equipment, books, writing materials, and child-sized furnishings.					
Community partners					
Southside Family Center currently operates Homelinks. The four Centers that offered Homelinks through June 2008 are: Asylum Hill Family Center, El Centro de Desarrollo y Reaffirmacion, Parkville Family Center, and RAMBUH Family Center. The three community-based organizations that manage the Family Centers are Catholic Charities, Inc.; Village for Families and Children, Inc.; and Family Life Education, Inc. In addition, Homelinks works with the Hartford Public Library, Mayor's Office for Young Children, and Connecticut Parents as Teachers.					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change		Yes	X	No	

Brighter Futures Initiative Homelinks Project (*continued*)

Collection of program data/information		Yes	X	No	
Homelinks encourages caregivers to assess children's development with the <i>Ages and Stages Questionnaire</i> in collaboration with their families.					
* <i>primary collection efforts</i>	Number of participants	X*		Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X		Parent satisfaction with care	
	Child characteristics			Parent experience with care	
	Care characteristics			Child outcomes	X
	Caregiver satisfaction with services			Other	
Evaluation methods and design		Yes	X	No	
Homelinks conducts pre/post observations of child care setting with 11 items from the <i>Family Child Care Environment Rating Scale</i> . In addition, between 2005 and 2008, the initiative conducted pre/post developmental assessments of 29 3- to 6-year old children with the <i>Early Screening Profiles</i> . It also used the <i>Ages and Stages Questionnaire</i> with 116 children. Two-hundred forty children were tracked for well child care. In addition, Homelinks has conducted pre/post <i>Family Assessments</i> with 27 providers and 51 families. The instrument measures family functioning in three areas: parenting, basic needs, and social supports.					
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes	X	No	
The Early Screening Profile assessments showed significant gains in children's self-help and social skills, but motor skills decreased. Pre/post data with the <i>Family Assessment</i> showed significant gains for caregivers and families in all three areas of parenting, basic needs, and social supports.					
Contact					
Elsa E. Jones, Hartford Foundation for Public Giving, Brighter Futures Program Associate, ejones@hfpg.org, 860-548-1888, x 1026					
Date information collected					
8/20/08					

CDA = Child Development Associate; CPR = cardiopulmonary resuscitation; ELL = English language learner; FDA = Family Development Associate; HBC = home-based care; IT = infant toddler

Name of initiative	Bridgeport Kith and Kin Project					
State	Connecticut					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Bridgeport Alliance for Young Children						
Dates of operation						
2001 - Present						
Funding						
CCDF and Family Resource Center (funding amount not available); United Way (\$17,000)						
Description of initiative						
The goal of the initiative is to improve the quality of family, friend, and neighbor care and to help caregivers obtain a child care license. The initiative provides training through support groups at a community center and three family resource centers in elementary schools. The initiative also organizes an annual half-day conference for parents and caregivers with a keynote speaker, concurrent workshops, lunch, and door prizes. In addition, it provides literacy kits through Learning in a Bag, which includes a book and developmental toys and activities each month.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other - Annual conference	X		
Content of services						
The content of the sessions includes a variety of topics such as child development, vision screening, First Aid, and CPR.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
2-hour weekly sessions						
Duration of services						
15 weeks						
Recruitment strategies						
The initiative uses word of mouth through other programs that take place in family resource centers, such as GED preparation, ESL classes, and literacy classes. In addition, each center offers an open house and an informational event to advertise the program.						

Bridgeport Kith and Kin Project (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
A total of 120 caregivers were served in the fiscal year 2007.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	4 full-time				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
The initiative uses Bank Street's <i>Working with Home-Based Caregivers</i> curriculum, which covers a variety of topics.					
Community partners					
Not available					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	X	No
The program uses pre/post test to assess changes in caregiver knowledge and skills.					
Process evaluation findings			Yes	No	X
Not available					
Outcome evaluation findings			Yes	No	X
Not available					
Contact					
Tracy Robinson, Bridgeport Public Schools, Special Projects Coordinator, trobinson1@bridgeportedu.net, 860-892-6025					

Bridgeport Kith and Kin Project (*continued*)

Date information collected
6/30/08

CPR = cardiopulmonary resuscitation; CCDF = Child Care and Development Fund; ELL = English language learner; ESL = English as a Second Language; GED = General Equivalency Diploma; HBC = home-based care; IT = infant toddler

Name of initiative	Family Child Care Support Project					
State	Connecticut					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
2-1-1 Child Care (United Way of Connecticut)						
Dates of operation						
2007 – Present						
Funding						
CCDF in 2007 only and United Way (funding amount not available)						
Description of initiative						
The goal of the program is to help new family child care providers offer quality child care and strengthen their businesses. The initiative provides a home visit which is sometimes followed by a second visit. After the initial home visit, the initiative provides advice by phone or e-mail. In addition, the initiative provides \$100 of materials and equipment.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The initiative covers a variety of topics related to child development, caring for children, and operating a child care business.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition		Activities for children	X	Business practices	X*
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
One one-hour home visit which is sometimes followed by a second visit						
Duration of services						
Single visit and ongoing phone or email support thereafter						
Recruitment strategies						
The initiative recruits licensed family child care providers by sending letters to providers on the Connecticut Department of Health's licensing list and making followup phone calls.						

Family Child Care Support Project (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Between July and December 2007, the initiative served 63 providers and made 110 home visits.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	3 full-time early childhood specialists				
<i>Staff qualifications</i>	Master's degree with a specialization in early childhood education and experience in a child care program				
Materials (curricula, other materials, technology)					
The initiative uses <i>Teaching Strategies</i> as a curriculum. Topics include: business practices (contracts, policies, setting and collecting fees, and advertising); communicating with families (welcoming families into the program, discussing sensitive topics, and resolving conflicts); child growth and development (social-emotional, physical, cognitive, and language development); developmentally appropriate activities for infants, toddlers, preschoolers, and school-aged children; routines and scheduling of drop-off/pick-up times, nap times, meals and snacks, and diapering and toileting; and effective environments including assistance on safety, organizing toys, arranging furniture, and appropriate learning materials.					
Materials include \$100 worth of art supplies, outdoor gross motor equipment, and books for providers and children.					
Community partners					
The initiative works with Homelinks to serve Spanish-speaking providers.					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		

Family Child Care Support Project (*continued*)

Evaluation methods and design	Yes		No	X
Not available				
Process evaluation findings	Yes		No	X
Not available				
Outcome evaluation findings	Yes		No	X
Not available				
Contact				
Melanie Smith-Cervera, United Way of Connecticut, 2-1-1 Child Care, Melanie.Smith-Cervera@ctunitedway.org, 860-892-6025				
Date information collected				
6/23/08				

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Caring for Children					
State	Connecticut					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
2-1-1 Child Care (United Way of Connecticut)						
Dates of operation						
2001 - Present						
Funding						
CCDF (funding amount not available)						
Description of initiative						
The goal of Caring for Children is to improve child care quality and to encourage caregivers to become licensed. The initiative offers a statewide workshop twice a year on child development. The initiative provides a kit of materials as an incentive for participation and as the basis for hands-on activities during each session.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The workshop focuses on child development and activities to do with children ages birth to 12.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
1.5 hours twice a year						
Duration of services						
2 times per year						
Recruitment strategies						
The initiative distributes fliers to license-exempt caregivers who participate in the subsidy system.						
Caregiver characteristics						
<i>Relationship to children</i>	Relatives of children in care					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					

Caring for Children (*continued*)

Number of caregivers enrolled					
The initiative serves 120 caregivers annually.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	3 full-time early childhood specialists				
<i>Staff qualifications</i>	Master's degree with a specialization in early childhood education and experience in child care				
Materials (curricula, other materials, technology)					
The initiative uses a curricula it has developed locally for training workshops.					
The initiative provides participants with a kit containing materials valued at \$100: board books, puzzles, ribbons, scissors, a first aid kit, and a smoke detector.					
Community partners					
Family Resource Centers					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design		Yes		No	X
Not available					
Process evaluation findings		Yes		No	X
Not available					
Outcome evaluation findings		Yes		No	X
Not available					
Contact					
Melanie Smith-Cervera, United Way of Connecticut 2-1-1, Melanie.Smith-Cervera@ctunitedway.org, 860-892-6025					
Date information collected					
6/24/08					

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Care to Care					
State	Connecticut					
Initiative category	Quality improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Care to Care						
Dates of operation						
1998 - Present						
Funding						
CCDF (funding amount not available)						
Description of initiative						
The goal of Care to Care is to improve child care quality and help caregivers comply with state training requirements for licensed providers. Care to Care provides training workshops on child health and wellness, infant and child CPR, medication administration, as well as training on child care licensing requirements. The initiative also offers mini grants, a bimonthly newsletter, and Learning in a Bag—a literacy-based early learning curriculum for toddlers and preschoolers. In addition, Care to Care holds an annual dinner to recognize caregivers for their dedication to young children.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other-Annual Recognition Dinner			
Content of services						
Training workshops focus on health and safety and child care licensing requirements. Learning in a Bag focuses on literacy.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X	Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
The training workshops are offered on a regular basis. The Learning in a Bag home visits are offered once a month.						
Duration of services						
Not available						
Recruitment strategies						
Not available						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					

Care to Care (continued)

<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
In 2008, a total of 75 caregivers—45 regulated family child care providers and 30 family, friend, and neighbor caregivers—were registered with the program. Twelve providers annually have participated in the Learning in a Bag component.				
Child characteristics				
<i>Ages of children in care</i>	Birth and age 5; some school-age			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	2 full-time staff: a nurse consultant and a health educator			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Training workshop topics include child health and wellness, infant and child CPR, and medication administration.				
Materials include books for the Learning in a Bag component and mini grants to purchase books, toys, and blocks.				
Community partners				
Not available				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Not available				
Process evaluation findings			Yes	X
Not available				
Outcome evaluation findings			Yes	X
Not available				
Contact				
Jennienne Burke, Care to Care, Health Educator, jburke@ci.stamford.ct.us, 203-977-4063				
Date information collected				
6/23/08				

CCDF = Child Care and Development Fund; CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

DELAWARE

Name of initiative	Relative Caregiver Training					
State	Delaware					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
The Family and Workplace Connection						
Dates of operation						
2006 - Present						
Funding						
Delaware Health and Social Services, Division of Social Services (\$50,000 annually)						
Description of Initiative						
The goal of the program is to provide support and training to relative caregivers to improve the quality of care they provide. Relative caregivers who participate in the child care subsidy program must participate in 45 hours of training. Each relative caregiver receives an activity kit upon training completion. This kit contains materials appropriate to the ages of children in their care.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Topics for trainings include safety (3 hours), health (3 hours), nutrition (3 hours), early language and literacy (3 hours), child development (15 hours), understanding children's behavior (12 hours), and CPR & First Aid (6 hours). Caregivers are also given information on DelaCare regulations.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition	X	Activities for children		Business practices	
	Language and literacy	X	Behavior management	X*	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Weekly or monthly three-hour sessions						
Duration of services						
Relative caregivers must complete 45 hours of training within 18 months of enrollment in Delaware's child care subsidy program.						
Recruitment strategies						
The Family and Workplace Connection recruits most caregivers during state-required orientation sessions for caregivers participating in the child care subsidy program. It also distributes a monthly training calendar.						

Relative Caregiver Training (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Most are grandmothers of the children in their care.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt relative caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Annual enrollment varies. Since its inception in 2006, 300 caregivers have participated in at least one training; 178 caregivers have completed all 45 hours of training.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 12			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	1 part-time program manager and 1 part-time coordinator; various trainers			
<i>Staff qualifications</i>	A bachelor's degree in early childhood development or a related field is required for the coordinator. Trainers are approved through the Delaware professional development system.			
Materials (curricula, other materials, technology)				
Training workshops follow the Delaware First curriculum which is used in the Delaware professional development system.				
Community partners				
Catholic Charities; CACFP; Delaware Parent Association				
Fidelity standards				
A training coordinator observes approved trainers annually.				
Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Evelyn Keating, The Family & Workplace Connection, Provider Services Director, ekeating@familyandworkplace.org, 302-479-1674				
Date information collected				
9/5/08				

CACFP = Child and Adult Care Food Program; CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

HAWAII

Name of initiative	Learning to Grow (LTG)					
State	Hawaii					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
University of Hawai'i Center on the Family						
Dates of operation						
2000 - Present						
Funding						
CCDF (\$450,000)						
Description of Initiative						
<p>The goal of LTG is to provide educational outreach services and resources to parents utilizing exempt family, friend, and neighbor care for their children ages birth to 5. It has two objectives: (1) to provide parents with research-based information on how they can promote children's safety, healthy development, and school readiness with the aim of increasing use of such practices by parents and their family, friend, and neighbor caregivers; and (2) to link parents and caregivers to community programs, resources, and services which promote children's safety, healthy development, and school readiness.</p> <p>The initiative distributes monthly packets to parents who use family, friend, and neighbor caregivers who participate in the child care subsidy program. The packets consists of a welcome letter, an LTG newsletter, a family resource kit article, an activity ideas sheet, a Play and Learn group flyer, a community resource flyer, and an activity sheet which is to be completed and returned to the project in return for a children's book.</p>						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X*	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Information about community resources	X		
Content of services						
<p>The resource materials provide information about safe healthy, developmentally appropriate activities, interactions, and experiences that use readily available materials found in the home. These materials are designed to be easy to read and comprehend, and to be culturally competent. They are designed for three age groups—infants (birth to 12 months), toddlers (12 to 36 months), and preschoolers (36 to 60 months)—to provide families with age-appropriate information.</p>						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Monthly packets						
Duration of services						
Year round						

Learning to Grow (*continued*)

Recruitment strategies					
The Department of Human Services provides a list of families who receive child care subsidies and the names of their caregivers. The packets go to the families who give them to the caregivers.					
Caregiver characteristics					
<i>Relationship to children</i>	Parents and the children's caregivers				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Two-thirds of the participants reported some college.				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
3,500 participants receive packets per month.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 5				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	5 full-time; 1 part-time				
<i>Staff qualifications</i>	Master's degree in early childhood education or education				
Materials (curricula, other materials, technology)					
The initiative developed its own materials based on those it had created for Family Resource Centers. Materials include books that are provided as an incentive for completing activity sheets.					
Community partners					
PATCH, Parents and Children Together, Healthy Start, and home visiting programs, as well as schools with family resource centers					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		X
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design		Yes	X	No	
The initiative conducts a post-survey to identify changes in the number of books in the home and the frequency of reading in the home as well as changes in knowledge of child development and practices to promote learning.					
Process evaluation findings		Yes	X	No	
In a 2007 evaluation of materials based on 279 responses from 3,168 participants, most rated the Family Resource Kit, the newsletter, and the activity sheet as "great."					

Learning to Grow (*continued*)

Outcome evaluation findings	Yes	X	No	
<p>In a 2007 evaluation of the book activities, 60 percent of the families who returned surveys reported that half or all of the children’s books in their home are from LTG. Almost all of the families, reported doing the book activities with their children. The number of families that reported reading to their child once a day increased from 20 percent before receiving LTG books to 28 percent after receiving LTG books. The number of families that reported reading to their children more than once a day increased from 30 percent before receiving LTG books to 54 percent after receiving LTG books. Families reported that children asked to be read to more often, showed more enjoyment when read to, asked more questions when read to, and showed an increased interest in reading.</p>				
Contact				
<p>Grace Fong, University of Hawai’i Center on the Family, Professor and Principal Investigator, gfong@hawaii.edu, 808-956-2232</p>				
Date information collected				
<p>6/12/08</p>				

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Tutu and Me					
State	Hawaii					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Partners in Development Foundation						
Dates of operation						
2001 - Present						
Funding						
The federal Native Hawaiian Education Act; the Kamehameha School; CCDF through the Hawaii Department of Human Services, and other sources (\$4.5 million)						
Description of initiative						
Tutu and Me uses a traveling preschool approach that was originally developed for the Kamehameha Schools in the early 1990s. It is based on a Play and Learn family interaction model that aims to enhance parents' and grandparents' understanding of how children learn by engaging them in activities together. Staff teams travel by van to the communities where churches, schools, and community organizations have offered space for the program. The program also includes Tütü Talks, 5- to 10-minute mini-lectures on different topics with companion tip sheets. Each month the participants receive a calendar of daily activities that adults and children can do at home together. Each site also has a Caregiver Resource Center with a variety of materials for adults to borrow as well as Keiki Book Bags and backpacks that children use to take home books and other teaching materials. Program staff members make an annual home visit to establish the relationship between the staff and the family, and they provide support to parents and grandparents in completing the Ages & Stages Questionnaires on an ongoing basis. The team assessment specialist also provides referrals for children who have been identified with developmental issues.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs	X*	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the initiative focuses on school readiness and includes all of the child developmental domains.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition	X	Activities for children	X*	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Hawaiian values and culture	X
Initiative intensity						
Twice weekly 2-hour sessions						
Duration of services						
11 months						
Recruitment strategies						
Word of mouth is the primary recruitment strategy, although Tutu and Me advertises in local newspapers, community bulletin boards and meetings, churches, schools, and on television.						

Tutu and Me (*continued*)

Caregiver characteristics	
<i>Relationship to children</i>	Birth to age 5
<i>Motivation for providing care</i>	In a recent study, nearly half of the participating caregivers cited their love for the child as their primary reason for caring for children. Another 17 percent indicated that they provided care primarily because they wanted to be a part of the child's life, and 15 percent reported that they wanted to help out the family.
<i>Interest in professionalizing</i>	Not available
<i>Training and education</i>	Approximately 60 percent reported some college or a college degree.
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers
<i>Other needs</i>	Some participants speak languages other than English such as Hawaiian, Spanish, Japanese, and Chinese.
Number of caregivers enrolled	
In 2008, Tütü and Me had the capacity to serve 2200 participants, 1100 adults (parents and grandparents) and 1100 children in 22 predominantly Native Hawaiian communities on five islands.	
Child characteristics	
<i>Ages of children in care</i>	Birth to age 5
<i>Group size</i>	Not available
<i>Characteristics (ELL, special needs)</i>	Some of the children speak Native Hawaiian, Spanish, Japanese, or Chinese.
Care characteristics	
<i>Schedule and intensity of care</i>	Not available
<i>Purpose of care</i>	Not available
Staff characteristics	
<i>Number of staff</i>	11 teams of a lead teacher, 2 teacher aides, and an assessment specialist; 6 managers; and 7 administrative assistant/management staff members
<i>Staff qualifications</i>	Staff have associate's, bachelor's, or master's with specializations in early childhood education.
Materials (curricula, other materials, technology)	
Tutu and Me uses a formal curriculum that is organized around learning themes as well as Native Hawaiian culture and values. It includes a variety of topics ranging from health and safety to child development and language development. A copy of the curriculum is available. Materials include books, activity calendars, and tip sheets as well as materials that are used in the activity centers. In addition, the program has developed and published books and music CDs that promote the learning of Native Hawaiian values and concepts.	
Community partners	
Tutu and Me works with a variety of community organizations as resources for participants. In addition, it has a formal partnership with the University of Hawai'i School of Nursing, which provides student nurses for health education at the sites.	
Fidelity standards	
Tutu and Me has fidelity standards in the form of a comprehensive community site checklist that reviews all aspects of the program. It includes items for the environment, first circle, second circle, learning centers, and personnel. The Checklist is used twice a year by the quality assurance manager, the operations manager, and the director of research, evaluation, and development to assess operations at each of the community sites.	
Other Versions	
A modified version of the Tutu and Me model has been implemented in Madison, Wisconsin (Madison School District Play and Learn). Several other initiatives use the Play and Learn model as well. They include: For The Love of Children in Seattle, Washington, and the STEP-UP Program in San Jose, California. .	

Tutu and Me (continued)

Logic model/Theory of change		Yes	X	No	
Tütü and Me aims to help grandparents and parents to prepare their children (keiki) for school. Its primary target population is Native Hawaiian children because data indicate that many of these children are not considered ready for school. A logic model is available.					
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		X
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		X
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design		Yes	X	No	
To assess child outcomes, assessment specialists administer the Peabody Picture Vocabulary Test twice a year to all children between 2.5 and 5 years of age. Children are also assessed with the Ages and Stages Questionnaires as well as with observations with preselected areas of the Work Sampling System for children ages 3 to 5. In 2006, Tutu and Me began an evaluation of participant outcomes. The evaluation design consisted of a participant survey and pre/post observations of a sample of participants with the Child Care Assessment Tool for Relatives (CCAT-R) assess changes in child care quality.					
Process evaluation findings		Yes	X	No	
An implementation study, which consisted of three focus groups with 35 program participants and eight interviews with program staff, was completed in the fall of 2006. It found that most participants understood the goals of the programs and were satisfied with it. The study also made recommendations for the development of several new components, such as a Tutu and Me support group.					
Outcome evaluation findings		Yes	X	No	
The pretest consisted of 180 CCAT-R observations with participants in 16 sites. Of the total, 169 were analyzed. The second wave of observations was conducted ten months after the baseline data were collected. The sample consisted of 113 participants from the 16 sites. Of the total, there were 58 participants who had also been observed in the first wave of data collection. The results of the pre- and post-tests in the sample of 58 matched pairs indicated that there were improvements in the quality of interactions for children under age 5 on three of the four factors measured by the CCAT-R—bidirectional communication, unidirectional communication, and engagement, and there was a slight increase in the nurturing scores for children under age 3. The changes in the language and engagement factors were statistically significant for the children under age 3. The findings also point to some significant correlations between quality and participant characteristics such as training and child care work experience.					
Contact					
Gail Omoto, Partners in Development Foundation, Project Director, gomoto@pidfoundation.org, 808-524-7633					
Date information collected					
8/26/08					

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

IDAHO

Name of initiative	Idaho Stars					
State	Idaho					
Initiative category	Certificate Programs					
Target population	Targeted to HBC		Modified for HBC	X	Not Targeted to HBC	
Service provider who implemented the initiative						
University of Idaho						
Dates of operation						
2003 - Present						
Funding						
CCDF (\$2.7 million plus \$500,000 for incentives in 2008)						
Description of initiative						
The goal of Idaho Stars is to improve caregiver education and support professional development. Idaho Stars is a career development system which provides opportunities for training and professional development as well as mentors. Online training through webinars and classes are also available. The initiative provides individual incentives—tuition, books, bonuses—to encourage caregivers to enroll and to move up the professional development ladder. It is a voluntary system that is associated with Idaho's pilot QRS.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X*	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	X
	Peer support networks		Other			
Content of services						
The content of the services focuses on child development and early care and education.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Varies depending on workshop or coursework						
Duration of services						
Year round						
Recruitment strategies						
Not available						

Idaho Stars (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
In 2008, 1,500 programs (401 relative caregivers, 572 family child care group homes, and 293 family child care homes) were registered in the system.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 12			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	University of Idaho has 8 staff and the regional offices have 15. There are also 3 vendor managers.			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
In addition to other curricula, Idaho Stars also uses the <i>Strengthening Families</i> curriculum. Material support includes books, bonuses, and tuition.				
Community partners				
Idaho Association for the Education of Young Children, CCR&Rs				
Fidelity standards				
Not available				
Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics	X	Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Genie Sue Weppner, Idaho Department of Health and Welfare, Program Manager, weppnerg@dhs.id.gov , 208-334-5656				
Date information collected				
6/11/08				

CCR&R = Child Care Resource & Referral; ELL = English language learner; IT = infant toddler; QRS = quality rating system

ILLINOIS

Name of initiative	Community Connections					
State	Illinois					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Illinois Action for Children (IAFC)						
Dates of operation						
2005-Present						
Funding						
State of Illinois Preschool for All and foundations (\$1.26 million)						
Description of initiative type						
<p>The goal of Community Connections is to provide opportunities for parents to keep their children in family, friend, and neighbor care; to provide preschool experiences for these children; and to improve the quality of family, friend, and neighbor care. The initiative consists of three primary components: (1) Preschool for All funding and program oversight for child care centers to serve 3- and 4-year-old children coming from home-based child care for a part-time classroom experience; (2) teacher visits to home-based caregivers who care for subsidized children to coordinate programming, share materials, and offer technical assistance; and (3) activities for parents.</p> <p>Community Connections provides funds for 3- to 5-year-old children to attend a part-day State Pre-K classroom four days a week. Teachers provide home visits twice a month to provide books and activities. Family, friend, and neighbor providers receive full-day child care subsidy payments. IAFC staff also provide training and technical assistance to child care centers that host the children in Pre-K classrooms as well as to the family, friend, and neighbor caregivers. The program also provides activities such as museum visits for caregivers, children, and their families.</p>						
* <i>primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X*
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the home visits and the training includes topics related to child development and emerging language and literacy.						
	Health and safety		Child development	X*	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Home visits two times a month						
Duration of services						
10 months						
Recruitment strategies						
IAFC partners with community groups to reach family, friend, and neighbor and licensed family child care providers.						

Community Connections (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
A total of 144 caregivers were enrolled in 2008.				
Child characteristics				
<i>Ages of children in care</i>	Ages 3 to 5			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	22 staff members totaling 20 FTE positions; central staff include the Director of PFA; the Assistant Director, who manages Community Connections; a Project Manager; and a Planning and Evaluation Manager. All central staff devote half of their time to Community Connections. In addition, each of the nine sites has a certified teacher and a qualified teacher aide.			
<i>Staff qualifications</i>	Ranges from some college to a bachelor's or master's degree with varying amounts of experience in the field			
Materials (curricula, other materials, technology)				
The initiative uses the <i>Creative Curriculum for Preschool</i> and the <i>Building Language for Literacy</i> .				
Community partners				
Not available				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
* primary collection efforts	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	X
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Beginning in fall 2009 Child Trends and the National Center for Children in Poverty planned to begin a pilot study of the initiative to help achieve it full implementation, inform program improvements, determine if the effort is achieving its anticipated outcomes, and identify key program elements.				
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X

Community Connections (*continued*)

Contact
Maria Whelan, Illinois Action for Children, President and CEO, whelanm@actforchildren.org , 312-823-1100
Date information collected
9/5/08

ELL = English language learner; FTC = full-time equivalent; HBC = home-based care; IT = infant toddler

INDIANA

Name of initiative	Child Care Health Consultation (CCHC) Program					
State	Indiana					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Indiana Bureau of Child Care						
Dates of operation						
September 2007 – Present						
Funding						
CCDF (funding amount not available)						
Initiative type						
The goal CCHC is to provide child care providers in Indiana with assistance in improving the health and safety aspects of their programs and meeting quality and regulatory standards. CCHCs are registered nurses or dieticians who provide on-site consultation, training, and technical assistance to early childhood educators and child care providers. The CCHCs serve licensed child care centers and preschools as well as registered family child care providers. Because registration is not required for small in-home caregivers, the CCHCs also serve them.						
* <i>primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
CCHCs conduct health and safety assessments and, to a lesser extent, provide referrals to providers and offer training. Services include individual consultation about menu preparation, health care issues such as caring for a special needs child, and health and sanitation issues. Caregivers can voluntarily request CHCC assessments which include a record review for the presence of such items as complete immunization records, evidence of routine physicals, and insurance information; and visual survey of the facility for proper health and sanitation practices.						
* <i>primary content areas</i>	Health and safety	X*	Child development		Working with parents	
	Nutrition	X	Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Indiana's CCHCs do not have a set schedule of services because consultations are provided on an as needed basis.						
Duration of services						
As needed						
Recruitment strategies						
CCHC recruits caregivers by mailing brochures to all registered child care centers, registered family child care providers, and licensing and registration consultants. Licensing and registration consultants also refer caregivers to CCHC. In addition, the program also makes presentations at all licensing orientation sessions.						

Child Care Health Consultation Program (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed child care centers; registered family child care homes; and exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
In 2007, the program held 241 trainings with a total of 1,984 participants and conducted 73 assessments.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	3 registered nurses, 1 registered dietician				
<i>Staff qualifications</i>	Bachelor's-level registered nurse or registered dietician				
Materials (use of curricula, other materials, technology)					
CHCC uses an assessment protocol developed by program staff.					
Community partners					
Not available					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X	
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X*	Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Paula McClain, Program Director, Indiana Child Care Health Consultants, Bureau of Child Care, Paula.McClain@fssa.in.gov, 765-983-7714					
Date information collected					
8/21/08					

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

IOWA

Name of initiative	Child Care Nurse Consultant (CCNC)					
State	Iowa					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Iowa Departments of Human Services and Public Health						
Dates of operation						
1999 - Present						
Funding						
<p>The program receives approximately \$1.5 million from the CCDF via the Iowa Department of Human Services that is passed through Community Empowerment Areas, local grant-making administering organizations. Annually, approximately \$250,000 is disbursed to CCR&Rs for regional nurse consultants and \$200,000 is disbursed to public health for systems development. Local CCNCs are funded through Title V funds allocated to local Maternal and Child Health agencies and state funds are allocated through a community grant process for supporting local CCNC.</p> <p>United Way of Central Iowa contributes funding for two CCNCs. These CCNCs are assigned to work only with specific child care businesses and are not available to consult with other child care providers. The United Way provided \$120,000 in 2008-2009.</p>						
Description of initiative						
CCNC provides nurse consultation and training for child care providers throughout the state. CCNCs, who are registered nurses, conduct health and safety assessments, make referrals to health care providers, and conduct training. Consultation is provided during on site visits or via telephone or e-mail. CCNCs serve licensed child care centers and preschools, registered family child care homes, license-exempt (but registered) home-based caregivers, and unregistered in-home child care providers.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X *
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines	X	Online training	
	Peer support networks		Other			
Content of services						
Initiative content includes topics related to health and safety, nutrition, behavior management, and working with parents.						
<i>* primary content areas</i>	Health and safety	X*	Child development		Working with parents	X
	Nutrition	X	Activities for children		Business practices	
	Language and literacy		Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
CCNCs typically visit providers who are applying for a specific quality rating designation in Iowa's quality rating system, seeking certification that they have met certain standards or requirements for grants, or needing the assessment for accreditation. The visits occur as needed.						

Child Care Nurse Consultant (CNCC) (*continued*)

Duration of services				
CCNC visits occur over several hours and potentially several days. The number of visits varies. CCNCs also consult with caregivers by phone or email.				
Recruitment strategies				
Caregivers can call their local public health agency or CCR&Rs for consultations.				
Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	CNCCs serve all types of home-based caregivers and child care centers.			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
In FY 2008, 1,234 child care centers and 1,834 home-based child care providers received a CCNC service.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	As of 2007, there are 57 local CCNCs who worked mostly part-time.			
<i>Staff qualifications</i>	Registered nurses with expertise in child care			
Materials (use of curricula, other materials, technology)				
CCNCs use the Health and Safety Assessment and Child Record Review adapted from a tool developed by the Quality Enhancement Project for Infants and Toddlers, Jonathan Kotch, UNC Chapel Hill School of Public Health. In addition, they use an injury-prevention hazard-identification assessment tool developed in cooperation with the U.S. Consumer Product Safety Commission.				
CCNCs also provide handouts to providers during their assessment visits. Topics include: Asthma Action Plan; Asthma Care Brochure; Child Care Weather Watch Poster; Child Injury/Incident Report Form; Choosing Child Care: What's Best for Your Family?; Common Childhood Infections; Diapering Poster English/Spanish; Emergency Planning Guide; First Aid Kit Checklist; Gloving Poster English/Spanish; Guide to Childhood Illness; Handwashing Poster English/Spanish; Head Lice Brochure English/Spanish; Insect Repellent Fact Sheet; Iowa Child Care Infant, Toddler, Preschool Age - Child Health Exam Form; Iowa Child Care Provider Physical Exam Form; Iowa School-Age Care - Health Status - Parent Statement; Mandatory Reporting Poster English/Spanish; Monthly Medicine Report Form; and Television and the Family.				
Community partners				
Not available				
Fidelity standards				
Through the system of regional CCNCs, local CCNCs receive program fidelity monitoring on an annual basis. The monitoring covers assessment tools used in the quality rating system.				
Other Versions				
Not available				
Logic model/Theory of change	Yes		No	X

Child Care Nurse Consultant (CNCC) (*continued*)

Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X		Quality outcomes (observations or ratings)	X
	Caregiver characteristics			Parent satisfaction with care	
	Child characteristics			Parent experience with care	
	Care characteristics			Child outcomes	
	Caregiver satisfaction with services			Other	
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Sally Clausen, ARNP, BSN, Healthy Child Care Iowa, Iowa Department of Public Health sclausen@idph.state.ia.us, 800-383-3826					
Dates information collected					
6/18/08 and 7/10/08					

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Provider and Child Care Education Services (PACES)				
State	Iowa				
Initiative category	Support for Accreditation				
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC
Service provider who implemented the initiative					
Hawkeye Area Community Action Program, Inc.					
Dates of operation					
1998 - Present					
Funding					
Linn County Community Empowerment Area (approximately \$230,000-\$250,000 per fiscal year)					
Description of initiative					
<p>The goal of the PACES program is to increase the number of registered and accredited child care providers in Linn County. PACES supports registered family child care providers through home visits, training seminars, equipment grants or reimbursement for equipment purchases; technical assistance visits utilizing the <i>Family Child Care Environmental Rating Scale</i> (FCCERS) tool, and support to obtaining NAFCC accreditation for selected providers.</p> <p>The PACES program provides five tiers of assistance to family care providers in Linn County, Iowa:</p> <p>First Steps: Provides exempt family, friend, and neighbor caregivers with an introduction to developmentally appropriate activities for children, procedures for becoming a registered family child care provider, and procedures for applying for child care subsidies and CACFP. First Steps also Educate caregivers about the services available through PACES' Providers program and encourage them to enroll.</p> <p>Level I: Supports registered family child care providers in improving the quality of care they provide. Provides support and information to caregivers about registration, child care subsidies if they care for eligible children, enrolling in CACFP, ChildNet certification, participating in the QRS system, and accreditation. During monthly visits, offered information about developmentally appropriate activities related to 12 core areas: (1) art, (2) cultural awareness, (3) literacy, (4) dramatic play, (5) manipulatives, (6) nature, (7) sensory, (8) nutrition, (9) blocks, (10) feelings and emotions, (11) active play, and (12) music. The educator also leaves materials with the provider about the area discussed that month. The initiative provides reimbursement up to \$50 for materials or other equipment. Providers also receive a one-time \$150 cash payment after completing 25 hours of training for ChildNet certification and in home certification visit.</p> <p>Level II: PACES staff deliver monthly home visits that focus on science, math, and literacy as well as three visits additional visits pertaining to FCCERS observations. PACES staff members observe home providers using two sections of the FCCERS. Staff then provide technical assistance based on the observation results and \$150 for purchases that will address any of the issues raised in the initial observation. Two to three months later, providers receive a second observation. Level II providers receive an additional \$15-\$20 for materials.</p> <p>Level III: Each year the program accepts one or two providers at this level to help them obtain NAFCC accreditation. The program provides up to two years of support and mentoring for providers to complete the self-study process and accreditation application. Providers receive \$150 (first year) and \$500 (second year) to purchase equipment that will assist in meeting accreditation standards. Other incentives include \$50 a year toward training and certification fees and payment of NAFCC membership fees and all fees associated with accreditation (about \$1,000, on average). Finally, providers receive a \$500 stipend once they become accredited.</p> <p>Level IV: PACES continues to provide accredited providers with monthly activity home visits, materials, NAFCC membership fees, all renewal fees associated with re-accreditation, mentoring support visits, and training/education support of up to \$125 annually. This education support can be used toward payment for college courses.</p>					

Provider and Child Care Education Services (PACES) (continued)

<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment	X*	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other	X		
Content of services						
The content includes a variety of topics related to child development, providing child care, registration, and accreditation.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X*	Business practices	X
	Language and literacy	X*	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
<p><u>First Steps</u>: maximum 3 visits <u>Level I</u>: Monthly 1-hour home activity visits, 25 hours of training annually <u>Level II</u>: Monthly 1-hour home activity visits, 16 hours of training annually, 3 technical assistance visits based on FCCERS observations <u>Level III</u>: Monthly 1-hour home activity visits, 16 hours of training annually, monthly 1.5- to 2-hour accreditation mentoring visits <u>Level IV</u>: Monthly 1-hour home activity visits, 16 hours of training annually, 2 to 3 1.5- to 2-hour accreditation mentoring visits annually</p>						
Duration of services						
<p><u>Level I</u>: 12 months <u>Level II</u>: Ongoing <u>Level III</u>: 2-3 years <u>Level IV</u>: Ongoing</p>						
Recruitment strategies						
PACES recruits caregivers through advertising its training, the CCR&R, community presentations, and word of mouth.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Many enrolled providers are registered family child care providers seeking accreditation.					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Registered family child care providers and exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					

Provider and Child Care Education Services (PACES) (continued)

Number of caregivers enrolled				
As of March 31, 2008 there were 65 family child care providers in the program.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 5			
<i>Group size</i>	Varies, many have fewer than 5 children at enrollment			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	PACES serves providers who offer care during the first shift, but many also provide second shift care.			
<i>Purpose of care</i>	Child care while parents work			
Staff characteristics				
<i>Number of staff</i>	1 supervisor, 1 child care educator, and 2 early childhood educators			
<i>Staff qualifications</i>	One staff member is working on a master's degree in early childhood. One has a bachelor's degree in business and an associate's degree in early childhood. One staff member has a Bachelor's degree in social work.			
Materials (curricula, other materials, technology)				
The program uses the Family Child Care Environmental Rating Scale (FCCERS) assessment tool to conduct assessments and the NAFCC accreditation standards.				
Community partners				
The local CCR&R, Linn County Empowerment, United Way, Child and Adult Care Food Program (CACFP), Crisis Care, and the Linn County Nurse Consultant				
Fidelity standards				
Not available				
Other Versions				
A modification of this program funded by the United Way was recently implemented in Jones County, Iowa. This program has one staff person who works three-quarter time for PACES.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics	X	Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Diana Strahan, Provider and Child Care Education Services (PACES), Supervisor, dstrahan@HACAP.ORG, 319- 739-0027				
Date information collected				
8/4/08				

CACFP = Child and Adult Care Food Program; CCR&R = Child Care Resource & Referral; ELL = English language learner; FCCERS = Family Child Care Environment Rating Scale; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care

Name of initiative	Read Rover II (RR II)					
State	Iowa					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Women's Leadership Connection of the United Way of Central Iowa						
Dates of operation						
2006-2009						
Funding						
In 2008-2009, the Women's Leadership Connection provided nearly 70 percent of the funding (\$122,000); the local Community Empowerment Area provided about 30 percent (\$58,000).						
Description of initiative						
RR II was designed to provide literacy supports to home-based child care providers and the children in their care. The program consisted of an outreach van, driven by a literacy specialist, who provided an interactive story time in the RR II bus, supplied books, and coordinated the "Books In A Box" Project for the Des Moines Public Library. The specialist also provided families and home-based child care providers with parent education materials covering topics such as kindergarten checklists, dental health, and discipline. <i>Born Learning</i> hand-outs are used as well.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content focused on literacy.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Monthly home visits						
Duration of services						
Not available						
Recruitment strategies						
Recruitment was primarily through word of mouth.						

Read Rover II (RR II) (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
In 2007, RR II served 63 home-based child care providers and distributed 300 Books in a Box.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	1 literary specialist coordinator			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Literacy materials (Books in a Box), <i>Born Learning</i> hand-outs				
Community partners				
Des Moines Public Library, CCR&Rs, Early Access, and the Community Empowerment Area, a state program designed to bring together community organizations/efforts and state government.				
Fidelity standards				
Not available				
Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other - Number of books distributed	X
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Maureen Tiffany, M ^T IFFANY@unitedwaydm.org or Katie McKenzie, ktmckn8@aol.com, 515-277-5074				

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

KANSAS

Name of initiative	Informal Caregiver Pilot					
State	Kansas					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
The pilot was delivered by the CCR&Rs in two pilot communities—Pittsburg, a rural community in southeast Kansas, and Topeka, a city with a population of about 130,000.						
Dates of operation						
July 2007 - July 2009						
Funding						
Kansas Department of Social and Rehabilitation Services, using CCDF quality set aside funds (\$75,000 annually for both locations)						
Description of initiative						
The goal of the Informal Caregiver Program was to support exempt family, friend, and neighbor caregivers in providing quality care and to act as a resource for them. In the rural community, the pilot offered monthly group workshops. In the urban location, services would likely include home visits because efforts to recruit caregivers to group sessions were unsuccessful in year one of the pilot.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X*	Other			
Content of services						
The content of workshops and home visits was driven by the needs and interests of caregivers. Topics frequently discussed included health and safety, nutrition, language and literacy, and child development.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children		Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - The content is caregiver driven	X*
Initiative intensity						
In the rural community, group sessions were offered monthly. Implementation in the urban community had not yet started as of summer 2008.						
Duration of services						
Year round for 2 years						
Recruitment strategies						
In the rural community, the program sent a letter about the initiative to all exempt family, friend, and neighbor caregivers who participated in the child care subsidy program. CCR&R staff then called the caregivers to tell them about the pilot and invited them to a “get to know you” session. In the urban community, the program sent a mass mailing to exempt caregivers participating in the child care subsidy program, followed up with phone calls, and offered home visits. Both communities offered incentives to caregivers to encourage participation.						

Informal Caregiver Pilot (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Of the 12 caregivers enrolled in 2007-2008, 5 were grandparents, 4 were great-grandparents, and 3 were other relatives.				
<i>Motivation for providing care</i>	Of the 12 caregiver enrolled in 2007-2008, 5 provided care because the children's parents prefer relative care, 2 wanted to help the children's parents, 2 provided care because they loved their grandchildren, and 2 did not provide a reason.				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Of the 12 caregivers enrolled in 2007-2008, 3 reported having less than a high school degree, 7 reported having a high school degree, and 2 reported having some college.				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
In 2007-2008, 12 caregivers were enrolled in one community. Recruitment efforts in the other community had not been successful.					
Child characteristics					
<i>Ages of children in care</i>	Most children were 1 to 3 years old. A few were school-age.				
<i>Group size</i>	Two children on average, ranging from one to five				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	2 part-time staff in the rural community; 1 full-time staff person is in the urban community				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
The CCR&Rs invite a range of other community service providers to participate in training events.					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Sally Paige Kahle, SRS/Economic & Employment Support, Special Initiative Manager, sallypaige.kahle@srs.ks.gov, 785-296-5019					
Date information collected					
9/30/08					

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

LOUISIANA

Name of initiative	Louisiana Child Care Home Visitation Program					
State	Louisiana					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Volunteers of America of Greater Baton Rouge						
Dates of operation						
2004 - Present						
Funding						
CCDF (funding amount not available)						
Description of initiative						
The goal of the initiative is to help providers manage their child care businesses more efficiently. The staff makes one announced and one unannounced home visit to provide technical assistance to registered family child care providers who provide services to children receiving child care subsidies. The visitors also provide materials such as books and art supplies to the provider.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The visits focus on administrative/management responsibilities (for example, attendance logs, Child Care Assistance Program invoicing procedures), working with parents, and other topics.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	X
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Assistance with completing reimbursement forms	X*
Initiative intensity						
2 one- to-three-hour home visits						
Duration of services						
6 months						
Recruitment strategies						
Caregivers are recruited through the subsidy list.						
Caregiver characteristics						
<i>Relationship to children</i>	Some providers are related to the children in their care.					
<i>Motivation for providing care</i>	Most are helping family members or working in centers and want to start their own businesses.					
<i>Interest in professionalizing</i>	Some want to achieve their CDA credential; others want to obtain a college degree.					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Registered family child care providers					
<i>Other needs</i>	Not available					

Louisiana Child Care Home Visitation Program (*continued*)

Number of caregivers enrolled				
Approximately 500 providers were served from 2006-2008.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 12			
<i>Group size</i>	No more than 6 children			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	1 full-time			
<i>Staff qualifications</i>	Bachelor's degree in applied life sciences			
Materials (curricula, other materials, technology)				
The home visitor provides information about the reimbursement process as well as tip sheets on managing conflicts with parents, daily boards, and preparing for field trips. Materials include books, puzzles, dramatic play, and art supplies.				
Community partners				
Not available				
Fidelity standards				
Not available				
Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Comaneci Johnson, Volunteers of America of Greater Baton Rouge, Child Care Technical Assistance Specialist, cjohnson@voagbr.org, 225-926-8005				
Date information collected				
8/21/08				

CCDF = Child Care and Development Fund; CDA = Child Development Associate; ELL = English language learner; HBC = home-based care; IT = infant toddler

MAINE

Number	124					
Name of initiative	CareQuilt					
State	Maine					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Kennebec Valley Community Action Program						
Dates of operation						
2001 - Present						
Funding						
U.S. Department of Health and Human Services, Head Start expansion grant (funding amount not available)						
Description of initiative						
CareQuilt integrates family, friend, and neighbor caregivers into Head Start full-day/full-year programming. CareQuilt caregivers receive 60- to 90-minute monthly home visits; complete health and safety checklists used to identify needs; receive health and safety equipment, educational materials, and developmentally appropriate activity kits; and opportunities to participate in group meetings with parents.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other - Group meetings with parents	X		
Content of services						
During home visits, caregivers receive information, materials, and training designed to help them enhance the child's ongoing development and health, and provide a safety environment. The context of the visits is driven by the needs of the caregivers and needs identified through a health and safety checklist.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Monthly, 60- to 90-minute home visits						
Duration of services						
12 months						
Recruitment strategies						
Not available						

CareQuilt (continued)

Caregiver characteristics						
<i>Relationship to children</i>	Most caregivers are related to the children in their care.					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
In 2008, 16 caregivers were enrolled in CareQuilt.						
Child characteristics						
<i>Ages of children in care</i>	4 to 5 year olds enrolled in Head Start					
<i>Group size</i>	Not available					
<i>Characteristics (ELL, special needs)</i>	Not available					
Care characteristics						
<i>Schedule and intensity of care</i>	Not available					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	Not available					
<i>Staff qualifications</i>	Not available					
Materials (curricula, other materials, technology)						
Caregivers receive activity kits with developmentally appropriate materials and suggestions for activities.						
Community partners						
Not available						
Fidelity standards						
Not available						
Other Versions						
Not available						
Logic model/Theory of change			Yes	X	No	
Collection of program data/information			Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)			
	Caregiver characteristics	X	Parent satisfaction with care			
	Child characteristics		Parent experience with care			
	Care characteristics		Child outcomes			
	Caregiver satisfaction with services	X	Other			
Evaluation methods and design			Yes	X	No	
An implementation study was conducted in 2001-2002 by the Muskie School of Public Service at the University of Southern Maine. The study included interviews with caregivers, parents, and program staff.						
Process evaluation findings			Yes	X	No	
The implementation study described the services offered and provided information on the experiences of caregivers, parents, and staff who participated in the program.						
Outcome evaluation findings			Yes		No	X
Contact						
Kathy Colfer, Kennebec Valley Community Action Program Head Start, kathyc@kvcap.org, 207-859-1599						
Date information collected						
10/2/08						

ELL = English language learner; HBC = home-based care; IT = infant toddler

MARYLAND

Name of initiative	Informal Caregivers Project					
State	Maryland					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Southern Maryland Child Care Resource Center						
Dates of operation						
1999–2005						
Funding						
Maryland Office of Child Care (\$155,000 annually)						
Description of initiative						
<p>The goal of the program was to help caregivers provide a quality and enriching environment for children by giving the caregivers resources and tools as well as encouragement and support as they met the challenging demands of providing child care.</p> <p>Southern Maryland Child Care Resource Center (SMCCRC) offered services the three counties in southern Maryland—Calvert, Charles and St. Mary’s. The program coordinators provided home visits and distributed materials to caregivers. The program also offered quarterly or bimonthly get-togethers in public libraries, community centers, caregivers’ homes, and fast-food restaurants in each county where caregivers and the children in care would learn a new educational activity, receive an activity kit (first time participants only), receive books and materials, and enjoy refreshments and socializing with other caregivers.</p>						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X*	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other	X		
Content of services						
<p>The Informal Outreach Project distributed a monthly newsletter with information on various child development topics; lists of recommended books for all ages of children; and activities to do with the children in various areas such as reading, math, science, cooking, music, and art. Informal caregivers also received a plastic tub with a variety of items.</p>						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	X
Initiative intensity						
The program provided home visits on an as needed basis, support group meetings on a bimonthly or quarterly basis, and monthly newsletters.						
Duration of services						
Caregivers participated in the program as long as they wished.						

Informal Caregivers Project (*continued*)

Recruitment strategies					
The three counties' Departments of Social Services regularly provided the names of caregivers participating in the child care subsidy program. Coordinators called caregivers to explain the program and to make arrangements for home visits to bring them program materials. In addition, Outreach Coordinators partnered with various community agencies to identify family, friend, and neighbor caregivers and contact them.					
Caregiver characteristics					
<i>Relationship to children</i>	Typically grandparents, aunts, and uncles				
<i>Motivation for providing care</i>	Most of the caregivers were assisting family members who were working one or more jobs or were incarcerated.				
<i>Interest in professionalizing</i>	Little interest in professionalization				
<i>Training and education</i>	The average educational level of the caregivers was 11 th grade, although some were high school graduates.				
<i>Regulation status</i>	Primarily exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Approximately 300 informal providers per year participated in the program.					
Child characteristics					
<i>Ages of children in care</i>	Preschool and school-age children				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	4 outreach coordinators and 1 administrative staff				
<i>Staff qualifications</i>	Coordinators had bachelor's degrees in elementary education, child development, or related fields.				
Materials (curricula, other materials, technology)					
The program provided each caregivers with a plastic tub with items such as paint and paint brushes; children's books; a file box with quick ideas and recipes; glue; scissors; paper; zip-lock bag games and activities; markers and crayons; health and safety information; and resource folders. The program also provided books and literacy materials and safety items such as smoke detectors and first aid kits.					
Community partners					
Departments of Social Services, St. Mary's Hospital/Health Connections (community outreach service), Cooperative Extension, public schools, Departments of Aging, Literacy Council, St. Mary's College of Maryland, Boeing, Target					
Fidelity standards					
Not available					
Other versions					
A similar program operated in Baltimore City.					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X	
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X*	Child outcomes		X
	Caregiver satisfaction with services	X	Other		

Informal Caregivers Project (*continued*)

Evaluation methods and design	Yes	X	No	
The Informal Caregivers Project conducted an evaluation of caregiver and child outcomes in 2003-2004. The evaluation used a pre/post design to examine the acquisition of children's literacy skills. The evaluation sample included 66 children and their caregivers. However, the frequent changes in child care arrangements limited the evaluators' ability to obtain pre/post child assessment results. The number of children with pre and post test data was 38 of the 66 sample children. The evaluation also included an assessment of the effects of the program on caregivers. Evaluators collected pre/post data on 36 caregivers participating in the program.				
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
Overall, evaluators found a significant improvement in the language and literacy skills of the children with pre- and post-tests and an increase in the use of age-appropriate activities by caregivers. Using the <i>Ages and Stages Questionnaire</i> , evaluators found significant gains on 4 of the 5 sub-scales: communication, gross motor skills, problem-solving, and personal-social. Evaluators also tested 23 of the 66 students using the <i>Peabody Picture Vocabulary Test</i> . Results showed significant improvement: the raw scores improved from pre-test (39.05) to post-test (58.88). The percentile rank also showed marked increase from 31.03 to 43.27.				
Caregivers reported having more books and more arts and crafts materials in their homes from pre to post. the number of arts and crafts increased. Caregiver reports on the children's overall verbal ability and interest and engagement in reading increased.				
Contact				
Siobhan Ponder, Executive Director, sponder@smccrc.org, 301-290-0040				
Date information collected				
6/16/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

MASSACHUSETTS

Name of initiative	Acre Family Child Care					
State	Massachusetts					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Acre Family Child Care, Inc.						
Dates of operation						
1988 - Present						
Funding						
CCDF subsidy administration and private sources (\$1.3 million)						
Description of initiative						
The goal of Acre Family Day Care is to cultivate economic independence in women; the original impetus for the initiative was welfare to work. Acre offers three core services for participants: <i>Benchmarks</i> , a classroom training course to help them become licensed family child care providers; home visits to provide technical assistance and support for obtaining a CDA credential or NAFCC accreditation; and monthly meetings to provide opportunities for social interaction as well as information about state policies. In addition, Acre organizes six annual events for parents and caregivers to encourage them to build relationships with each other and for families to build relationships among themselves. It also offers small business loans of \$500 to \$5,000. Five providers received these loans in 2008.						
* <i>primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	X
	Peer support networks	X	Other			
Content of services						
Training content includes topics related to child development, managing a child care business, as well as special topics such as child abuse and nurturing the nurturer.						
* <i>primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X*
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Monthly 2-hour meeting; biweekly 2-hour home visits; 5.5 hours of training workshops twice a month on Saturdays; 1 day of shadowing						
Duration of services						
Year round for monthly meetings and home visits; 7 weeks once in the fall/once in the spring for Benchmarks training						
Recruitment strategies						
Caregivers are recruited through word of mouth.						

Acre Family Day Care (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Half of the caregivers are taking credit-bearing courses.				
<i>Training and education</i>	Varies				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Some providers speak Spanish, Portuguese, or Cambodian.				
Number of caregivers enrolled					
A total of 56 providers and 380 subsidized children are served by the initiative. Of the 380 children, 100 are eligible for child care subsidies through income-eligible contracts, 40 through protective services contracts; and the remainder through child care vouchers.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Some children are eligible for early intervention services.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	2 home visitors; 1 trainer/coordinator; 1 transportation director; 1 intake coordinator; 1 social worker; 1 billing specialist; 1 chief financial officer; 1 deputy director; 1 executive director; 1 accountant; and 4 part-time bus drivers				
<i>Staff qualifications</i>	The trainer must have a bachelor's degree in early childhood education. The social worker must have a master's degree in social work. Home visitors must have experience as licensed family child care providers and a master's in social work.				
Materials (curricula, other materials, technology)					
The initiative does not use a specific curriculum for training; rather, it relies on a variety of materials and speakers. The <i>Ages and Stages Questionnaire</i> (ASQ) is used to guide home visits. The initiative tried <i>Learning Ladders</i> , a computer-based training for early childhood education, with four providers but it found that providers needed a lot of support on computer literacy.					
Community partners					
Not-for Profit Alliance in Lowell, MA					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services		Other		

Acre Family Day Care (*continued*)

Evaluation methods and design	Yes	X	No	
In 2008, the initiative carried out pre/post assessment of 250 children using the ASQ. Acre providers also participated in an evaluation of <i>Learning Games</i> and a program evaluation in 2008.				
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes		No	X
Contact				
Kathy Reticker, Acre Family Day Care, Executive Director, KReticker@acrefamily.org, 978-937-5899				
Date information collected				
7/09/08				

ASQ = Ages & Stages Questionnaires; CCDF = Child Care and Development Fund; CDA = Child Development Associate; ELL = English language learner; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care

Name of initiative	Universal Pre-Kindergarten (UPK) Pilot Grant Program					
State	Massachusetts					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Massachusetts Department of Early Education and Care (DEEC)						
Dates of operation						
2007 - Present						
Funding						
Massachusetts Department of Early Education and Care (\$12.1 million in FY 2007-2009)						
Description of initiative						
The UPK Pilot Grant Program offers grants to eligible child care programs to spend in areas commonly thought to impact quality and ultimately, child outcomes. The grants range between \$5,000 and \$120,000 for purchasing curricula and materials, professional development, increasing staff compensation, expanding services, and approved administrative costs.. Funds are awarded to UPK-selected family child care programs based on the number of preschool children and the number of subsidized preschool children (\$500 per child and an additional \$1,500 per subsidized child). There is also a UPK planning grant that providers can use to implement child assessment systems (one of the requirements to participate in UPK). The program also offers coaching and mentoring for participating providers who were part of family child care systems.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Funding	X*		
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Not available						
Duration of services						
Grants are provided for one year at a time. Grants are awarded for each year a provider remains eligible to provide continuous/ongoing program improvements.						
Recruitment strategies						
DEEC issued a Request for Response and applicants replied to programmatic questions online to determine if they met the requirements of the UPK Pilot. A selection process was conducted based on available resources.						

Universal Pre-Kindergarten (UPK) Pilot Grant Program (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	UPK grants are targeted to programs with staff who have relevant training and experience. A recent evaluation of the program reported that, 75 percent of the teachers in centers and 25 percent of family child care providers had bachelor's degrees. Participating providers must be accredited by any one of the following bodies: NAEYC, New England Association of Schools and Colleges, or NAFCC; or family child care providers must have a CDA credential or higher degree. Sixty-five percent of family child care providers receiving grants have the CDA credential.				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Seventy percent of the family child care providers are bilingual; some do not speak English as a first language.				
Number of caregivers enrolled					
In 2008, grants were awarded to 209 UPK Programs: 118 centers, 72 family child care homes, and 19 public and private schools.					
Child characteristics					
<i>Ages of children in care</i>	Providers must serve preschool children ages 3 and 4, although they may also care for children of other ages.				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Some children have special needs, are English Language Learners, and live in low-income homes.				
Care characteristics					
<i>Schedule and intensity of care</i>	Participating providers must provide access to full-day full-year services for working families.				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	2 full-time staff and several part-time staff members help plan and implement the program. DEEC's regional staff and staff in programs, research, and administration departments work with the UPK staff to review proposals and negotiate activities and budgets.				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Providers must use a state-selected child assessment tool to measure children's progress in the program as well as follow the <i>Guidelines for Preschool Learning Experiences</i> based on the <i>MA K-12 Curriculum Frameworks</i> .					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	X	No
Collection of program data/information			Yes	X	No
* <i>primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		X
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services	X	Other		

Universal Pre-Kindergarten (UPK) Pilot Grant Program (*continued*)

Evaluation methods and design	Yes	X	No	
<p>In 2008, Abt Associates conducted an evaluation of the UPK Pilot Grant Program. The evaluators examined three questions: (1) How did program/system administrators choose to allocate their grant funding to improve the quality of the program? (2) What were the perceptions of administrators, teachers, and family child care providers about improvements in quality since the grant funding was received; and, if there were improvements, how were they potentially linked to the grant funding? (3) What are the areas where program needs remain?</p> <p>The sample consisted of grantees who received quality grants for both of the first two years of the pilot—a total of 126 program sites including 82 child care centers, 5 public school district prekindergarten programs, and 39 family child care homes. Data were collected through telephone and in-person interviews with persons at both the agency level and site level (teachers and family child care providers) who received funds for quality improvements.</p>				
Process evaluation findings	Yes	X	No	
<p>Grantees reported that the funds went to the program areas most likely to lead to meaningful outcomes for children—high-quality curricula, systematic assessment, and staff support through professional development and compensation. Most grantees reported that grant funds resulted in improvements or “substantial improvement” in the quality of their programs, in the areas where funds were allocated. In the area of staff expenditures, grantees reported improvement in their ability to hire staff or to compensate staff adequately, but their programs continued to have challenges in sufficiently financing their staffing needs. The largest proportion of grantees reported that they would use additional funding for staff compensation. Additionally, grantees in 48 percent of child care centers and 60 percent of family child care providers reported that professional development was an area of need. Family child care providers identified more areas of need than other types of providers, indicating needs for comprehensive services (possibly because homes are serving a high proportion of at-risk children) and material resources. Overall, the UPK Pilot Program was well received, funds were targeted to appropriate areas of need, and the implementation of the program was well executed. Based on evaluation findings, Abt Associates recommended that the UPK Pilot Program provide more quality-related technical assistance and training to all programs; refine guidelines for usage of the grant funds, develop a plan specifically for family child care programs, develop a plan for communicating with parents and the public, and design and conduct an evaluation of child outcomes.</p>				
Outcome evaluation findings	Yes		No	X
Contact	Amy Checkoway, Massachusetts Department of Early Education and Care, UPK Project Manager, amy.checkoway@state.ma.us, 617-988-7835			
Date information collected	10/9/08			

CDA = Child Development Associate, ELL = English language learner; NAEYC = National Association for the Education of Young Children; NAFCC = National Association for Family Child Care; HBC = home-based care; IT = infant toddler

MICHIGAN

Name of initiative	Michigan Better Kid Care Pilot (MiBKC)					
State	Michigan					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Michigan Better Kid Care of Michigan State University Extension (MSUE)						
Dates of operation						
The initiative began in 1996 in five counties in Michigan. By 2008 it had expanded to include all 83 counties in Michigan.						
Funding						
The Early Childhood Investment Corporation (\$1.3 million annually)						
Description of initiative						
The goal of the program is improve child care quality and support the professional development of home-based caregivers. MiBKC offers training, mentoring, and support to current and potential child care providers and is modeled on the Penn State Better Kid Care Program. Training options include: (1) one-time workshops, (2) a 36-hour child care provider training for those interested in becoming registered family child care providers, (3) an 18-hour relative caregiver training, (4) online training, and (5) independent learning kits.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	X
	Peer support networks		Other - learning kits	X		
Content of services						
Training topics include business and professional development, health and safety, child abuse and neglect, and nutrition. All training services address the Core Competencies and Core Knowledge for Early Childhood Care and Education Professionals adopted by the state of Michigan.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X*
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Training workshops are offered throughout the month are typically last for two to three hours. They are usually offered on the weeknights or weekends.						
Duration of services						
Varies						
Recruitment strategies						
Participants are recruited through conferences, public service announcements on the radio, and newsletters. Outreach is also conducted to caregivers in the State Department of Human Services database.						

Michigan Better Kid Care Pilot (MiBKC) (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed family child care and exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
During the 2006-2007 programming year, a total of 11,691 providers were enrolled. In 2008, MiBKC was unable to track providers participation because of the size of its coverage area.					
Child characteristics					
<i>Ages of children in care</i>	Varies				
<i>Group size</i>	Varies				
<i>Characteristics (ELL, special needs)</i>	Varies				
Care characteristics					
<i>Schedule and intensity of care</i>	Varies				
<i>Purpose of care</i>	Varies				
Staff characteristics					
<i>Number of staff</i>	26 staff located in counties across Michigan, including extension educators, program associates, and 3 staff located at the state extension office				
<i>Staff qualifications</i>	Extension educators must have a Master's in early childhood education or extensive experience; program associates must have at least a bachelor's degree or extensive experience.				
Materials (curricula, other materials, technology)					
Provider literacy toolkits are check-out kits that contain five books with corresponding activities sheets and concepts (for example, shapes and colors) to enhance existing curriculum.					
Community partners					
Michigan Community Coordinated Child Care (MI4C), Child Care Expulsion Process (CCEP), local department of Human Services offices, various other community partners					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	X	No
Not available					
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X*	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other - Changes in provider knowledge		X
Evaluation methods and design			Yes	X	No
MiBKC uses pre/post assessments to evaluate changes in caregiver knowledge and self-reported behavior for 18- and 36-hour training series.					

Michigan Better Kid Care Pilot (MiBKC) (continued)

Process evaluation findings	Yes	X	No	
Participant satisfaction surveys showed that most participants were satisfied with the program, felt the information was useful, and would recommend it to other individuals. Results also showed that caregivers were interested in materials they could use the next day.				
Outcome evaluation findings	Yes		No	X
Contact	Kendra Moyses, Michigan State University Extension Children, Youth, Families and Communities, Michigan Better Kid Care Coordinator, kmoyses@msu.edu, 517-432-7654			
Date information collected	09/08/08			

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	FUTURES					
State	Michigan					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Michigan 4Cs						
Dates of operation						
1990-Present						
Funding						
CCDF (Funding amount not available)						
Description of initiative						
The initiative, which is offered by CCR&Rs across the state, offers 16-hour basic courses and 10-hour advanced courses. Some offer on-line courses, correspondence courses, coaching sessions, and play groups.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	X
	Peer support networks		Other			
Content of services						
The content of the courses focuses on Child Development Associate (CDA) competency areas. Other content includes special needs, caring for infants and toddlers, administration, and inclusive child care.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition		Activities for children		Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
The course schedule is determined by each office. Schedules range from weekly, to two weekends in a row, to two times a week for three weeks.						
Duration of services						
Services are offered in different cycles depending on funding. Smaller areas offer trainings one to two times a year. Medium to large offices may offer one training a month.						
Recruitment strategies						
The regional offices distribute newsletters that contain training schedules. The newsletters are also on CCR&R web sites. The 4C offices have a list of relative caregivers who provide care for subsidized children to whom they mail training information on a quarterly basis.						

FUTURES (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Not available				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
The initiative trains approximately 250 caregivers each year. The completion rate is approximately 85 percent.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 specialist; 45-60 trainers across the state				
<i>Staff qualifications</i>	Associate's or bachelor's degree in child development, 12 credit hours birth to 5, experience in child care, experience in training adults				
Materials (curricula, other materials, technology)					
The initiative provides books and CDs with course information.					
Community partners					
Michigan State Extension					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design		Yes	X	No	
The initiative uses pre/post assessments to evaluate gains in caregiver knowledge. It conducts a caregiver survey to assess training needs of caregivers and to collect information on pay, relationship to children, and number and characteristics of children in care.					
Process evaluation findings		Yes	X	No	
Not available					
Outcome evaluation findings		Yes		No	X
Contact					
Norma Eppinger, Michigan 4C Association, Deputy Director, eppinger@mi4c.org , 800-950-4171, x 18					
Date information collected					
7/23/08					

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Early Learning Community					
State	Michigan					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC	X	Not Targeted to HBC	
Service provider who implemented the initiative						
United Way for Southeastern Michigan						
Dates of operation						
October 2008						
Funding						
United Way (funding amount not available)						
Description of initiative						
The goal of the Early Learning Community was to improve child care quality through education and training. The aim of the program was to provide 50 hubs for training family, friend, and neighbor caregivers in southeastern Michigan. Initially there were three hubs. The initiative focused on providing workshops with <i>High/Scope</i> materials supplemented by distribution of materials.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
Based on the <i>High/Scope</i> curriculum, topics ranged from supporting child development to providing high quality child care.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
One or two 2-hour classes weekly						
Duration of services						
Three to four months						
Recruitment strategies						
The initiative staff attended community events to inform caregivers about the Early Learning Community. They have also sent mailings to state-subsidized providers and rely on the state-subsidized union members to inform others.						

Early Learning Community (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
The program expected to serve 15 caregivers in each workshop.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Five				
<i>Staff qualifications</i>	Bachelor's degree in early childhood and five years of early childhood experience				
Materials (curricula, other materials, technology)					
The curriculum used the <i>High/Scope</i> and provided materials as well as incentives to reward short-term and long-term gains using a point system.					
Community partners					
High/Scope, Child Care Coordinating Council					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		X
	Caregiver satisfaction with services	X	Other: Changes in caregiver knowledge		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Annemarie Harris, United Way of Southeastern Michigan, Assistant Director,, Early Childhood Community Investment & Partnerships, annemarie.harris@uwsem.org, 313-226-9482					
Date information collected					
07/28/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

MINNESOTA

Name of initiative	Hands-On Teach to Learn Project					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Alliance of Early Childhood Professionals						
Dates of operation						
January 2008 - November 2008						
Funding						
McKnight Foundation, local CCR&R (approximately \$190,000)						
Description of initiative						
The goal of the Hands-On Teach To Learn Project was to translate Minnesota Kindergarten Readiness Domains and Core Competency areas into hands-on activities that would allow child care providers to improve the school readiness of children in family, friend, and neighbor care in certain English Language Learner (ELL) populations. Parents and family, friend, and neighbor caregivers were eligible to attend the workshops. When a caregiver became proficient in conducting an activity, staff visited the home to photograph the caregiver using the curriculum with the children. Staff used the photos to teach other caregivers in future workshops. The program also provided training and home consultations to caregivers who did not speak English as their first language.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The curriculum, <i>Do, Make, Learn, Teach</i> , was created by the Hands-on Teach to Learn Project and uses a "Learn-by-Doing" method to teach the concepts covered in the workshops.						
<i>* primary content areas</i>	Health and safety		Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Training workshops biweekly; each caregiver received one home visit.						
Duration of services						
14 weeks for each cohort (seven training biweekly workshops)						
Recruitment strategies						
The organization used existing contacts in the community to recruit caregivers.						

Hands-On Teach to Learn Project (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Some children were related to the caregivers.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Primarily exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Some caregivers did not speak English as a first language.				
Number of caregivers enrolled					
14 Latino, 15 Somali, 10 Hmong family, friend, and neighbor caregivers and 2 child care center staff.					
Child characteristics					
<i>Ages of children in care</i>	Preschool and school-aged children				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Two program staff and two mentors. The two mentors in each training who serve as interpreters were given a \$25 Target gift certificate as payment.				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
<i>Hands-On Teach to Learn Curriculum, Zoo Animals Curriculum, Minnesota Indicators of Progress, Kindergarten Readiness Learning Domains, first skill level of Child Development Associate, and Minnesota Core Competencies.</i>					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
As part of the Hands-On Teach to Learn program, staff conduct in-home observations of participants at the conclusion of the training to determine the extent to which participants incorporate teachings.					
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X*	
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Margaret Boyer, Alliance of Early Childhood Professionals, CEO, allecp@aol.com , 612-721-4246					
Date information collected					
6/17/08					

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Children's Readmobile Service					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Hennepin County Library System						
Dates of operation						
1988 - Present						
Funding						
The Hennepin Library Foundation (\$326,000 in FY 2008; \$290,000 for staff and \$46,000 for vehicles)						
Description of initiative						
The goal of the Children's Readmobile is to improve the school readiness of children from birth to 6 years old and to serve as a gateway experience to the world of libraries. The Children's Readmobile Service brings the library directly to underserved communities that are new to libraries or do not have easy access to a community library. Children's libraries on wheels, the two Readmobile vehicles, visit home-based caregivers, family literacy and early childhood programs, and summer programs in Hennepin County. For home-based caregivers, each visit consists of a storytime and materials circulation from the Children's Readmobile.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X*	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
A wide range of children's books, magazines, puppets, music CDs, and other media are available for checkout on each vehicle, and there is full access to the entire Hennepin County Library collection..						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Monthly visits						
Duration of services						
Up to 24 months						
Recruitment strategies						
In the past, the program obtained lists of caregivers from area child care associations and sent recruitment letters. More recently, the program has used a list of all caregivers receiving child care subsidies from Hennepin County's child care assistance office for recruitment mailings.						

Children's Readmobile Service (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Some caregivers are related to the children in their care.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
80 home-based caregivers are visited per month.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 6				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	One full-time and four part-time staff members for a total of 4.3 FTEs.				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Two Readmobile vehicles are stocked with books children's books, magazines, and puppets as well as music CDs, and other media.					
Community partners					
During the school year the program partners with school district and community education programs from 10-12 different school districts in the county and Head Start programs. During the summer it partners with non-profit organizations that provide support to communities living in low income housing. Examples are: Project for Pride in Living, Meadowbrook Collaborative, CommonBond communities, and Interfaith Outreach and Community Partners.					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X	
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	X	No
A small evaluation with pre-post design (assessments in January and May) used an assessment tool and observation to evaluate the influence of the program on caregivers' book reading and on children's literacy skills. This evaluation also included a questionnaire distributed to 16 providers. Research questions included: (1) What are providers' perceptions about book reading? (2) Have providers learned about the concept of dialogic reading? Has that influenced their reading practices? (3) Have providers' story-reading skills changed? If so, how? (4) Have children's scores on literacy measures changed since starting participation? (5) What other lessons are being learned? The targeted outcomes were to improve children's literacy skills and increase the use of dialogic reading by caregivers.					

Children's Readmobile Service (*continued*)

Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
The study found that 12 of the 16 providers were unaware of dialogic reading in January and all 16 were aware of this method in May. Children improved their ability to name pictures and rhyme between the pre- and post-test.				
Contact				
Erin Callahan, Children's Readmobile Service, Senior Librarian, Hennepin County Library, ecallahan@hclib.org, 952-847-5407				
Dates information collected				
6/23/08 and 7/11/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Minnesota Family, Friend, and Neighbor Grant Program					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Minnesota Department of Human Services						
Dates of operation						
November 2007 through June 2009						
Funding						
Minnesota Department of Human Services (\$750,000). An additional \$231,000 was leveraged by the grantees from local sources. Six projects were funded for the 2008-2009 grant year.						
Description of initiative						
The Family, Friend, and Neighbor grant program was established by the Minnesota legislature in 2007 to promote children's early literacy, healthy development, and school readiness, and to foster community partnerships to promote children's school readiness. Goals of the program were to enable children to receive and participate in more developmentally appropriate activities; improve caregivers' practices and knowledge about child development; increase the availability of resources in local communities; increase interest in educational activities for children in family, friend, and neighbor care; and provide community-based organizations with a stronger link to the family, friend, and neighbor caregiver community. Six grants for projects to support Family, Friend, and Neighbor caregivers were awarded under this program; each project is profiled separately.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Grant program/funding	X*		
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Grant program/funding	X*
Initiative intensity						
Each project differed in its intensity.						
Duration of services						
Each project differed in its duration of services.						
Recruitment strategies						
Each project used different recruitment strategies.						

Minnesota Family, Friend, and Neighbor Grant Program (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Some caregivers were related to the children in care.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 5				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Community partners vary by individual project. Partners include: CCR&Rs; United Way programs; Indian tribes; Head Start programs; school districts; Early Childhood Family Education Programs; county health departments; social services and licensing departments; Women, Infants, and Children programs; teen parent and crisis programs; kinship care organizations; Board on Aging programs; libraries; university programs; museums; community action agencies; cultural organizations; Minnesota Association for the Education of Young Children; advocacy organizations Early Childhood Initiative Councils; and community councils.					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	X	No
Not available					
Collection of program data/information			Yes	X	No
Information about providers participating in the grantees' projects was collected through evaluation activities.					
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		X
	Caregiver satisfaction with services		Other		

Minnesota Family, Friend, and Neighbor Grant Program (*continued*)

Evaluation methods and design	Yes	X	No	
<p>The grant requirements of the Minnesota Family, Friend, and Neighbor program required an evaluation by 2010. The Minnesota Department of Human Services contracted with the Center for Early Education and Development (CEED) at the University of Minnesota to conduct this evaluation. CEED collected a broad range of descriptive information through program and caregivers surveys, site visits, and a limited number of focus groups. The evaluation aimed produce regular program reports that describe:</p> <ul style="list-style-type: none"> ▪ Whether and how family, friend, and neighbor caregivers and children were successfully engaged in program activities ▪ The number and kinds of caregiving and school readiness practices used by caregivers ▪ The knowledge and attitudes of caregivers in relation to children’s development and school readiness ▪ The knowledge and attitudes of caregivers in relation to their own education about children’s development and early care and education ▪ The developmental status of children whose caregivers participated in the grant program <p>Evaluators expected descriptive data to provide initial evidence about the extent to which the programs were implemented as intended, whether there were changes in participating caregivers’ knowledge and attitudes, and whether the children of those caregivers demonstrate age-appropriate skills. CEED also expected to describe and evaluate partner outreach strategies, caregiver knowledge and behavior, and educational experiences provided to children that correlate with school readiness.</p>				
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes		No	X
Contact				
Dru Osterud, Minnesota Department of Human Services, Dru.osterud@state.mn.us, 651-431-3870				
Date information collected				
6/16/08 and 7/28/08				

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based caregiver; IT = infant toddler

Name of initiative	Neighborhood House (Minnesota Family, Friend, and Neighbor Grant Program)					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Neighborhood House						
Dates of operation						
November 2007 through June 2009						
Funding						
State of Minnesota (\$139,500)						
Description of initiative						
The initiative provided support, information, and technical assistance to family, friend, and neighbor caregivers. A range of community partners offered culturally relevant services, interactive activities, resource fairs, and support. These services included a networking system for caregivers, access to community services, on-site programming, support group meeting opportunities at low-income housing sites, and training sessions on preventing child abuse. The Children's Museum involved the children of the caregivers in its program "For the Children" that helps children get ready for school.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other			
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Access to community services	X
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
Not available						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					

Neighborhood House (Minnesota Family, Friend, and Neighbor Grant Program) (*continued*)

Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
CommonBond Communities, Prevent Child Abuse Minnesota, the Children's Museum, and Resources for Child Caring Child Care Resource and Referral.					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	No	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Milena Gebrensekkel, mgebremeskel@neighb.org, 651-789-3602					
Date information collected					
6/16/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Early Childhood Resource and Training Center Project (Minnesota Family, Friend, and Neighbor Grant Program)					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Early Childhood Resource and Training Center						
Dates of operation						
November 2007 through June 2009						
Funding						
State of Minnesota (\$139,500)						
Description of initiative						
This initiative offered support to American Indian family, friend, and neighbor caregivers in the Minneapolis area by focusing on issues pertinent to the American Indian community. Services were imbedded within a formal child care center. Providers received mentoring from licensed staff.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Translation of documents	X		
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - School readiness	X
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
The program recruited caregivers through urban centers, clinics, and libraries.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend and neighbor caregivers					
<i>Other needs</i>	Not available					

Early Childhood Resource and Training Center Project (Minnesota Family, Friend, and Neighbor Grant Program) (continued)

Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Not available				
Community partners				
Early Childhood Resource and Training Center, All Nations Indian Church, Franklin Library, Native American Community Clinic, University of Minnesota Pediatricians, and the Minnesota Indian Women's Resource Center.				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
* <i>primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Becky Faust Goze, rebecca@ecrc1.org, 612-721-0112, x 109				
Date information collected				
6/16/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Library Foundation of Hennepin County (Minnesota Family, Friend, and Neighbor Grant Program)					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Library Foundation of Hennepin County						
Dates of operation						
November 2007 through June 2009						
Funding						
State of Minnesota (\$139,500)						
Description of initiative						
The goal of this initiative was to create an information-sharing network for family, friend, and neighbor caregivers. The project implemented a community outreach model utilizing immigrant family, friend, and neighbor caregivers and their families as community ambassadors to build an informal network to connect caregivers and the families they served to community resources, information and services, early childhood education programs, school districts, parent education programs, and family services providers						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other-informal network to connect to services	X*		
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Referrals on a range of topics	X*
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
Not available						

Library Foundation of Hennepin County (Minnesota Family, Friend, and Neighbor Grant Program)
(continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Many family, friend, and neighbor caregivers in the network were immigrants who did not speak English as a home language.			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Not available				
Community partners				
Minneapolis Public Library; the Hennepin County Library and the Library Foundation; Alliance for Early Childhood Professionals; Minneapolis Public Schools; Northwest Hennepin Family Services Collaborative; City of Minneapolis Department of Health and Family Support; Hennepin County Child Care Licensing and Child Care Registration; Hennepin County Medical Center; Hennepin County Strategic Initiatives and Community Engagement Department; and Resources for Child Caring Child Care Resource and Referral.				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Kelly Wussow, Early Literacy Librarian, kcwussow@hclib.org, 952-847-5637				
Date information collected				
6/16/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Northland Foundation (Minnesota Family, Friend, and Neighbor Grant Program)					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Northland Foundation						
Dates of operation						
November 2007 through June 2009						
Funding						
State of Minnesota (\$139,500)						
Description of initiative						
This initiative conducted a regional family, friend, and neighbor caregiver assessment; implemented training and education strategies in four family, friend, and neighbor program partner sites; created a learning community among the Northland Alliance partners; and created a fund to support innovative concepts among caregivers. It also connected caregivers and the children in their care with the early childhood education programs in four school districts.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting		Warm lines		Online training	
	Peer support networks	X	Other - Assessment and creation of networks	X*		
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Creating networks and resources	X
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
Not available						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					

Northland Foundation (Minnesota Family, Friend, and Neighbor Grant Program) (continued)

Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Minneapolis Public Library; the Hennepin County Library and the Library Foundation; Alliance for Early Childhood Professionals; Minneapolis Public Schools; Northwest Hennepin Family Services Collaborative; City of Minneapolis Department of Health and Family Support; Hennepin County Child Care Licensing and Child Care Registration; Hennepin County Medical Center; Hennepin County Strategic Initiatives and Community Engagement Department; and Resources for Child Caring Child Care Resource and Referral.					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes		No	X
<i>* primary collection efforts</i>	Number of participants			Quality outcomes (observations or ratings)	
	Caregiver characteristics			Parent satisfaction with care	
	Child characteristics			Parent experience with care	
	Care characteristics			Child outcomes	
	Caregiver satisfaction with services			Other	
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Zane Bail, zane@northlandfdn.org, 218-723-4040					
Date information collected					
6/16/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Family, Friend, and Neighbor Outreach Program (Minnesota Family, Friend, and Neighbor Grant Program)					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
West Central Area Schools and Thorson Library						
Dates of operation						
November 2007 through June 2009						
Funding						
State of Minnesota (\$53,716)						
Description of initiative						
The Family, Friend, and Neighbor Outreach Program provided caregivers with training materials and children's activities based on the Minnesota Early Childhood Indicators of Progress, Minnesota's early learning standards. The library hosted Play and Learn groups and other special events following the Early Childhood/ Family Education (EC/FE) model of child/adult time together and periods of separate instruction. The model offered caregivers and children the opportunity to explore a classroom filled with developmentally appropriate play and learning activities planned by a licensed early childhood teacher and where parents and caregivers met with a licensed parent educator to share support, experiences, and information about child development and parenting techniques.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs	X	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other			
Content of services						
Content focused on child development, health and safety, nutrition, and school readiness.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
Not available						

Family, Friend, and Neighbor Outreach Program (Minnesota Family, Friend, and Neighbor Grant Program)
(continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Not available				
Community partners				
Thorson Memorial Library; Grant County Child and Youth Council; West Central Area Schools EC/FE programs; Ashby EC/FE programs; Head Start programs in Ashby, Elbow Lake, Kensington and Herman; Stevens Traverse Public Health; Lakes and Prairies Child Care Resource and Referral; the ELEAH Medical Center; the Grant County Early Childhood Initiative; the Minnesota Early Childhood Initiative; and the University of Minnesota Extension Nutrition Education Program.				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Gail Hedstrom, eltml@runestone.net, 218-685-6850 and Deb Hengel, cycmail@wca.k12.mn.us, 218-685-4587				
Date information collected				
6/16/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	White Earth Indian Reservation Tribal Council (Minnesota Family, Friend, and Neighbor Grant Program)					
State	Minnesota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
White Earth Indian Reservation Tribal Council						
Dates of operation						
November 2007 through June 2009						
Funding						
State of Minnesota (\$138,291)						
Description of initiative						
White Earth Reservation works with Mahnomens, Becker, and Clearwater counties to provide services to family, friend, and neighbor caregivers including monthly home visits from a Readmobile, referrals to social service, and on-site mentoring.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Program content focuses on language and literacy.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
Not available						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Many caregivers speak Ojibwe.					

White Earth Indian Reservation Tribal Council (Minnesota Family, Friend, and Neighbor Grant Program)
(continued)

Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Many children speak Ojibwe.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Books and literacy materials are provided to caregivers and children, including materials in the Ojibwe language					
Community partners					
White Earth Early Child Care Program; White Earth Even Start; White Earth Head Start; White Earth Early Childhood Initiative Coalition; Mahnomens, Becker, and Clearwater counties; White Earth Home Health Agency; Women, Infants and Children's program; and Mahube Child Care Resource and Referral					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes		No	X
<i>* primary collection efforts</i>	Number of participants			Quality outcomes (observations or ratings)	
	Caregiver characteristics			Parent satisfaction with care	
	Child characteristics			Parent experience with care	
	Care characteristics			Child outcomes	
	Caregiver satisfaction with services			Other	
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Dru Osterud, Minnesota Department of Human Services, Dru.osterud@state.mn.us, 651-431-3870					
Date information collected					
6/16/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

MISSOURI

Name of initiative	Educare					
State	Missouri					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Missouri Department of Social Services						
Dates of operation						
1993 - Present						
Funding						
State of Missouri, Department of Social Services, Children's Division (\$2,994,637)						
Description of initiative						
Educare provides resources, technical assistance, training, and on-site visits for subsidized child care providers. On-site training is the core component. Other services include a peer support network for family, friend, and neighbor caregivers; seminars on various topics such as CPR, first aid, autism, and child development; and environmental and quality rating assessments.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs	X	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting	X*	Warm lines		Online training	
	Peer support networks	X	Other - On-site training*			
Content of services						
Topics include information on parenting and child development, emotional availability, and relationship-building skills of infant and toddler caregivers.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Minimum of seven, 1-hour home visits provided monthly; monthly support groups; periodic seminars and quality assessments						
Duration of services						
Caregivers can participate in Educare as long as they participate in the child care subsidy program.						
Recruitment strategies						
Caregivers are recruited from the state's list of registered providers. Educare program staff use this list for monthly mailings to any newly registered providers. The program also relies upon word of mouth throughout the provider community as a recruitment tool.						

Educare (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	All home-based caregivers receiving subsidies from the Department of Social Services are eligible for services.			
<i>Other needs</i>				
Number of caregivers enrolled				
In 2007, 1,417 providers participated in Educare.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 3			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	17 Educare program directors, some of whom have support staff and early childhood specialists that work with caregivers.			
<i>Staff qualifications</i>	Bachelors' degree in early childhood education, early childhood special education, family or child development, elementary education, psychology, social services, or other related field and two years of experience working with children or teachers/staff of a child care program.			
Materials (curricula, other materials, technology)				
Curricula: <i>Supporting Care Providers Through Personal Visits, Supporting Infant/Toddler Care Providers and Emotional Beginnings</i>				
Assessment Tools include: <i>Quality Instrument for Informal Child Care Early Childhood Environment Rating Scale; Early Childhood Environment Rating Scales-Revised; Early Childhood Environment Rating Scale-Extension; Family Day Care Rating Scale; and the Infant/Toddler Environment Rating Scale.</i>				
Community partners				
Caring Community Partnerships, universities, and school districts hold the contracts to deliver Educare services and those entities work with many different community partners at the local level.				
Fidelity standards				
Not available				
Other Versions				
Educare began as a governor's initiative based on Project REACH. Project REACH, currently under contract to deliver Educare services, serves caregivers in 22 rural counties.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X No
* <i>primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics	X	Child outcomes	
	Caregiver satisfaction with services	X	Other - Usage of program services	X*

Educare (*continued*)

Evaluation methods and design	Yes		No	X
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes		No	X
Contact				
Holly M. Otto, Children's Division/Early Childhood & Prevention Services, Program Development Specialist, holly.m.otto@dss.mo.gov, 573-522-2316				
Dates information collected				
6/17/08 and 7/16/08				

CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

MISSISSIPPI

Name of initiative	Right from Birth					
State	Mississippi					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Mississippi State University Extension Service and Georgetown University						
Dates of operation						
2003-2007						
Funding						
Source not available (\$156,000 annually)						
Description of initiative						
Right from Birth is a training program for home-based caregivers based on two books (<i>Right from Birth</i> and <i>Going to School</i>) and the Right from Birth public television series. Training was delivered in two modes: a series of workshops and a 20-day intensive coaching program. The workshops were based on a standardized manual, the public television series, and interactive experiences. The coaching program included 20 days of full-day side-by-side coaching over four to five weeks known as "The Rameys' Immersion Training for Excellence." Right from Birth also provided a core set of materials such as books, writing materials, supplies, puzzles, and games to support literacy and learning activities.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The training covered "the seven essentials" for all caregivers and parents: (1) encouraging active exploration; (2) mentoring children in "the basics;" (3) celebrating each child's new skills; (4) helping children rehearse and extend new skills; (5) protecting children from harsh and inappropriate treatment; (6) providing language-rich interactions and promoting language and literacy development; and (7) guiding and limiting children's behavior. Right from Birth also addressed the "Four Diamond Model of Quality Care and Education:" health and safety; language and learning; responsive care to promote social-emotional development; and communication with families.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
The initiative was delivered in a series of 12 workshops lasting several hours each or 20 full days of coaching spread over four to five weeks.						
Duration of services						
Several months for workshops or four to five weeks of coaching						
Recruitment strategies						
Right from Birth recruited caregivers through the Extension Service's CCR&R and word-of-mouth. Home-based caregivers participating in the Nurturing Homes Initiative were offered an opportunity to participate. Right from Birth staff also recruited from a list of caregivers participating in CACFP.						

Rite from Birth (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Less than a college degree or CDA credential				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 5				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 principal investigator, 1 program manager, and 3 full-time coaches				
<i>Staff qualifications</i>	Coaches needed a bachelor's degree in early childhood development, early childhood/elementary education, or a related field.				
Materials (curricula, other materials, technology)					
The program purchased a core set of materials such as books, writing materials, supplies, puzzles, and games to support literacy and learning activities for caregivers.					
Community partners					
Not available					
Fidelity standards					
Fidelity standards were developed for workshop leaders and coaches. The program manager observed and evaluated the coaches during 2 of the 20 coaching visits to ensure fidelity. The program manager used a checklist developed to specifically evaluate coaches' use of the curriculum.					
Other Versions					
Not available					
Logic model/Theory of change		Yes	X	No	
Evaluation methods and design		Yes	X	No	
<p>Georgetown University conducted an evaluation of Right from Birth (Ramey, Ramey, Grace, & Davis, 2008). The evaluation enrolled a total of 17 caregivers, including center teachers and exempt home-based caregivers, in its sample and randomly assigned providers to one of three models: the RITE 20-day immersion; a series of six Right from Birth workshops over 6 days; and a single, one-day Right from Birth workshop. Data source for the evaluation included observations using the ECERS-R, ITERS-R, and FDCRS; documentation from coaches on evidence of implementation of the seven learning essentials; qualitative interviews, and child language development assessments using the Preschool Language Scale. The evaluation examined the following research questions: Does the Rite form Birth training model (available in multiple formats) improve the quality of child care and education? Does the format—a series of workshops versus a highly-intensive form of job-embedded coaching produce different benefits? Are improvements maintained over time? What are the projected costs of the Rite model in different formats? How do these compare to other training and quality initiatives? Do children benefit? Is there evidence that Rite from Birth will be adopted statewide to improve child care quality and children's literacy and language outcomes?</p> <p>Observations using the FDCRS were conducted at baseline and after two weeks, three months, and 12 months. In addition, coaches documented changes in the seven learning essentials. Children's language development was assessed with the PLS-4 at baseline and 12 months after enrollment.</p>					

Rite from Birth (*continued*)

Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
<p>Key findings from the study were as follows:</p> <ul style="list-style-type: none"> • Right from Birth produced benefits for both child care centers and home-based caregivers in both the workshop format and the immersion format. • The immersion training produced greater benefits than the workshops. • Improvements were maintained and sometimes enhanced up to 12 months after the intervention for all settings and training conditions. • Positive benefits for children’s language development were detected only in centers that received the Right immersion training. 				
Contact				
Dr. Sharon Ramey, Georgetown University Center on Health and Education, sr222@georgetown.edu , 202-687-2874,				
Date information collected				
09/30/08				

CACFP = Child and Adult Care Food Program; CCR&R = Child Care Resource & Referral; CDA = Child Development Associate; ECERS-R = Early Childhood Environment Rating Scale-Revised; ELL = English language learner; FDCRS = Family Day Care Rating Scale; HBC = home-based care; IT = infant toddler; ITERS-R = Infant Toddler Environment Rating Scale-Revised

Name of initiative	Nurturing Homes					
State	Mississippi					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Mississippi State University Extension Service						
Dates of operation						
2000 - Present						
Funding						
CCDF (\$375,000 annually)						
Description of initiative						
The goal of Nurturing Homes is quality improvement in home-based child care. Trainers make biweekly two-hour home visits throughout the year. They use the Family Child Care Environment Rating Scale (FCCERS) to assess the quality of the caregiving environment and use the results as the basis for planning individual lessons. They also encourage caregivers to create parent resource centers with videos and materials to take home as well, as a newsletter and written policies. The program also provides materials and training calendars from area CCR&Rs.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content focuses on a range of topics related to the FCCERS content areas. These include health and safety, language and literacy, child cognitive development, and behavior management.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Early Learning Guidelines Benchmarks for 3 and 4 year olds	X
Initiative intensity						
Biweekly two-hour home visits						
Duration of services						
Caregivers are enrolled for an initial 12 month period. If a caregiver does not receive a total FCCERS score of at least 4 at the end of 12 months, an additional 12 months of services are provided.						
Recruitment strategies						
Initially, the initiative used the Child and Adult Care Food Program list, church bulletins, and radio and television public service announcements to advertise the program and recruit participants. In 2008, however, the initiative maintained a waiting list and no longer needed to advertise its services.						

Nurturing Homes (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Some participants are related to the children in care.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers and regulated family child care providers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
The initiative served 120 providers in 2008.				
Child characteristics				
<i>Ages of children in care</i>	Birth to school-age			
<i>Group size</i>	5 children or less			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Most operate from early morning to late evening for working parents.			
<i>Purpose of care</i>	To provide child care while parents are working			
Staff characteristics				
<i>Number of staff</i>	1 project manager; 1 assessment coordinator; 6 trainers			
<i>Staff qualifications</i>	Bachelor's degree in early childhood education or a related field			
Materials (curricula, other materials, technology)				
The initiative developed 60 lessons to support indicators in the FCCERS. In addition, trainers provide materials such as blocks and art supplies to support the lessons. The program also provides videos such as the <i>Ready To Learn</i> and the <i>Right from Birth</i> series. Nurturing homes will also pay for membership in the National Association for Family Child Care (NAFCC).				
Community partners				
Not available				
Fidelity standards				
There are no fidelity standards for program service delivery. All trainers maintain inter-rater reliability on the FCCERS. Reliability checks are conducted every six assessments. Two staff members maintain reliability with national FCCERS training at the University of North Carolina's Frank Porter Graham Child Development Institute.				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
The initiative uses an annual caregiver survey and pre/post observations with the FCCERS to assess child care quality.				
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X

Nurturing Homes (*continued*)

Contact
Tonya Adkins,, Mississippi State University Extension Service, Project Manager, Nurturing Homes Initiative, tadkins @humansci.msstate.edu, 662-325-3083
Date information collected
7/24/08

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

NEBRASKA

Name of initiative	Early Childhood Training Center					
State	Nebraska					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
The Early Childhood Training Center, Nebraska Department of Education						
Dates of operation						
1998 - Present						
Funding						
Nebraska Department of Education, CCDF through the Nebraska Department of Health and Human Services (funding amount not available)						
Description of initiative						
The Early Childhood Training Center, a statewide service of the Nebraska Department of Education, provides services to support the professional and career development of early care and education staff. Technical assistance and information are provided to those working with children ages birth to 8. The main services include brokering or providing on-site training and consultation; developing and supporting specialized training and training groups; promoting and advising T.E.A.C.H. Early Childhood® licensees; helping to coordinate training resources; working with related training initiatives; operating the Information Child Line; and developing and disseminating materials. A variety of pre-service and in-service training, support, and learning communities are offered, including workshops, conferences, independent study, study teams, consultation, mentoring, and classes for credit.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting		Warm lines		Online training	
	Peer support networks		Other	X		
Content of services						
The content of the services includes topics covered in the Nebraska Early Learning Guidelines, Nebraska Core Competencies for staff, and CDA requirements. These topics include approaches to learning, creative arts, health and physical development, language and literacy development, mathematics, science, social and emotional development, and business management practices.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other -- Group facilitation	X
Initiative intensity						
The intensity of services varies by activity. The center offers one-time workshops and conferences, a training series on the Nebraska Early Learning Guidelines, and a management training series.						
Duration of services						
Year round						

Early Childhood Training Center (*continued*)

Recruitment strategies				
The Early Childhood Training Center offers conferences throughout the state annually, publishes newsletters, and publicizes its trainings through a training calendar on its web site. Licensed family child care providers must obtain 12 hours of training annually; the center is a main source for that training. License-exempt family, friend, and neighbor caregivers who participate in the child care subsidy program must complete quality improvement activities, such as attending a workshop or completing a self-study activity; these are also offered through the Center.				
Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers; exempt family, friend, and neighbor caregivers who participate in the child care subsidy program; staff from licensed child care centers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Staff include 1 director, 1 information specialist, 1 resource and referral specialist, 1 media coordinator, 1 media assistant, 3 training coordinators, and 2 professional development coordinators. Additionally, the Center works with part-time regional training coalition coordinators and full-time early childhood professional development partnerships and community-based providers who are located throughout the state. State-level planning is also accomplished with other state agency representatives.			
<i>Staff qualifications</i>	Varies			
Materials (curricula, other materials, technology)				
Some of the trainings offered by the Center have been manualized, such as training on the Early Learning Guidelines. Training materials are available for caregivers and parents to borrow from the Center's media center.				
Community partners				
The Center works with a large number of agencies that support service delivery, especially the Early Childhood Professional Development Partnerships & Regional Training Coalitions and the regional early childhood training delivery system. The early intervention system's regional planning teams are also partners to support inclusive practices.				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change		Yes	X	No
The Center's theory of change is that well-qualified staff with specialized training offer more effective programs that influence positive child outcomes.				

Early Childhood Training Center (continued)

Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*			
	Caregiver characteristics	X			
	Child characteristics				
	Care characteristics				
	Caregiver satisfaction with services	X			X
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Jessica LaChere, The Early Childhood Training Center, Information Specialist, 402-557-6889					
Date information collected					
7/30/08					

CCDF = Child Care and Development Fund; CDA = Child Development Associate; ELL = English language learner; HBC = home-based care; IT = infant toddler

NEVADA

Name of initiative	Nevada Accreditation Project					
State	Nevada					
Initiative category	Support for Accreditation					
Target population	Targeted to HBC		Modified for HBC	X	Not Targeted to HBC	
Service provider who implemented the initiative						
Office of Early Care and Education, Department of Welfare and Supportive Services						
Dates of operation						
2003 - Present						
Funding						
CCDF (\$49,000)						
Description of initiative						
The goal of the Nevada Accreditation Project is to encourage family child care providers and child care centers to become accredited. Family child care providers who participate in the child care subsidy system and obtain accreditation are eligible for higher reimbursement rates. The initiative covers all the costs NAFCC accreditation for family child care providers, a one-time \$250 recognition bonus, and \$1,500 grant for equipment and materials. In northern Nevada, services are provided through the University of Nevada-Reno, which operates a Home Provider Network. Members of the network can obtain the support for accreditation. In the southern part of the state, the Department of Workforce Support Services staff provides the services to interested providers.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X*	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - One-time bonus	X		
Content of services						
The initiative provides funds for fees, grants for equipment, and a one-time bonus.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other—Financial support for accreditation	X
Initiative intensity						
Financial assistance						
Duration of services						
Varies						
Recruitment strategies						
Participants are recruited through word of mouth and through the Nevada Association for the Education of Young Children (NVEAYC) and NAFCC.						

Nevada Accreditation Project (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
As of July 2008, seven family child care providers had obtained NAFCC accreditation.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	4 full-time, in the state office and 1 at the University of Nevada			
<i>Staff qualifications</i>	Master's degrees in early childhood education			
Materials (curricula, other materials, technology)				
The initiative provides \$1,500 for equipment and materials.				
Community partners				
The University of Nevada Reno, NVAEYC				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Patti Oya, Nevada Department of Welfare and Supportive Services, Office of Early Care and Education, poya@dwss.nv.gov, 702-486-1432				
Date information collected				
7/24/08				

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care

NEW HAMPSHIRE

Name of initiative	Provider Appreciation Day					
State	New Hampshire					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
New Hampshire Division for Children, Youth and Families, Child Development Bureau						
Dates of operation						
2003 - Present						
Funding						
CCDF (\$20,000)						
Description of initiative						
The goal of the initiative is to recognize the role that home-based caregivers play in providing child care and to improve child care quality. The initiative consists of six hours of workshops offered on single one day.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the workshops is related to a single theme that supports child development. In 2008, the theme was "Outdoor Environmental Play."						
<i>* primary content areas</i>	Health and safety		Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Around a theme such as outdoor play	X
Initiative intensity						
Six hours of workshops in one day						
Duration of services						
Once a year						
Recruitment strategies						
Providers are recruited through invitations to home-based caregiver participating in the child care subsidy program.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor care					
<i>Other needs</i>	Not available					

Provider Appreciation Day (continued)

Number of caregivers enrolled					
A total of 75 caregivers attended Provider Appreciation Day in 2008.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	3 presenters				
<i>Staff qualifications</i>	Approved as trainers/mentors in the statewide credentialing system				
Materials (curricula, other materials, technology)					
Materials related to the Provider Appreciation Day theme are offered during the workshops. For example, the initiative distributed magnifying glasses at a 2008 workshop on outdoor play.					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Ellen Wheatley, New Hampshire Division for Children, Youth and Families, Child Development Bureau Administrator, ewheatley@dhhs.state.nh.us, 603-271-8153					
Date information collected					
7/21/08					

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Monadnock Little Houses					
State	New Hampshire					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Southwestern Community Services						
Dates of operation						
November 2007 - Present						
Funding						
Children's Trust Fund (\$8,000); additional funding from agency membership (funding amount not available)						
Description of initiative						
Monadnock Little Houses was developed to recruit expectant first-time mothers to start child care businesses, but mothers expecting their second child were more interested in participating. To help potential caregivers start their businesses, the initiative offers three training workshops, a home visit, and technical support.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other - Technical Support	X		
Content of services						
Training workshops include topics such as infant/toddler care and small business development. The initiative also provides caregivers with information about CPR classes and other training they may need.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	X
	Nutrition		Activities for children		Business practices	X*
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X*	Other	
Initiative intensity						
Three training workshops, one home visit						
Duration of services						
Varies						
Recruitment strategies						
Recruitment conducted through child birth classes and parent/child groups.						

Monadnock Little Houses (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers interested in starting a child care business			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
As of September 2008, four caregivers had completed the program.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	One in addition to caregiver's own child			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	One full-time staff member and consultants on an as-needed basis			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
The initiative provides training materials that include child development materials and business information as well as a booklet for parents.				
Community partners				
United Way, Success by Six, Cheshire Medical Center, Network by Children and Family				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other - Changes in knowledge	X
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Kathy Torrey, Monadnock Little Houses, Director, ktorrey@riseforbabyandfamily.org, 603-357-1395 x 409				
Date information collected				
9/08/08				

CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Child Care Boost					
State	New Hampshire					
Initiative category	Certificate Program					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
New Hampshire Division for Children, Youth and Families, Child Development Bureau						
Dates of operation						
2004 - Present (Level 1); 2006 - Present (Level 2)						
Funding						
TANF Transfer (funding amount not available)						
Description of initiative						
The goal of Child Care Boost is to help exempt family, friend, and neighbor caregivers obtain credentials and encourage them to participate in the Early Childhood Professional Development system. The initiative provides support for training in core competency areas in the New Hampshire Early Childhood Professional Development System and an annual visit from regional CCR&R staff to identify equipment needs. License-exempt caregivers who seek to achieve Level 1 in the system must have a high school diploma or GED; a 40-hour apprenticeship with a child care center or a family child care home or six months in the field; Infant Toddler CPR; and six hours of core competency training through workshops provided by credentialed CCR&R trainers. License-exempt providers who seek to reach Level 2 in the system must have a high school diploma or GED, Infant Toddler CPR, one year in the field, and four Child Care Basics workshops or a one-credit course with a regionally accredited college or university as well as a contract with families. Caregivers receive equipment and materials as well.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The 12 core knowledge areas of the New Hampshire Early Childhood Professional Development System include: (1) foundations of early childhood education; (2) child growth and development; (3) curriculum for early care and education; (4) health, safety, and nutrition in early childhood; (5) child observation, recordkeeping, and assessment; (6) creating environments for young children; (7) child guidance and discipline; (8) cultural diversity; (9) children with special needs; (10) family and community relationships; (11) professionalism and professional development; and (12) administration and supervision.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children		Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-age children, or children with special needs		Other	
Initiative intensity						
Six hours or one credit hour						
Duration of services						
Year round						

Child Care Boost (continued)

Recruitment strategies					
CCR&Rs attend TANF meetings to identify family, friend and neighbor caregivers who participate in the child care subsidy program and who are interested in becoming credentialed through the system.					
Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Materials include equipment such as cribs and outdoor equipment. If participants care for school-aged children, \$100 worth of consumable supplies such as paper and markers are provided.					
Community partners					
CCR&Rs and regionally accredited colleges or universities					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Ellen C. Wheatley, New Hampshire Division for Children, Youth and Families, Child Development Bureau Administrator, ewheatley@dhhs.state.nh.us, 603-271-8153					
Date information collected					
7/21/08					

CCR&R = Child Care Resource & Referral; ELL = English language learner; GED = General Equivalence Diploma; HBC = home-based care; IT = infant toddler; TANF = Temporary Assistance for Needy Families

NEW JERSEY

Name of initiative	Monday Morning, Inc. Mentor Program					
State	New Jersey					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Monday Morning, Inc.						
Dates of operation						
1995-1996, 2003-2004						
Funding						
1995-1996 program, AT&T (\$6,000 plus substantial in-kind donations of staff time); 2003-2004, Avaya (\$22,000)						
Description of initiative						
Monday Morning, Inc. is a family child care management service. The mentor program provided a professional development opportunity for experienced providers and mentoring services to new providers. Experienced family child care providers received mentor training from staff in the Department of Early Childhood and Family Studies at Kean College through a series of five four-hour workshops. Trained mentors were matched with new providers and worked with them in their homes at least four times. Mentees visited the mentors' homes to observe the child care environment and interactions with the children in care at least once. Mentors conducted observations of mentees' homes using the Family Day Care Rating Scales (FDCRS) and used the results as a guide for setting quality improvement goals. An outgrowth of the Mentor Program was the establishment of a warm line for matching new providers with trained mentors who could receive guidance and support by telephone.						
* <i>primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines	X	Online training	
	Peer support networks		Other			
Content of services						
Training workshops covered the following topics: introduction to mentoring, adult learning, using the Family Day Care Rating Scale; communications, interactional processes, and model of supervision; caregiver as curriculum; creativity and problem solving; and family relationship. Mentors also used other resources: <i>Growing Teachers</i> , <i>Teaching Adults</i> , articles from <i>Young Children</i> , publications from <i>Zero to Three</i> , and the <i>Creative Curriculum for Family Child Care</i> . Mentor visits were tailored to the needs of new providers and the results of the FDCRS assessment.						
* <i>primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Mentors received five 4-hour workshops. Mentors made at least four visits to mentees' homes, and mentees visited the mentors' home at least once during a five-month period.						
Duration of services						
About five months						

Monday Morning, Inc. Mentor Program (*continued*)

Recruitment strategies				
Mentors were recruited from experienced providers in Monday Morning, Inc.'s family child care network. Mentees were recruited from a pool of new providers who joined the network.				
Caregiver characteristics				
<i>Relationship to children</i>	Most caregivers were not related to the children in their care.			
<i>Motivation for providing care</i>	Operating a child care business			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	At least a high school degree			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
13 mentors and 13 mentees in 1995-1996				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 5			
<i>Group size</i>	5 or fewer			
<i>Characteristics (ELL, special needs)</i>	None			
Care characteristics				
<i>Schedule and intensity of care</i>	Full time, weekday care			
<i>Purpose of care</i>	Child care for working parents			
Staff characteristics				
<i>Number of staff</i>	5 Monday Morning, Inc. staff			
<i>Staff qualifications</i>	Advanced degrees in early childhood education			
Materials (curricula, other materials, technology)				
Training curriculum for the mentor workshops was developed by Kean College staff. Mentors also used other resources: <i>Growing Teachers</i> , <i>Teaching Adults</i> , the FDCRS; articles from <i>Young Children</i> ; publications from <i>Zero to Three</i> ; and the <i>Creative Curriculum for Family Child Care</i> .				
Community partners				
Department of Early Childhood and Family Services, Kean College				
Fidelity standards				
Not available				
Other Versions				
The original Monday Morning, Inc. Mentor Program implemented in 1995-1996 was implemented again in 2003-2004 with support from a different funder.				
Logic model/Theory of change	Yes		No	X
Collection of program data/information	Yes		No	X
Evaluation methods and design	Yes	X	No	
Kean College staff conducted pre/post observations of mentor homes using the FDCRS.				
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
The average FDCRS score for mentor homes was 5.83 prior to participation in the program and 6.20 after participation.				
Contact				
Suzanne Williamson, Monday Morning, Inc., President, suewmson@aol.com, 908-668-6840				
Date information collected				
09/15/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

NEW MEXICO

Name of initiative	Conversations Pilot					
State	New Mexico					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
La Vida Institute, New Mexico State University						
Dates of operation						
2004–2005; now a required module for New Mexico’s career development system, Aim High						
Funding						
CCDF (funding amount not available)						
Description of initiative						
The goal of Conversations is to provide a forum for family, friend, and neighbor caregivers to discuss their interests, knowledge, expertise, and needs. The program offers an 18-hour workshop training series with peer support in nine weekly two-hour sessions.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other			
Content of services						
The training series consists of nine modules, which address a variety of topics relevant for family, friend, and neighbor caregivers.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Family diversity	X
Initiative intensity						
Weekly for two hours in Spanish or English						
Duration of services						
Nine weeks, typically once a semester						
Recruitment strategies						
The initiative recruits caregivers through orientations for the child care subsidy program, mailings to caregivers who participate in the subsidy program, and presentations at regional child care conferences. Participants are also recruited through word of mouth.						

Conversations Pilot (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Almost all of the caregivers are related to the children in their care.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	A case study of 15 caregivers indicated that most had a high school degree.			
<i>Regulation status</i>	Exempt family, friend and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
170 caregivers completed the workshops in 2004-2005.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	10 full-time staff, including 4 who provided training			
<i>Staff qualifications</i>	Bachelor's or associate's degree in early childhood education			
Materials (curricula, other materials, technology)				
The curriculum, which was developed by Dr. Nancy Baptiste of New Mexico State University, consists of nine topics: (1) families and communities; (2) child development and learning; (3) learning environments; (4) health and safety; (5) business practices in family child care; (6) social/emotional development; (7) guiding young children's behavior; (8) language; and (9) reading, writing, and numbers.				
The initiative also offers a toy lending library.				
Community partners				
Not available				
Fidelity standards				
Not available				
Other versions				
The pilot has been institutionalized as a module in Aim High, New Mexico's career development system.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
The initiative examined pre/post changes in knowledge and skills and child care quality observations used the Child Care Assessment Tool for Relatives (CCAT-R), and self-reported on changes in caregiver practice.				
Process evaluation findings			Yes	X
The evaluation found that mailings to license-exempt caregivers participating in state's child care subsidy program were the most effective approach for recruiting participants. Fifteen caregivers who participated in the winter 2005 session agreed to participate in the evaluation. None of them completed all nine workshops; three caregivers attended seven workshops.				

Conversations Pilot (*continued*)

Outcome evaluation findings	Yes	X	No	
<p>The pre/post evaluation found some positive effects for changes in knowledge and skills. Of the 13 caregivers in the sample for whom data are available, 9 had increases in scores between the pre-test and the post-test. Changes in knowledge were reported in three areas: learning environments; reading, writing and numeracy; and family child care business practices. Caregivers reported improvement on two of the four questions about practice—offering enrichment activities and using specific skills. Median scores on the CCAT-R increased overall on all four factors: nurturing; engagement in activity with child; bidirectional communication; and unidirectional use of language. The greatest change occurred in bidirectional communication.</p>				
Contact	Gloria Gonzalez, La Vida Institute, ggonzale@nmsu.edu, 505-527-1149			
Date information collected	8/26/08			

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT= infant toddler

NEW YORK

Name of initiative	State University of New York (SUNY) Early Childhood Education and Training Program					
State	New York					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Professional Development Program						
Dates of operation						
1997-Present						
Funding						
New York State Office of Children and Family Services (funding amount not available)						
Description of initiative						
The SUNY Early Childhood Education and Training Program offers training via video conferencing and e-learning downloads for family child care providers.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
SUNY provides downloadable training information on a range of topics, from shaken baby syndrome to activities for children. Some of the downloadable brochures are available in Spanish. Summer video conferencing programs cover topics such as summer safety, nutrition, health, and safety, and child care regulations. Each video conferencing training session provides .25 CEUs for the provider.						
<i>* primary content areas</i>	Health and safety	X	Child development		Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Video conference training was offered 12 times in 2008. Each session lasted 2.5 hours.						
Duration of services						
Year round						
Recruitment strategies						
Not available						

State University of New York (SUNY) Early Childhood Education and Training Program (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Curriculum topics include summer safety, nutrition, health, safety, child care regulations, and medication administration. The program also provides downloadable training information on a range of topics.					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other— Change in knowledge		X
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
SUNY Early Childhood Education and Training Program (ECETP) http://www.tsg.suny.edu					
Date information collected					
9/22/08					

CEUs = Continuing Education Units; ELL = English language learner; HBC = home-based caregivers; IT = infant toddler

Name of initiative	Caring for Quality					
State	New York					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Cornell Early Childhood Program, Family Life Development Center, Cornell University and Rochester Childfirst Network, Family Resource Centers of Crestwood Children's Center						
Dates of operation						
2005-2007						
Funding						
Annie E. Casey Foundation; Monroe County Department of Human Services; Rochester Area Community Foundation; Rochester's Child; New York State Department of Health; and the Wegmans Food Markets (funding amount not available)						
Description of initiative type						
The goal of the initiative was to assess the program's effectiveness on improving the quality of care provided by family child care and family, friend, and neighbor caregivers and positively influencing the outcomes of the children in care. Participating home-based caregivers had one child (age 0-47 months) in care for at least 20 hours per week, expected to provide care for at least 6 months, and spoke English. Caregivers were randomly assigned to a program group which received the home visits twice a month using the <i>Supporting Caregivers through Personal Visits</i> curriculum and monthly meetings, or a control group that received one home visit and the packet of health and safety information.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
The content of the initiative focused on child development and support quality in home-based child care settings.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Two, 2-hour home visits per month and one group meeting per month						
Duration of services						
9 to 12 months						
Recruitment strategies						
Participants were recruited through phone calls to registered family child care providers and family, friend and neighbor caregivers who participated in the child care subsidy program, advertisements posted at local businesses (for example, grocery stores and libraries), and announcements at other training events for home-based child care providers.						

Caring for Quality (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Family, friend and neighbor caregivers were more likely to care for their own grandchildren (45 percent) and other family members' children (41 percent), while registered family child care providers were more likely to care for children who were not related to them (82 percent).				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Approximately one third of the providers had a high school education, and 53 percent had some college, a bachelor's degree, or some graduate school as the highest level of education.				
<i>Regulation status</i>	Registered family child care providers and exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
A total of 97 caregivers participated in the study, 53 registered family child care providers and 44 exempt family, friend, and neighbor caregivers. 74 were in the program group, and 23 in the comparison group.					
Child characteristics					
<i>Ages of children in care</i>	5 percent were under age 1; 32 percent were between 1 and 2 years old; 29 percent were between 3 and four years old; and 34 percent were 5 years old or older.				
<i>Group size</i>	For family child care providers, fewer than six children; for family, friend, and neighbor caregivers, no more than two children who were not related to the provider.				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	3 full-time and 2 part-time				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
The initiative used the <i>Supporting Home Providers Curriculum</i> developed by the Parents As Teachers National Center and the <i>Family Development Credential</i> . Materials included a packet of health and safety information, materials for children's activities, and handouts for parents and caregivers.					
Community partners					
Rochester Childfirst Network Family Child Care Satellites of Rochester, Family Resource Centers of Crestwood Children's Center					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	X	No
Collection of program data/information			Yes	X	No
* <i>primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		X*
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		X
	Caregiver satisfaction with services	X	Other		

Caring for Quality (*continued*)

Evaluation methods and design	Yes	X	No	
The evaluation used a random assignment design to assess the initiative’s impact on the quality of the child care home, perceived social supports, knowledge of child development and child rearing beliefs, satisfaction with the program, and children’s language and social-emotional development.				
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
Providers who participated in the home visits showed a significant increase in quality on the Family Day Care Rating Scale (FDRCS) total score and all subscale scores except basic care and space and furnishing. Within the program group, increases were smaller for family, friend, and neighbor caregivers than for family child care providers. FDCRS scores for comparison group providers, by contrast, decreased overall and in all subscales with the exception of professional development. A higher proportion of providers who were more “engaged” based on qualitative observations of the home visitors showed improvements than those who were less “engaged.” In addition, the greatest increase in quality was demonstrated among providers with the least amount of experience—less than two years. No impacts were found on child outcomes.				
Contact				
Diana Webb, Family Child Care Satellites of Greater Rochester, Project Manager, dwebb@rcn4kids.org, 585-697-3569 Lisa McCabe, Cornell Early Childhood Program, Family Life Development Center, Evaluation Manager, LAM4@cornell.edu, 607-254-7292				
Date information collected				
10/10/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	The School Readiness Project, Family Day Care Satellite Project					
State	New York					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
The School Readiness Project, Family Day Care Satellite Project						
Dates of operation						
September 1, 2007 - August 31, 2008						
Funding						
Appalachian Regional Planning Commission and local county foundations (\$152,608)						
Description of initiative						
Family Day Care Satellite provided training, distributed materials, and offered career counseling to family child care providers.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Career Counseling	X		
Content of services						
The content of services covered working with parents, state regulations, and business practices.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	X
	Nutrition		Activities for children		Business practices	X
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - State Regulation Requirements	X
Initiative intensity						
One or two two-hour training workshops per month						
Duration of services						
Six months						
Recruitment strategies						
Family Day Care Satellite sent letters about the program to registered family child care providers.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available.					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Registered family child care providers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
15 caregivers						

The School Readiness Project Family Day Care Satellite Project (*continued*)

Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
Number of staff	2 full-time staff who provide services directly to the caregivers and 3 full-time administrators				
Staff qualifications	Bachelor's degree in child care or a human services field or at least five years of experience				
Materials (curricula, other materials, technology)					
Materials include business boxes for supplies and forms.					
Community partners					
Columbia University conducted an evaluation of the project.					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
Not available					
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		X*
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design		Yes	X	No	
The program conducted pre/post quality assessments using the Family Day Care Rating Scale.					
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes	X	No	
Contact					
Ruth Krusen, The School Readiness Project Family Day Care Satellite Project, rkrusen@chemchildcare.com, 607-734-3941 x 211					
Date information collected					
8/25/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Home Based Child Care Microenterprise Network					
State	New York					
Initiative category	Quality Improvement and Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Women's Housing and Economic Development Corporation (WHEDCo)						
Dates of operation						
1991 - Present						
Funding						
Helena Rubinstein Foundation, Patrina Foundation, MizuhoUSA Foundation, JP Morgan Chase Foundation, Durst Foundation, Hearst Foundation, Liz Claiborne Foundation, CACFP, New York City Department of Youth and Community Development, New York State Office of Children and Family Services (\$2.7 million)						
Description of initiative						
Home-Based Child Care Microenterprise Network helps women establish neighborhood-based child care by providing training, tax and licensing assistance, and other resources. In addition to training for licensed family child care providers, the program offers screening and 12 hours of training for exempt family, friend, and neighbor caregivers; a home-based child care network, CACFP, and quarterly network meetings.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs/ Groups with care providers & children & trainers modeling	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting	X	Warm lines	X	Online training	
	Peer support networks	X	Other - Referral Financial Education	X		
Content of services						
Content of services is related to child development and operating a child care business. The main content areas are nutrition and health needs, business management and development, child and program development, developing quality business, child abuse, sudden infant death syndrome, and financial education. Training topics include tax seminars, basic child development, literacy, and parent communication.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Weekly and monthly sessions; service receipt varies by caregiver.						
Duration of services						
15-hour cycles of training and a variety of individual workshops offered year round						
Recruitment strategies						
Recruitment strategies include pamphlets, word of mouth, referrals by licensing agencies, mailings, open house information sessions, information sessions about starting a family child care business, quarterly and WHEDCo's participation in conference panels.						

Family Day Care Microenterprise / Home Based Child Care Services (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Many caregivers speak Spanish as a first language.				
Number of caregivers enrolled					
180 providers are enrolled as network members. In 2007-2008, 450 to 500 caregivers enrolled in training workshops.					
Child characteristics					
<i>Ages of children in care</i>	Varies				
<i>Group size</i>	Varies				
<i>Characteristics (ELL, special needs)</i>	Many children are English language learners.				
Care characteristics					
<i>Schedule and intensity of care</i>	Varies				
<i>Purpose of care</i>	Varies				
Staff characteristics					
<i>Number of staff</i>	1 program director, 10 bilingual day care case managers; 5 bilingual health and safety trainers; 16 support staff including part-time mentors, health and safety trainers from the State Department of Health, CACFP administrators; technical support assistants, and legal support.				
<i>Staff qualifications</i>	Master's degree in social work; licensed clinical social workers; bachelor's degrees; professional experience ranging from working in housing relocation, Head Start programs, and family literacy programs.				
Materials (curricula, other materials, technology)					
The initiative uses the <i>Creative Curriculum</i> as one of its curricula. Materials include children's toys and books, art kits, books such as <i>SPARK</i> activity books, pamphlets on shaken baby syndrome, and State University of New York college educational materials.					
Community partners					
New York Cares, CCR&Rs, South Brook Legal Services, New York City Department of Health, Institute for Urban Family Health, PS 218, City University of New York Professional Development Institute					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	X	No
WHEDCo's Home-Based Child Care Microenterprise Network was established to help parents secure flexible, affordable day care for their children and to improve the quality of care by providing training and technical assistance.					
Collection of program data/information			Yes	X	No
* <i>primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services	X	Other - Business-related outcomes		X*

Family Day Care Microenterprise / Home Based Child Care Services (*continued*)

Evaluation methods and design	Yes	X	No	
The initiative assesses progress toward its goals on an annual basis.				
Process evaluation findings	Yes	X	No	
In 2007, an internal evaluation indicated that staff provided 176 visits to 157 clients, 323 training sessions, and 123 hours in technical assistance.				
Outcome evaluation findings	Yes	X	No	
In 2008, an internal evaluation indicated that 80 percent of providers in the network developed plans with personal, business, and professional development goals; 96 percent were in compliance with regulatory requirements for health and safety; 94 percent filed for the EITC; 87 percent had savings goals and 90 percent of them made progress toward the goal; and 79 percent had debt reduction goals and 79 percent of them made progress towards the goal.				
Contact				
Diana Perez, Women's Housing and Economic Development Corporation, Director of Home Based Child Care Services, dperez@whedco.org, 718- 839-1124				
Date information collected				
07/29/08				

CACFP = Child and Adult Care Food Program; CCR&R = Child Care Resource & Referral; EITC = Earned Income Tax Credit; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Informal Family Child Care Training Project (IFCC)					
State	New York					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
NYC Early Childhood Professional Development Institute						
Dates of operation						
2003 - Present						
Funding						
Administration for Children's Services (\$482,000)						
Description of initiative						
IFCC provides training and technical assistance to exempt family, friend, and neighbor caregivers to improve the quality of care they provide. The program offers monthly training workshops for caregivers. At each workshop, IFCC distributes a materials packets with materials related to the training, a children's book, and additional information to encourage the caregivers to use the information provided during the workshop at home. The program also offer a information phone line and distributes a monthly newsletter.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines	X	Online training	
	Peer support networks		Other --newsletter			
Content of services						
All workshop topics align with the New York State Core Body of Knowledge, OCFS training priorities, and the New York State early learning standards that are currently in development. Topics range from child development and nutrition to business strategies and licensing requirements. The IFCC also offers workshops on how to communicate with parents and on children's challenging behaviors. IFCC staff and consultants offer the workshops which are conducted simultaneously in English and Spanish.						
The program also works closely with the Children's Museum of Manhattan. The museum provides four sessions of training. The first three are three-hour sessions once a month and the last allows the provider to bring the children in their care to incorporate all the information they have learned. Providers who complete the training with the Museum receive a free one-year pass to use the museum as often as they would like.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy		Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Monthly, 3-hour training workshops, consultation by phone or in the IFCC office as needed						
Duration of services						
Year round						
Recruitment strategies						
The sends letters to exempt caregivers who participate in the child care subsidy programs to invite them to attend training workshops.						

NYC Early Childhood Professional Development Institute (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
On any given Saturday approximately 40-80 individuals participate in the training sessions.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	3 full-time staff and 6 part-time consultants			
<i>Staff qualifications</i>	Background in early childhood education			
Materials (curricula, other materials, technology)				
Curriculum topics include:				
<ul style="list-style-type: none"> - Becoming a Licensed Family Day Care Provider - Language and Literacy - Child Nutrition - Setting Up Your Child Care Environment - Cooking with Children - Cognitive Development - Social & Emotional Development - Shaken Baby Syndrome & Sudden Infant Death Syndrome Infection Control - Emergency Planning - The Important of Physical Activity - Medication Administration Regulations - Managing Tantrums - Obesity Prevention - Why Do Children Bite? - Payment class 				
Materials are given out at each training session depending on the training topic.				
Community partners				
Business Outreach Center, United Federation of Teachers and Children’s Museum of Manhattan				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change	Yes		No	X

NYC Early Childhood Professional Development Institute (*continued*)

Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X		Quality outcomes (observations or ratings)	
	Caregiver characteristics			Parent satisfaction with care	
	Child characteristics			Parent experience with care	
	Care characteristics			Child outcomes	
	Caregiver satisfaction with services	X		Other - Number of participants that come more than once	X
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Sherry Cleary, NYC Early Childhood Professional Development Institute, Executive Director, sherry.cleary@mail.cuny.edu, 646-344-7293					
Date information collected					
10/08/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler; OCFS = Office of Child and Family Services

NORTH CAROLINA

Name of initiative	Family Child Care Home Pre-Licensing Workshops					
State	North Carolina					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
In 2005, Child Care Resources, Inc. was contracted to manage the Family Child Care Home Pre-Licensing Workshops at the state level; workshops were piloted and conducted by Regional Lead CCR&Rs throughout the state. In 2007, state level management ended, but local CCR&Rs, including Child Care Resources Inc. continue to conduct the workshops.						
Dates of operation						
2006 - Present						
Funding						
North Carolina Division of Child Development (funding amount not available)						
Description of initiative						
The goal of the Pre-Licensing Workshop is to increase the sustainability of family child care providers and to improve quality. The Pre-Licensing workshop is a one-day, five-hour workshop for individuals who plan to operate a family child care business. The workshop is not mandatory. Participants receive a copy of the <i>Family Child Care Home Handbook</i> , published by the North Carolina Division of Child Development.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The one-day workshop is a comprehensive review of the North Carolina Family Child Care Home rules and regulations. Content includes information on quality, North Carolina's family child care home licensing requirements information, region-specific zoning and sanitation requirements, and detailed information regarding program start-up and operation as it relates to budgeting.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - North Carolina's Quality Rating System is discussed	X
Initiative intensity						
One 5-hour workshop						
Duration of services						
One-time event						
Recruitment strategies						
Under the statewide contract, Child Care Resources, Inc. implemented a statewide advertising strategy. Under the current delivery of the system, regional leads and local CCR&Rs advertise the services in their communities.						

Family Child Care Home Pre-Licensing Workshops (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Individuals seeking to become licensed family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
The number of caregivers enrolled annually statewide is not available.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Information on the number of trainers throughout the state is not available.				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Child Care Resources, Inc. (in its role as the state manager of the initiative) coordinated the development of a scripted curriculum for the workshop. Regional Leads and local CCR&Rs continue to use this curriculum.					
Community partners					
Not available					
Fidelity standards					
In 2006, Child Care Resources, Inc. (in its role as the state manager of the initiative) conducted and subcontracted services to monitor the workshops to assess if the information was being delivered consistently; program monitoring was discontinued in 2007.					
Other Versions					
Not available					
Logic model/Theory of change		Yes	X	No	
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Francesca Busse, Child Care Resources Inc., fbusse@childcareresourcesinc.org, 704-376-6697 x 113					
Date information collected					
9/18/08					

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

NORTH DAKOTA

Name of initiative	Right from the Start					
State	North Dakota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
North Dakota CCR&R						
Dates of operation						
2003 - Present						
Funding						
CCDF (for the CCR&R coordinator, funding amount not available); Bush Foundation (\$12,000 and consultant salaries)						
Description of initiative type						
<p>Right from the Start project provides consultation services (in person and by telephone), on-site technical assistance, observation and evaluation, and training licensed family child care providers. Child Care Specialists conduct an observation of the child care setting using the FCCERS then use the results to develop an action plan with the provider. Subsequent visits consist of feedback and independent learning modules, demonstration or modeling of caregiving techniques, observation of provider-child interaction, and feedback and discussion. The specialist also works with the provider to purchase equipment and toys identified in the action plan.</p> <p>After an initial visit, Child Care Health Consultants staff visit providers to demonstrate hand washing procedures, sanitary diapering, and how to sanitize the contents and furnishings in the child care environment; discuss appropriate nutrition and food handling for babies; and offer individualized health consulting.</p> <p>A final assessment is completed with each provider using the FCCERS. On the last consultation visit, the consultant and provider review the scores and discuss options for continued professional development and goals for continued improvement. Providers may use up to 35 clock hours of training through the Right From the Start project toward the required 9 or 10 hours per year needed to maintain licensure.</p>						
* <i>primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines	X	Online training	
	Peer support networks		Other - Independent learning modules	X		
Content of services						
<p>Content including six learning modules:</p> <ul style="list-style-type: none"> ▪ Environment. Arranging the child care space to meet the needs of infants and toddlers and to promote learning and development, selecting appropriate equipment and materials, maintaining safety, supervision of infants and toddlers in mixed-age groupings ▪ Routines. Understanding and utilizing routines as learning opportunities, responsive and flexible care-giving practices, working with children's individual rhythms ▪ Activities. Planning age- and individually-appropriate activities, stimulating learning and discovery, changing activities to meet children's growing needs ▪ Child Development. Ages and stages of development, developmental milestones, responding to children's temperament and individual development, recognizing key developmental warning signs ▪ Observation and Planning. Objectivity, observation techniques, using observation to plan for each child, daily and weekly lesson plans ▪ Working with Families. Confidentiality, communication techniques and information sharing, creating partnerships with families, being sensitive and responsive to family culture and expectations, dealing with difficulties 						

Right from the Start (*continued*)

<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X*	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Total time in the project is 35 hours including the eight 1-hour consultation visits and independent work.						
Duration of services						
6-10 months						
Recruitment strategies						
Right From the Start mails letters to all licensed family child care providers in the state. The project advertises the program through its web site, newsletters, and brochures. Project staff members distribute brochures to newly licensed providers during their 'start-up visit'. Other organizations conduct some recruiting activities for the project as well. For example, local child care associations make announcements to providers about the project and county licensors assist the project in recruiting potential providers.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Varies					
<i>Regulation status</i>	Licensed family child care providers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
The project is funded to enroll 24 providers per year.						
Child characteristics						
<i>Ages of children in care</i>	The project is open to providers care for infants and toddlers.					
<i>Group size</i>	Not available					
<i>Characteristics (ELL, special needs)</i>	Not available					
Care characteristics						
<i>Schedule and intensity of care</i>	Not available					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	North Dakota's Western Region: 2 child care specialists and 1 child care health consultant (32 hours a week for each position); North Dakota's Eastern Region: 4 full-time child care specialists, 1 full-time and 1 part-time child care health consultant					
<i>Staff qualifications</i>	The child care health consultants are RNs. The project prefers that all new staff have at least a bachelor's degree.					

Right from the Start (*continued*)

Materials (curricula, other materials, technology)				
Right from the Start uses the FCCERS for assessment observations. The program also provides \$500 for each provider to purchase of books, toys, or equipment such as low shelving or towel dispensers, or other items identified in the provider's action plan.				
Community partners				
County licensing offices, CCR&Rs				
Fidelity standards				
Not available				
Other Versions				
The Minnesota Department of Human Services funds the Right from the Start project.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X*
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Shonda Wild, ND Child Care Resource and Referral, Program for Infants and Toddler Caregivers Coordinator swild@lssnd.org, 888-223-1510				
Date information collected				
7/18/08				

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; FCCERS = Family Child Care Environment Rating Scale; HBC = home-based care; IT = infant toddler; RN = registered nurse

OHIO

Name of initiative	Quality Child Care Initiative, Sisters of Charity Foundation of Canton					
State	Ohio					
Initiative category	Certificate Program					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Early Childhood Resource Center (ECRC)						
Dates of operation						
Research began in 1999, training program initiated in 2002						
Funding						
Sisters of Charity Foundation of Canton (funding amount not available)						
Description of initiative						
The goal the Quality Child Care Initiative is to improve the quality of early care and education in Stark County by providing professional development, resources, and support services to home-based caregivers. The program provides CDA training through workshops. In addition, each caregiver is assigned a mentor who visits three hours a month to observe and assist. Overall, caregivers receive 10 hours of training and mentoring per month.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other	X		
Content of services						
Trainings and mentoring visits are based on the following CDA subject areas: planning a safe, healthy learning environment; steps to advance children's physical and intellectual development; positive ways to support children's social and emotional development; strategies to establish productive relationships with families; strategies to manage an effective program operation; maintaining a commitment to professionalism; observing and recording children's behavior; and principles of child development and learning. The program also uses Family Child Care Environmental Rating Scale (FCCERS) tailor mentoring and support services to meet the individual needs of the provider.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy		Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Monthly 6-hour training sessions; 3 hours of mentoring per month; home assignments for CDA program						
Duration of services						
Training is provided over 12 months, but support continued until caregivers complete the CDA.						
Recruitment strategies						
The program post fliers, places advertisements in the newspaper and receives referrals from the Department of Jobs and Family Services, parents, and word of mouth.						

Quality Child Care Initiative funded by Sisters of Charity Foundation of Canton (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
10 caregivers annually				
Child characteristics				
<i>Ages of children in care</i>	6 weeks to 12 years old			
<i>Group size</i>	Maximum group size of six			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Varies			
<i>Purpose of care</i>	To provide care while parents work			
Staff characteristics				
<i>Number of staff</i>	1 director and 1 coach			
<i>Staff qualifications</i>	The director has a master's degree in early childhood and the coach has a bachelor's degree.			
Materials (curricula, other materials, technology)				
Caregivers receive assignment from the CDA training books. Participants have access to a family care center lending library where they can check out literacy kits, science kits, and math kits for up to six weeks.				
Community partners				
Not available.				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	No
The program conducts pre/post observations of family child care homes using the FCCERS. Results from initial observations are used to design specific goals for each provider. Post-observations are used to assessment improvements over time.				
Process evaluation findings			Yes	No
Outcome evaluation findings			Yes	No
Pre/post assessments showed increases in all subscales of the FCCERS.				

Quality Child Care Initiative funded by Sisters of Charity Foundation of Canton (*continued*)

Contact
Angela Parker, Early Childhood Resource Center (www.ecresourcecenter.org), Director of Special Projects and Community Development, aparker@ecresourcecenter.org , 330-491-3272 x 228
Sisters of Charity Foundation of Canton Joni Close, jclose@scfcanton.org , 330-454-5800
Date information collected
7/07/08

CDA = Child Development Associate; FCCERS = Family Child Care Environment Rating Scale; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Child Care Connections					
State	Ohio					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Pathways of Central Ohio, Ohio Action for Children						
Dates of operation						
1988 - Present						
Funding						
Action for Children; Licking County United Way (\$58,294 in FY2008)						
Description of initiative						
The goal of Child Care Connections is to connect child care professionals, parents, and child care centers in Licking County with resources that will assist them in improving the quality of the care they provide. Child care professionals receive services such parent referrals, information about starting and running a child care business, professional development training, problem-solving technical assistance, and newsletters. Child Care Connections also provides access to a resource library and Ohio and FBI background checks to providers. With the exception of parent referrals, providers do not have to be registered with Child Care Connections to receive services.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other-Background checks	X		
Content of services						
Professional development courses specifically for home-based caregivers include: health and safety for family child care, and managing children's conflicts. Other coursework includes a series on the Ohio Early Learning Standards, child behavior, and child abuse awareness.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other-Ohio Early Learning Standards	X
Initiative intensity						
Intensity varies by training series.						
Duration of services						
Year round						
Recruitment strategies						
The program recruits participants through word of mouth, posters, fliers, and brochures through the Licking County Department of Job and Family Services, which sends a list of certified providers on a monthly basis. Child Care Connection's program director promotes the program during attendance in the bimonthly family child care provider orientations for new providers.						

Child Care Connections (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Mothers who want to stay home with their own children but need to contribute to their family's income				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Regulated family child care providers and family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
In 2008 the program served 112 caregivers.					
Child characteristics					
<i>Ages of children in care</i>	6 weeks to 13 years				
<i>Group size</i>	Maximum of six children, with no more than three children under two years old at any given time				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Most caregivers offer care from 6:00 a.m. to 6:00 p.m.; a small number offer evening, overnight, and weekend care.				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 full-time program director and 1 part-time specialist				
<i>Staff qualifications</i>	The program director has a bachelor's in individual and family studies with a concentration in child care. The specialist has a bachelor's in psychology.				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Licking County Red Cross, Boeing, Licking County Job and Family Services, TEACH Early Childhood Ohio, Ohio Child Care Resource and Referral Association, Central Ohio Technical College, Leads Head Start, Licking County Health Department, and Help Me Grow					
Fidelity standards					
Not available					
Other Versions					
Child Care Connections' parent program offers similar programs in Franklin County, Ohio and has partnerships with five other counties.					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X*	Other		
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Teri Peasley, Program Director, ccc@pathwayslc.org, 740-345-6166 (Secondary contact: Sylvia Friel, sfriel@lcuw.net)					
Dates information collected					
6/17/08 and 7/14/08					

ELL = English language learner; FBI = Federal Bureau of Investigation; HBC = home-based care; IT = infant toddler

Name of initiative	Ohio Ready to Learn (RTL): Professional Development for Family Child Care Providers					
State	Ohio					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Ohio Educational Television Stations						
Dates of operation						
1998 - Present						
Funding						
Bureau of Child Care and Development, Ohio Department of Job and Family Services (funding amount not available)						
Description of initiative						
<p>The Ready to Learn (RTL) program is based on the belief that quality educational television can be a positive mechanism for learning and a tool for assisting parents and caregivers with preparing children for learning. Ohio's RTL is a joint project of the Ohio Educational Television Stations and the Child Care Bureau of the Ohio Department of Jobs and Family Services (ODJFS). It provides child-appropriate television programming and workshops for family child care providers. Family, friend and neighbor caregivers are welcome to participate, but the program does not actively recruit them. Each station also presents workshops on Ohio's Infant and Toddler Guidelines. The workshops are free and participants are not only able to get ODJFS in-service credit, Step-Up to Quality approval, and apply for International Association for Continuing Education and Training (IACET) CEUs, but they also receive free materials to use with children. Additionally, stations broadcast interstitial messages about appropriate child care practices throughout the year.</p>						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Television training	X		
Content of services						
Workshop topics include language and literacy, learning discipline, and assessment using the <i>Ages & Stages Questionnaires</i> .						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
The infant and toddler series includes seven 2-to-3-hour modules. The preschool series include three 2-hour modules.						
Duration of services						
Duration of specific courses vary as providers can take a one-time course or, as recommended by the program, an entire series of courses.						
Recruitment strategies						
Not available.						

Ohio Ready to Learn: Professional Development for Family Child Care Providers (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Each of the eight public television stations in Ohio delivers 28 Infant Toddler Guidelines modules and 48 RTL workshops annually. The number of caregivers participating in these activities is not available.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 5; some family providers also provide school-age care.			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Each station has 1 RTL coordinator and early learning staff or contract trainers.			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Assessment: <i>Ages & Stages Questionnaires</i> ; materials for family child care homes				
Community partners				
Infant/toddler specialists at the CCR&Rs in Ohio also offer infant/toddler guideline training.				
Fidelity standards				
Not available				
Other Versions				
A variety of family literacy programs, book distribution to low-income children, lending libraries, and other services may be available from individual stations.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Jamie Gottesman, Bureau of Child Care and Development, Assistant Chief, Ohio's Ready to Learn, Program Officers, GOTTEJ@odjfs.state.oh.us, 614-752-0579 Kathy Smith, Early Learning and Outreach at WGTE Public Media in Toledo, Director, Kathy_Smith@wgte.org, 419-380-4638				
Dates information collected				
6/20/08 and 10/3/08				

CCR&R = Child Care Resource & Referral; CEU = continuing education unit; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	State Institutes for Reading Instruction (SIRI) Pre-K/K					
State	Ohio					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Office of Literacy, Ohio Department of Education (ODE)						
Dates of operation						
2004 - Present						
Funding						
Ohio Department of Education (\$433,583)						
Description of initiative						
SIRI Pre-K/K provides early literacy instruction to early childhood educators to increase the quality of reading instruction they provide to children.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The program offers seven training modules on the following topics: (1) tools for early language and literacy teaching; (2) observation and recording; (3) building a foundation for preschool literacy; (4) oral language and early literacy in preschool; (5) learning about print in preschool; (6) writing in preschool; (7) using children's literature in preschool.						
<i>* primary content areas</i>	Health and safety		Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Seven modules, each consisting of four 3-hour sessions, for a total of 94 hours						
Duration of services						
Varies based on the region						
Recruitment strategies						
SIRI Pre-K/K typically recruits through the CCR&R network, schools, the internet, fliers posted in areas frequently by teachers and child care providers, and word-of-mouth.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Licensed family child care providers and child care centers					
<i>Other needs</i>	Not available					

Pre-K/K State Institutes for Reading Instruction (SIRI) (continued)

Number of caregivers enrolled					
A total of 2,399 early childhood educators participated in 2008, including 107 family child care providers.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 5				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	4.5 FTE contracted by ODE offices to administer SIRI; pool of 90 faculty members who serve as contract instructors				
<i>Staff qualifications</i>	Instructors must adjunct or full-time faculty, field supervisors, or special field personnel such as English Language Learner Specialists within the field of early childhood education at Ohio two- or four-year colleges or universities. The minimum educational background is a master's degree in literacy or early childhood education.				
Materials (curricula, other materials, technology)					
Ohio Early Learning Content Standards					
Community partners					
College of Education at The Ohio State University, Early Childhood Quality Network (ECQ-Net) (provider of courses)					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	X	No
Central to all content and instruction are the four themes of early childhood that form the essential principles of early education: (1) all children are born ready to learn; (2) relationships are influential; (3) environments matter; and (4) communication is critical. Professional learning goals specific to PreK/K SIRI participants were defined according to what participants will understand (knowledge), be able to do (skills), and be willing to do (dispositions). PreK/K SIRI was also designed to align with the core curriculum for preschool educators developed by ODE as well as state early learning content standards for language arts. The program seeks to make changes in practice so that providers/teachers more effectively incorporate Ohio's early learning standards into their programs.					
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X*	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other - Licensing Changes		X
Evaluation methods and design			Yes	X	No
The University of Cincinnati, Evaluation Services Center, conducted a process evaluation of SIRI from 2005 to 2007. Research questions pertaining specifically to SIRS pre-K/K included:					
<ul style="list-style-type: none"> • Is SIRI Pre-K/K content grounded in the research and theory on early childhood literacy acquisition and development? • How well is implementation fidelity maintained across regions for SIRI programs serving a K-12 audience and across modules and sessions for SIRI Pre-K/K? • To what degree do SIRI Pre-K/K participants report changes in practice that reflect research-based literacy instruction that is linked to Ohio's early learning standards? • To what degree do SIRI Pre-K/K participants attribute changes in practice to their professional development experiences? 					

Pre-K/K State Institutes for Reading Instruction (SIRI) (*continued*)

Process evaluation findings	Yes	X	No	
<p>The evaluators found that PreK/K SIRI was based on clearly articulated philosophical and instructional frameworks. All content and instruction were centered on the four themes of early childhood described above and there was alignment with the core curriculum for preschool educators developed by ODE and State early learning content standards for language arts. Evaluators also determined that learning objectives and relevant vocabulary for each module, as well as for each session, were clearly articulated in instructor and participant materials. The consistent use of this instructional framework helped to ensure fidelity of instructional sequencing and overall content for PreK/K SIRI across instructors and participant groups.</p> <p>The analysis revealed that participants with less than five years' experience scored significantly lower on both the pre-and post-assessments but also showed significantly greater improvement pre- to post-assessment than participants with more experience. PreK/K SIRI participants were weak in their knowledge about standards: many missed both the basic knowledge and application questions. Currently, only Module 1 covers standards to any depth, yet familiarity and understanding of early learning content standards is assumed for Modules 2-7. Given the demonstrated lack of understanding about standards, the evaluators suggested a need to embed explicit learning and connections to standards in all seven PreK/K SIRI modules. The evaluation did not include changes in practice because the program was still in the initial pilot stages during the evaluation.</p>				
Outcome evaluation findings	Yes		No	X
Contact				
Sandy Miller, Director, Office of Early Learning and School Readiness, Ohio Department of Education, 614-728-5116				
Date information collected				
6/19/08				

CCR&R = Child Care Resource & Referral; ELL = English language learner; FTE = full-time equivalent; HBC = home-based care; IT = infant toddler

OKLAHOMA

Name of initiative	Cherokee Connections Relative Provider Child Care Programs					
State	Oklahoma					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Cherokee Nation						
Dates of operation						
1992 - Present						
Funding						
CCDF, Cherokee Nation (funding amount not available)						
Description of initiative						
Cherokee Connections aims to improve the quality of care provided by relative caregivers by providing home visits, a language incentive program, and Play and Learn groups. The program conducts an assessment with caregivers during the first home visit, which is then used to guide technical assistance provided during subsequent visits. Financial incentives are offered for completion of various home visit focus areas. The initiative also offers quarterly support group meetings. The language program provides Cherokee speakers with a monetary incentive to teach the language to children in their care.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines	X	Online training	
	Peer support networks	X	Other - Financial incentives	X		
Content of services						
The home visiting component consists of four focus areas: health, safety, school readiness, and strengthening Cherokee Connections.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Cherokee language	X
Initiative intensity						
Monthly 1- to 2-hour visits; 3-hour meetings every three months						
Duration of services						
12 months						
Recruitment strategies						
The program receives referrals from the child care licensing departments and other programs within the Cherokee Nation. Fliers and mailings are also distributed. Many caregivers learn about the program by word of mouth.						

Cherokee Connections Relative Provider Child Care Programs (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Most caregivers are grandmothers.				
<i>Motivation for providing care</i>	Caregivers distrust center-based care and want to help out their families.				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Varies				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
In 2007-2008, 40 caregivers participated in the home visits.					
Child characteristics					
<i>Ages of children in care</i>	Most are under age 2.				
<i>Group size</i>	Two children on average				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Most caregivers provide full-time care.				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Full-time director, educator, Play and Learn specialist, language specialist				
<i>Staff qualifications</i>	The director has a master's degree in special education. Other staff have a CDA credential and classroom teaching experience.				
Materials (curricula, other materials, technology)					
The initiative uses the <i>Parents as Teachers Supporting Caregivers through Home Visits</i> curriculum. Materials include monthly curriculum packets as well as books and language CDs in the Cherokee language.					
Community partners					
Cultural Resource Center, Library, Smart Start, Health Department					
Fidelity standards					
Not available					
Other Versions					
None					
Logic model/Theory of change			Yes	X	No
Collection of program data/information			Yes	X	No
Some of the data are gathered from focus groups.					
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design			Yes	X	No
The program conduct Cherokee language pre/post test for both adults and children. There is also a pre/post test for the Play and Learn group. In addition, the Cherokee Nation conducts focus groups with participants.					
Process evaluation findings			Yes		No
Outcome evaluation findings			Yes	X	No
Findings from a 2005 survey of caregivers indicated that more than half reported reading to the children each day, and 90 percent had obtained CPR training (Hand 2006).					

Cherokee Connections Relative Provider Child Care Programs (*continued*)

Contact
Phyllis Yargee, Cherokee Nation Child Care and Development Resource and Referral, Manager, Phyllis-Yargee@cherokee.org, 918-453-5048
Date information collected
7/31//08

CCDF = Child Care and Development Fund; CDA = Child Development Associate; ELL = English language learner; HBC = home-based care; IT = infant toddler

OREGON

Name of initiative	Child Care Improvement Program (CCIP)					
State	Oregon					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Neighborhood House						
Dates of operation						
2000 - Present (moved to Neighborhood House in 2005)						
Funding						
City of Portland Bureau of Housing and Community Development (BHCD) and United Way (\$550,000); City of Portland Children's Investment Fund (funding amount not available); Social Venture Partners - Portland and Oregon Community Foundation (funding amount not available)						
Description of initiative						
The goals of CCIP are to improve the quality of family child care; strengthen family child care businesses; increase low-income families' economic stability and access to affordable, quality child care; and provide a model for a city-wide coordinated system of child care networks. The initiative consists of nine community-based family child care networks that provide monthly networking and training meetings, home visits, an annual conference, a \$300 annual resource grant for members, provider scholarships for classes and conference participation, a parent subsidy fund, and business consultants.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other - Parent subsidy fund	X		
Content of services						
The initiative content includes topics related to improving child care practices, child development, and managing a child care business.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Six 2-hour trainings; six 2-hour support groups/networking meetings; a minimum of four home visits; a full-day annual conference						
Duration of services						
Year round						
Recruitment strategies						
Most providers are recruited through word of mouth, although the initiative distributed fliers through local CCR&Rs.						

Child Care Improvement Program (CCIP) (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed or registered family child care providers				
<i>Other needs</i>	Some providers speak Russian, Spanish, or Somali as a first language.				
Number of caregivers enrolled					
The initiative served 120 family child care providers in 10 child care networks in 2007. In 2008, it had the capacity to serve 135.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Some children are English language learners.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 project coordinator, 9 network coordinators, 1 part-time administrative assistant, contract staff, contract evaluator, and business consultant				
<i>Staff qualifications</i>	Degrees in early childhood education and experience in child care				
Materials (curricula, other materials, technology)					
The initiative used the Family Child Care Environment Rating Scale (FCCERS) to assess quality. Members receive a \$300 resource grant.					
Community partners					
ROSE Community Development Corporation, Mt. Hood Community College Child Development and Family Support Programs					
Fidelity standards					
Not available					
Other versions					
The initiative was originally implemented by the Enterprise Foundation and the City of Portland Bureau of Housing and Community Development in 2000.					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		X
	Caregiver characteristics	X	Parent satisfaction with care		X
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design		Yes	X	No	
The initiative conducts an annual business survey with questions about how long providers have been in the field and duration of membership in the network; annual member focus groups with questions about successes, challenges, improvements, and advice for program; an annual parent satisfaction survey; and quality observations using the FCCERS.					
Process evaluation findings		Yes	X	No	
Not available					

Child Care Improvement Program (CCIP) (continued)

Outcome evaluation findings	Yes	X	No	
<p>The 2006-2007 95 percent of parents reported being satisfied with their child care arrangement; 68 percent of providers had been operating their child care business for more than four years; - 76 percent of providers who had been in the CCIP for three or more years reported increasing their income; 73 percent of providers reported making more than two improvements in their business practices; 88 percent of providers reported developing contracts with parents that specify policies and procedures, rates, hours of operation, and reasons for terminating child care arrangements. In addition, 40 families reported receiving a subsidy; 31 received an emergency subsidy and 9 received a student subsidy. Results of quality observations indicated that for the 57 providers with two or more observations, 47 percent of providers scored a 4.5 or higher on their first observation and 79 percent scored a 4.5 or higher on their second observation.</p>				
Contact				
Marilyn Goodman, Neighborhood House, CCIP Program Manager, mgoodman@nhweb.org, 503-524 3245				
Date information collected				
6/24/08				

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Great Beginnings Quality Child Care Project					
State	Oregon					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Mid-Willamette Valley Community Action Agency						
Dates of operation						
2007 - Present						
Funding						
Oregon Department of Human Services, Chemeketa Community College, and the Marion County Children and Families Commission (\$62,222 annually)						
Description of initiative						
<p>The goal of Great Beginnings is to prepare children to succeed in preschool or kindergarten by helping infants and toddlers to form healthy attachments, develop positive peer relationships, experience and regulate emotions, and safely explore their environment. The initiative is based on the assumption that family, friend, and neighbor caregivers may lack skills in creating learning environments for young children and lack training and support to strengthen the attachment between infants/toddlers and caregivers.</p> <p>The Project has three components. The first component offers home visits with incentives for participation, training and stipends for participating, and peer support. The second is 60 hours of professional development linked to the core knowledge categories of the Oregon Registry. Caregivers who completed all 60 hours of coursework qualify for Step 5 on the Oregon Registry. The third is promoting identification of children with special needs through caregiver training, screening, assessment, and discussions with parents observed concerns. The program also offers one-on-one consultation with caregivers and referrals for children and families with mental health needs through a Child Care Infant Mental Health Consultant.</p>						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other – Mental health consultation	X		
Content of services						
The content of training includes child development, behavior management, infant care, nutrition, literacy and language development, and working with parents.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Home visits (1 hour); Family, Friend, and Neighbor training (1 hour); mental health consultations by telephone (40 minutes); Training/Coursework (60 hours)						
Duration of services						
Not available						
Recruitment strategies						
The initiative distributed 600 brochures about the program and targeted providers on DHS-provided list of child care providers in Marion, Polk, and Yamhill Counties.						

Great Beginnings Quality Child Care Project (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers and regulated family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
In 2007-2008, 54 caregivers received home visits; 61 attended coursework; 29 accessed mental health consultation.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 5				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 mental health consultant; 1 family, friend, and neighbor consultant; and an unspecified number of coursework/training instructors				
<i>Staff qualifications</i>	Great Beginnings requires staff to have a bachelor's degree in early childhood development or early childhood/elementary education.				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Chemeketa Community College (training courses); Child Care Information Service (consultations)					
Fidelity standards					
Not available					
Other versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Marguerite Kenagy or Tami Goettsch, Marion County Commission on Children and Families, Marguerite_Kenagy@class.oregonvos.net or tgoettsch@co.marion.or.us, 503-588-7975					
Date information collected					
6/10/08					

DHS = Department of Human Services; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Family, Friend, and Neighbor Toolkit Project					
State	Oregon					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Oregon Child Care Resource & Referrals, SEIU, Oregon Department of Human Services						
Dates of operation						
2008 - Present						
Funding						
CCDF (\$145,160 for toolkits and \$36,000 for evaluation)						
Description of initiative						
The Family, Friend, and Neighbor Toolkit Project provides materials to family, friend, and neighbor caregivers who participate in orientation for Oregon's child care subsidy program.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X*	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The Oregon Commission on Children and Families contracted with the state of Michigan to combine Michigan's infant, toddler, and preschool R.E.A.D.Y. kits into a single kit. Kits are available in English and Spanish and includes information, materials, and learning activities to help children develop the language and literacy skills needed to enter school.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
One time distribution						
Duration of services						
One time distribution						
Recruitment strategies						
Kit are distributed to exempt family, friend, and neighbor caregivers at orientation sessions for the state's child care subsidy program. Orientations are provided at CCR&Rs.						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					

Family, Friend, and Neighbor Toolkit Project (*continued*)

Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Each kit contains a children's book, a pocket-sized book list, learning activities and reminder magnet, a music CD, a child development DVD, a booklet by I am Your Child, a child development ages and stages wheel, and other materials.					
Community partners					
Local CCR&Rs, county governments					
Fidelity standards					
Not available					
Other Versions					
The Family, Friend, and Neighbor Project in Multnomah County provides the kits to Spanish-speaking home-based caregivers during home visits.					
Logic model/Theory of change			Yes	X	No
The Family, Friend, and Neighbor Toolkit Project anticipates that as a result of participation in the initiative, caregivers will increase the number and frequency of literacy activities with children in their care, increase their use of community supports and resources, and experience a reduction in the isolation typically associated with providing home-based care.					
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design			Yes	X	No
The program conducted a pre/ post survey of literacy activities with 209 caregivers.					
Process evaluation findings			Yes		No
Outcome evaluation findings			Yes		No
Pre/post survey findings indicated that 46 percent caregivers reported reading to the children in their care more than 5 times a week at the post-test compared to 33 percent at the pre-test. At the post-test 85 percent of caregivers reported 11 or more children's books in the home compared to 77 percent at the pre-test. In addition, 74 percent of the caregivers reported having a library card at post-test, compared to from 72 percent at the pre-test.					
Contact					
Kim Cardona, Oregon Commission on Children and Families, Childhood Care and Education Specialist, kimberly_cardona@class.oregonvos.net, 503-378-5159					
Date information collected					
6/13/08					

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler; SEIU = Service Employees International Union

Name of initiative	Family, Friend, and Neighbor Orientations					
State	Oregon					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Oregon Child Care Resource & Referrals, SEIU, Oregon Department of Human Services						
Dates of operation						
January 2007 - June 2009						
Funding						
State General Fund through the Department of Human Services (\$537,000)						
Description of initiative						
Family, Friend, and Neighbor Orientations offered caregivers participating in the child care subsidy program information about reimbursement policies and procedures and qualifications for licensure. The program also provided toolkits to caregivers who completed the orientation.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Child Care Provider Orientations provided information on how to participate in the child care subsidy program; how to become eligible for an enhanced subsidy reimbursement rate; the SEIU union that represented exempt unlicensed family, friend, and neighbor caregivers; and information about how to enroll in the CACFP. In addition, the program distributed a toolkit developed by Oregon's Family, Friend, and Neighbor Toolkit Project.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other-Unionization	X
Initiative intensity						
One 90 minute session						
Duration of services						
One-time session						
Recruitment strategies						
Information about the orientation is provided to caregivers through local CCR&Rs.						

Family, Friend, and Neighbor (FFN) Orientations (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
The program was funded to orient 5,200 caregivers, but the number who participated was not available.				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Toolkits from the Family, Friend, and Neighbor Toolkit Project				
Community partners				
Not available				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Kim Cardona, Oregon Commission on Children and Families, Childhood Care and Education Specialist kimberly_cardona@class.oregonvos.net, 503-378-5159				
Date information collected				
6/13/08				

CACFP = Child and Adult Care Food Program; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler; SEIU = Service Employees International Union

Name of initiative	Family, Friend, and Neighbor Care Project					
State	Oregon					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Multnomah County Commission on Children, Families, and Community						
Dates of operation						
January 2008 - June 30, 2009						
Funding						
CCDF (\$30,000 for FY2008-2009)						
Description of initiative						
The Family, Friend and Neighbor Care Project provides training and a toolkit to family, friend, and neighbor caregivers who participate in child care subsidy program and to other family, friend, and neighbor caregivers as resources permit. Services include two home visits and consultation with a registered nurse who offers health consultation; literacy training; a kit for family, friend, and neighbor caregivers; and books valued at \$25.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Content includes health, safety, environmental safety, and literacy.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Two 1-hour sessions.						
Duration of services						
Two visits, with potential for a student nurse to make follow-up visits						
Recruitment strategies						
The contacts family, friend, and neighbor caregivers who participate in the child care subsidy program to offer services. If resources permit, the program offers services to other family, friend, and neighbor caregivers who do not participate in the subsidy system.						

Family, Friend, and Neighbor Care Project (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Most caregivers are related to the children in their care.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Most caregivers speak Spanish as a first language.				
Number of caregivers enrolled					
The program anticipated enrolling 100 caregivers that by June 30, 2009.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 part-time registered nurse				
<i>Staff qualifications</i>	Must be a registered nurse and speak Spanish.				
Materials (curricula, other materials, technology)					
The program distributes the state's family, friend, and neighbor toolkit and selected children's books to caregivers.					
Community partners					
Multnomah County Library, CCR&Rs					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X	
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services	X	Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Elena Emlen, CHR - MCCFC, elana.s.emlen@co.multnomah.or.us , 503-988-5859					
Date information collected					
6/11/08					

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

PENNSYLVANIA

Name of initiative	Better Kid Care Program					
State	Pennsylvania					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC	X	Not Targeted to HBC	
Service provider who implemented the initiative						
Penn State Cooperative Extension						
Dates of operation						
State date not known - Present						
Funding						
Pennsylvania Department of Public Welfare, Office of Child Development (funding amount not available)						
Description of initiative						
The goal of the Better Kid Care Program is to improve the availability, accessibility, and quality of child care. The program offers an informational web site, training workshops via satellite broadcast, distance education units via video, on-site training, and a telephone help line. The program also offers an orientation for home-based caregivers; the training meets Keystone STARS' core series training requirements.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines	X	Online training	X
	Peer support networks		Other			
Content of services						
The content includes information on operating a child care business, supporting children's development, meeting health and safety requirements, and working with parents. Information is offered on topics such as activities to do with children, language and literacy, and behavior management. The program also provides information and guidance about obtaining a CDA credential.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Varies by activity						
Duration of services						
Year round						
Recruitment strategies						
Not available						

Better Kid Care Program (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed child care providers and exempt family, friend and neighbor caregivers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
Not available					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Some workshops are based on workshops developed by the Michigan Better Kid Care Program.					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	No	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Better Kid Care Program website: http://betterkidcare.psu.edu/index.html					
Date information collected					
10/2/08					

CDA = Child Development Associate; ELL = English language learner; HBC = home-based care; IT = infant toddler; STARS = Standards, Training/Professional Development, Assistance, Resources, and Support

Name of initiative	YMCA Family Child Care Network Accreditation Initiative					
State	Pennsylvania					
Initiative category	Support for Accreditation					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
YMCA Family Child Care Network, YMCA of Philadelphia and Vicinity						
Dates of operation						
1995 - Present						
Funding						
Pew Charitable Trust, William Penn Foundation, Department of Public Welfare, United Way of Southeastern Pennsylvania, Fleet Foundation, Disney, and Philip Morris Foundation (funding amount not available)						
Description of initiative						
The goal of the Accreditation Initiative is to licensed family child care providers in meeting the requirements for NAFCC accreditation. The program provides training, technical assistance, and access to resources needed to meet prerequisites for accreditation also provides assistance enrolling in a CDA program.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
The content of training and technical assistance aligns with the Keystone STARS Performance Standards and the NAFCC accreditation requirements.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Monthly site visits and weekly training sessions						
Duration of services						
Up to 24 months						
Recruitment strategies						
Providers are frequently referred by city licensing agencies, state registration agencies, the Women's Business Development center, and other family child care providers.						

YMCA Family Child Care Network Accreditation Initiative (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available.			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
The Accreditation Initiative enrolls approximately 150 providers annually.				
Child characteristics				
<i>Ages of children in care</i>	90 percent of children are 6 months to 2 years old			
<i>Group size</i>	85 percent of providers care for five to six children			
<i>Characteristics (ELL, special needs)</i>	A small percentage of children in care are English language learners. Eleven providers care specifically for children with special needs.			
Care characteristics				
<i>Schedule and intensity of care</i>	Most providers offer care Monday through Friday, 6:00 a.m. to 6:00 p.m.			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	2 full-time staff			
<i>Staff qualifications</i>	Associate's degree in early childhood education or development or a CDA credential			
Materials (curricula, other materials, technology)				
Staff use several curricula and resources to guide training workshops and site visits, including <i>Creative Curriculum</i> and <i>High/Scope</i> .				
Community partners				
Delaware Valley Association for the Education of Young Children				
Fidelity standards				
Trainers are approved through the Pennsylvania state professional quality assurance program.				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Lola M. Rooney, YMCA Accreditation Initiative, YMCA Family Child Care Network, YMCA of Philadelphia and Vicinity, Director, Early Childhood Education, lrooney@philaymca.org, 215-963-3786				
Date information collected				
8/8/08				

CDA = Child Development Associate; ELL = English language learners; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care

RHODE ISLAND

Name of initiative	Ready To Learn Providence (R2LP)					
State	Rhode Island					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC	X	Not Targeted to HBC	
Service provider who implemented the initiative						
Ready to Learn Providence						
Dates of operation						
HeadsUp Reading: 2004 - Present; Club: 2005 - Present; Mind in the Making: 2006 - Present; Early Literacy curriculum course: 2008 - Present						
Funding						
Early Childhood Educator Professional Development (ECEPD) Grant and United Way (funding amount not available)						
Description of initiative						
The goal of the initiative is to improve caregivers' ability to support children's school readiness, especially literacy development. The initiative consists of several components. HeadsUp! Reading, developed by the National Head Start Association, focuses on early literacy and aims to provide early childhood educators with research-based content specifically designed to promote school readiness. The Early Literacy Curriculum, the companion course that follows HeadsUp! Reading, provides hands-on experience for early childhood educators in implementing a structured early literacy curriculum. As part of the ECEPD, caregivers can obtain college credit for both courses with the Community College of Rhode Island (CCRI) and can use the credits to count towards CCRI's certificate or associate's degree program. Mind in the Making, developed by the United Way, also focuses on literacy. In addition, a club for participants in HeadsUp! Reading offers training in conjunction with a recycling program that provides materials. In 2008, the initiative was also testing a Ready Families course that will offer six three-hour modules in the evening.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
All three components of the initiative focus on language and literacy.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
HeadsUp! Reading: 15 3-hour sessions (30 hours video, 15 hours discussion) in evenings Mind in the Making: Three 2-hour home visits and 12 2-hour workshop sessions Early Literacy Curriculum: 15 3-hour sessions						
Duration of services						
HeadsUp! Reading: 15 weeks (2008: 10 sections with three for family child care providers) Mind in the Making: 12 weeks (2008: four sections with three for family child care providers) Early Literacy Curriculum: 15 weeks (2008: 9 sections with three for family child care providers)						

Ready To Learn (R2LP) Providence (*continued*)

Recruitment strategies				
Caregivers are recruited through the Department of Children, Youth, and Family subsidy lists. Caregivers participated in the child care subsidy program receive a letter followed by a phone call. Participants receive a stipend of \$100 as an incentive for participation; all courses are free.				
Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Some providers speak Spanish as a first language.			
Number of caregivers enrolled				
In 2007, R2LP served 150 providers including 50 home-based caregivers.				
Child characteristics				
<i>Ages of children in care</i>	Ages 3 to 5			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Some children are English language learners.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	10 part-time staff and 30 AmeriCorps mentors			
<i>Staff qualifications</i>	Bachelor's degree preferred with training by National Heads-Up reading staff			
Materials (curricula, other materials, technology)				
The curricula include <i>HeadsUp! Reading</i> and <i>Mind in the Making</i> , as well as a locally-developed early literacy curriculum. Materials include 10 books if participants enroll in two courses.				
Community partners				
Community College of Rhode Island, Providence Public Library, Wheelock College				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics	X	Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
In 2007, the initiative began an external evaluation to examine the effects on children's literacy through pre/post tests with the Child/Home Early Language and Literacy Observation (CHELLO), the Peabody Picture Vocabulary Test (PPVT), and the Phonological Awareness Literacy Screening for Preschool (PALS Pre-K). The sample of 850 children included 100 in family child care. Post-tests were conducted in May and June, 2008.				

Ready To Learn (R2LP) Providence (*continued*)

Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
Not available				
Contact				
Leslie Gell, Ready to Learn Providence, lgell@provplan.org, 401-490-9960				
Date information collected				
6/23/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

SOUTH DAKOTA

Name of initiative	Family Child Care Professionals of South Dakota					
State	South Dakota					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Family Child Care Professionals of South Dakota						
Dates of operation						
2005 - Present						
Funding						
CCDF (\$800)						
Description of initiative						
The goal of the initiative is to enhance child care quality and reduce the isolation of home-based caregivers. The initiative, a professional association of family child care providers, has 320 members; approximately one-third are family, friend, and neighbor caregivers. It provides a variety of services including a 12-page monthly on-line newsletter; an on-line forum with a wide range of topics for members; an annual conference; and a mentoring program for caregivers who seek to become registered. Mentors receive 12 hours of training from the association. The association has also purchased books on literacy for providers.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other - Online newsletter and forum	X*		
Content of services						
The web site and the newsletter address a variety of topics ranging from child development to operating a child care business. The conference includes hands-on activities, and the mentoring program focuses on eight areas of interest related to providing child care.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Monthly newsletter; one-day annual conference; 4 hours in-home mentoring per month up to 24 hours						
Duration of services						
Year round						
Recruitment strategies						
Members are recruited through the web site, conferences, and word of mouth.						

Family Child Care Professionals of South Dakota (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Two-thirds of the members are registered family child care providers and one-third are exempt family, friend, and neighbor caregivers.			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
A total of 320 providers are members of the association. Approximately 130 to 190 providers attend the annual conference.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 12			
<i>Group size</i>	A maximum of 12 children for registered family child care providers, with 4 children under age 2			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Full-time, part-time, school-age care, shift work care			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	One part-time executive director; 18 mentors in 2008			
<i>Staff qualifications</i>	Master's degree in early childhood education			
Materials (curricula, other materials, technology)				
The initiative heavily on technology, using the web as the basis for a forum and its newsletters. It distributes books to members when funding is available.				
Community partners				
Not available				
Fidelity standards				
Not available				
Other Versions				
The mentoring training is based on the Minnesota Licensed Family Child Care Professional Organization training.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
* primary collection efforts	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X

Family Child Care Professionals of South Dakota (*continued*)

Contact
Dawn Wahl, Family Child Care Professionals of South Dakota, Director, dawn36@aol.com, 605-342-0573
Date information collected
9/5/08

CCDF = Child Care and Development Fund; ELL = English language learner; HBC = home-based care; IT = infant toddler

TENNESSEE

Name of initiative	Tennessee's Outstanding Providers Supported Through Available Resources (TN TOPSTAR)					
State	Tennessee					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Tennessee Family Child Care Alliance						
Dates of operation						
1999 - Present						
Funding						
CCDF (\$300,000)						
Description of initiative						
The goal of TOPSTAR is to reduce caregiver isolation, increase caregiver retention, and improve quality. TOPSTAR is a peer mentoring program. It includes 20 hours of one-on-one consultation and participation in local family child care support groups, scholarships to attend Tennessee's state family child care conference, and NAFCC membership scholarships.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
The topics of the support groups and home visits are designed to meet the needs of caregivers. Generally, however, CCR&R report cards drive support group topics.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Participants receive 20 hours of one-on-one in-person consultation from a peer mentor during a two-month period. They also attend local support groups, usually held four times per year..						
Duration of services						
One-on-one in-person consultation takes place during a two-month period. Once enrolled, providers are welcome to attend local support groups on an ongoing basis.						
Recruitment strategies						
Many providers are recruited by peers mentors who are visible leaders in their communities. Additionally, providers are referred by licensing staff, CCR&R staff, and local support groups and associations. TOPSTAR representatives also attend new provider orientation sessions offered by the Department of Human Services and share information with the providers about the project.						

Tennessee's Outstanding Providers Supported Through Available Resources (TN TOPSTAR) (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
TOPSTAR typically serves about 125 providers annually.				
Child characteristics				
<i>Ages of children in care</i>	Infants through age 9			
<i>Group size</i>	7 to 12 children, depending on licensing status			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	One full-time program director, 11 contracted regional representatives throughout the state, 50 to 75 peer mentors.			
<i>Staff qualifications</i>	Qualifications of TOPSTAR staff are not available. Mentors must be family child care or group home licensed providers for at least three years with a positive history of compliance, and have gone through Tennessee's Star Report Card Program Assessment for three consecutive years. They must maintain a positive Department of Human Services history of compliance and be 2- or 3-start providers. In addition, they must provide documentation of completion for a 30-hour comprehensive family child care training, be NAFCC accredited or in the process of becoming accredited, and be an active member of a local family child care support group or network. Finally, mentors must obtain at least three of Tennessee Family Child Care Association's Professional Development 5-star awards.			
Materials (curricula, other materials, technology)				
Not available				
Community partners				
CCR&Rs; Department of Human Services; Tennessee Early Childhood Training Alliance				
Fidelity standards				
Not available				
Other Versions				
The project is based on a Minnesota program. Initially staff members from Minnesota were brought in to train the mentors and staff. For the past seven years all training has been done in-house.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics	X	Parent experience with care	
	Care characteristics	X	Child outcomes	
	Caregiver satisfaction with services		Other	

Tennessee's Outstanding Providers Supported Through Available Resources (TN TOPSTAR) (*continued*)

Evaluation methods and design	Yes		No	X
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes		No	X
Contact				
Daphne Cole, Project TOPSTAR, Program Director, tutu@charter.net, 931-381-3485				
Date information collected				
6/9/08				

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler; NAFCC = National Association of Family Child Care

TEXAS

Name of initiative	Registered Family Home Development Project					
State	Texas					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Family Service Association						
Dates of operation						
2001 - Present						
Funding						
City of San Antonio (\$100,000)						
Description of initiative						
<p>The goal of the Registered Family Home Development Project is to increase the availability of registered and licensed family child care in San Antonio, Texas. The program provides services to individuals who want to open or improve a registered family child care home. The core services are training and one-on-one mentoring. Individuals who are not registered agree to complete requirements to become a registered family child care provider as a term of acceptance into the program. All participants are required to take at least 16 hours of pre-service training that meets state licensing requirements. Providers who are already licensed may use this training toward meeting state requirements for maintaining licensure. At the conclusion of the training, each participant is linked to an experienced registered family child care provider who serves as a mentor (at a ratio of one mentor for three to five participants). Mentors provide consultation that includes a needs assessment selection of \$150 to \$200 worth of materials and equipment based on the needs identified in the assessment. Other services include a resource library and van, networking opportunities, and monthly meetings with Family Service Association staff.</p>						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
<p>Content of training includes the basic of operating a family child care program; literacy and curriculum in a multi-age setting, activities for children; business practices, management, and financial literacy; professionalism and positive communication; an overview of accreditation requirements; and an introduction to community resources such as the food program, state QRS (for example, Texas Rising Star), and state professional development opportunities.</p>						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition		Activities for children	X	Business practices	X*
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
A minimum of 16 hours of classroom training is offered on Saturday mornings for 4 hours per session.						
Duration of services						
Duration of services is approximately 2 to 3 months. Training lasts one month and mentoring activities last approximately 4 to 8 weeks. Participants can access the resource van indefinitely.						

Registered Family Home Development Project (continued)

Recruitment strategies				
Participants are recruited through staff presentations at child care licensing orientations and home-based child care association meetings as well as through fliers and mailings.				
Caregiver characteristics				
<i>Relationship to children</i>	Some caregivers are related to the children in care. They are typically grandparents and aunts.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Enrolled caregivers are seeking to become licensed.			
<i>Training and education</i>	Most of the providers have a high school education.			
<i>Regulation status</i>	Exempt family, friend and neighbor caregivers and registered family child care providers			
<i>Other needs</i>	Some caregivers do not speak English as a first language.			
Number of caregivers enrolled				
The program is funded to enroll 10-20 caregivers per program cycle.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 4			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Some of children are English Language Learners.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Child care to help working parents			
Staff characteristics				
<i>Number of staff</i>	1 full-time project coordinator and contractual staff to lead training sessions and provide mentoring			
<i>Staff qualifications</i>	The project coordinator must have at least an associate's degree in early childhood or related social services field with a minimum of four years experience. Contract instructors and mentors must have expertise in early childhood and be licensed family child care providers with several years of experience.			
Materials (curricula, other materials, technology)				
\$150 to \$200 worth of materials and equipment based on the needs identified by a needs assessment				
Community partners				
Not available				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X*	Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X

Registered Family Home Development Project (*continued*)

Contact
Sue Hancock, Manager, Parent & Children's Resources/Family Service Association, shancock@family-service.org, 210-431-7500
Date information collected
8/11/08

ELL = English language learner; HBC = Home-based care; IT = infant toddler; QRS = quality rating system

Name of initiative	Play and Learn San Antonio					
State	Texas					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Family Service Association						
Dates of operation						
October 2007 - Present						
Funding						
Not available						
Description of initiative						
<p>The goal of the Play and Learn program is to offer providers developmentally appropriate activities for the children in their care and to increase providers' knowledge of activities that will improve children's school readiness. The Play and Learn program in San Antonio is modeled after a similar program in Seattle, Washington. The San Antonio program is targeted to exempt family, friend, and neighbor caregivers who participated in the child care subsidy system, but it is open to any home-based caregiver. Play and Learn sessions are offered in all city council districts and rotate among various locations throughout the city. Each session is led by two facilitators, one who speaks English and another who speaks Spanish. The sessions include an hour and 15 minutes of play in centers with cooperative clean up, 15 minutes of circle time, half an hour for lunch, and half an hour to help caregivers access resources. Facilitators offer resource van materials for caregivers to check out and in on a monthly basis. The Family Service Association also produces a quarterly newsletter entitled <i>Play & Learn Notes</i> and a calendar of Play and Learn events.</p>						
* <i>primary strategy</i>	Training through workshops		Play and Learn programs	X*	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
Content focuses on preparing children for kindergarten through purposeful play activities that promote learning and, how to help children learn in a safe and nurturing environment.						
* <i>primary content areas</i>	Health and safety		Child development	X	Working with parents	
	Nutrition		Activities for children	X*	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Play and Learn sessions are held three days per week for 2.5 hours per session.						
Duration of services						
Each cycle of Play and Learn sessions last between 9 and 12 months.						
Recruitment strategies						
The program mails information about the Play and Learn groups to a list of family, friend, and neighbor caregivers who participate in the child care subsidy program.						

Play and Learn (San Antonio) (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Caregivers are typically grandparents or aunts.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers				
<i>Other needs</i>	Many caregivers do not speak English as a first language.				
Number of caregivers enrolled					
The program is funded to accommodate 30 caregivers per session and serves between 90 and 120 caregivers per week.					
Child characteristics					
<i>Ages of children in care</i>	14 months to 5 years				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Many children are English language learners.				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 project director, 1 early care consultant, 2 contract Play and Learn facilitators				
<i>Staff qualifications</i>	One facilitator speaks English and the other speaks Spanish.				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Faith-based organizations provide space for the sessions.					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X	
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services	X*	Other		
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Sue Hancock, Manager, Parent & Children's Resources/Family Service Association, shancock@family-service.org, 210-431-7500					
Date information collected					
8/11/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler

UTAH

Name of initiative	Family Provider Start-Up Grants					
State	Utah					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Utah Department of Workforce Services, Office of Work and Family Life, administered by the state's network of CCR&Rs						
Dates of operation						
1998 - Present (Part 2 grants added in 2005 and T.E.A.M. Grant added in 2007)						
Funding						
State of Utah (\$110,000)						
Description of initiative						
<p>The primary goals of the Family Provider Start-Up Grants program are to help those interested in providing care for children become fully regulated and adhere to the highest quality standards; provide support for accreditation; and introduce newly regulated providers to developmentally appropriate materials and practices. The program offers grants to family child care providers at three stages of licensure:</p> <p>Stage 1: Grants of up to \$250 can be awarded to new providers entering the field who seek to become fully licensed, or family child care providers seeking to upgrade their license from registered (subject to less stringent regulation) to licensed. Providers can receive reimbursement for expenses such as child care licensing fees, business license fees, fire inspection fees, fire extinguishers, smoke detectors, first aid kits, first aid and CPR training, food handler's permit training, the cost of the provider's TB test, the 5-hour Sharing the Caring CCR&R initial recruitment training for new family providers, or other approved items.</p> <p>Stage 2: Part 2 grants of \$250 are available to family child care providers who have been licensed for one year. Providers learn the basic elements of quality included in the NAFCC Accreditation Standards. Following an observation visit, the providers receive an additional \$250 grant, which must be used toward purchases that support quality-related measures defined in the NAFCC Accreditation Standards. Finally, providers must complete two out of the three career ladder classes to receive the grant. Providers may elect to use a portion of their grant to cover the registration fee for any of these career ladder courses.</p> <p>Stage 3: In the third year of licensure, family child care providers are eligible for T.E.A.M awards. Providers receiving this grant must complete a 40-hour training endorsement from the Utah Career Ladder as well as completing the Family Child Care Endorsement in the first year of licensure. Once providers complete the 40 hours, they can also select a toy package. Providers may apply for the T.E.A.M. awards every year.</p>						
* <i>primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring. or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Grants	X*		

Family Provider Start-Up Grants (*continued*)

Content of services						
Stage 1 content covers basic topics related to providing child care. Stage 2 content includes early childhood healthy care, child development: ages & stages, and learning in the early years.. Stage 3 course content includes a wide range of topics related to child development. For example, a Touch Points course with the support of the Touch Points Institute is available.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Funding	X*
Initiative intensity						
Stage 1: 5 to 10 hour CCR&R initial recruitment training; Stage 2: 1-hour observation visit; Stage 3: 40 hours of training						
Duration of services						
3 years						
Recruitment strategies						
Not available						
Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	All participants are registered or licensed family child care providers who seek a higher level of professionalization.					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Registered and licensed family child care providers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
Not available						
Child characteristics						
<i>Ages of children in care</i>	Not available					
<i>Group size</i>	Not available					
<i>Characteristics (ELL, special needs)</i>	Not available					
Care characteristics						
<i>Schedule and intensity of care</i>	Not available					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	7 recruitment and retention Specialists in CCR&Rs' recruitment departments					
<i>Staff qualifications</i>	Not available					
Materials (curricula, other materials, technology)						
A choice of one of six toy packages						
Community partners						
Utah's six CCR&Rs						
Fidelity standards						
Not available						

Family Provider Start-Up Grants (*continued*)

Other versions				
Not available				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	No
<i>* primary collection efforts</i>	Number of participants			
	Caregiver characteristics	X*		
	Child characteristics			
	Care characteristics			
	Caregiver satisfaction with services			X
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Lynette Rasmussen, Office of Work and Family Life, Director, lrasmussen@utah.gov, 801-526-4340				
Date information collected				
9/11/08				

CCR&R = Child Care Resource & Referral; CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler; NAFCC = National Association of Family Child Care

VERMONT

Name of initiative	Starting Points Family Child Care Networks					
State	Vermont					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Agency of Human Services						
Dates of operation						
1996 - Present						
Funding						
CCDF (\$130,000)						
Description of initiative						
The goal of Starting Points Family Child Care Networks is to enhance the quality of home-based child care for infants and toddlers. The initiative grew out of a Carnegie Foundation study indicating that infant-toddler care might be improved through the creation of family child care networks. The initiative funds CCR&Rs in 12 counties to coordinate networks, although family child care providers serve as the leaders. Networks offer get-togethers as well as trainings that are approved through Northern Lights, the state's career development system. In addition, the networks provide opportunities for informal mentoring through conversation as well as a variety of resources such as books and materials.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X*	Other			
Content of services						
The content ranges from child development to managing child care businesses.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X*
	Nutrition	X	Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Varies						
Duration of services						
Year round						
Recruitment strategies						
Not available						

Starting Points Family Child Care Networks (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Providers care for their own children as well as children who are not related.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Varies from high school to undergraduate and graduate degrees.				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
In 2008, approximately 600 providers were enrolled in 60 networks with an average of 6 to 30 members.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Five children not related to the provider				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 full-time administrator and the CCR&R coordinators in 12 counties				
<i>Staff qualifications</i>	Master's degree in early childhood education				
Materials (curricula, other materials, technology)					
The initiative does not use a specific curriculum. Materials include books and art supply closets.					
Community partners					
CCR&Rs					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other - Self-report on retention		X
Evaluation methods and design			Yes	No	X
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	No	X
Contact					
Jan Walker, Agency of Human Services, Child Care Workforce Director, jan.walker@ahs.state.vt.us, 802-241-2198					
Date information collected					
8/27/08					

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

VIRGINIA

Name of initiative	Infant Toddler Family Day Care					
State	Virginia					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Infant Toddler Family Day Care						
Dates of operation						
1983 - Present						
Funding						
Fairfax County Consolidated Funding Pool (\$70,000.00 annually); CACFP (\$110,000), Morris & Gwelyn Cafritz Foundation (\$25,000), parent registration fees (funding amount not available)						
Description of initiative						
The goal of Infant Toddler Family Day Care is to improve child care quality and increase the number of licensed family child care providers. The agency is a private, non-profit organization that recruits, screens, trains, and licenses individuals to set up independent high-quality family child care businesses to provide child care to infants, toddlers, and preschoolers. The program integrates the program English as a Second Language (ESL) and cultural training because of the ethnic makeup in the area. They provide comprehensive ongoing business support that includes billing, collections, liability insurance, and technical assistance. The system also serves as a resource and referral agency for parents seeking child care.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs	X	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education	X	Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X	Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
Training topics include medical administration training, CPR, first aid, child development, play and temperament, interviewing skills, best business practices, and communication skills.						
Virginia also has guidelines for early childhood education that consists of three tracks:						
<ol style="list-style-type: none"> 1. Child Development Educator: Curriculum from Child Development Associate Credential (CDA) which requires 120 hours of training, professional portfolio and site visit. 2. Infant Toddler Certificate: five courses on community college level. All tuition and books are paid for by Infant Toddler Family Day Care and tutoring is provided. 3. Associates Degree in Early Childhood Development 						
There is no timeframe for completing the track. Infant Toddler Family Day Care is going to eventually align track system with the quality rating system.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - ESL training	X

Infant Toddler Family Day Care (*continued*)

Initiative intensity				
There are approximately 85 hours of pre-service training which include 12 hours of medical administration training (CPR, First Aid), child development, play and temperament, interviewing skills, and communication skills. After this classroom training, there is a mandatory 40 hours of "internship" training in the home of a caregiver who has an Infant Toddler Certificate, two years of experience, and has demonstrated excellence in the field.				
Training cycles are offered four times a year. Class sizes are kept to fewer than 20 participants and the maximum class time is 10 hours in one session with a competency exam at the end.				
Duration of services				
12 months				
Recruitment strategies				
Because Infant Toddler Family Day Care has been in existence for so many years, its principal recruitment strategy is word of mouth. In fall 2008, they had a waiting list for caregivers to enter training.				
Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care and exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Many participants speak languages other than English at home.			
Number of caregivers enrolled				
Currently there are 130 caregivers enrolled in the program.				
Child characteristics				
<i>Ages of children in care</i>	6 weeks - 3.5 years			
<i>Group size</i>	Providers can have a maximum of five children (including their own) and no more than two can be infants up to 12 months. This can vary depending on the regulations in the county where providers are located.			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	11: 4 full-time staff (Executive Director, Associate Director, staff liaison for Marines contract, bookkeeper); 7 part-time staff (4 home visitors, 1 intake coordinator, 1 Child Care and Adult Food Program coordinator, 1 accountant)			
<i>Staff qualifications</i>	Employees must have degrees in early childhood development.			
Materials (curricula, other materials, technology)				
Infant Toddler Family Day Care provides CPR training, first aid training, child development classes, play and temperament, interviewing skills, and communication skills. The first track for early childhood educators also uses a CDA curriculum.				
Community partners				
Northern Virginia Community College				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change				
	Yes		No	X

Infant Toddler Family Day Care (*continued*)

Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X			
	Caregiver characteristics				X
	Child characteristics				
	Care characteristics				
	Caregiver satisfaction with services				X
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Ileene Hoffman, Infant Toddler Family Day Care, Executive Director, ihoffman@infanttoddler.com, 703-352-3449 x 101					
Date information collected					
9/09/08					

CACFP = Child and Adult Care Food Program; CDA = Child Development Associate; CPR = cardiopulmonary resuscitation; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Fairfax County Preschool Pilot Initiative					
State	Virginia					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Fairfax County Department of Family Services/Office for Children						
Dates of operation						
June 2007-June 2008						
Funding						
Virginia Department of Education (\$500,000)						
Description of initiative						
The goal of the initiative is to increase school readiness of 4-year-old children. Mentors trained in the Portage home visiting curriculum provided 1.5 to 2-hour home visits at least twice a month to family child care providers and child care centers caring for at risk 4-year-old children. Providers were also invited to participate in training workshops on specific topics, such as anti-bias and working with mixed-age groups of children.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the visits followed needs identified in the Family Child Care Rating Scale (FCCERS).						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X*	Business practices	
	Language and literacy	X*	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Home visits at least twice monthly for 1.5 to 2 hours						
Duration of services						
10 months						
Recruitment strategies						
The program staff identified neighborhoods with low-income 4-year-old children and then identified providers in those communities who had been to some training—the school readiness certificate program, for example. In addition, the program sought feedback from CCR&R, licensing and permitting staff. Selected providers were invited to participate in the program.						

Fairfax County Preschool Pilot Initiative (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed and permitted family child care providers and child care centers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
The goal was 15 family child care providers and 50 child care centers. The actual number of family child care provider enrolled was 10 providers caring for 15 children.					
Child characteristics					
<i>Ages of children in care</i>	4 years olds				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 full-time coordinators and 2 full-time mentors				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
The initiative used the Portage curriculum, which includes ongoing child assessments. It is available in English and Spanish. The initiative also provided materials to providers depending on their needs.					
Community partners					
Not available					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	X	No
Virginia Polytechnic Institute and State University is conducted a pre/post evaluation using the Phonological Awareness Literacy Screening for Preschool (PALS Pre-K) and a numeracy assessment designed for the evaluation. In addition, an independent evaluator conducted pre/post quality observations using the FCCERS.					
Process evaluation findings			Yes	No	X
Outcome evaluation findings			Yes	X	No
Contact					
Betsi Closter, Fairfax County DFS/Office for Children, Child Care Program Administrator, Betsi.Closter@fairfaxcounty.gov , 703-324-8053					

Fairfax County Preschool Pilot Initiative (*continued*)

Date information collected
7/24/08

CCR&R = Child Care Resource & Referral; ELL = English language learner; FCCERS = Family Child Care Environment Rating Scale; HBC = home-based care; IT = infant toddler

Name of initiative	Play Partners					
State	Virginia					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
Children, Youth and Family Services						
Dates of operation						
1997 - Present						
Funding						
City, County, United Way, private foundation grants and individual donors (\$28,000 annually)						
Description of initiative						
Play Partner trains volunteers who visit the home-based caregivers and child care centers for one hour a week to read with the children in care. Volunteers read a “story of the month” with the children and then engage in enrichment activities that focus on teaching and extending themes from the book. The volunteers focus on one book for four weeks. Volunteers model methods for providers to use to enhance reading activities in the child care setting. At the end of the month, when the book is completed, volunteers give each child and provider a copy of the book to keep. The initiative also provides mini-kits for the summer months when the visits do not take place. Volunteers only visit homes of caregivers that serve four or more children, with at least two of the children being at least 2 years or old. Caregivers must be licensed or registered family child care providers and serve low-income children.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
These activities highlight language and literacy as well as concepts such as colors and numbers.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X*	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
1-hour, weekly visits						
Duration of services						
Nine months						
Recruitment strategies						
Children, Youth and Family Services’ Child Care Quality Program refers child care programs to Play Partners. Some providers also learn about the program through word of mouth.						

Play Partner Program (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Most providers are not related to the children in their care.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed or registered family child care providers and child care centers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
In 2008, 9 licensed family child care providers and 3 child care centers participated in Play Partners.				
Child characteristics				
<i>Ages of children in care</i>	A minimum of two of the children in care must be at least 2 years old or older.			
<i>Group size</i>	4 or more			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	1 part-time director and 1 half-time educator			
<i>Staff qualifications</i>	Bachelor's degree in a related field, experience with young children			
Materials (curricula, other materials, technology)				
Materials include books, enrichment activities, and mini-kits.				
Community partners				
Community churches, YMCA, Salvation Army, and community preschools				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change		Yes	X	No
Children and family child care providers are exposed to children's books and age-appropriate enrichment activities, helping providers offer a variety of enrichment activities and increasing children's interest in books.				
Collection of program data/information		Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	X
	Caregiver satisfaction with services		Other - Number of books given to children and caregivers; volunteer hours	X
Evaluation methods and design		Yes	X	No
In 2007-2008, Play Partners conducted a pre/post survey with parents, volunteers, and providers. Approximately half of the children in care in fall 2007 were in care in spring 2007 (85 of 173 children). The parent survey included questions such as "Does your child use new words he or she heard in Play Partners stories, games, and activities?" and "Does your child seem more interested in books and being read to since Play Partners began?" All volunteers completed surveys. Six of the 12 child care providers completed surveys.				

Play Partner Program (*continued*)

Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes	X	No	
Seventy-nine percent of parents who completed the pre-post survey reported that their child used new words he or she heard in Play Partners stories, games, and activities. All but one volunteer reported observing an improvement in the interest and attention of the children during reading time from fall to spring. Providers who completed the survey reported that participation in Play Partners helped them with activities ideas for their group of children, such as songs, counting activities, and retelling stories. Five of the six reported that Play Partners activities helped the children learn new words.				
Contact				
Jacki Bryant, Children, Youth, and Family Services, Executive Director, jbryant@cyfs.org , 434-296-4118 x231				
Date information collected				
8/13/08				

ELL = English language learners; HBC = home-based care; IT = infant toddler

WASHINGTON

Name of initiative	Catholic Family and Child Service (CFCS)					
State	Washington					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Catholic Family and Child Service						
Dates of operation						
1990-Present (Building Blocks); 2008-Present (Play & Learn)						
Funding						
The State Department of Early Learning (funding amount not available) federal funding and private grants (approximately \$80,000 for Building Blocks and \$100,000 for Play & Learn)						
Description of initiative type						
CFCS provides licensed family child care providers with the Building Block curriculum as a basic introduction to quality child care and a Play & Learn program for seasonal agricultural workers whose children are in family, friend, and neighbor care. Building Blocks including 16 hours of workshop training and four hours of mentoring. Training workshops are offered separately in English and Spanish. The training series is also available on a DVD.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs	X	Consultation, mentoring, or coaching	X
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	X
	Home visiting	X	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the Play and Learn groups focuses on how children learn through play and activities to support this learning. Building Blocks workshops cover the following topics: professionalism, behavior management, health and safety, child development, parent communication, activities, special needs, child abuse awareness, business practices, provider/child interaction, environments, and policies and procedures.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition		Activities for children	X	Business practices	X
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - Child abuse and neglect	X
Initiative intensity						
The Play and Learn groups meet twice weekly for 2 hours. The 20-hour training is offered two times per year. Classes are generally on two Saturdays for eight hours each, with the remainder of the training at a mentoring site. The 10 hours of additional training each year is offered once a month and there is also a yearly conference to earn the continuing education credits.						
Duration of services						
Year round						
Recruitment strategies						
CFCS is well known in the community; the primary recruitment strategy is word of mouth. CFCS also sends out quarterly newsletters to all child care providers and community partners in its network and fliers in English and Spanish.						

Catholic Family and Child Service (*continued*)

Caregiver characteristics						
<i>Relationship to children</i>	Not available					
<i>Motivation for providing care</i>	Not available					
<i>Interest in professionalizing</i>	Not available					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Licensed family child care providers and exempt family, friend and neighbor caregivers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
Annual enrollment is approximately 100 family child care providers for Building Blocks and 600 family, friend, and neighbor caregivers for Play & Learn.						
Child characteristics						
<i>Ages of children in care</i>	Birth to age 12					
<i>Group size</i>	Varies					
<i>Characteristics (ELL, special needs)</i>	Not available					
Care characteristics						
<i>Schedule and intensity of care</i>	Not available					
<i>Purpose of care</i>	Not available					
Staff characteristics						
<i>Number of staff</i>	4 full-time and 2 part-time staff					
<i>Staff qualifications</i>	Minimum of an associate's degree					
Materials (curricula, other materials, technology)						
None						
Community partners						
Head Start and school districts						
Fidelity standards						
Not available						
Other Versions						
Not available						
Logic model/Theory of change			Yes	X	No	
A logic model for <i>Building Blocks</i> is not available. However, CFCS developed a logic model for <i>Play & Learn</i> . Goals are to provide family, friend, and neighbor caregivers with resources, support, and connections to promote optimal development of the children in their care; to build connections, friendships, and a circle of mutual support among caregivers; and to instill in children and caregivers the love of lifelong learning so that children are healthy and ready for school and life.						
Collection of program data/information			Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)			
	Caregiver characteristics		Parent satisfaction with care			
	Child characteristics		Parent experience with care			
	Care characteristics		Child outcomes			
	Caregiver satisfaction with services		Other - Change in knowledge		X	
Evaluation methods and design			Yes		No	X
Process evaluation findings			Yes		No	X
Outcome evaluation findings			Yes		No	X
Contact						
Kim Ferguson, Catholic Family and Child Services, Program Manager, kferguson@cfcs.net, 509-662-6761 x4547						
Date information collected						
9/10/08						

ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	For the Love of Kids – Family, Friends, and Neighbor Child Caregiver Support Program					
State	Washington					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Chinese Information and Service Center						
Dates of operation						
2003 - Present						
Funding						
Children's Trust, Boeing Fly to the Future; private donations (approximately \$30,000 annually)						
Description of initiative						
The goal of For the Love of Kids is to improve child outcomes, increase caregiver knowledge, and reduce caregiver isolation. The program offers weekly Play and Learn groups, in which facilitators lead caregivers and children in structured activities and provide information to caregivers. Caregivers are also invited to classes, which provide more detailed information about child development and how children learn through play.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs	X*	Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks	X	Other			
Content of services						
Topics during the Play and Learn groups include child development and suggested activities caregivers can do at home with children. Weekly classes provide more detailed information about these topics, with an overall focus on learning through play.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	
	Nutrition	X	Activities for children	X*	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Play and Learn groups occur weekly for half an hour. Classes for caregivers occur weekly for two hours.						
Duration of services						
Play and Learn groups offered year round. Caregiver classes offered for seven weeks.						
Recruitment strategies						
Chinese Information and Service Center is a multi-purpose social service agency. It recruits caregivers who come to the agency for other services. It also advertises For the Love of Kids through fliers in churches, schools, and community other locations and through advertisements in local media.						

Caregiver characteristics						
<i>Relationship to children</i>	Approximately 85 percent of caregivers are grandparents.					
<i>Motivation for providing care</i>	Most caregivers want to provide care for their grandchildren.					
<i>Interest in professionalizing</i>	No interest among most caregivers					
<i>Training and education</i>	Not available					
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers					
<i>Other needs</i>	Not available					
Number of caregivers enrolled						
For the Love of Kids serves about 50 to 60 caregivers annually.						
Child characteristics						
<i>Ages of children in care</i>	2 to 4 year olds					
<i>Group size</i>	Not available					
<i>Characteristics (ELL, special needs)</i>	Most children are English language learners.					
Care characteristics						
<i>Schedule and intensity of care</i>	Most caregivers provide care daily from 7:00 a.m. through 6:00 p.m.; some provide care overnight.					
<i>Purpose of care</i>	Child care while parents work					
Staff characteristics						
<i>Number of staff</i>	5 part-time					
<i>Staff qualifications</i>	Play and learn facilitators have bachelor's degrees. Social workers have master's degrees in social work, psychology, or education. Training is provided by staff from Child Care Resources, the local CCR&R.					
Materials (curricula, other materials, technology)						
The Play & Learn groups use a curriculum developed by Child Care Resources in King County, Washington. The training curriculum was developed by the Chinese Information and Service Center.						
Community partners						
Child Care Resources, Seattle-King County Department of Public Health						
Fidelity standards						
Not available						
Other Versions						
Not available						
Logic model/Theory of change			Yes	X	No	
Collection of program data/information			Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)			
	Caregiver characteristics	X	Parent satisfaction with care			
	Child characteristics		Parent experience with care			
	Care characteristics	X	Child outcomes			
	Caregiver satisfaction with services	X	Other			
Evaluation methods and design			Yes	X	No	
For the Love of Kids was one of 14 Play & Learn groups included in a 2007 evaluation sponsored by Child Care Resources. However, findings from the evaluation were not specific to this program.						
Process evaluation findings			Yes		No	X
Outcome evaluation findings			Yes		No	X
Contact						
Hueiling Chan, Chinese Information and Service Center, Case Management Director, huelingc@cisc-seattle.org, 206-624-5633						
Date information collected						
8/8/08						

CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

Name of initiative	Building Blocks: Laying the Foundation for Quality Family Child Care™					
State	Washington					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
The Washington State Child Care Resource & Referral Network (WA CCR&R Network)						
Dates of operation						
1992 - Present						
Funding						
The development of the initial training model, Family-to-Family/Child Care Aware was funded by the Dayton Hudson Foundation. Delivery of the training has been funded through CCDF quality dollars as part of overall funding for the WA CCR&R Network. There is no longer a dedicated stream of funding specifically for this project.						
Description of initiative						
The goal of Building Blocks is to provide training to improve the quality of licensed family child care. Building Blocks is a 20-hour training course for new or prospective licensed family child care providers. Local CCR&Rs may partner with family child care associations to offer the training and mentoring. The 20-hour course is offered as a workshop or through a self-paced series of DVDs loaned by the CCR&Rs. After completing the course, the caregivers visit two to three "mentoring" sites to observe.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	X
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Training through videos	X		
Content of services						
The content of the training includes health and safety, business practices, nutrition, techniques for caring for mixed-age groups, developmentally appropriate practices, nutrition, meeting state licensing standards, positive discipline, and professionalism.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition	X	Activities for children		Business practices	X
	Language and literacy		Behavior management	X	Stress reduction	X
	Information about regulation or licensing	X	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
20 hours of training provided through a workshop series or a self-paced DVD and workbook						
Duration of services						
Twenty hours of training must be completed within six months of becoming a licensed family child care provider.						
Recruitment strategies						
Building Blocks recruits most participants during licensing orientation meetings.						

Building Blocks: Laying the Foundation for Quality Family Child Care™ (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Most participants are newly licensed family child care providers or caregivers who seek to become licensed.			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Licensed family child care providers or family, friend, and neighbor caregivers who seek to become licensed.			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Trainers receive a trainer's guide to help them structure the curriculum. They are encouraged to provide other relevant materials to participants. A self-paced DVD and workbook version of the training is also available.				
Community partners				
Local CCR&Rs may partner with family child care associations to offer the training and mentoring.				
Fidelity standards				
There are written standards for delivery of Building Blocks training classes.				
Other Versions				
Building Blocks was formerly called Family-to-Family/Child Care Aware as well as "Ready, Set, Go!" in some regions of the state.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	No
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	No
A statewide evaluation documenting participation and satisfaction was conducted in 2001.				
Process evaluation findings			Yes	No
Outcome evaluation findings			Yes	X
Contact				
Susan Yang Affolter, The Washington State Child Care Resource & Referral Network, Professional Development Coordinator, susan@childcarenet.org, 253-383-1735 x 25				
Date information collected				
6/26/08				

CCDF = Child Care and Development Fund; CCR&R = Child Care Resource & Referral; ELL = English language learner; HBC = home-based care; IT = infant toddler

WISCONSIN

Name of initiative	Satellite Family Child Care					
State	Wisconsin					
Initiative category	Support for Accreditation					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Satellite Family Child Care						
Dates of operation						
1983 - Present						
Funding						
City of Madison, 80 percent; United Way, 10 percent, user fees 10 percent (\$250,000)						
Description of initiative						
The goal of the initiative is to help family child care providers become accredited. Satellite provides home visits, monthly support groups, and three annual conferences to help family child care providers in Madison, Wisconsin attain and maintain accreditation with the Madison Family Child Care Accreditation standards. There are three levels of accreditation: affiliated; associated; and accredited (which is also consistent with NAFCC Standards). Members who pay an annual \$100 fee can obtain kits and use a lending library as well as obtain loans of large equipment such as rocking boats and quadruple strollers. In addition to working with providers, the initiative offers referrals and mediation for parents who pay a \$100 annual membership fee.						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks	X	Other - Annual conferences	X		
Content of services						
The content focuses on child development and early childhood education.						
<i>* primary content areas</i>	Health and safety	X	Child development	X*	Working with parents	X
	Nutrition	X	Activities for children	X	Business practices	X
	Language and literacy	X	Behavior management	X	Stress reduction	X
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Minimum of four home visits annually; monthly support groups; annual conferences						
Duration of services						
Year round						
Recruitment strategies						
Satellite uses brochures, mailings to newly licensed providers, contacts with area support groups, information sharing with other agencies, and presentations about services in child care courses to recruit providers.						

Satellite Family Child Care (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	The providers aim to become accredited.				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed and /or county-certified family child care providers				
<i>Other needs</i>	Some members speak Spanish.				
Number of caregivers enrolled					
The initiative served 93 providers in 2008.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 12				
<i>Group size</i>	Child care group size based upon regulation				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	1 full-time director; 6 part-time staff				
<i>Staff qualifications</i>	A master's, bachelor's, and associate's degree or a CDA credential				
Materials (curricula, other materials, technology)					
The initiative does not rely on a single curriculum. Materials include kits that are oriented to a single content area, a lending library, and loans of large equipment such as rocking boats and quadruple strollers.					
Community partners					
City of Madison, Dane County Head Start Parent Council					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change			Yes	No	X
Collection of program data/information			Yes	X	No
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics	X	Parent satisfaction with care		X
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design			Yes	X	No
The initiative uses an annual survey, an evaluation at end of the accreditation process, exit interviews, and ongoing feedback to evaluation the program. In addition, the program receives an annual review by the City of Madison, which sets goals for program improvement.					
Process evaluation findings			Yes	X	No
Outcome evaluation findings			Yes		No
Contact					
Joan Laurion, Madison County, Laurion@co.dane.wi.us, 608-224-3722 or Kari Stroede, Satellite Director, Kari.Stroede@dcpcinc.org 608-270-3439					
Date information collected					
6/11/08					

ELL = English language learner; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care

Name of initiative	Madison Metropolitan School District Play and Learn United Way Dane County Play and Learn					
State	Wisconsin					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Madison Metropolitan School District; United Way Dane County						
Dates of operation						
2004 - Present						
Funding						
Madison Public Schools Title I, United Way (funding amount not available)						
Description of initiative						
The initiative offers weekly three-hour Play and Learn programs which provide opportunities for adult caregivers (parents or caregivers) and children living in low-income neighborhoods to interact together in activities. A staff member models interactions for them. The Madison Public School initiative started with a small scale effort that offered two half-day (two-and-a-half-hour) programs in one neighborhood, and has grown to 16 sites, 6 of which are offered in space that is dedicated to them and 10 that are offered through mobile vans in space that is offered by community organizations. United Way Dane County in 2007 has also initiated Play and Learn groups and is collaborating with Madison Public School Play and Learn. They have an additional three sites that are fixed and five mobile sites. The Madison Public Schools fund the 6 fixed sites as well as their 10 mobile sites, while the United Way funds their sites. Each site has a maximum capacity for 15 to 20 caregivers and 20 to 30 children. The initiative also includes distribution of Early Learning Kit bags that have a monthly list of activities and materials.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs	X*	Consultation, mentoring, or coaching	
	Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the Play and Learn Groups focuses on helping parents and caregivers understand how children learn through play and how to support children's school readiness.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	
	Nutrition		Activities for children	X*	Business practices	
	Language and literacy	X	Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other - Early Mathematics Development Social/Emotional Development	X
Initiative intensity						
3 hours weekly						
Duration of services						
10 months for the Madison Public School programs; year round months for the United Way preschool programs						
Recruitment strategies						
Participants are recruited through community meetings to identify the program site, brochures distributed through the school district, and word of mouth.						

Madison Metropolitan School District Play and Learn (continued)

Caregiver characteristics				
<i>Relationship to children</i>	Many of the participants are related to the children in care.			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Some caregivers speak Spanish or Hmong.			
Number of caregivers enrolled				
The initiative can serve up to 560 children and caregivers.				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 5 years			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Some children speak Spanish or Hmong.			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Madison Schools: 6 teachers, 2 assistant teachers, 1 evaluator United Way of Dane County: 4 teachers, 1 assistant, 1 evaluator			
<i>Staff qualifications</i>	All staff members have bachelor's degrees in early childhood education.			
Materials (curricula, other materials, technology)				
The initiative uses the <i>Creative Curriculum</i> as well as materials from Zero To Three. Materials include monthly activity sheets and materials to support them.				
Community partners				
AmeriCorps, Dane County Early Childhood Initiative, Madison Public Library System, Joining Forces for Families (Dane County Department of Human Services, public health, county and local law enforcement agencies)				
Fidelity standards				
Not available				
Other Versions				
The initiative is based on Tutu and Me.				
Logic model/Theory of change			Yes	X
Collection of program data/information			Yes	X
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)	
	Caregiver characteristics	X	Parent satisfaction with care	
	Child characteristics	X	Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services	X	Other	
Evaluation methods and design			Yes	X
Process evaluation findings			Yes	X
Outcome evaluation findings			Yes	X
Contact				
Rita Kehl, Madison Metropolitan School District, Preschool Instructional Resource Teacher, rkehl@madison.k12.wi.us, 608-663-5235				
Date information collected				
9/22/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

WYOMING

Name of initiative	Training for Spanish-Speaking, Unlicensed Providers					
State	Wyoming					
Initiative category	Support for Licensing					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Not available						
Dates of operation						
2008 - Present						
Funding						
Not available						
Description of initiative						
The goal of the initiative is to provide access to training on providing quality child care to caregivers in the Spanish-speaking population. Many providers in Jackson's large population of undocumented immigrants are unlicensed. Reasons for a lack of licensing are challenges with language and the reticence of this population to interact with governmental agencies. In response to a child fatality in the care of an unlicensed caregiver, Teton County (Jackson) held a training course to help predominantly Spanish-speaking unlicensed caregivers obtain licensing and provide training and technical assistance related to child care.						
<i>* primary strategy</i>	Training through workshops	X*	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The program provides caregivers with information regarding regulation and licensing during training courses.						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing	X*	Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	
Initiative intensity						
Not available						
Duration of services						
Not available						
Recruitment strategies						
Not available						

Training for Spanish-Speaking, Unlicensed Providers (*continued*)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Exempt family, friend and neighbor caregivers				
<i>Other needs</i>	Most providers speak Spanish as a home language.				
Number of caregivers enrolled					
Approximately 25 caregivers registered for the course.					
Child characteristics					
<i>Ages of children in care</i>	Not available				
<i>Group size</i>					
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	Not available				
<i>Staff qualifications</i>	Not available				
Materials (curricula, other materials, technology)					
Not available					
Community partners					
Jackson Community Resource Center, Latino Resource Center, Inc., and Child Care Licensing					
Fidelity standards					
Not available					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
Not available					
<i>* primary collection efforts</i>	Number of participants	X*	Quality outcomes (observations or ratings)		
	Caregiver characteristics		Parent satisfaction with care		
	Child characteristics		Parent experience with care		
	Care characteristics		Child outcomes		
	Caregiver satisfaction with services		Other		
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Sue Bacon, Early Childhood Division WY Department of Family Services, Administrator, sbacon@state.wy.us, 307-777-6848					
Date information collected					
8/11/08					

ELL = English language learners; HBC = home-based caregivers; IT = infant toddler

MULTIPLE STATES

Number	063					
Name of initiative	National League of Cities Informal Caregivers Initiative					
State	Colorado, Georgia, Iowa, Rhode Island, Tennessee, and Texas					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
National League of Cities (NLC) and United Way of America (UWA)						
Dates of operation						
2007 - Present						
Funding						
Annie E. Casey Foundation (funding amount not available)						
Description of initiative						
<p>The rationale for the Informal Caregivers Initiative is that the majority of the nation's youngest and most vulnerable children are in family, friend and neighbor care during the work day. NLC and UWA provide technical assistance to help six communities promote school readiness among young children by strengthening the efforts to support family, friend, and neighbor caregivers, lay the foundation to help other cities promote school readiness, and highlight promising practices that can be replicated in communities across the nation. Each city had plans for different initiatives. Atlanta leaders planned to support caregivers by expanding a Parents as Teachers curriculum, increasing the number of Play & Learn groups, and connecting family, friend, and neighbor caregivers with work force development opportunities. Denver intended to develop customized communication strategies targeted toward key stakeholders, family, friend, and neighbor caregivers and local residents to highlight the importance of investing in young children. Des Moines planned to incorporate parent education into and evaluate the effectiveness of Play & Learn groups and identify protocols for parent educators who administer referrals and offer advice to parents. Nashville leaders planned to convene stakeholder discussions about school readiness policy and create a plan for gathering data about where children, families and caregivers live. Providence planned to develop a family, friend, and neighbor care business plan and integrate family, friend, and neighbor care supports with the larger early learning system, including early learning resource hubs in neighborhoods and family place libraries. San Antonio planned to create a coordinated system of school readiness resources and programs, as well as marketing and communications strategies, and a financial sustainability plan.</p>						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other - Technical assistance	X*		
Content of services						
Not available						
<i>* primary content areas</i>	Health and safety		Child development		Working with parents	
	Nutrition		Activities for children		Business practices	
	Language and literacy		Behavior management		Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs		Other	

National League of Cities Informal Caregivers Initiative (*continued*)

Initiative intensity				
Not available				
Duration of services				
Not available				
Recruitment strategies				
Not available				
Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend, and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Birth to age 5			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Five staff at UWA and NLC			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
Not available				
Community partners				
United Way of America (national partner), local partners vary by city				
Fidelity standards				
Not available				
Other versions				
Precursor to initiative was the NLC and UW Promoting School Readiness Initiative Phase I				
Logic model/Theory of change		Yes	No	X
Collection of program data/information		Yes	No	X
<i>* primary collection efforts</i>	Number of participants		Quality outcomes (observations or ratings)	
	Caregiver characteristics		Parent satisfaction with care	
	Child characteristics		Parent experience with care	
	Care characteristics		Child outcomes	
	Caregiver satisfaction with services		Other	
Evaluation methods and design		Yes	No	X
Process evaluation findings		Yes	No	X
Outcome evaluation findings		Yes	No	X
Contact				
Tonja Rucker, Early Childhood Development, Senior Program Associate, rucker@nlc.org, 202-626-3004				
Date information collected				
6/11/08				

ELL = English language learners; HBC = home-based caregivers; IT = infant toddler

Name of initiative	Partnerships for Inclusion (PFI)					
State	California, Iowa, Minnesota, Nebraska, and North Carolina					
Initiative category	Quality Improvement					
Target population	Targeted to HBC		Modified for HBC		Not Targeted to HBC	X
Service provider who implemented the initiative						
University of North Carolina-Chapel Hill						
Dates of operation						
2003-2007						
Funding						
Research funding was provided by the Child Care Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Program services were funded by the 24 local agencies that provided consultants for the study. Services were generally funded from state funds, including quality enhancement set-aside funds (funding amount not available).						
Description of initiative						
PFI provided consultation and technical assistance services to child care providers including classroom teachers and regulated family child care providers. Consultants made 12 to 17 visits to an early childhood classroom or family child care home over a period of 6 to 10 months to guide the provider through an assessment-based, six-stage consultation process. The six stages included: building a relationship, obtaining information through assessment, setting goals and setting strategies based on the outcomes of the assessments, implementing an action plan and evaluating the plan and process and, a summary conference between the consultant and provider.						
<i>* primary strategy</i>	Training through workshops		Play and Learn programs		Consultation, mentoring, or coaching	X*
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting		Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the consultations included topics related to child development and early childhood education.						
<i>* primary content areas</i>	Health and safety	X*	Child development	X	Working with parents	
	Nutrition	X	Activities for children	X*	Business practices	
	Language and literacy	X*	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
A minimum of one visit every month						
Duration of services						
6 to 10 months						
Recruitment strategies						
The participating agencies recruited providers in various ways.						

QUINCE/Partnerships for Inclusion (PFI) (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Not available				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	Not available				
<i>Training and education</i>	Not available				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
257 family child care providers (127 in PFI group and 136 in control group); 108 preschool teachers					
Child characteristics					
<i>Ages of children in care</i>	Age 20 months to 5 years				
<i>Group size</i>	Not available				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Not available				
<i>Purpose of care</i>	Not available				
Staff characteristics					
<i>Number of staff</i>	101 consultants				
<i>Staff qualifications</i>	Consultants had an average of six years of early childhood experience. Consultants randomly assigned to the PFI group received a week-long training (three days of training on the Environmental Rating Scales and two days of initial training on the PFI model); followed by five seminars on language and literacy, interactions, diversity, health and safety, and environments.				
Materials (curricula, other materials, technology)					
PFI consultants could use up to \$200 to assist family child care providers and teachers with purchasing supplies, materials, or books or to fund specific additional training activities.					
Community partners					
CCR&Rs					
Fidelity standards					
The following fidelity questions were documented: (1) To what extent did consultants implement the PFI model as intended? (2) Did consultants adhere to some aspects of the model more than others? (3) Are there consultant characteristics that predict fidelity? (4) Are there agency characteristics that predict fidelity? The fidelity index measures exposure (dosage); adherence to critical elements (following the six stages); and quality of delivery (collaboration). Nine indicators were rated on a scale of one (no evidence or very little evidence of PFI implementation) to four (much evidence of PFI implementation).					
Other Versions					
Not available					
Logic model/Theory of change			Yes	X	No
The theory behind Partnerships for Inclusion is that intensive one-on-one, relationship-based consultation and assessment will improve quality of care providers and thus impact child outcomes.					
Collection of program data/information			Yes	X	No
* <i>primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)	X	
	Caregiver characteristics	X*	Parent satisfaction with care	X	
	Child characteristics	X	Parent experience with care	X	
	Care characteristics	X	Child outcomes	X	
	Caregiver satisfaction with services	X	Other		

QUINCE/Partnerships for Inclusion (PFI) (*continued*)

Evaluation methods and design	Yes	X	No	
The FPG Child Development Institute (FPG) at UNC-Chapel Hill managed the North Carolina site and acted as the coordinating center for the five sites evaluating the PFI model. The other four study sites and their administrative homes (in parenthesis) are California (University of California-Los Angeles), Iowa (Iowa State University), Nebraska (University of Nebraska-Lincoln), and Minnesota (Child Trends, Inc. and University of Minnesota). Each site partnered with two to five state or community agencies that currently provide training to family and/or center-based child care providers. The study recruited child care providers from September 2004 through September 2007. One hundred and one consultants were randomly assigned to either a control group or an experimental treatment group (using the PFI model). Assessments of environmental quality were conducted at baseline, at the end of the intervention, and five to six months after the intervention ended. Assessments were conducted using the FDCRS, the ECERS-R, and the ECERS-E.				
Process evaluation findings	Yes	X	No	
Researchers assessed fidelity to the PFI model using an index that addressed exposure, implementation of key components of the model, and quality of service delivery. Data for completing the index were drawn from documentation completed by consultants. The study found that implementing the initiative with fidelity to the PFI model was challenging; in particular, consultants had difficulty making regular visits, correctly scoring rating scales, and tailoring plans to providers' identified needs. Only 25 percent of PFI consultants were rated as "high level" implementers. Levels of fidelity were not linked to specific consultant or agency characteristics but may have been related to supervisory or management practices.				
Outcome evaluation findings	Yes	X	No	
Family child care providers receiving PFI demonstrated significant improvement on several dimensions of quality measured by the FDCRS—teaching and interactions, provisions for learning, and literacy/numeracy—over the course of the consultation period. Treatment effect sizes were moderate. Providers in the control group showed no improvement. In addition, six months after the PFI services ended, quality improvements among the PFI providers persisted. The analysis indicated that quality improvements in the PFI group were greater for caregivers with more experience than for those with less experience. Among classroom teachers, PFI had no impact. PFI impacts on the PSL-IV Auditory Comprehension Scale were observed among children in classrooms but not among those in family child care.				
Contact	Donna Bryant, Frank Porter Graham Child Development Institute, University of North Carolina-Chapel Hill, bryant@unc.edu, 919-966-4523			
Date information collected	9/9/08			

CCR&R = Child Care Resource & Referral; ECERS-R = Early Childhood Environment Rating Scale-Revised; ECERS-E = Early Childhood Environment Rating Scale-Extension; ELL = English language learner; FDCRS = Family Day Care Rating Scale; HBC = home-based care; IT = infant toddler

Name of initiative							Accreditation Facilitation Project						
State							Kansas and Missouri						
Initiative category							Support for Accreditation						
Target population							Targeted to HBC	X	Modified for HBC		Not Targeted to HBC		
Service provider who implemented the initiative													
The Family Conservancy													
Dates of operation													
Family Child Care Accreditation Facilitation Project: 2000 - Present Early Accreditation Support: 2003 - Present													
Funding													
Kansas and Missouri state; private foundation; other funders (funding amount not available)													
Description of initiative													
Family Child Care Accreditation Facilitation Project participants attend trainings monthly to work toward NAFCC accreditation. Technical assistance and consultation are also available. NAFCC-accredited providers serve as mentors, which enables providers in the accreditation self-study process to gain tips and insights into the accreditation process. An accreditation specialist and coaches lead trainings and provide technical assistance and support on NAFCC quality standards during on-site visits and through telephone consultations. Early Accreditation Support enables licensed family child care providers to move forward in the accreditation process. Early Accreditation Support services include phone consultation and a copy of NAFCC standards.													
<i>* primary strategy</i>		Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	X*						
		Distribution of materials and equipment	X	Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs							
		Home visiting		Warm lines		Online training							
		Peer support networks	X	Other - Mini-grants for accreditation fees and materials and equipment	X								
Content of services													
Trainings are focused on NAFCC quality standards. They are designed to provide the participants with the opportunity to discuss NAFCC quality standards, share quality improvement ideas, network, and learn about various resources available to them in their communities as well as the greater metropolitan area.													
<i>* primary content areas</i>		Health and safety	X	Child development	X	Working with parents	X						
		Nutrition		Activities for children	X	Business practices	X						
		Language and literacy	X	Behavior management	X	Stress reduction							
		Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other - NAFCC quality standards	X*						
Initiative intensity													
Monthly onsite visits last 1 to 4 hours as needed. Monthly trainings last for 2 hours. Telephone consultation is available on an ongoing basis.													
Duration of services													
18 to 24 months													
Recruitment strategies													
Recruitment strategies include advertisements in the agency newsletter, direct mail fliers, announcements at conferences and groups for licensed family child care providers, referrals from other providers, and referrals from licensing agencies.													

Accreditation Facilitation Project (continued)

Caregiver characteristics					
<i>Relationship to children</i>	Most are unrelated to the children in care.				
<i>Motivation for providing care</i>	Not available				
<i>Interest in professionalizing</i>	All participants are licensed family child care providers seeking NAFCC accreditation.				
<i>Training and education</i>	All participants have a high school degree or more education.				
<i>Regulation status</i>	Licensed family child care providers				
<i>Other needs</i>	Not available				
Number of caregivers enrolled					
The project enrolls about 20 new providers annually; providers enrolled in previous years continue to receive ongoing support. Since the project began in 2000, about 160 providers have been enrolled.					
Child characteristics					
<i>Ages of children in care</i>	Birth to age 10; most are birth to age 5.				
<i>Group size</i>	Group sizes range from 5 to 15; most care for 8 to 10 children.				
<i>Characteristics (ELL, special needs)</i>	Not available				
Care characteristics					
<i>Schedule and intensity of care</i>	Care is primarily provided Monday through Friday, 6am to 6pm; some care is provided during non-traditional hours, including overnight.				
<i>Purpose of care</i>	Child care while parents work				
Staff characteristics					
<i>Number of staff</i>	1 full-time accreditation specialist, 4 full-time coaches (caseloads include licensed Family Child Care providers and child care centers); contracted family child care provider mentors				
<i>Staff qualifications</i>	Bachelor's degree or higher for staff; NAFCC accreditation for mentors				
Materials (curricula, other materials, technology)					
The NAFCC accreditation resource manual is used to guide training topics. Coaches access other materials based on the needs of the providers.					
Community partners					
Francis Institute					
Fidelity standards					
Staff are trained on the Family Child Care Environment Rating Scale (FCCERS) must meet reliability standards.					
Other Versions					
Not available					
Logic model/Theory of change		Yes		No	X
Collection of program data/information		Yes	X	No	
<i>* primary collection efforts</i>	Number of participants	X	Quality outcomes (observations or ratings)		X
	Caregiver characteristics	X	Parent satisfaction with care		
	Child characteristics	X	Parent experience with care		
	Care characteristics	X	Child outcomes		
	Caregiver satisfaction with services	X	Other: Accreditation status		X
Evaluation methods and design		Yes		No	X
Process evaluation findings		Yes		No	X
Outcome evaluation findings		Yes		No	X
Contact					
Monica Dutton Hurt, The Family Conservancy, Family Child Care Accreditation Project, 913-342-1110					
Date information collected					
8/12/08					

ELL = English language learners; HBC = home-based care; IT = infant toddler; NAFCC = National Association for Family Child Care

Name of initiative	Supporting Care Providers Through Personal Visits					
State	Multiple					
Initiative category	Quality Improvement					
Target population	Targeted to HBC	X	Modified for HBC		Not Targeted to HBC	
Service provider who implemented the initiative						
Parents As Teachers National Center						
Dates of operation						
2002 - Present						
Funding						
Curriculum and training developed by Parents as Teachers National Center (funding amount not available)						
Description of initiative						
Supporting Care Providers Through Personal Visits is a curriculum for providing home visits to home-based caregivers. Training on the curriculum is offered in two modes: two-day training at the Parents as Teachers National Center and an on-site customized training package tailored to the needs of specific programs						
<i>* primary strategy</i>	Training through workshops	X	Play and Learn programs		Consultation, mentoring, or coaching	
	Distribution of materials and equipment		Professional development through formal education at institutions of higher education		Linkages to pre-kindergarten or other center-based child care programs	
	Home visiting	X*	Warm lines		Online training	
	Peer support networks		Other			
Content of services						
The content of the training program and curriculum covers the following topics: instructional personal visiting components and strategies; approaches and techniques to build partnerships with care providers; strategies to engage and support child care providers; terminology, definitions, and current trends and issues relevant in the child care world; strategies that encourage care providers to observe and individualize activities for the children in their care; and cultural sensitivity for various family and care provider value systems.						
<i>* primary content areas</i>	Health and safety	X	Child development	X	Working with parents	X
	Nutrition		Activities for children	X	Business practices	
	Language and literacy	X	Behavior management	X	Stress reduction	
	Information about regulation or licensing		Special focus topics related to ELL, IT, preschoolers, school-aged children, or children with special needs	X	Other	
Initiative intensity						
Two-day training for home visitors.						
Duration of services						
Not applicable.						
Recruitment strategies						
Not available						

Supporting Care Providers Through Personal Visits (*continued*)

Caregiver characteristics				
<i>Relationship to children</i>	Not available			
<i>Motivation for providing care</i>	Not available			
<i>Interest in professionalizing</i>	Not available			
<i>Training and education</i>	Not available			
<i>Regulation status</i>	Exempt family, friend and neighbor caregivers			
<i>Other needs</i>	Not available			
Number of caregivers enrolled				
Not available				
Child characteristics				
<i>Ages of children in care</i>	Not available			
<i>Group size</i>	Not available			
<i>Characteristics (ELL, special needs)</i>	Not available			
Care characteristics				
<i>Schedule and intensity of care</i>	Not available			
<i>Purpose of care</i>	Not available			
Staff characteristics				
<i>Number of staff</i>	Not available			
<i>Staff qualifications</i>	Not available			
Materials (curricula, other materials, technology)				
<i>Supporting Care Providers Through Personal Visits curriculum</i>				
Community partners				
Not available				
Fidelity standards				
Not available				
Other Versions				
Not available				
Logic model/Theory of change	Yes		No	X
Evaluation methods and design	Yes		No	X
Process evaluation findings	Yes		No	X
Outcome evaluation findings	Yes		No	X
Contact				
Parents As Teachers National Center, info@parentsasteachers.org, 314-432-4330				
Date information collected				
09/30/08				

ELL = English language learner; HBC = home-based care; IT = infant toddler

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