

GETTING READY: FINAL EVALUATION REPORT

**Tabitha Isner, Ladia Albertson-Junkans, Katie Quinn, Meg Soli,
Jennifer Cleveland, Kathryn Tout**

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708 North 1st Street, Suite 333
Minneapolis, MN 55401
612-331-2223
www.childtrends.org



**Greater Twin Cities
United Way**

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SECTION 1. OVERVIEW

In this final evaluation report, Child Trends presents the findings from a two year evaluation of the Parent Aware Getting Ready Project, also known simply as “Getting Ready.” Section 1 provides an overview of the Parent Aware Getting Ready Project and the Getting Ready Evaluation, including the research questions that guide the evaluation and the data sources that inform it. Next, Section 2 describes the programs that have participated in Getting Ready and the children served by those programs. Section 3 is an in-depth exploration of the services and supports received by Getting Ready participants, both from the perspective of the Getting Ready program staff and from the perspective of participating child care providers. Then, Section 4 examines program implementation including staff training and supervision, documentation of services and case management, and how the Getting Ready process has evolved over time. Finally, Section 5 presents the outcomes of Getting Ready in terms of quality improvement for participating programs, enrollment in Parent Aware, and providers’ perceptions of the difference that Getting Ready has made for their quality of care. The report closes with a summary of findings and implications for future quality improvement efforts.

BACKGROUND AND PURPOSE OF GETTING READY

In 2007, Minnesota launched a pilot Quality Rating and Improvement System (QRIS) called Parent Aware. Like other QRIS, Parent Aware was intended to set quality standards for early care and education programs, rate the quality of care available, and encourage programs to improve their quality and therefore improve outcomes for children. Parent Aware is unique nationally because of its intentional focus on supporting parents’ early care and education decisions. Special emphasis has been placed in the pilot on developing and promoting a rating tool that will be useful to parents.

Early in the Parent Aware pilot, the Implementation team and other community stakeholders recognized the importance of recruiting a diverse group of early care and education programs to join Parent Aware.¹ However, recruitment of programs was challenging because the rating system and its requirements were new, and providers were hesitant to enroll.² The recruitment difficulties were especially pronounced for family child care providers and non-English speaking providers.

To meet providers’ need for support and information, the Greater Twin Cities United Way (with support from the 3M Foundation) provided a grant to the Minnesota Department of Human Services (DHS) and their partners – Resources for Child Caring (RCC) and the Minnesota

¹ Tout, K., Starr, R., & Cleveland, J. (2008). *Evaluation of Parent Aware: Minnesota’s Quality Rating System pilot: Year 1 evaluation report*. Child Trends.

² Throughout this report, the term “program” will be used to refer to child care facilities, whether family child care homes or child care centers. The term “provider” will be used to refer to the individual from each program (the Director or lead provider) that facilitated their program’s participation in Getting Ready.

Licensed Family Child Care Association (MLFCCA) for a quality improvement program that would help programs to “get ready” for Parent Aware. Partners at the Child Care Resource and Referral Network and the Minnesota Center for Professional Development also contributed to the program’s implementation.

The resulting program, Getting Ready, is a quality improvement initiative with three core purposes:

- Offer programs a preparation process that facilitates entry into Parent Aware
- Make Parent Aware more accessible for family child care providers
- Make Parent Aware more accessible for providers who are English Language Learners

Child Trends contracted with the Greater Twin Cities United Way to conduct an evaluation of Getting Ready and to provide program staff and stakeholders with information to refine program services and processes. The evaluation team completed an interim report (called the Year One Report) in early 2011 describing implementation and initial outcomes after the first sixteen months of program implementation (August 2009 to November 2010).³ This final report includes the data from that interim report and incorporates additional data to create a final report that describes 27 months of implementation (August 2009 to October 2011) and the outcomes for programs that have completed Getting Ready and enrolled in Parent Aware.

LESSONS LEARNED FROM THE YEAR ONE EVALUATION REPORT

Overall, findings from the Year One Evaluation indicated that Getting Ready was succeeding in recruiting the intended population of programs/providers and in supporting programs in making quality improvements that would make them more successful in Parent Aware.

Specifically:

- In the first 16 months of implementation Getting Ready recruited and enrolled 75 programs. Most of these (65%) were family child care homes, and nearly one-third were English language learners.
- Getting Ready programs served a higher percentage of children receiving child care assistance and a higher percentage of children who are English language learners than did other programs enrolled in Parent Aware.
- At the start of Getting Ready, family child care providers reported that they were significantly less prepared to join Parent Aware than did providers from center-based programs. In the initial self-assessment, 9% of participating family child care programs were able to meet at least 40% of the Parent Aware indicators, compared to 83% of center-based programs.⁴

³ Isner, T., Soli, M., Rothenberg, L., Quinn, K., Tout, K. (2011). Getting Ready: Year One Evaluation Report. Child Trends.

⁴ The Parent Aware website, www.parentawareratings.org, states that a program that can answer “Yes” to 40% to 50% of the questions on the Getting Ready Checklist is ready to be rated by Parent Aware.

- After receiving Getting Ready services, programs report meeting significantly more Parent Aware indicators than they did at the start of the program, particularly in the Teaching Materials and Strategies category and in the Tracking Learning category.
- Twenty programs had graduated from Getting Ready and made the transition to Parent Aware. Most of these graduates (80%) had received a three- or four-star rating (the highest possible rating) from Parent Aware.

The Year One Evaluation findings on implementation informed Getting Ready program staff in the second year of the program and raised additional issues to be explored in the Year Two Evaluation. These issues included:

- Establishing effective communication and collaboration strategies across Getting Ready partner agencies.
- Developing goals and improvement plans that can be used successfully by programs.
- Understanding the experiences of Getting Ready participants and graduates.

Therefore, in addition to the research questions included in the Year One Evaluation report, research questions in the Year Two Evaluation report address how collaboration has improved over time and how improvement plans are developed and used by providers. Throughout the report, an increased focus was given to the experience of providers in Getting Ready.

RESEARCH QUESTIONS AND METHODOLOGY FOR THE EVALUATION

This evaluation is intended to provide the Greater Twin Cities United Way and other Parent Aware stakeholders with evidence about the effectiveness of Getting Ready for promoting quality improvement and participation in Parent Aware. The evaluation aims to address the following research questions:

1. What are the characteristics and initial quality level of programs who participate in the Getting Ready project? Is Getting Ready serving the intended population?
2. How effective is the Getting Ready process as a strategy for assessing and addressing individual program needs? Do providers report being satisfied with the services offered?
3. How are services coordinated across multiple service providers, and how does the provision of multiple supports serve the needs of providers/programs?
4. Does the quality of participating programs improve by the end of the Getting Ready process?
5. Are providers more open to and focused on the process of quality improvement by the end of Getting Ready?
6. Do programs participating in Getting Ready services enroll in Parent Aware? How are these programs rated in Parent Aware?

To address these questions, this report will describe the participants in Getting Ready and the services and supports they received. This report will also describe the self-assessed quality of programs as they begin Getting Ready and the changes in quality that are reported as they complete Getting Ready.

GETTING READY OVERVIEW

In order to help child care programs (especially, but not limited to, family child care providers and English Language Learners) meet Parent Aware quality indicators and improve their quality, multiple supports were offered through Getting Ready:

- Individualized assessment process designed to identify program strengths and areas for improvement
- Training on Parent Aware-approved research-based curriculum and assessment tools, including Creative Curriculum and Creative Curriculum Assessment
- For child care center-based programs, consultation on implementation of Creative Curriculum and Creative Curriculum Assessment
- For family child care providers, mentoring that includes but is not limited to support for implementation of Creative Curriculum and Creative Curriculum Assessment
- Consultation to improve global quality as measured by the Family Child Care Environment Rating Scale-Revised (FCCERS-R)⁵ for family child care providers and by the Infant Toddler Environment Rating Scale-Revised (ITERS-R)⁶ and the Early Childhood Environment Rating Scale-Revised (ECERS-R)⁷ for center-based programs
- Assistance in enrolling in the Minnesota Center for Professional Development Registry

This process is described in greater depth below.

Step 1. Recruitment

To be eligible for participation in Getting Ready, programs must be licensed, located in the Parent Aware metropolitan pilot areas of St. Paul, Minneapolis, or Wayzata, and be willing to enroll in Parent Aware after the Getting Ready process is complete. Center-based child care programs must have children enrolled with family incomes at or below 200% of the federal poverty level and be interested and willing to apply for United Way funds to serve low-income children in their programs. Family child care programs must serve low-income families. If there is more interest in the program than the funds available are able to serve, programs serving children in the most highly challenged situations will be selected, with preference given to those serving the largest percentage of children at or below 200% of poverty. Originally, center-based programs interested in participating were required to demonstrate non-profit status, but

⁵ Harms, T., Cryer, D., & Clifford, R.M. (2007). *Family Child Care Environment Rating Scale (Rev. Ed.)* New York: Teachers College Press.

⁶ Harms, T., Cryer, D., & Clifford, R.M. (2006). *Infant/Toddler Environment Rating Scale (Rev. Ed.)*. New York: Teachers College Press.

⁷ Harms, T., Clifford, R.M., & Cryer, D. (2005). *Early Childhood Environment Rating Scale (Rev. Ed.)*. New York: Teachers College Press.

when recruitment was moving slowly, that eligibility requirement was eliminated to allow more center-based programs to participate. In addition, eligibility was expanded to allow for several programs to receive Getting Ready supports after having been rated by Parent Aware. While this was allowed, it happened only rarely.

Step 2: Intake

Eligible programs interested in participating are asked to complete a Program Application form and then schedule an intake appointment.

Step 3: Assessment of Baseline Quality

At the intake appointment, the lead provider for a participating program completes a Getting Ready Checklist, with the help of the Getting Ready Project Coordinator, in order to determine the program's quality improvement needs. (An interpreter was provided for intake appointments with non-English-speaking providers.) The Getting Ready Checklist was developed for use by Parent Aware and is intended to be used as a way for a program to get to know the indicators included in the Parent Aware Rating Tool, to reflect on whether their program's practices meet those indicators, and to consider what changes would need to be made to meet those indicators. If a program does not currently meet an indicator on the Checklist, space is provided for the program to document any actions they plan to take to meet that indicator.

Step 4: Quality Improvement Supports

A variety of quality improvement supports are available to help programs make changes in their practices to meet the Parent Aware quality indicators. For center-based programs, these supports include:

- Individualized consultation on the ECERS-R and/or ITERS-R provided by an Environment Rating Scale (ERS) Consultant who is trained on the tool,
- Support for curriculum implementation provided by a Curriculum Consultant from Resources for Child Caring (RCC),
- Consultation on the CLASS⁸ observation tool, provided by the curriculum consultant when caseload permitted additional time with a program,
- Books or other materials needed for training or coursework, and

Project Coordinator: Provides an introduction to Getting Ready and assists the provider in completing the Getting Ready Checklist during the intake appointment

Curriculum Consultant: Provides support for center-based programs in implementation of Creative Curriculum and Assessment Tool, and potentially also on the CLASS observational tool.

Mentor: Provides mentoring to family child care providers on a variety of topics, particularly the Creative Curriculum and Assessment Tool

ERS Consultant: Provides consultation on the Environment Rating Scales to center-based and family child care programs

Outreach Specialist: Provides interpretation services to ELL providers

⁸ Pianta, R.C., La Paro, K.M., & Hamre, B.K. (2008). *Classroom Assessment Scoring System*. Baltimore, MD: Paul H. Brookes Publishing Co., Inc.

- Classroom materials, books and equipment, as available.

For family child care programs, these supports include:

- Individualized consultation on the FCCERS-R provided by an ERS consultant who is trained on the tool,
- Training on Creative Curriculum and the Creative Curriculum Assessment Tool, and support for implementation of the curriculum and assessment tool provided by a mentor from the Minnesota Licensed Family Child Care Association (MLFCCA).
- Books or other materials needed for training or coursework, and
- Classroom materials, books and equipment, as available.

For family child care providers who speak other languages, services are provided with the help of an Outreach Specialist (a bilingual individual who interprets between the provider and the curriculum consultant, mentor, or ERS consultant).

All lead providers are also asked to enter their information into the Minnesota Center for Professional Development (MNCPD) Registry to determine their level in the Career Lattice (as required by Parent Aware) and help them assess their professional development needs.

In addition, opportunity sometimes arose for Getting Ready staff to provide extra supports that were not initially included in the menu of options provided by Getting Ready. For example, the curriculum consultant who worked with center-based programs was trained to provide consultation on the Classroom Assessment Scoring System (CLASS)⁹ and offered this support to programs when her caseload permitted. In addition, when gently used materials and equipment (such as shelving and tables) became available, Getting Ready staff distributed these materials to programs that could not afford to purchase such materials.

Step 6: Transition to Parent Aware

When the program is ready to join Parent Aware, the Getting Ready Project Coordinator holds a wrap-up meeting with the provider to reflect on improvements made. By the time of the wrap-up meeting, the program is listed on the Parent Aware website as “in process” and their work “getting ready” is complete.

⁹ Pianta, R.C., La Paro, K.M., & Hamre, B.K. (2008). *Classroom Assessment Scoring System*. Baltimore, MD: Paul H. Brookes Publishing Co., Inc.

DATA SOURCES

The information in this report comes from a variety of data sources collected in both the first and second year of Getting Ready implementation. The data sources used were:

- The Program Application completed by participating providers,
- The Wiki (a record of staff interactions with providers, documented using FrontPage software or GoogleDocuments),¹⁰
- Two provider surveys conducted by Child Trends (the Evaluation Intake Survey at the beginning of participation in Getting Ready and the Evaluation Exit Survey at the end),
- The Getting Ready Checklist (a provider self-assessment completed before and after participation in Getting Ready with the help of the Getting Ready Project Coordinator),
- The Stage of Change Scale 2.0 – Self Report Form (completed by providers at the beginning and end of their Getting Ready participation),
- The Stage of Change Scale 2.0 – “Coach” Form (completed by each provider’s Mentor, ERS Consultant, Curriculum Consultant, and Outreach Specialist at the beginning and end of the provider’s Getting Ready participation; “Coach” is used generally to refer to the different staff who used this form)
- Phone interviews with Getting Ready staff in Year One of evaluation,
- An online survey of Getting Ready staff in September 2011, and
- Phone interviews with Getting Ready graduates conducted in Fall 2010 and early summer 2011.

These data sources are summarized in the table below and will be described in more depth in the sections that follow.

Table 1. Data collected over the two years of the Getting Ready Evaluation

Data source	Data collected August 2009 to November 2010	Additional data collected December 2010 to October 2011	Total data reported in Getting Ready Final Report
Total Getting Ready participants	N=75	N=14	N=89
Program Application data	N=71	N=16	N=87
Total Evaluation participants/Intake Evaluation Survey	N=41	N=20	N=61

¹⁰ A Wiki is a website where multiple users can create and edit documents collaboratively. Both FrontPage and GoogleDocuments are Wiki software. Getting Ready staff members use the Wiki to document and share with one another their interactions with providers/programs, including the dates of meetings and phone calls, the content of those interactions, and requests for other staff members. Child Trends researchers coded the information in the Wiki to determine how many times Getting Ready staff interacted with providers in a meaningful way and to determine the degree of collaboration among Getting Ready staff members.

Data source	Data collected August 2009 to November 2010	Additional data collected December 2010 to October 2011	Total data reported in Getting Ready Final Report
Completed Pre-Getting Ready Checklist	N=70	N=19	N=89
Completed Post-Getting Ready Checklist	N=14	N=31	N=55
Rated by Parent Aware	N=20	N=22	N=42
Exit Evaluation Survey	N=10	N=19	N=29
Provider phone interviews (administered to a sample of Getting Ready graduates)	N=10 (All English-speaking providers)	N=20 (10 English-speaking and 10 ELL providers)	N=30 (20 English-speaking providers* and 10 ELL providers)
Staff phone interviews	N=13		N=13
Online Staff Survey		N=14	N=14
Wiki data for programs that have graduated from Getting Ready	N=21	N=32	N=53

*The 2011 provider interview for English-speaking providers includes some questions that were not asked in the 2010 interviews. Adding these questions to the interview protocol for ELL providers would have made the interview too long and over-burdened both providers and interpreters. Therefore, there are some questions that were asked of only the 10 English-speaking providers interviewed in 2011.

SECTION 2. DESCRIPTION OF PARTICIPANTS

Because Getting Ready is specifically intended as a support for programs and providers that are underrepresented in Parent Aware or reticent to join Parent Aware, understanding the characteristics of enrolled programs is critical for evaluating the success of the program in meeting its goals. This section explores how programs were recruited to participate in Getting Ready, the characteristics of the programs and the children they serve, their initial perceptions of Parent Aware, and the initial quality of their care.

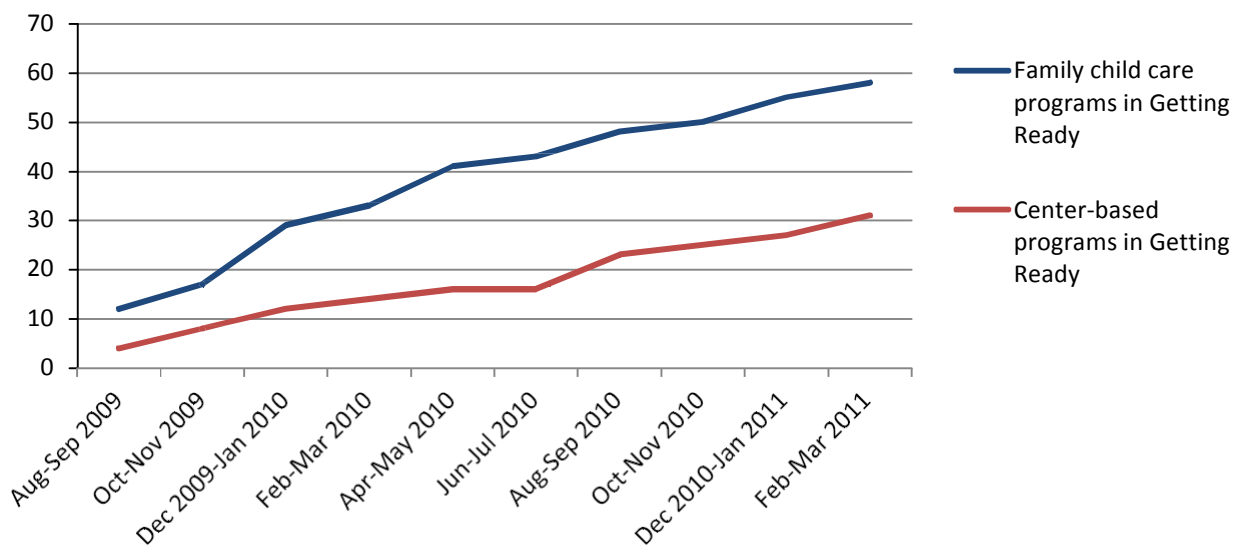
Findings in this section are drawn from numerous data sources. Information about program recruitment and retention was collected from the Project Coordinator. Additional data was obtained from Getting Ready program applications, the Child Trends Evaluation Intake Survey (administered only to participants who consented to participate in the evaluation), and the initial Getting Ready Checklist (administered and recorded by the Getting Ready Project Coordinator). Getting Ready programs were also compared to Parent Aware programs using data from the Final Parent Aware Evaluation Report.¹¹

¹¹ Tout, K., Starr, R., Isner, T., Albertson-Junkans, L., Soli, M., and Quinn, K. (2011). Evaluation of Parent Aware: Minnesota's Quality Rating and Improvement System Pilot: Final Evaluation Report. Minneapolis, MN: Child Trends.

RECRUITMENT & RETENTION

In line with the goal of prioritizing programs underrepresented in Parent Aware, recruitment of Getting Ready participants began in August of 2009 by exclusively targeting non-profit, center-based child care programs and licensed family child care programs in Minneapolis and St. Paul. After recruitment slowed, eligibility criteria were expanded in December of 2009 to include for-profit center-based programs to allow more programs to participate. Figure 1 below reflects Getting Ready enrollment patterns by program type in two-month intervals from August 2009 through March 2011. A program's joining date is defined as the date when the provider had their first meeting with the Getting Ready Project Coordinator to complete the Getting Ready Checklist.

Figure 1. Family child care and center-based programs joining Getting Ready



Source: Getting Ready Program Records, July 2009 – April 2011

Of the 89 programs that joined Getting Ready, 16 programs (9 family child care and 7 center-based programs) withdrew from Getting Ready before completing an exit interview. Of those programs with known reasons for withdrawing, a few joined another quality improvement program, such as Building Quality or the Accreditation Facilitation Project, and a couple decided that re-joining at a later time would better fit their needs.

The duration of participation in Getting Ready varies across programs and by program type. For this purpose, we defined the duration of participation as the time between the intake session (where the Project Coordinator facilitates the completion of the initial Getting Ready checklist) and the exit interview (where the Project Coordinator facilitates the completion of the final Getting Ready checklist). Using this definition, the majority of programs (89% of family

Most programs received Getting Ready services for at least 6 months.

child care programs and 69% of center-based programs) received Getting Ready services for at least six months. The average length of participation across all programs that completed both initial and exit interviews was just over nine months. Both family child care programs and center-based programs received Getting Ready services for at least four months, with family child care programs receiving services for up to 21 months and center-based programs receiving services for up to 14 months.

CHARACTERISTICS OF PROGRAMS PARTICIPATING IN GETTING READY

Getting Ready has continued to serve populations underrepresented in Parent Aware, including family child care programs and English Language Learners. Table 2 below describes characteristics of center-based programs and family child care programs that have participated in Getting Ready between July 2009 and October 2011. Across its first two years of implementation, family child care programs constituted the majority of programs served by Getting Ready, representing 65% of all programs as of October, 2011. Similarly, English Language Learners (ELL) comprised a sizeable portion of participants (28% of all programs and 43% of family child care programs were led by an English Language Learner). Just over half the participating programs (58%) are located in Minneapolis, while the rest (42%) are located in St. Paul.

Table 2. Characteristics of programs participating in Getting Ready

Program type	Total number of participants	Primary language is Hmong	Primary language is Somali	Primary language is Spanish	Other non-English primary language	Number from Minneapolis and St. Paul*
Family child care	58	9	7	5	4	35 Mpls, 23 St. Paul
Center-based programs	31	0	0	0	0	17 Mpls, 14 St. Paul
Total	89	9	7	5	4	89

**While programs in Wayzata were potentially eligible, none were recruited to participate in Getting Ready.*

Source: Getting Ready program records, July 2009 – October 2011

At the outset of participating in Getting Ready, providers complete a Program Application that collects general information related to their program’s enrollment and basic characteristics of the children they serve. Program Application data is available for all 58 family child care programs participating in Getting Ready. Nearly all providers were women. The average length of licensure among family child care programs at the time the Program Application was completed was 6.8 years and ranged from 0 to 29 years. Only one family child care program was not yet licensed at the time of completing the program application; six had been licensed less than a year; and another 22 had been licensed between one and five years. More than a third of family child care programs (35%) had been licensed for nine or more years.

CHARACTERISTICS OF CHILDREN IN GETTING READY PROGRAMS

As of October 2011, at least 2,085 children have been served by family child care programs and center-based programs participating in Getting Ready. While center-based programs in Getting Ready serve a similar population of children as do center-based programs in Parent Aware, notable differences emerge in the characteristics of children served by family child care programs in Getting Ready compared to children served by family child care programs in Parent Aware. As described below, the children cared for by family child care programs in Getting Ready are more likely to be receiving child care assistance (subsidies) to pay for child care and more likely to be English language learners than children served by family child care programs in Parent Aware.

Family child care programs serve a total of 413 children, most of whom are enrolled full-time in their respective programs (70%). The remaining 30% of children are enrolled part-time. Family child care programs serve, on average, seven children. Only a small portion of family child care providers (12%) report caring for their own children. Enrollment ranges from zero to 14 children, with roughly one-quarter of family child care programs serving fewer than five children; nearly 40% serving between five and eight children (38.6%); and just over one-third (35%) of serving nine or more children.

Of the 31 center-based programs participating in the second year of Getting Ready, 29 completed Program Applications. These 29 center-based programs serve a total of 1,672 children, with most center-based programs serving more than 40 children. Nine center-based programs (31%) serve fewer than 38 children; 10 (35%) serve 38-63 children; and another 10 (35%) serve more than 64 children. Most children enrolled in Getting Ready center-based programs are preschoolers (56%) or infants or toddlers (33%). Fewer children (11%) are of school age.

Getting Ready programs serve 772 children receiving child care assistance (CCAP), 187 receiving other scholarships, 378 who are English Language Learners (ELL), and 86 who have an Individual Education Plan (IEP) or Individualized Family Service Plan (IFSP).

Getting Ready programs serve a total of 2,085 children. Children served by family child care providers in Getting Ready are more likely to be receiving child care assistance and more likely to be English language learners than children served by family child care providers currently rated by Parent Aware.

Table 3. Characteristics of the children cared for by Getting Ready programs from July 2009 to October 2011, compared to the characteristics of children care for in fully-rated Parent Aware programs.

	Family Child Care		Center-based programs	
	Getting Ready (N=58)	Parent Aware (N=45)	Getting Ready (N=29)	Parent Aware (N=70)
Average number of children in care	7	9	58	53
% of children receiving child care assistance	46%	30%*	35%	36%*
% of children who are English Language Learners	50%	8%*	10%	20%*
% of children receiving other scholarships	<1%	^	11%	^
% of children with an IEP or IFSP	6%	^	4%	^

*Estimated from survey data to full population of Parent Aware programs.

^Data on the % of children receiving other scholarship and the % of children with an IEP or IFSP in fully-rated Parent Aware programs was not available.

Source: *Getting Ready Program Applications, July 2009 – October 2011 and the Final Parent Aware Evaluation Report (Tout et al, 2011).*

Children served by family child care programs in Getting Ready differ in important ways from those served by family child care programs in Parent Aware. Child care assistance is received by nearly half (46%) of children in family child care participating in Getting Ready, compared to approximately 30% of children in Parent Aware-rated family child care.¹² Similarly, ELL children comprise half (50%) of family child care enrollees in Getting Ready compared to only 8% in Parent Aware.

Meanwhile, center-based programs participating in Getting Ready and center-based programs in Parent Aware are more similar. Child care assistance is received by 35% of children in center-based programs participating in Getting Ready and by approximately 36% of children in Parent Aware-rated center-based programs. However, one difference emerged between center-based programs in Getting Ready and center-based programs in Parent Aware. Just 11% of children enrolled in a center that is participating in Getting Ready are ELL versus approximately 20% of children enrolled in center-based programs with Parent Aware ratings. In other words, a smaller percentage of children in Getting Ready center-based programs are ELL than are those in Parent Aware-rated center-based programs.

¹² Tout, K., Starr, R., Isner, T., Cleveland, J., Albertson-Junkans, L., Soli, M., & Quinn, K. (2011). Evaluation of Parent Aware: Minnesota's Quality Rating and Improvement System Pilot: Final Evaluation Report. Minneapolis, MN: Child Trends.

The differences in child characteristics seen between family child care programs in Getting Ready and Parent Aware suggest the success of Getting Ready in recruiting family child care programs that enroll higher-risk children, a group which is underrepresented in Parent Aware.

Between the first year of the Getting Ready evaluation and this final report, some changes were seen in the average characteristics of the children served. To better understand these changes, programs were divided into three groups based on when they were enrolled into Getting Ready. The evaluation team hypothesized that programs with the highest proportion of children with high needs would be enrolled first and that program staff might subsequently have difficulty finding, recruiting, and enrolling programs with a similar proportion of high needs children. Table 4 shows the differences between the children served by programs that were early-enrollers (joined in the first four months of Getting Ready), middle-enrollers (joined between the fifth and tenth month), and late-enrollers (joined in the last eight months of the program).

Table 4. Characteristics of children served by programs that enrolled early in the Getting Ready process compared to characteristics of children served by programs that enrolled in Getting Ready at a later point.

Population of interest	Percent of children receiving child care assistance	Percent of children receiving another scholarship	Percent of children who are English Language Learners	Percent of children who have an IEP/IFP
Early enrollers (8/12/2009 - 12/31/2009)				
Family child care (n=27)	50%	0%	71%	5%
Center-based programs (n=9)	32%	9%	5%	4%
Middle enrollers (01/01/2010 - 06/30/2010)				
Family child care (n=16)	43%	3%	56%	5%
Center-based programs (n=7)	49%	15%	19%	8%
Late enrollers (07/01/2010 - 03/22/2011)				
Family child care (n=15)	42%	1%	8%	6%
Center-based programs (n=15)	34%	11%	12%	3%

Source: Getting Ready Program Applications, July 2009 – October 2011

Family child care programs that joined Getting Ready early in the evaluation served a far greater percentage of English Language Learners (ELL) than did programs that joined later. Indeed, 71% of children served by family child care programs that joined during the first four months of the evaluation were ELL compared to only 8% of children served by programs that joined during the final 8 months of the two-year evaluation. The proportion of children receiving Child Care Assistance (CCAP) in family child care programs entering Getting Ready also declined slightly over time (from 50% in the first trimester to 42% in the final trimester).

Interestingly, centers recruited mid-way through the evaluation served more high-risk children than did early-enrollers or late-enrollers. In fact, the seven centers that joined between January, 2010 and June, 2010, served more children on CCAP, more children receiving other scholarships, more children who are English language learners, and more children with an IEP/IFSP than did early-enrollers or late-enrollers. In contrast to the trend found among family child care programs, Getting Ready appears to have become slightly more successful over time in recruiting centers serving a higher percentage of children with risk factors.

INITIAL PERCEPTIONS OF PARENT AWARE

Providers participating in Getting Ready were invited to participate in the evaluation of Getting Ready, which includes completing a brief survey intended to capture their perceptions and knowledge related to Parent Aware prior to receiving Getting Ready services. This survey is called the Evaluation Intake Survey and as of May 5, 2011, it had been completed by all 61 providers participating in the evaluation.

In the pre-Getting Ready survey, providers are asked the extent to which they agree with the following statements:

- 1) I understand what I need to do to earn a 3- or 4-star rating.
- 2) There are obstacles preventing me from reaching a 3- or 4-star rating.

Respondents could choose from the following options: "Strongly Disagree," "Somewhat Disagree," "Neutral/I don't know," "Somewhat Agree," or "Strongly Agree."

Most providers (80%) "somewhat agree" or "strongly agree" that they know what they need to do to earn a 3- or 4-star rating in Parent Aware. Only 15% "somewhat disagree" or "strongly disagree" and 5% are "neutral." In contrast, providers' responses to whether barriers prevent them from achieving a high-star rating are more split. Whereas one-third (33%) of providers "somewhat disagree" or "strongly disagree" that obstacles prevent them from reaching 3- or 4-stars, almost half of providers (49%) "somewhat agree" or "strongly agree" that barriers exist. These providers then were asked to describe the obstacles they face; the most common obstacles related to resources or classroom materials, money, time, and resistance to change after years of having a system in place.

INITIAL QUALITY LEVEL OF PARTICIPATING PROGRAMS

Before receiving Getting Ready improvement supports, providers from 89 programs completed the Getting Ready Checklist, a self-assessment tool for determining a program's ability to meet Parent Aware quality indicators. The Checklist is designed to determine whether or not a program currently meets each of the Parent Aware indicators.¹³ If the program does not currently meet an indicator, the Checklist encourages the program to create a brief action plan, outlining the steps that will be taken to meet the indicator.

The Getting Ready Checklist was completed during an intake meeting with the Getting Ready Project Coordinator who is knowledgeable about the Parent Aware indicators and the documentation required for each indicator. The Project Coordinator is able to answer questions about the Parent Aware indicators and help a program more accurately determine

At intake, only 9% of family child care programs reported meeting at least 40% of the questions on the Getting Ready Checklist, the standard for determining a program's readiness to join Parent Aware.

what more is needed to demonstrate fulfillment of the Parent Aware indicators. The Project Coordinator also helped the program to determine its action plan that would align with the services and supports available through Getting Ready. Because the Project Coordinator was involved in the completion of all 89 Getting Ready Checklists (some with the assistance of an interpreter), the results of the assessment are likely more consistent and accurate than they would have been if providers completed the assessments without assistance.

This checklist serves as a baseline for assessing changes made to a program through the course of Getting Ready participation. (In Section 5, we will present detailed comparisons of programs' scores on the Getting Ready Checklist before and after their participation in Getting Ready services.)

The Parent Aware website, www.parentawareratings.org, states that a program that can answer "Yes" to 40 to 50% of the questions on the Getting Ready Checklist is ready to be rated by Parent Aware. Before receiving Getting Ready services, only 5 of the 58 (9%) family child care providers in Getting Ready answered "Yes" to at least 40% of these questions. In contrast, 27 of 31 (87%) providers from center-based programs answered "Yes" to at least 40% of these questions. Family child care programs participating in Getting Ready were significantly less prepared than center-based programs to join Parent Aware at the start of Getting Ready.

¹³ Parent Aware indicators can be viewed at: http://www.parentawareratings.org/providers-educators/download/Indicator_summary_full_rating_FCCs.pdf for family child care providers and http://www.parentawareratings.org/providerseducators/download/Indicator_summary_full_rating_centers.pdf for center-based programs.

SUMMARY

In its first two years of implementation, Getting Ready has served 89 programs. Most of these participants are family child care programs, and just under a third of participants are English language learners. Approximately two-fifths of children served in Getting Ready programs are receiving child care assistance and one-fifth of children served are English language learners. Family child care programs in Getting Ready serve more high-needs children than do family child care programs in Parent Aware, whereas center-based programs in Getting Ready serve the same (or lower) percentage of high-needs children than do center-based programs in Parent Aware.

Family child care programs participating in Getting Ready are in greater need of quality improvement supports than center-based programs participating in Getting Ready. Less than 10% of family child care programs entering Getting Ready already meet the criteria to be considered “ready” for Parent Aware, compared to over 80% of center-based programs.

Getting Ready participants receive services for nine months, on average, but the duration of participation varies widely. In the next section, we will describe the supports that programs are receiving to improve their quality.

SECTION 3. SERVICES AND SUPPORTS PROVIDED TO CHILD CARE PROGRAMS/PROVIDERS

This section describes the services and supports provided by the Getting Ready Project Coordinator, the ERS Consultants, the Mentors, and the Outreach Specialists utilizing several data sources: program implementation data as tracked by staff members in a Wiki, interviews with providers that have completed their participation in Getting Ready, and online surveys completed by Getting Ready program staff. Each of these sources is described in greater depth below. For an overview of sources used in this report, refer to Table 1.

The first data source is a Wiki (a set of structured spreadsheets housed online via GoogleDocuments, a.k.a., GoogleDocs). These spreadsheets are a way for program staff to record their interactions with participants, track a program’s needs and improvements, and communicate and coordinate with other staff members. These spreadsheets are the most complete record available of the services provided to Getting Ready participants. The Wiki records of 36 family child care programs and 17 center-based programs that had completed their participation in Getting Ready were coded and analyzed by the evaluation team to explore patterns in services provided, such as the average number of calls and visits that programs receive from each staff member.

The second data source was a phone interview conducted by the evaluation team with participating providers. A total of 30 providers completed the interview. Six center-based providers and four family child care providers were interviewed in October and November 2010. In May and June 2011, four center-based providers, six English-speaking family child care

providers, and ten non-English speaking family child care providers were interviewed. All of the ELL providers and 12 of the 20 non-ELL providers had already received their Parent Aware rating at the time of the interview; nine had already turned in their Quality Documentation Packet (and were awaiting their rating) at the time of the interview, and one had not yet started the Parent Aware rating process. Providers were asked to report on their experiences working with a Mentor (for family child care providers), Curriculum Consultant (for center-based providers), ERS Consultant, and Outreach Specialist (for ELL providers), the activities they engaged in most often with each of these staff members, the goals they set for their program, the improvements they made (which will be reported on in Section 4), and their experience with the Parent Aware rating process (which will also be reported on in Section 4). Interviews with ELL providers were conducted with interpreters from the Language Line (a service provided by Resources for Child Caring). Because interviews involving an interpreter take longer than regular interviews, the interview protocol for English Language Learners was abbreviated. This ensured that ELL providers and Language Line interpreters were not unduly burdened by the interview. As a result, ELL providers were asked some but not all questions that were asked of English-speaking providers.

The third data source was a survey of Getting Ready staff members, conducted in September 2011. Mentors, Curriculum Consultants, ERS Consultants, and Outreach Specialists were asked to complete an online survey about their work with Getting Ready. The survey includes 30 questions, two of which are asked only of Mentors and Curriculum Consultants, two are asked only of ERS Consultants, and two are asked only of Outreach Specialists. Staff were asked to report on which activities they engage in most frequently with providers, how consistent their approach is when working with providers, their confidence in their ability to perform certain tasks, their communication and record-keeping practices, and changes to their workload and practices in the second year of implementation.

INITIAL MEETING/SELF-ASSESSMENT USING CHECKLIST

According to the Wiki data, the majority (79%) of providers from programs that have completed the Getting Ready process met with the Project Coordinator just once, for the initial self-assessment using the Getting Ready Checklist. However, ten family child care providers and one provider from a center-based program had at least one additional on-site meeting with the Project Coordinator. On average, providers checked in with the Project Coordinator by phone or email 2.3 times during the course of their involvement in Getting Ready (calls or emails with the purpose of scheduling another call or meeting were not included in this count).

MENTORS & CURRICULUM CONSULTANTS

Family child care providers in Getting Ready receive mentoring on Creative Curriculum and the Creative Curriculum Assessment tool from Mentors who are themselves practicing family child care providers. The Mentors are hired by the Minnesota Licensed Family Child Care Association (MLFCCA) on a part-time basis. Providers from center-based programs also receive consultation on Creative Curriculum from a Curriculum Consultant, who is employed by Resources for Child Caring.

Both Mentors and Curriculum Consultants are discussed in this section because both provided support for curriculum and assessment implementation. However, each of these positions involved the provision of additional supports in addition to supports for curriculum and assessment implementation.

According to the Wiki records, 94% of center-based programs received supports from a Curriculum Consultant, and 92% of family child care programs received supports from a Mentor. Family child care programs received, on average, 5.0 visits from their Mentor (ranging from 1 to 10 visits). Center-based programs received, on average, 4.1 visits from their Curriculum Consultant (ranging from 0 to 13 visits). In addition to visits, both center-based programs and family child care programs received an average of 1.9 substantive phone calls or emails as part of their mentoring relationship (ranging from 0 to 10 calls). Nearly a third of center-based programs (31%) interacted with their Curriculum Consultant more often by phone or email than via onsite visit. Just 15% of family child care providers interacted with the Mentor more often by phone or email than via onsite visit. Just over half of center-based programs (53%) received support on the CLASS from their Curriculum Consultant. No family child care programs received support for the CLASS tool since this tool is not used to determine the Parent Aware rating for family child care programs.

In the Year One Report, Mentors described playing a multi-faceted role with family child care programs which includes teaching about the curriculum and assessment tool but also answering general questions about business practices, dealing with parents, and other day-to-day issues. In interviews, Mentors were more likely than ERS Consultants to say that their purpose changes depending on the immediate needs of the program. Mentors did not describe using a particular model of mentoring but all reported that goal-setting is a consistent part of their work with programs. Nearly all Mentors described basing their practices on the needs and interests of providers and taking the process at the pace set by the provider. Most Mentors reported that providing resources for programs that do not have adequate materials is also a frequent activity. Mentors did not report any consistent sequence of activities beyond starting with relationship-building and then moving on to goal-setting and action. These initial findings are extended in this section.

Only one Curriculum Consultant was interviewed, so that individual's responses to the interview are excluded for reasons of confidentiality.

Provider Perceptions of Mentors

In 2011, Getting Ready providers who completed phone interviews were first asked if they had a Mentor (for family child care programs) or Curriculum Consultant (for center-based programs) as part of their Getting Ready participation. Those who reported that they did (N=7 centers and 19 family child care programs) were then asked, “What was your experience working with your Mentor/Curriculum Consultant?” and were encouraged to provide examples of specific help they had received, to comment on whether or not their expectations had been met, and to think of ways the Mentor/Curriculum Consultant could have been more helpful. Most center-based providers (five out of seven) had positive comments about their Curriculum Consultant and nearly all family child care providers (17 out of 19) replied with positive comments about their Mentor. The remaining comments were neutral.

The majority of family child care providers reported that Mentors helped them with their environment (arranging their space, setting up centers, choosing materials). Four providers mentioned that their Mentor helped them with paperwork, one provider talked about her Mentor helping her set up a daily schedule, and one discussed her Mentor showing her how to take notes while observing children and share them with parents at conferences. Comments by family child care providers about their Mentors, included:

Both center-based providers and family child care providers report positive experiences with their Mentor or Curriculum Consultant.

- “She gave me lots of ideas of how to work the curriculum into my daily schedule. She had a lot of resources for me and ideas of places for me to go for information. She brought examples and gave me a lot of encouragement. She was very positive and helped me stay balanced. She made herself very available.”
- “She was helping me with activities for the kids and not just buying things but using what I have already or purchasing cheaper things. She showed me how to go online to find materials. Building a binder. Talking about things I need for the drama area and other ideas. She's helping me set things up.”
- “She helped me with a lot of paperwork. I didn't understand it and I couldn't read it that good. She would call me and ask me if I got something in the mail that I didn't understand. She helped me do this for the loan. I did have books that I didn't need and unnecessary toys that kids that weren't playing with. She helped me have things handy for kids depending on their age.”
- “I had some questions about assessment and she gave me some ideas. Some ideas about how to do parent conferences. She brought a sample of hers, how to take notes before a conference, how to observe kids.”

Half of the interviewed ELL providers gave examples to indicate that working with a Mentor increased their knowledge of early childhood development. Some of these examples included showing the provider *how to* read books and *how to* play with the children, as well as teaching the provider about age-appropriate activities.

- “[My Mentor] teaches me how to play with children. She brings books and shows me how to read to children. She has helped me with a lot of things. She teaches me how to do arts and crafts and cut out pictures and shapes. She brought in examples of an easel and different art projects I can do. She has contributed to my environment and helped me set it up for the children.”

Center-based providers reported different experiences with their Curriculum Consultant than did family child care providers with Mentors. Three center-based providers talked about their Curriculum Consultant helping them with the CLASS, three said that their Curriculum Consultant answered questions and gave feedback to teachers, and two said they helped them prepare for or improve their Parent Aware rating.

- “She gave us realistic expectations and set up a plan with us so we were successful when we got rated. She helped us look at the way our room was organized and gave us feedback on what we could consider changing to meet the needs of kids and improve our rating.”
- “I think she's great. She's very knowledgeable. She sits down with the teachers and is very honest. She did a great job explaining the CLASS in simple ways. Not an overhaul.”
- “She was great. Incredible the way she helped answer questions and she was very prompt. She helped us with the CLASS tool. She did a mock observation letting us know what we need to work on. She went through little things in the environment. Helped us with our binder.”
- “I think it's been fabulous. She shows up on time. She communicates. She works directly with classroom teachers, gives us great feedback.”

English-speaking providers were also asked if the help they received from their Mentor was what they expected and what their Mentor could have done to be more helpful. The majority of respondents did not know what to expect from their Mentor and could not think of a way the Mentor could have been more helpful. Examples include:

- “I didn't expect this kind of help. I didn't know what it would be like. I was frustrated about it at first but it made me feel good [that she understood how hard it is].”
- “I wasn't expecting as much as I got! [It would have been more helpful if she had been] able to work with me more frequently. There was more help I needed.”

In the second year of interviews, English-speaking family child care providers who reported working with a Mentor (N=6) were asked to rate the responsiveness of their Mentor on the following scale: Very responsive, Mostly responsive, Somewhat responsive, or Not very responsive. Five of these respondents reported that their Mentor was “very responsive,” and one respondent reported “mostly responsive.”

Activities Mentors Engage in with Providers

In the second year of interviews, English-speaking family child care providers were asked about a series of activities they might have engaged in with their Mentor.¹⁴ Respondents were asked to indicate whether or not they did the activity, and if so, how often. In year two, six family child care providers were interviewed who reported having worked with a Mentor. As shown in Table 5 below, there is no activity that all respondents report engaging in with their Mentor.

Table 5. Activities engaged in most often with a Mentor (According to family child care providers)

Questions posed to family child care providers during phone interview	Percent who report this activity happened at all (N=6)	Frequency of the activity, if it happened at all
Did your Mentor observe your interactions with children and talk to you about how you could improve your interactions with children?	2	Once or twice (1) Occasionally (1)
Did you and your Mentor rearrange the furniture and materials in your space (or discuss rearranging it)?	4	Occasionally (3) Once or twice (1)
Did your Mentor work with the children in your home/classroom(s) to show you how to interact with children and lead new activities?	3	Once or twice (1) Occasionally (1) At most visits (1)
Did your Mentor show you how to make a lesson plan for the week's lessons and activities? (Using the curriculum as a guide)	4	Once or twice (3) At most visits (1)
Did your Mentor show you how to assess a child's progress by conducting a child assessment while you watched?	1	Once or twice (1)
Did your Mentor talk with you about the results of child assessments and how to adjust your teaching to meet their needs?	2	Once or twice (2)
Did your Mentor talk with you about how to run your child care business?	4	Once or twice (4)
Did your Mentor talk with you about how to relate to parents?	4	Once or twice (1) Occasionally (1) At most visits (2)
Did your Mentor help you fill out paperwork or document your practices for Parent Aware?	3	Occasionally (2) At most visits (1)

Source: Phone interview with Getting Ready graduates, completed by Child Trends in Spring/Summer 2011.

¹⁴ English-speaking center-based providers were asked similar questions about their Curriculum Consultant, but since only two center-based providers completed the interview, the sample is too small to be reported.

The activities that family child care providers reported their Mentors did most frequently were:

- Rearranging the furniture and materials in the provider's space/classroom,
- Showing the provider how to make a lesson plan for the week's activities,
- Talking about how to run a child care business, and
- Talking about how to relate to parents.

The five surveyed Mentors were also asked to report on how often they engaged in each of the activities listed in Table 5 with family child care providers. For each of the activities, Mentors could say that they do the activity "with every provider," "with most providers," "with some providers," "with just a few providers," or "never." The activities most frequently reported by Mentors were:

- Discuss with the provider the results of child assessments and how she can adjust her teaching to meet children's needs.
- Discuss with the provider how she relates to parents and how to increase family engagement.
- Work with the provider to make a lesson plan for the week's lessons and activities (Using the curriculum as a guide).

All five mentors reported engaging in the first two of these activities with all or most providers. However, there was a great deal of variation in the frequency with which mentors report engaging in other activities. In fact, there were three activities for which at least one Mentor reported never doing the activity and at least one Mentor reported doing the activity with every provider they work with.

Family child care providers and Mentors report engaging in a broad range of activities together, with no single activity reported by all providers.

To approach the question from another angle, Mentors were also asked to identify the three activities that they do most often, as opposed to the activities that they do with the most providers (even if done only minimally). The activities that Mentors report doing most often are:

- Assist in rearranging the furniture and materials in the provider's space (or discuss rearranging it);
- Work with the provider to make a lesson plan for the week's lessons and activities (using the curriculum as a guide);
- Discuss with the provider the results of child assessments and how she can adjust her teaching to meet children's needs;

Notably, these activities are not all the same as the activities that Mentors report doing with the majority of providers. Moreover, there is no activity that is identified by more than three Mentors as being in their top three most frequent activities.

Mentors were asked to what extent they agree with each of the following statements:

- I have a standard, consistent approach to working with providers.
- I take the lead in my relationship with the provider and set the agenda for our meetings.

- I base my actions and activities entirely on what the provider wants to do.
- I wish I had a more standardized approach to mentoring/consultation.

These questions were intended to capture information about the extent to which mentoring is a standardized process, the extent to which the provider directs the relationship, and whether additional standardization would be desirable. (The same question was asked of ERS Consultants and their responses will be reported on later in this section.)

Responses to these questions reveal that not all Mentors share a common attitude toward standardization. Of the five surveyed Mentors, two Mentors feel strongly about individualizing services to the provider, and not standardizing their practices. These Mentors disagree with the statement, “I have a standard, consistent approach to working with providers,” agree with the statement, “I base my actions and activities entirely on what the provider wants to do,” and strongly disagree with the statement, “I wish I had a more standardized approach to mentoring/consultation.”

In contrast, one of the surveyed Mentors reported having a standardized approach and having interest in further standardizing the process. She agreed with the statement, “I have a standard, consistent approach to working with providers,” agreed with the statement, “I take the lead in my relationship with the provider and set the agenda for our meetings,” disagreed with the statement, “I base my actions and activities entirely on what the provider wants to do,” and agreed with the statement, “I wish I had a more standardized approach to mentoring/consultation.”

The remaining two Mentors did not have a consistent pattern of responses to these questions, implying that they may use different strategies with different providers, or are trying to strike a balance between standardization and individualization. Both were neutral (neither agreed nor disagreed) about the statement, “I wish I had a more standardized approach to mentoring/consultation.”

Creative Curriculum & Assessment

Providers were asked whether or not they (or their staff) had attended Creative Curriculum and Assessment training and to what extent the Curriculum was being implemented in their program. Three quarters of respondents (23 out of 30) reported having attended Creative Curriculum training or sending teachers from their program to attend training. Only three of the 23 providers who reported that the program staff had received training also reported that their programs had not started using Creative Curriculum or the assessment tool.

English-speaking providers were also asked whether they were using the results to guide their teaching plan and whether or not they were sharing the results with parents. Providers who reported using the assessment tool (13 out of 15) also reported using the results to guide their teaching plan and sharing the results with parents. Nine out of 13 reported that they use the results for their planning every week and two out of 13 reported using the results for their planning some weeks but not every week.

All providers were asked “What portion of the time you spent with your Mentor/Curriculum Consultant was focused on Creative Curriculum (both curriculum and assessment)?” and could choose from the following options: “All of the time,” “Most of the time,” “About half of the time,” or “Less than half of the time” (see Table 6). Respondents interviewed after the first year of Getting Ready reported spending significantly more time focused on Creative Curriculum than respondents interviewed after the second year of Getting Ready ($p < .05$).

Table 6. Amount of time spent with a Mentor/Curriculum Consultant on Creative Curriculum and Assessment

Portion of time with Mentor or Curriculum Consultant spent on Creative Curriculum and Assessment	English-speaking providers in center-based programs (N=5)	English-speaking family child care providers (N=8)	ELL family child care providers (N=7)
All of the time	1	1	1
Most of the time	2	3	3
About half the time	0	1	0
Less than half the time	2	3	3

Source: Phone interviews with Getting Ready graduates, completed by Child Trends in Fall 2010 and Spring/Summer 2011.

English-speaking providers were asked, “If you had the opportunity to receive this kind of mentoring on a different curriculum and assessment tool, would you have preferred something different?” Among the 15 English-speaking providers who attended Creative Curriculum training, three said that they would have preferred training on a different curriculum; five were unsure; and seven preferred Creative Curriculum. Two respondents reported not having attended Creative Curriculum training because they were already using High Scope Curriculum. Both these programs reported that they would have liked mentoring on High Scope if it had been available.

ERS CONSULTATION

The Getting Ready staff includes five ERS Consultants (including one Hmong-speaking staff member who serves both as an ERS Consultant and as an Outreach Specialist). The ERS Consultants are trained on the Environment Rating Scales by staff at the Assessment and Training Center (ATC) within the Center for Early Education and Development (CEED) at the University of Minnesota.

According to the Wiki records, 88% of center-based programs and 89% of family child care programs received the supports of an ERS Consultant. Center-based programs received, on average, 5.5 visits from their ERS Consultant (ranging from 2 to 11 visits) while family child care programs received, on average, 6.1 visits from their ERS Consultant (ranging from 2 to 17 visits). These visits included 1.4 classroom observations per center-based program and 1.1 classroom

observations per family child care program. In addition to visits, center-based programs received, on average, 2.1 substantive phone calls or emails while family child care programs received, on average, 1.2 substantive phone calls or emails. Nearly half of ELL providers (44%) attended a group training on the Environment Rating Scales, provided in their primary language.

In interviews summarized in the Year One report, ERS Consultants described a consistent sequence of activities that guides their interactions with programs. On the initial visit to the program, the ERS Consultant reviews the All-About-the-ECERS-R or All-About-the-ITERS-R book and watches a DVD that provides examples of environments at various levels of quality. Having provided a basic overview of the observation tool and how it is scored, the ERS Consultant then schedules a time to observe the program's environment and score it. The provider is also asked to score her own environment using the ERS, at whatever time is convenient for her. The ERS Consultant and provider then meet to compare their scores, a process called consensus scoring. The Consultant and provider use the score to identify areas for improvement and set goals. Providers have time to make improvements to their program before a second observation by the Consultant. Finally, the Consultant talks with the provider about improvements that were observed and improvements that can still be made. The relationship between ERS Consultants and providers is explored in more depth.

Provider Perceptions of ERS Consultants

Providers who completed a phone interview as part of the Evaluation (whether in the first year of interviews or the second) were asked if they had worked with an ERS Consultant as part of their Getting Ready participation. Those who reported that they did (N=27) were then asked, "What was your experience working with your ERS Consultant?" and were encouraged to provide examples of specific help they had received, to comment on whether or not their expectations had been met, and to think of ways the ERS Consultant could have been more helpful. Approximately one-third of English-speaking respondents (5 of 17) responded with positive comments about their ERS Consultant, one-third (6 of 17) responded with neutral comments, and one-third (6 of 17) responded with negative comments. Positive comments included:

Provider perceptions of their ERS Consultants varied widely.

- "It was really great. She was honest with her feedback and helped us understand why setting up your environment [in a] different [way] would not only enhance our score but also be better for kids and teacher supervision. It was helpful to have the room set up so that teachers could see kids everywhere in the classroom." (Center-based provider)
- "She basically told me what I needed and broke down the book about what I needed in my environment to make it better to get a better rating. She told me that I needed to put art pictures in certain areas to be specific about what was in that area, like the science area. She was very helpful." (Family child care provider)

Neutral comments included:

- “She knew what types of learning centers, how many objects to have at each, hand-washing and sanitizing techniques, room arrangement, etc. She was very hands-on and met regularly with one of our teachers. There was some concern that she didn't follow through on the days she said she was coming. She'd say that she'd have the whole day and show up for a half an hour.” (Center-based provider)
- “She came in after I got rated. Assessed what I needed to improve. She gave me ideas of little things that I needed based on my rating [observation]. They didn't give me specific feedback. I didn't agree with my rating visit but I did the things she told me to do because I didn't have a choice. She helped me with materials I needed to order. I only was with her for 3 visits. [When asked if this was what she was expecting] I didn't know what to expect. No one gave me information.” (Family child care provider)

Negative comments included:

- “She was not as knowledgeable. She was vague and didn't answer very many questions. It was a struggle. Like, when teachers asked her “What does several mean?” she wasn't able to answer with clarity. I think that when you get assigned a specific [consultant] like this you hope they are knowledgeable in that area. Obviously she had been trained but actually implementing it is different.” (Center-based provider)
- “She was very unprepared and didn't follow-up. I saw her several times and don't remember anything she helped with. She did a mock observation but never gave me any feedback. I didn't know what to expect but I didn't think it was acceptable.” (Family child care provider)

In contrast, 100% of ELL providers had positive comments about their ERS Consultant. They most often remarked on how the ERS Consultant helped them choose appropriate materials, and helped them to organize, arrange, and decorate their space.

- “When she comes to my environment, she tells me how to set up my learning materials, for example, which materials are used for the daily routine. And she teaches me how to sort out materials and how to arrange the materials so that they are accessible to children.”

In the second year of interviews, English-speaking providers (N=9) who reported working with an ERS Consultant were asked, “How knowledgeable was your ERS Consultant about the Environment Rating Scales?” and were asked to choose from the following options: Expert, Very knowledgeable, Sufficiently knowledgeable, Not as knowledgeable as I would have liked, or Not at all knowledgeable. All providers reported that their ERS Consultants were knowledgeable. One provider reported that their ERS Consultant was an “expert,” five reported that their ERS Consultant was “Very Knowledgeable,” and three reported that their ERS Consultant was “sufficiently knowledgeable.”

Also in the second year of interviews, English-speaking providers who reported working with an ERS Consultant (N=9) were asked to rate the responsiveness of their ERS Consultant on the following scale: Very responsive, Mostly responsive, Somewhat responsive, or Not very responsive. Two-thirds of providers (6 of 9) reported that their ERS Consultant was “very responsive,” and one respondent reported each of the following choices, “mostly responsive,” “somewhat responsive,” and “not very responsive.”

Provider Feedback on the ERS as a Quality Improvement Tool

In phone interviews, English-speaking providers were asked, “How helpful was the ERS as a way to think about improving the quality of your child care program (beyond just scoring well on the ERS for Parent Aware)?”, and were asked to choose from the following options: Not helpful at all, Helpful only because I want to score well on the ERS for Parent Aware, Somewhat helpful for thinking about my program's overall quality, or Very helpful for thinking about the overall quality of my child care program. Across both years of interviews, the majority of providers (58%) said that ERS was “very helpful,” with another 32% reporting that the ERS was “somewhat helpful.” Two respondents reported that the ERS is “not helpful at all” or “helpful only because I want to score well for Parent Aware.” Notably, however, responses were more positive in the first year of Getting Ready (n= 10 interviews) than in the second year (n= 9 interviews), with 90% of respondents in the first year of interviews reporting that the ERS was “very helpful” as a way to think about the overall quality of their program compared to just 22% reporting that the ERS was “very helpful” in the second year of interviews. Family child care providers were no more or less likely than providers from center-based programs to report that the ERS was “very helpful” as a way to think about improving the quality of care.

Providers in the first year of Getting Ready found the ERS more helpful as a way to think about improving quality than did providers in the second year of Getting Ready.

Activities that ERS Consultants Engage in with Providers

In the second year of provider interviews, ten English-speaking providers were asked about a series of activities they might have engaged in with their ERS Consultant. Respondents were asked to indicate whether or not they did the activity, and if so, how often. Nine out of ten interview respondents reported having worked with an ERS Consultant.

Table 7. Activities providers report engaging in most often with an ERS Consultant

Questions posed to providers during a phone interview	Number who report this activity happened at all (N=9)	Frequency of the activity, if it happened at all
Did your ERS Consultant review the All-About-the-ECERS or All-About-the ITERS book with you?	7	Once or twice (5) Occasionally (1) At most visits (1)
Did your ERS Consultant show you a DVD that shows examples of child care settings that score high (and low) on the ERS?	4	Once or twice (4)
Did your ERS Consultant conduct an ERS observation and talk to you about how you scored?	5	Twice (3) Once (1) I don't know (1)
Did your ERS Consultant ask you to score your own environment? If so, did you compare your scores to the scores given by your ERS Consultant? (aka consensus scoring)	5 scored their own environment. 3 of these 5 then compared scores with the Consultant.	N/A
Did you and your ERS Consultant help rearrange the furniture and materials in your space (or discuss rearranging it)?	6	Once or twice (4) At most visits (2)
Did your ERS Consultant talk to you about how you could improve your interactions with children?	3	Once or twice (2) At most visits (1)

Source: Phone interview with Getting Ready graduates, completed by Child Trends in Spring/Summer 2011.

As shown in Table 7, there was no activity that all providers reported engaging in with their ERS Consultant. However, most providers reported that their ERS Consultant reviewed an All-About-the-ERS book with them, helped rearrange the furniture and materials in their space, conducted an ERS observation, and asked them to score their own environment. The activity reported the least (3 out of 9) was talking about improving interactions with children.

In the online survey, ERS Consultants were asked to report on how often they engaged in each of these activities with providers. For each of the above activities, ERS Consultants could say that they do the activity “with every provider,” “with most providers,” “with some providers,” “with just a few providers,” or “never.” The activities most frequently reported by ERS Consultants were:

- Assist in rearranging the furniture and materials in the provider’s space (or discuss rearranging it).
- Conduct an ERS observation and review the results with the provider.

All ERS Consultants reported engaging in these two activities with “most” or “every” provider. When asked to identify the three activities they do most often, a similar pattern emerged. All

Providers and ERS Consultants report a consistent set of activities that they engage in together, but also some individualization.

surveyed ERS Consultants report the two activities listed above as being among the three activities they engage in most often.

Notably, while less than half of providers reported that their ERS Consultant had talked to them about how to improve interactions with children, most ERS Consultants reported engaging in this activity “with most providers” or “with every provider.” Despite this one discrepancy, in general, providers and ERS Consultants provide similar reports about how they are spending their time together.

ERS Consultants were asked to what extent they agree with each of the following statements:

- I have a standard, consistent approach to working with providers.
- I take the lead in my relationship with the provider and set the agenda for our meetings.
- I base my actions and activities entirely on what the provider wants to do.
- I wish I had a more standardized approach to mentoring/consultation.

These questions were intended to capture information about the extent to which ERS consultation is a standardized process, the extent to which the provider directs the relationship, and whether additional standardization would be desirable. (The same question was asked of Mentors and their responses are summarized earlier in this section.)

Compared to Mentors, ERS Consultants demonstrated more consistency in their responses to this question. All five ERS Consultants agree with the statement, “I have a standard, consistent approach to working with providers.” All five ERS Consultants agreed or were neutral about the statement, “I take the lead in my relationship with the provider and set the agenda for our meetings.” Four out of five ERS Consultants agreed or were neutral about the statement, “I base my actions and activities entirely on what the provider wants to do.” Finally, four of the five ERS Consultants disagreed or were neutral about the statement, “I wish I had a more standardized approach to mentoring/consultation.” In summary, ERS Consultants report having a standard, consistent approach to working with providers in which they usually lead, but also take into account the provider’s desires. ERS Consultants are generally content with the current level of standardization, and do not wish to standardize the process further. These responses are in accordance with the findings in the Year One Evaluation Report that ERS Consultants have a more consistent approach to their work with providers than do Mentors, but still find ways to individualize the process.

OUTREACH SPECIALISTS

Family child care providers who are not proficient in English receive Getting Ready supports through the help of an Outreach Specialist. There are five Outreach Specialists – two Hmong specialists, one Spanish specialist, one East African specialist, and one Somali specialist – who

serve as interpreters between providers and other Getting Ready staff. Outreach Specialists are generally present at every meeting a provider has with either a Mentor or ERS Consultant, so they see the provider more often than any other member of the Getting Ready staff. According to the Wiki, 17% of ELL providers have had at least one meeting with their Outreach Specialist that did not include any other Getting Ready program staff.

Outreach Specialists see the provider more often than any other member of the Getting Ready staff.

In the Year One Report, Outreach Specialists described their role as ensuring that providers understand what is happening during the process and what is being asked of them. They explained that merely interpreting the words of the mentor or ERS Consultant is not sufficient because the provider often needs additional explanation and will ask follow up questions to the Outreach Specialist, both during the visit and later by phone. Outreach Specialists must therefore have a

deep understanding of the Mentor or ERS Consultants' intentions and sufficient content knowledge of the curriculum and the ERS to be able to answer these questions. Outreach Specialists also described helping ELL providers to develop new concepts and to find the words in their home language for talking about their work in a new way. In Year Two, ten ELL providers were interviewed about their experience in Getting Ready. Their feedback is intended to provide a deeper insight into the role of Outreach Specialists.

Provider Perceptions of Outreach Specialists

In 2011, ELL providers were asked to describe their relationship with their Outreach Specialist, and explain how often they met with their Outreach Specialist when a Mentor or ERS Consultant was not present. Most ELL providers (7 of the 9 who reported working with an Outreach Specialist) reported that the Outreach Specialist functioned primarily as a translator and thus was present only (or primarily) when the Mentor or ERS Consultant was also present. However, several ELL providers explained that they would call their Outreach Specialist when they had questions and therefore spoke frequently to the Outreach Specialist. Only two ELL providers reported having met in person with their Outreach Specialist without the presence of a Mentor or ERS Consultant.

ELL providers were then asked how the Outreach Specialist most often helped them. Responses were coded to reveal common themes. ELL providers reported that their Outreach Specialist most often helped them to improve their business practices, to get professional development, and to engage in developmentally-appropriate practices. For example:

- “She would help me figure out what to work on with the children. We would talk about how one child was a toddler and that she needs to learn her colors. My other child is a preschooler and she talked about what preschoolers need. He needs to learn how to count and learn letters and how to write his name. She also said we should work on cutting with him because he's not very good at that yet. She helped me understand the stages they are at and what they need to learn.”

- “[My Outreach Specialist and my Mentor] went through my papers and organized my business forms. They helped me organize my professional development documents. They helped me have a better business.”

Overall, ELL providers report being very appreciative of the services provided by Outreach Specialists because these individuals make it possible for them to participate in a program that would otherwise be inaccessible for them.

COORDINATION OF SUPPORTS

Because providers are interacting with more than one Getting Ready staff person, it is important for Mentors, Curriculum Consultants, ERS Consultants, and Outreach Specialists to coordinate their supports. In Year One interviews, Getting Ready staff reported that a high level of collaboration has sometimes been difficult to achieve. As is common during implementation of a new program, there was some confusion in the first year of implementation about the roles and responsibilities of Mentors, Curriculum Consultants, and ERS Consultants which sometimes created tensions between these groups. This happened less frequently with Outreach Specialists. Getting Ready staff reported that this tension resulted in part from overlapping functions, and in part from not knowing very much about their fellow staff person’s background and experience. Since that time, some new measures have been put in place to encourage coordination. Staff perceptions of changes in coordination and collaboration and providers’ perceptions of the multiple supports provided in Getting Ready are explored in depth.

Provider Perceptions of Coordination among Staff

English-speaking providers were asked, “Did your Mentor and ERS Consultant work with each other or coordinate to help you and your program?” Most respondents (11 of 15) said that they didn’t think their Mentor and ERS Consultant had worked together or didn’t know if they had worked together. However, this lack of observed collaboration was not generally perceived as a problem by providers. When asked, “What was it like working with both a Mentor and ERS Consultant? Would you have preferred working with just one individual, or did you appreciate having multiple people involved? Why?”, the majority of respondents (11 out of 15) said they liked working with two people. Less than a third (4 out of 15) said they would have preferred one person. Those who liked working with multiple providers made comments such as:

- “It's good to have multiple viewpoints, as long as they aren't conflicting. I guess I liked having multiple people involved.”

Providers do not perceive that Mentors and ERS Consultants are coordinating their efforts, but most appreciate working with multiple people.

- “I think the more the better. More eyes on things. It's only two people too, it's not like five people were coming in at once.”

Those who said they would have preferred just one person providing supports provided comments such as:

- “I would have preferred just one person. I didn't know who all of these people were... It would be better if it was one person. Then they could get to know us.”
- “I would have preferred one individual. It would have streamlined the process. Because there were two different people there was never collaboration. Having one source would have helped us utilize it more. It would have helped us know where to seek out answers.”

Staff Perceptions of Collaboration and Coordination

In the online survey, Getting Ready staff members were asked, “How often do you speak (by phone or email) with other staff about how best to support a provider that you both work with? (This does not include conversations about scheduling.)” Their responses varied widely, as shown below in Table 8, with the median response being “Monthly.” Notably, all staff attend a monthly online meeting with one another, so this may be the monthly interaction that respondents are referencing.

Table 8. How often do you speak with other staff about how best to support a provider that you both work with?

Frequency of communication with other staff	Number of Getting Ready staff respondents (N=13)
Weekly	2
Twice monthly	4
Monthly	2
Every other month	1
Less often	3
Never	1

Source: Online survey of Getting Ready staff, conducted by Child Trends in September 2011.

Staff respondents were then asked to provide an example of how they have collaborated with another Getting Ready staff member to better serve a provider. Less than half of surveyed staff members provided an example. Two ERS Consultants reported calling the Getting Ready Project Coordinator to ask for advice. One Mentor described calling other staff members, and one explained that she never works with ERS Consultants. Two out of three Outreach Specialists described instances of collaboration.

SUMMARY

Mentors/Curriculum Consultants play a multi-faceted role with providers, and do not engage in a consistent set of activities across sessions or across providers. There is no activity that all Mentors say they do with all or most providers or that all providers report doing with their Mentor. However, providers and Mentors agree that some common activities include:

- Rearranging the furniture and materials in the provider's space/classroom,
- Showing the provider how to make a lesson plan for the week's activities,
- Talking about how to run a child care business, and
- Talking about how to relate to parents.

In interviews, the majority of providers (85%) gave positive feedback about their experience working with a Mentor, and three-quarters reported that their Mentor was "very responsive."

A significant part of the Mentor's role is facilitating the implementation of Creative Curriculum and the Creative Curriculum Assessment tool for those programs that have chosen to adopt the curriculum and associated assessment tool. Three-quarters of participating programs were trained in Creative Curriculum through their participation in Getting Ready and of those who received this training, over 85% were implementing the curriculum in their program. About half of interviewed providers reported spending "most" or "all" of their time with their Mentor working on Creative Curriculum and/or Assessment, while the other half reported spending no more than half their time with their Mentor working on Creative Curriculum and/or Assessment.

While mentoring appears to be a fluid and individualized process, ERS consultation is more standardized and consistent across providers. All five ERS Consultants agree with the statement, "I have a standard, consistent approach to working with providers." ERS Consultants report a multi-step process focused on educating providers about the ERS tool, conducting practice observations (sometimes using consensus-scoring), reviewing the program's scores to identify potential improvements and set goals, making improvements, and if possible, repeating the process. Similarly, the majority of providers reported that their ERS Consultant reviewed an All-About-the-ERS book with them, helped rearrange the furniture and materials in their space, conducted a practice ERS observation, and asked them to score their own environment.

In interviews, providers gave mixed feedback about their experience working with an ERS Consultant, with ELL providers having more positive perceptions of ERS consultation than do English-speaking providers. Providers agreed that their ERS Consultant was knowledgeable about the Environment Rating Scales and two-thirds reported that their ERS Consultant was "very responsive." Providers generally found the ERS to be a helpful way to think about improving the quality of their program, but providers interviewed in the second year of Getting Ready found the ERS less helpful than providers interviewed in the first year of Getting Ready.

Although most Outreach Specialists are not responsible for helping providers in a particular content area (the exception is that some Outreach Specialists also function as ERS Consultants),

their contribution is critical for the success of ELL providers. They facilitate the mentoring and ERS consultation processes and also serve as the primary contact for ELL providers when they have questions about the Getting Ready content or process. According to interviewed ELL providers, Outreach Specialists most often helped them to improve their business practices, to get professional development, and to engage in developmentally-appropriate practices with children.

With multiple supports being provided by multiple staff members, it is possible that providers might report that they are overwhelmed by the number of people with whom they have contact. This is not the case. Instead, the majority of interviewed providers reported that they liked working with multiple staff members. However, providers did not perceive that their Mentor and ERS Consultant worked together to better support them. Likewise, most Getting Ready staff members report communicating with other staff no more than once a month. Thus, internal communication and collaboration across staff with different functions does not happen frequently in Getting Ready but, overall, this level of communication does not appear to be negatively impacting the provision of supports.

SECTION 4. PROGRAM IMPLEMENTATION

Having reviewed the core activities that comprise Getting Ready, this section focuses on the implementation of Getting Ready. First, the focus is on Getting Ready staff – how they were selected, the training they have received, and their ongoing supervision and support. Next, the core data system (the Wiki) used by Getting Ready to document a program’s progress, manage caseloads, and facilitate collaboration among staff will be examined. Finally, changes in the second year of implementation will be described – for example, in response to changes in the wider early care and education system – with a focus on how administrators responded to the changes.

STAFF TRAINING AND SUPERVISION

As described in Section 3, the Getting Ready staff includes one Project Coordinator, five ERS Consultants (including one Hmong-speaking staff member who serves both as an ERS Consultant and as an Outreach Specialist), seven Mentors for family child care programs, one Curriculum Consultant for center-based programs, and four Outreach Specialists. The Mentors who serve family child care providers are family child care providers themselves who are also employed part-time by the Minnesota Licensed Family Child Care Association. All other staff (Project Coordinator, ERS Consultants, Curriculum Consultant, and Outreach Specialists) are employed by Resources for Child Caring.

Pre-service training. Prior to the start of Getting Ready, all staff attended a Parent Aware orientation to learn the basics of Parent Aware. The ERS Consultants were trained on the

Environment Rating Scales by staff at the Assessment and Training Center (ATC) within the Center for Early Education and Development (CEED) at the University of Minnesota, but were not trained to reliability. The Mentors are required by MLFCCA to have a MLFCCA Mentor Credential, which requires training on the mentoring process (16 class hours), Creative Curriculum (16 hours), the Creative Curriculum Assessment (8 hours), the Early Childhood Indicators of Progress for Family Child Care (8 hours), and the Family Child Care Environment Rating Scale (FCCERS-R) (8 hours).¹⁵ Mentors also received training on Building Cultural Connections (a course on cultural sensitivity). Curriculum Consultants were selected based on their experiences with curriculum implementation in a center setting, and also received additional training in Creative Curriculum and CLASS. Outreach Specialists were selected for their familiarity with the early childhood field, their language skills, and their understanding of the culture they would be serving. In interviews, Outreach Specialists did not report receiving any additional training specifically for Getting Ready. In interviews, many staff members also reported drawing upon trainings they had received in previous positions, including trainings on consultation and relationship-based coaching, adult learning models, curriculum, and the ERS and CLASS.

Ongoing training. In the online survey administered in September 2011, Getting Ready staff were asked if they would be interested in a refresher course on any of the following topics: the Environment Rating Scales, Creative Curriculum and Assessment, strategies for mentoring/consulting, the Parent Aware rating system, or the Minnesota Center for Professional Development Registry. Responses varied by type of staff:

- All ERS Consultants were interested in receiving training on Creative Curriculum and Assessment; the majority were interested in training on the Parent Aware rating tool; and a couple ERS Consultants were interested in receiving training on the Professional Development Registry.
- The majority of Mentors were interested in receiving training on the Parent Aware rating tool.
- Outreach Specialists expressed interest in additional training on the Environment Rating Scales and on Creative Curriculum and Assessment.

The online survey asked Getting Ready staff to report on their own skills and abilities. For each of 21 items, respondents were asked to, "Indicate how confident you are in your ability to perform each of the following tasks," by choosing from the following options, "No, I'm sure I cannot do this," "Not sure I can," "Moderately sure I can," "Mostly sure I can," "Yes, I'm sure I can do this," or "Not applicable: That is not part of my job."

It is notable that the response, "Not applicable: That is not part of my job," was very rarely selected (in 2% of responses) by Getting Ready staff. In other words, Getting Ready staff report

¹⁵ Mentors are not trained to reliability on the FCCERS-R. To be a reliable observer, a person must be trained to score the ERS consistently with an "anchor" observer who has been trained by the ERS authors. In Parent Aware, an anchor observer who trains other observers to be reliable (to a benchmark of 85% agreement within one point on each item on the scale) is housed at the Assessment and Training Center (ATC) at the Center for Early Education and Development at the University of Minnesota. ATC is responsible for all observations in Parent Aware.

that their job involves many and varied skills. Overall scores on these items indicate that staff have a high level of confidence that they can perform these skills. Mentors were the most confident in their ability to perform the tasks described in the survey, and ERS Consultants were the least confident, though they nonetheless report total confidence in 91% of their responses.

The following items are those on which all Getting Ready staff expressed complete confidence (no more than two respondents expressed any doubt in their ability to perform the task):

- I can ask someone to help me find the best solution when I am not sure how to handle a difficult situation.
- I can get support and ideas from other professionals to help me solve problems I face as a Mentor.
- I can find resource materials to help me when I need information to help a provider plan a learning activity.
- I can explain to a provider how scoring better on the Environment Rating Scale will benefit children in her care.
- I can help a provider make positive changes in her care setting.
- I can explain to a provider what makes for a positive learning environment.
- I can explain to a provider how the Environment Rating Scale is scored.
- I can maintain a working relationship with a provider even if I disagree with her choices about improving her care.

The following items are those on which Mentors and Outreach Specialists are highly confident in their abilities while ERS Consultants report less confidence:

- I can help a provider to get registered on the Minnesota Center for Professional Development Registry.
- I can help a provider modify their instruction based on child assessment results.
- I can help a provider learn how to help parents support their children's growth and development.
- I can help a provider learn how to help a child develop his or her thinking and problem solving skills.

The following items are those on which a broader group of Getting Ready staff are less confident:

- I can explain to a provider what is needed to move up a level on the Minnesota Center for Professional Development Career Lattice.
- I can explain to a provider the Parent Aware scoring system and what is required to receive a rating.
- I can help a provider learn how to accommodate children with special needs.
- I can help a provider find the classes or training she needs to meet her professional goals.
- I can help a provider learn how to manage behavior problems among the children in her care.

- I can help a provider learn how to modify activities for a variety of developmental needs.
- I can help a provider learn how to help children improve their language skills.
- I can explain the stages of child development to a provider to help her understand the needs and abilities of children in her care.

Getting Ready staff would benefit from additional training on the Professional Development system, the Parent Aware Rating Tool, and developmentally-appropriate practices.

Based on these findings, the following topics may be good candidates for targeting additional training for all Getting Ready staff:

- The Professional Development system, particularly the Career Registry and Lattice,
- Scoring within the Parent Aware Rating Tool,
- The stages of child development and developmentally-appropriate practices (especially for children with special needs).

Ongoing coaching and supervision. According to staff interviews in Fall 2010, MLFCCA Mentors are supervised by a Mentoring Coordinator at MLFCCA with whom they have a positive relationship. Mentors can meet individually with their supervisor but do so only occasionally. The Curriculum Consultant, ERS Consultants, and Outreach Specialists all have broader responsibilities at Resources for Child Caring (RCC), so Getting Ready is just one piece of their portfolio. Each has a direct supervisor at RCC, but these supervisors are not directly involved in Getting Ready and thus may not be familiar with the details of the programs or be able to hold staff accountable for their work on Getting Ready. However, staff at RCC report having a positive relationship with the Project Coordinator and feeling comfortable talking to her or to other colleagues when questions arise.

Staff report very positive relationships with their peers and that these relationships have been supported by the addition of a monthly Getting Ready Staff meeting, which takes place in an online chat room. This meeting functions as an opportunity for staff members to share with one another their successes and challenges and seek support from their peers and from supervisors.

DOCUMENTATION AND CASE MANAGEMENT

Getting Ready staff members use the Wiki (formerly housed in FrontPage but now in GoogleDocuments)¹⁶ to document and share with one another their interactions with providers/programs, including the dates of meetings and phone calls, the content of those interactions, and requests for other staff members. The Wiki is important for successful

¹⁶ A Wiki is a website where multiple users can create and edit documents collaboratively. Both FrontPage and GoogleDocuments are Wiki software.

program implementation because it both facilitates and documents the provision of key program components. The information in the Wiki, if accurate, complete, and up-to-date, will inform program staff about what services and supports a program or provider most needs and can also inform program administrators (and the evaluation) about potential areas of program improvement. For a data system to work, however, those who input data and those who use the data must agree about the purpose of the data and about expectations for the data.

To learn more about how Getting Ready staff understand and use the Wiki, the online staff survey administered in September 2011 asked staff several questions about their use of the Wiki. First, the survey asked staff, “What is the primary way you keep track of where things stand with the programs you work with?” and allowed respondents to choose from the following options:

- I remember details about programs but don’t write them down on paper or in GoogleDocs.
- I take notes in a notebook or binder.
- I use my time log and/or calendar to keep track.
- I keep my notes in GoogleDocs.

The most frequent response (given by 8 of 13 respondents) was, “I take notes in a notebook or binder.” A few respondents (3) said that they use their calendar to keep track of interactions with programs and a couple (2) said that they keep their notes in GoogleDocs.

Staff members were then asked, “In the last six months, on average, how often did you enter data into GoogleDocs?” As shown in Table 9 below, responses varied widely, with 5 of 13 survey respondents reporting that they enter data into GoogleDocs more than once a month, three reporting that they enter data into GoogleDocs monthly or every other month, and five reporting that they enter data into Google Documents less often. With less than half of staff members entering data more than once a month, the information in GoogleDocs is often out of date.

Table 9. The frequency with which Getting Ready staff members enter and review data in the Wiki

Frequency	Number of staff reporting entering data at this frequency (N=13)	Number of staff reporting looking at what others are doing at this frequency (N=13)
Weekly	4	2
Twice Monthly	1	2
Monthly	1	1
Every other month	2	2
Less often	5	3
Never	NA	3

Source: Online staff survey, administered in September 2011.

The survey also asked staff, “In the last six months, on average, how often did you look at GoogleDocs to see what other staff are doing?” Staff reported looking at what others are doing slightly less often than they enter their own data. About half of staff (6 of 13) reported looking at what others are doing at the same frequency that they reported entering data. Another five respondents reported looking at what others are doing less frequently than they enter data. Two respondents reported looking at what others are doing more frequently than they enter data.

To understand why staff are not using GoogleDocs more frequently, the online survey asked three questions.

- From your perspective, what is the primary or most important purpose of GoogleDocs?
- How important is GoogleDocs data entry to your work as a Mentor/Consultant/Specialist?
- How would you describe your perception of the time and work it takes to enter data into GoogleDocs?

Among survey respondents, most agree that the purpose of GoogleDocs is to share information among staff about what is being done with the program in order to avoid duplication and to serve programs better. However, a few respondents explicitly stated in their response that they understood communication to be the purpose of GoogleDocs but that they prefer other methods for communication. In addition, a couple respondents reported that they were uncertain about the purpose of GoogleDocs.

Program staff express mixed attitudes toward data documentation and data sharing.

The majority of surveyed staff (9 of 13) reported that data entry is “somewhat important” or “very important” to their work. However, a small but important minority reported that data entry is “not at all important” or that they didn’t know how important data entry is for their work. Those who did not find data entry important were the same respondents who were unclear about the purpose or did not use GoogleDocs as their primary mode of communication.

Staff were divided about the extent to which the data entry process is burdensome. Half of respondents (6 of 13) reported that the time and work it takes to enter data into GoogleDocs is “Somewhat burdensome” or “Very burdensome,” while the other half (7 of 13) reported that entering data is “Not much of a burden” or “No burden at all.” Those who found data entry to be burdensome were often but not always the same respondents who reported that data entry is not very important or of uncertain importance.

Program staff express mixed feelings and attitudes toward data documentation and sharing within Getting Ready. Future training of Getting Ready staff could be focused on conveying the expectations for data entry and sharing and offering supports for staff who are unclear about processes.

As a program evolves and matures, it is expected that there will be some changes in how the program is implemented. However, in its second year Getting Ready faced additional changes because of the changing context in which the work is done. The Parent Aware pilot was scheduled to end in June 2011 and, until August 2011, the status of Parent Aware (whether it would continue, whether it would expand to other areas) was unknown. Because Getting Ready is intended to prepare child care programs for participation in Parent Aware, the future of Parent Aware was of critical importance to Getting Ready participants and staff. As the Parent Aware pilot came to a close, programs had to choose whether to join the final cohort of programs entering Parent Aware or wait to join in the event that Parent Aware would continue.

To understand how this context may have affected Getting Ready, the online survey posed the following question to Getting Ready staff members, “The future of Parent Aware was uncertain this year. How did this affect your work with providers?” The most common response from staff was that some providers were frustrated with the uncertainty and thus lost confidence in the system and momentum for their own improvement efforts. For example, one staff person said, *“It was difficult on the providers that signed up later in the project year as they were in what I call “limbo” not knowing if there was a cohort for them or not... this was difficult since they finally made the decision to do Parent Aware and then had to wait!”*

However, an equal number of staff reported that the uncertainty did not have any real effect on their work.

Another change in the second year of Getting Ready was that programs that signed a Parent Aware agreement (indicating their commitment to complete the Parent Aware rating process) were eligible to receive financial assistance to support quality improvements before the actual rating. In the past, financial assistance for quality improvements was only available after the initial rating had been issued. With support dollars available sooner, programs were able to afford to make material improvements earlier in the process. To understand how this shift affected Getting Ready, the online survey posed the following question to Getting Ready staff members, “Support dollars were available for the first time this year to those that signed a Parent Aware agreement. How did the availability of support dollars affect your approach and relationship with providers?” The most common response from staff (6 of 13) was that the providers appreciated this additional support. For example, one respondent wrote,

“That was great because providers could purchase what they needed for their environment before the rating so that they can get a better score. The providers were happy and appreciative.”

Some respondents (5 of 13) reported that the financial supports did not affect their work at all, and two respondents reported that the supports were not always integrated into the other supports provided by Getting Ready.

Getting Ready staff members were also asked about any changes in their caseload (more programs, less programs, or about the same number of programs) and about any changes in the needs of programs they served (more needs, about the same needs, fewer needs) from the first year of Getting Ready to the second. Among staff members who had worked with Getting Ready for both years of its implementation, half reported having a larger caseload in the second year than in the first, and another 40% reported working with about the same number of programs in the second year as in the first. Nearly all respondents reported that the participating programs in the second year had about the same level of needs as the programs who participated in the first year.

As described earlier, the Year One report revealed some challenges in staff communications and collaborations. Steps were taken in the second year of implementation to encourage coordination among staff types. To explore how intra-staff relationships have changed over time, the online survey asked staff if there were any differences in how they related to other staff members in the second year of Getting Ready. Respondents could choose from the following options:

- I worked more independently (less with other staff) this year than last year.
- I worked with other staff members about the same amount this year as last year.
- I worked more closely with other staff members this year than last year.

The majority of ERS Consultants reported working with other staff about the same amount in the second year of Getting Ready as in the first, while the majority of Mentors reported that they were working more independently in the second year of Getting Ready than they did in the first year. One Mentor explained the situation in this way,

- “[In the second year of Getting Ready,] the expectations of collaboration with RCC staff were diminished. Mentors no longer were being told to stop helping providers outside of the curriculum related areas of their work but as we became more familiar with the Parent Aware process, were more able to help providers prepare since there was very limited help coming from other sources. I think the program has become much more dependent on the Mentors to prepare providers’ binders and help them understand the process... So, overall, our role has expanded.”

SUMMARY

The Getting Ready staff includes one Project Coordinator, five ERS Consultants, one Curriculum Consultant, seven Mentors, and four Outreach Specialists. Each of these individuals has a particular role in the project, has some previous experience to bring to the role, and received at least some project-specific training to fulfill that role. Staff are generally very confident in their ability to perform a wide variety of tasks as part of their position, but are less confident in their ability to offer providers support on the Professional Development system, the Parent Aware rating system, and the stages of child development and corresponding developmentally-appropriate practices.

When asked about their own interest in receiving additional training, ERS Consultants reported that they would be most interested in receiving training on Creative Curriculum and Assessment and the Parent Aware rating tool; Mentors would be most interested in training on the Parent Aware tool; Outreach Specialists would be most interested in training on the Environment Rating Scales and on Creative Curriculum and Assessment.

The Wiki is a case management and documentation tool developed by Getting Ready as a way for staff members to document their interactions with programs and make this information available to one another. However, most staff members report that their primary method for keeping track of their interactions with programs is to take notes in a notebook or binder and only later enter some of these notes into Wiki. Most staff report entering data into the Wiki infrequently (less than monthly) and reviewing what others have entered even less frequently. The lack of attention devoted to regular data entry may be because staff members do not use the Wiki as their primary form of note-taking nor as their primary method for communicating with other staff members.

Additional issues which may have affected the implementation of Getting Ready include:

- The uncertain future of Parent Aware during the second year of implementation
- The availability of financial assistance to support quality improvements

While half of surveyed staff reported that the future of Parent Aware had no real effect on their work, the other half of the surveyed staff reported that the uncertain future of Parent Aware made it difficult for providers to build momentum for their quality improvement efforts, since the likelihood of recognition or reward for their efforts was unclear. Similarly, staff members were divided as to whether the availability of financial assistance made a real difference in their work with programs.

To understand how else the implementation of Getting Ready might have varied between the first and second year of implementation, staff were asked to report whether they saw any changes in their caseload (more programs or programs with higher needs) or any changes in their level of collaboration with other staff members. Some staff members reported having a larger caseload, but nearly all staff members reported noticing no difference in the needs of the programs they served. ERS Consultants reported collaborating to a similar degree in the second year as in the first, but the majority of Mentors reported working more independently in the second year of Getting Ready than they did in the first.

Research on effective program implementation has shown that these factors (staff training and supervision, data collection, and how the program responds to systems-level changes) are among the most important factors that must be in place and carefully-attended to in order for a program to be successful. While Getting Ready is generally functioning well, these are some areas where additional attention and effort could lead to improved implementation.

SECTION 5. QUALITY UPON COMPLETION OF GETTING READY

A key measure of the success of Getting Ready is the role that it plays in helping participating programs improve their quality, particularly those indicators of quality recognized and measured by Parent Aware. In the section that follows, we report on the quality of programs that have graduated from Getting Ready, as measured by the Post-Getting Ready Checklist and by the Parent Aware ratings that programs earn after graduating from Getting Ready. Next, we describe providers' perceptions of the improvements they made to their programs. Finally, we report on the changes in providers' readiness-to-change, as measured by the Stage of Change Scale 2.0, to be described later.

QUALITY IMPROVEMENT AS MEASURED BY THE GETTING READY CHECKLIST

After receiving Getting Ready services, providers self-reported on whether their program met the same Parent Aware indicators assessed at intake by completing a Getting Ready Checklist identical to the Getting Ready Checklist completed at intake. As of October 12th, 2011, thirty-seven family child care programs and 18 center-based programs (representing 62% of all 89 programs participating in Getting Ready) had completed the Post-Getting Ready Checklist, marking their completion of the Getting Ready project. The tables below show the percentage of programs, by program type, that reported meeting Parent Aware indicators at intake compared to the percentage that met these indicators upon completion of Getting Ready. For each of the four Parent Aware categories of indicators, results for family child care programs in Getting Ready will be presented first, followed by results for center-based programs.

Family Partnerships

Table 10 shows the number of family child care programs who reported meeting indicators in the Family Partnership category before and after participating in Getting Ready.

Table 10. Family child care programs meeting Family Partnerships Indicators on the Getting Ready Checklist at intake and upon completion of Getting Ready

Indicators within the Family Partnerships category	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Program regularly asks client families for their opinions and ideas for improving the program	22%	65%
Program has a written improvement plan based on the ideas presented from client families	3%	62%
Program has intake process in place that helps in learning the needs and preferences of the child's family, including those related to culture	22%	73%
Program shares information with parents about preschool screening	57%	97%

Indicators within the Family Partnerships category	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Program provides plans for children transitioning between major developmental milestones	38%	81%
Program has a formal process for communicating about transitions with client families	8%	62%
Total number of family communication strategies used to communicate with families about the program and things they can do at home to extend learning (i.e., newsletters, family fun nights, website)	0 Strategies: 24% 1 Strategy: 35% 2 Strategies: 30% 3 Strategies: 5% 4 Strategies: 5%	0 Strategies: 5% 1 Strategy: 11% 2 Strategies: 19% 3 Strategies: 32% 4 Strategies: 32%

As shown in Table 10, family child care programs reported meeting more Family Partnership indicators after participating in Getting Ready than were met before participation. Before receiving Getting Ready supports, only 1 (3%) family child care program had an improvement plan in place that gathered and integrated feedback from families. In contrast, nearly two-thirds (62%) of family child care programs reported meeting this indicator after receiving Getting Ready supports. Similarly, only 22% of family child care programs reported having a culturally sensitive intake process or regularly asking client families for input on program improvements when they joined Getting Ready. By their completion of Getting Ready, 73% of family child care programs reported having a culturally sensitive intake process and 65% reported regularly asking client families for input on improvements. Nearly all family child care programs (97%) reported sharing information with parents about preschool screening by the end of Getting Ready, whereas about half (57%) did at intake.

Similar gains were seen in the number of family communication strategies used by family child care programs over the course of participation in Getting Ready. Whereas the majority of family child care programs reported using only one, if any, communication strategy at the outset of their participation, 83% reported using two or more strategies by the end of their participation.

Table 11 shows the number of center-based programs that reported meeting indicators in the Family Partnership category before and after participating in Getting Ready.

Table 11. Getting Ready Checklist – Center-based programs meeting Family Partnership Indicators before and after Getting Ready

Indicators within the Family Partnerships category	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Program regularly asks client families for their opinions and ideas for improving the program	89%	100%

Indicators within the Family Partnerships category	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Program has a written improvement plan based on the ideas presented from client families	44%	83%
Program has intake process in place that helps in learning the needs and preferences of the child's family, including those related to culture	61%	94%
Program shares information with parents about preschool screening	89%	100%
Program provides plans for children transitioning between major developmental milestones	72%	100%
Program has a formal process for communicating about transitions with client families	22%	100%
Total number of family communication strategies used to communicate with families about the program and things they can do at home to extend learning (i.e., newsletters, family fun nights, website)	0 Strategies: 0% 1 Strategy: 0% 2 Strategies: 33% 3 Strategies: 33% 4 Strategies: 33%	0 Strategies: 0% 1 Strategy: 0% 2 Strategies: 0% 3 Strategies: 44% 4 Strategies: 56%

Even though a higher percentage of center-based programs were already meeting Family Partnership indicators at the beginning of Getting Ready than were family child care programs, improvements were still seen across most indicators over the course of Getting Ready participation. The largest improvement was seen in the percentage of center-based programs that implemented a formal process for sharing transition plans with families; all programs had a formal process by the end of participation, whereas fewer than a quarter (22%) of center-based programs did at the beginning. In addition, most programs reported adding at least one more family communication strategy over the course of participation, with all programs reporting the use of at least three communication strategies by the end. It is also notable that, by the end of Getting Ready, all programs reported regularly asking families for feedback, sharing information about preschool screening, having transition plans for children, and nearly all (94%) had instituted a culturally sensitive intake process.

While Getting Ready participants showed improvements in the number of family communication strategies used, they nevertheless lag behind programs receiving first-time Parent Aware ratings. Indeed, 81% of programs receiving their first Parent Aware rating use at least four communication strategies,¹⁷ compared to just 32% of Getting Ready graduates.

¹⁷ Tout, K., Starr, R., Isner, T., Cleveland, J., Albertson-Junkans, L., Soli, M., & Quinn, K. (2011). *Evaluation of Parent Aware: Minnesota's Quality Rating System pilot: Final evaluation report*. Child Trends.

Among Getting Ready participants, the most common strategies for communicating with families were: distributing newsletters, providing suggestions for at-home family activities, and setting up bulletin boards.

Teaching Materials and Strategies

Table 12 shows the percent of family child care programs that reported meeting indicators in the Teaching Material and Strategies category before and after participating in Getting Ready.

Table 12. Getting Ready Checklist – Family child care programs meeting indicators from the Teaching Materials and Strategies category before and after Getting Ready

Use of Curriculum with Infants and Toddlers	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Program staff use and are trained on an approved curriculum	5%	92%
Program uses a bundle of curricula that may meet approval criteria	3%	0%
Program uses activities aligned with the Early Childhood Indicators of Progress (ECIPs) for Birth to Three ¹⁸	5%	0%
Use of Curriculum with Preschool Children	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Program staff use and are trained on an approved curriculum	5%	92%
Program uses a bundle of curricula that may meet approval criteria	5%	0%
Program uses activities aligned with the Early Childhood Indicators of Progress (ECIPs) for Three to Five ¹⁹	3%	0%

Table 12 shows that family child care programs that completed Getting Ready have made significant improvements in meeting Teaching Materials and Strategies indicators. Very few family child care programs used even informal curricula, if any at all, when they first joined Getting Ready, while nearly all programs (92%) reported having their staff trained in and using an approved curriculum at the completion of Getting Ready. This was true for both infants/toddlers and preschool children.

¹⁸ Minnesota’s Early Learning Guidelines for Birth to Three (also known as the Early Childhood Indicators of Progress) can be found at: <https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-4438-ENG>

¹⁹ Minnesota’s Early Learning Standards for Three to Five (also known as the Early Childhood Indicators of Progress) can be found at: http://www.dhs.state.mn.us/main/groups/children/documents/pub/dhs16_144667.pdf

Almost no family child care providers used an approved curriculum at the start of Getting Ready, but nearly all do by the end of Getting Ready.

Table 12 also shows that, at the end of Getting Ready, no family child care programs reported using “a bundle of curricula that may meet approval criteria,” nor did any programs report using “activities aligned with ECIPs”, despite a few having reported using these informal curricula in the beginning. This decrease is expected because these indicators are only applicable for programs that do *not* already use an approved curriculum; and nearly all family child care programs (92%) were using an approved curriculum at the completion of Getting Ready. Nevertheless, 8% of family child care programs do not report the use of any form of curriculum or ECIPs-aligned activities at the end of Getting Ready.

Table 13 shows the percent of center-based programs that reported meeting indicators in the Teaching Material and Strategies category before and after participating in Getting Ready.

Table 13. Getting Ready Checklist – Center-based programs meeting indicators from the Teaching Materials and Strategies category before and after Getting Ready

Use of Curriculum with Infants and Toddlers	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Program staff use and are trained on an approved curriculum	39%	56%
Program uses a bundle of curricula that may meet approval criteria	11%	22%
Program uses activities aligned with the Early Childhood Indicators of Progress (ECIPs) for Birth to Three	17%	0%
Use of Curriculum with Preschool Children	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Program staff use and are trained on an approved curriculum	44%	78%
Program uses a bundle of curricula that may meet approval criteria	17%	22%
Program uses activities aligned with the Early Childhood Indicators of Progress (ECIPs) for Three to Five	33%	0%

As was seen in the Family Partnerships category, a greater percent of center-based programs met Teaching Materials and Strategies indicators when they joined Getting Ready than did family child care programs. Nevertheless, center-based programs that completed Getting Ready have made notable improvements in this category. Thirty-nine percent of center-based programs reported that their staff were trained in and using an approved curriculum with infants and toddlers prior to participating in Getting Ready. A similar percentage (44%) of programs reported having staff trained in and using an approved curriculum with preschoolers at the outset. By the end, over half of programs met these indicators with both age groups; 56% using curriculum with infants and toddlers, and 78% using curriculum with preschoolers.

As mentioned earlier, the decrease in the percent of center-based programs using ECIPs-aligned activities is expected because more center-based programs used an approved curriculum after Getting Ready than did before. The slight increase in center-based programs using a bundle of curricula (for which approval is pending) between intake and exit suggests that center-based programs originally using only ECIPs-aligned activities (i.e., the least formal teaching strategy of the three) moved towards implementing increasingly more formal learning strategies over the course of Getting Ready.

Table 14 outlines the percent of family child care providers reporting familiarity and experience with the observational tool used in Parent Aware. A provider is considered to have experience with the tool if she has a) used it to conduct a self-assessment of her program and b) had a colleague, mentor, or consultant use the tool to provide feedback on her child care environment.

Table 14. Getting Ready Checklist – Family child care providers’ familiarity and experience with the Environment Rating Scales before and after Getting Ready

Familiarity and experience with the Environment Rating Scales	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Familiarity with FCCERS-R	16%	95%
Provider has walked through program making note of things she could change that would improve her score	11%	78%
Provider has asked a colleague, mentor, or consultant to observe the way she works with the children using the tool and to give feedback for improvement	11%	97%

As shown in Table 14, family child care providers’ familiarity and experience with the observation tool used by Parent Aware increased after participating in Getting Ready, with nearly all providers meeting these indicators upon graduation. This change was particularly noticeable in the percent of providers who had a colleague observe them and provide feedback for improvement, increasing from 11% to 97% after participation in Getting Ready.

Table 15 outlines the percent of providers from center-based programs reporting familiarity and experience with observational tools used in Parent Aware.

Table 15. Getting Ready Checklist – Center-based providers’ familiarity and experience with the Environment Rating Scales and CLASS before and after Getting Ready

Familiarity and experience with the Environment Rating Scales	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Familiarity with ECERS-R	33%	94%
Familiarity with ITERS-R	22%	78%
Familiarity with CLASS	6%	94%
Provider has walked through program making note of things she could change that would improve her score	28%	94%
Provider has asked a colleague, mentor, or consultant to observe the way she works with the children using the tool and to give feedback for improvement	22%	94%

In general, center-based providers were also largely unfamiliar and inexperienced with the observation tools used in Parent Aware when they started Getting Ready. Providers from center-based programs were particularly unfamiliar with the Classroom Assessment Scoring System (CLASS), as only 6% reported familiarity at intake. In contrast, by the end of Getting Ready, nearly all (94%) center-based providers reported familiarity and experience with CLASS and the Early Childhood Environment Rating Scale (ECERS), including having been informally observed by a colleague, mentor, or consultant who then provided feedback for improvement.

Tracking Learning

Tables 16 and 17 outline changes in programs’ use of an approved assessment tool for tracking children’s learning, as well as how results are communicated to families and used in goal setting.

Table 16. Getting Ready Checklist – Family child care programs meeting Tracking Learning indicators before and after Getting Ready

Use of child assessment tools with infants and toddlers	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Program uses an approved child assessment tool to track children’s learning for ages 0 to 3 at least twice per year, and all caregivers have received training on it	3%	78%
Program does not use an approved tool, but does use an informal method to track children’s learning	8%	5%
Program shares assessment results with families	11%	70%
Program uses the results from assessments to design goals for individual children	11%	78%
Use of child assessment tools with preschool children	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Program uses an approved child assessment tool to track children’s learning for ages 3 to 5 at least twice per year, and all caregivers have received training on it	3%	78%
Program does not use an approved tool, but does use an informal method to track children’s learning	11%	5%
Program shares assessment results with families	14%	78%
Program uses the results from assessments to design goals for individual children	14%	78%

Just as few family child care programs had reported using an approved curriculum prior to participating in Getting Ready, using approved assessment tools to track children’s learning was equally as rare among family child care programs at the start of Getting Ready. As seen in Table 16, just 3% of family child care programs used approved tools with either infants/toddlers or preschoolers. By the time the post-Getting Ready Checklist was administered, however, over three-fourths (78%) of family child

Family child care providers made great improvements in their use of an approved assessment tool, while gains for centers were more moderate.

care programs not only used approved assessment tools for tracking preschoolers’ learning, but also shared results from those assessments with families and used results to design individualized goals. Equally as many family child care programs reported using approved tools to track learning and set goals for infants and toddlers (78%), with only slightly fewer reporting that they shared assessment results with families (70%). As more programs adopted approved assessment tools over the course of Getting Ready, fewer reported using informal methods of tracking children’s learning.

Table 17. Getting Ready Checklist – Center-based programs meeting Tracking Learning indicators before and after Getting Ready

Use of child assessment tools with infants and toddlers	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Program uses an approved child assessment tool to track children’s learning for ages 0 to 3 at least twice per year, and all caregivers have received training on it	33%	61%
Program does not use an approved tool, but does use an informal method to track children’s learning	28%	22%
Program shares assessment results with families	61%	50%
Program uses the results from assessments to design goals for individual children	61%	78%
Use of child assessment tools with preschool children	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Program uses an approved child assessment tool to track children’s learning for ages 3 to 5 at least twice per year, and all caregivers have received training on it	39%	78%
Program does not use an approved tool, but does use an informal method to track children’s learning	56%	22%
Program shares assessment results with families	89%	72%
Program uses the results from assessments to design goals for individual children	94%	100%

Changes in meeting Tracking Learning indicators among center-based programs were more mixed (see Table 17). Gains were seen in the percent of programs using approved assessment tools before and after Getting Ready, with nearly twice as many center-based programs using an approved assessment tool to track children’s learning at the end of Getting Ready compared to at the start: a change of 33% to 61% with infants and toddlers, and 39% to 78% with preschoolers. In contrast, fewer center-based programs reported sharing assessment results with families after Getting Ready than did before it; a decrease of 61% to 50% of center-based programs with infants and toddlers, and 89% to 72% of center-based programs with preschoolers. One hypothesis for explaining this decrease is that providers who have adopted a new assessment tool or are just learning how to use an old tool more effectively may feel less comfortable sharing these results with families than they were sharing results of informal assessments. More exploration will need to be done to understand this finding. Nevertheless, increases were still seen in the percent of center-based programs using assessment results to develop individualized goals for children of both age groups, with all center-based programs designing assessment-informed goals for preschoolers.

Teacher Training and Education

Table 18 outlines the percent of programs that reported meeting indicators in the Teacher Training and Education category before and after participation in Getting Ready.

Table 18. Getting Ready Checklist – Family child care programs meeting Teacher Training and Education indicators before and after Getting Ready

Indicators within the Teacher Training and Education category	Percent of FCCs that met indicator at intake (N=37)	Percent of FCCs that met indicator at end of Getting Ready (N=37)
Providers/lead staff have documented their training & education through the Minnesota Center for Professional Development (MNCPD) Registry	5%	89%
Providers/lead staff have a professional development plan	0%	57%

As shown in Table 18, substantial gains were made in professional development indicators among family child care programs. At intake, no family child care providers reported having a professional development plan and only a few (5%) had documented their training and education through the Minnesota Center for Professional Development (MNCPD) Registry. In contrast, by the end of Getting Ready, over half (57%) of the 37 providers reported having professional development plans and 89% reported having documented their training and education through the MNCPD Registry.

Table 19. Getting Ready Checklist – Center-based programs meeting Teacher Training and Education indicators before and after Getting Ready

Indicators within the Teacher Training and Education category	Percent of centers that met indicator at intake (N=18)	Percent of centers that met indicator at end of Getting Ready (N=18)
Percent of center-based programs that have an Educational Coordinator who has a Bachelor's (BA) degree in early childhood education or related field	94%	94%
Providers/lead staff have documented their training & education through the MNCPD Registry	6%	100%
Providers/lead staff have a professional development plan	11%	89%

Large improvements in professional development indicators were also seen among center-based programs (see Table 19). Even though nearly all programs reported having an Educational Coordinator with a Bachelor’s degree prior to receiving Getting Ready supports, very few center-based programs had documented their training and education through MNCPD or developed professional development plans. After receiving Getting Ready supports, however, all programs had entered their information into the MNCPD Registry and almost all (89%) had professional development plans.

Overall, post-Getting Ready Checklist data from 37 family child care programs and 18 center-based programs (representing 62% of all programs in Getting Ready) indicate that programs that completed the Getting Ready project are meeting more Parent Aware indicators than they did prior to participation across all categories of indicators. Whereas at the start of Getting Ready only 9% of family child care programs met the criterion to be considered “ready” to enter Parent Aware, by the end of Getting Ready 91% of family child care programs reached that benchmark. Center-based programs also showed improvement, but began Getting Ready at a higher level of initial quality. Most (87%) center-based programs were considered ready to enter Parent Aware at the start of Getting Ready and 100% were considered ready by the end of Getting Ready.

Family child care programs showed the most substantial improvements in the categories of Teaching Materials and Strategies and Tracking Learning, with approved curriculum or assessment tools being used by fewer than 10% of programs at the outset and by at least 78% at graduation from Getting Ready. Notably, these are also the categories in which Parent Aware programs most often make improvements between their first and second ratings.²⁰ The greatest gains among center-based programs were seen in specific Teaching Materials and

²⁰ Tout, K., Starr, R., Isner, T., Cleveland, J., Albertson-Junkans, L., Soli, M., & Quinn, K. (2011). *Evaluation of Parent Aware: Minnesota’s Quality Rating System pilot: Final evaluation report*. Child Trends.

Strategies indicators, such as experience with observational tools, and in professional development indicators, such as documenting staff training and education through the MNCPD Registry.

PROVIDERS' PERCEPTIONS OF QUALITY IMPROVEMENT

To understand how providers perceive their program's quality improvement, data was collected in two ways. First, all participants in the evaluation were asked to complete a written Evaluation Exit survey, at the time of their exit from Getting Ready, that included questions about perceived quality improvement. Second, a smaller sample of participants were interviewed over the phone and were asked to provide additional information about their improvement goals and the changes they made to their program.

The Evaluation Exit survey asked providers to what extent they agree with the following statement: I have made significant improvements to my program because of my participation in the Getting Ready Project. Of the 29 respondents who answered this question, the majority (59%) reported that they "strongly agreed" with this statement, and another 28% "somewhat agreed." Of the remaining 13%, three replied with, "neutral," and one replied, "strongly disagree."

The majority of providers agree that they have made significant improvements to their program because of their participation in Getting Ready.

In the same survey, respondents were asked to identify up to three improvement goals that they targeted during Getting Ready. Open-ended responses were coded and grouped into themes. The most common themes are described below, in order from most to least cited:

- 1) **Improving the environment** (reported by 17 of 25 respondents). This included general references to the Environment Rating Scales, rearranging space, obtaining new materials (of an appropriate size, of sufficient variety, and in good working order, representing multiple cultures), and improving health and safety (including diapering).
- 2) **Implementing a curriculum** (reported by 11 of 25 respondents). This included general references to Creative Curriculum, lesson planning, and establishing or improving learning areas.
- 3) **Improving family partnerships** (reported by 9 of 25 respondents). This included developing a process for collecting feedback from parents, preparing for parent conferences, and improving communication with families.

Other areas of improvement mentioned by multiple respondents were: training and professional development (reported by 6 of 25 respondents), assessment (reported by 4 of 25 respondents), and business practices (reported by 4 of 25 respondents).

In phone interviews (conducted either after Year One or after Year Two), English-speaking providers were asked, “Who helped you set these goals? (Was it the Project Coordinator, an ERS Consultant, or a Mentor/Curriculum Consultant?). Responses to this question varied, with six providers reporting that they developed the goals on their own or with their staff and nine providers reporting that the goals were developed during their work with Getting Ready staff (some said with the Project Coordinator, others with their Mentor, others with their ERS Consultant). Another three providers reported that goals were set as part of the assembly of a Parent Aware binder (in collaboration with a Parent Aware Provider Resource Specialist²¹).

In the second year of phone interviews, English-speaking graduates were asked about the goals they listed in their Evaluation Exit survey and then asked, “Did you have these goals written down for yourself somewhere? If not, how did you keep track of the goals?” Responses were then coded into the following categories: “formal list,” “evolving to-do list,” “mental notes,” or “other.” One provider reported not having any goals, but most providers (six out of nine) reported that their goals were documented as part of a formal list. Providers were then asked, “Did your Mentor/ERS Consultant have a duplicate copy of these goals?” Only two of nine providers reported that their Mentor/ERS Consultant had a copy of these goals. Providers were then asked, “How often did you reference these goals? Did you pull out the list of goals at every meeting with your Mentor/ERS Consultant?” None of the interviewed providers reported referencing their goals at meetings with their Mentor or ERS Consultant. In summary, providers report that they set goals through Getting Ready, but they do not describe referring to the goals during their work with Getting Ready staff.

Significant improvement. In phone interviews, providers were asked to report on the most significant improvement they had made to their program.²² Responses were then categorized to identify key themes. The most common themes were:

- Environment changes (15 respondents)
- Curriculum and planning (7 respondents)
- Learning materials (6 respondents)
- Building relationships with parents (4 respondents)
- Assessment (3 respondents, all English-speaking)
- Taking a new—and more educational—approach to interacting with children (3 respondents, all ELL)

The 15 responses coded as “environment changes” included general comments about improvements to the environment as well as more specific comments about organizing materials and books, setting up a diapering station, and purchasing age-appropriate furniture. For example, one provider said,

²¹ Programs participating in Parent Aware receive support from a Provider Resource Specialist who assists them in navigating the rating system and making quality improvements.

²² While the question intended to get just one answer, some respondents gave more than one response. Therefore, the responses here sum to more than the number of respondents.

"It was the science area, I put the pictures up and the kids liked it and questioned it. They looked around and wanted to know more about the microscopes and the rocks. We set that up. This made me see how making it separate from other areas was important."

The second most common theme related to changes in "curriculum and planning." These seven responses included comments about adopting Creative Curriculum, adopting a structured schedule for the day, and engaging in more intentional planning of activities. For example, one provider described making a change to implement a daily schedule,

"Having a structured day. I went off of what we already do every day, organized it more, and typed it up with times."

The six responses coded as "learning materials" included offering children a wider variety of materials (including materials reflecting diversity), learning how to choose what materials to purchase, and removing materials that are not developmentally appropriate. For example, one provider said,

"I got some boxes and packed up books that kids aren't old enough to read and put away toys that they don't play with. I removed some baby dolls because I had too many and got rid of some of the worn out ones."

In addition, four respondents named improvements to their relationship and communication with parents as their biggest improvement; three English-speaking respondents reported that their biggest improvement was adopting the Creative Curriculum Assessment tool; and three ELL respondents reported that their biggest improvement was taking a more educational approach to interacting with children.

When English-speaking providers were asked what motivated them to make these changes, most respondents expressed a general desire to provide high quality care to children and families. In addition, some providers said their motivation was to make their work life easier (by using activity ideas from Creative Curriculum, and having an organized space), and several providers were motivated by having an "outsider" (a Getting Ready staff person) visit and show interest in their program. A few providers said that they made changes because they were required by Parent Aware. Providers made statements such as:

"I love kids, I was already doing it and I wanted to do better to make them happy and understand better and give them that basic learning. I love to see them learning, so when I saw my environment improving and see it being different for the kids [that was motivating]."

"What motivates me is that I want to offer them quality care. All aspects of it. They spend 10-12 hours a day with me and I want to be that person that makes a difference."

“As a director I was interested in moving out of the mindset that we’re a daycare. I want us to be a preschool and that can’t happen if you don’t have a scientific/real curriculum.”

“Knowing that someone else cared and was interested in it. Knowing someone wanted me to better my daycare. I was thinking about the things I can do and I was trying to figure it out, but I needed help.”

“I knew that I wanted to make things work better. It goes much more smoothly now [that] the kids know what to expect.”

Providers were then asked, “Was this a difficult change to make? If so, what made it difficult?” Most providers (14 of 19) replied that the change was not difficult to make. Of the five providers who did report challenges, two mentioned concerns about how parents would react to changes in the program and two mentioned the difficulty of making changes part of a new routine rather than falling into old habits.

PARENT AWARE

The majority of the English-speaking providers who completed a phone interview (12 of 20) had already received their rating and nearly all the rest (7 of 20) had already turned in their documentation packet and were waiting to be rated (only one had not started anything with Parent Aware yet). In the second year of interviews, providers were asked if they got the rating that they expected. Of the six English-speaking respondents who had already received a rating, half said they got the rating they expected and half said they got a rating lower than expected. Of the ten ELL providers who had already received a rating, 80% said they got the rating they expected or higher than they expected. One ELL provider expected a higher rating, and one said she did not know what to expect.

Getting Ready graduates account for 59% of the programs that received initial Parent Aware ratings between July 2010 and June 2011.

In the second year of interviews, English-speaking providers were also asked how likely it is that they would have joined Parent Aware if they had not participated in Getting Ready. Of the nine interviewed providers who had joined Parent Aware, four said they probably wouldn’t have joined Parent Aware if they hadn’t participated in Getting Ready, three said they would have joined Parent Aware anyway (two said that they were required to join), and one provider said that she did not distinguish between joining Getting Ready and joining Parent Aware.

As of the end of the Parent Aware pilot in June 2011, 42 Getting Ready graduates had been rated by Parent Aware. Getting Ready graduates account for 59% of the programs that received initial Parent Aware ratings between July 2010 and June 2011.

To understand how Getting Ready graduates are scoring in Parent Aware, ratings for Getting Ready graduates (N=42) were compared to ratings for non-Getting Ready graduates who went through the full rating process and were initially rated by Parent Aware in 2010 or 2011 (N=54). Excluded from the comparison are those programs that received ratings before 2010 in recognition that average initial Parent Aware ratings have been improving over time.

Table 20. Differences in the initial Parent Aware ratings of Getting Ready graduates and non-Getting Ready graduates.

Quality measure	Getting Ready graduates (N=42)	Non-Getting Ready graduates (N=54)	Statistically significant difference?
Average score in Family Partnerships	8.7	9.0	Not significant
Average score in Teaching Materials and Strategies	5.3	4.4	p<0.05
Average score in Tracking Learning	7.1	5.6	p<0.05
Average score in Teacher Training and Education	5.2	5.9	Not significant
Average score on ERS	3.5	3.3	Not significant

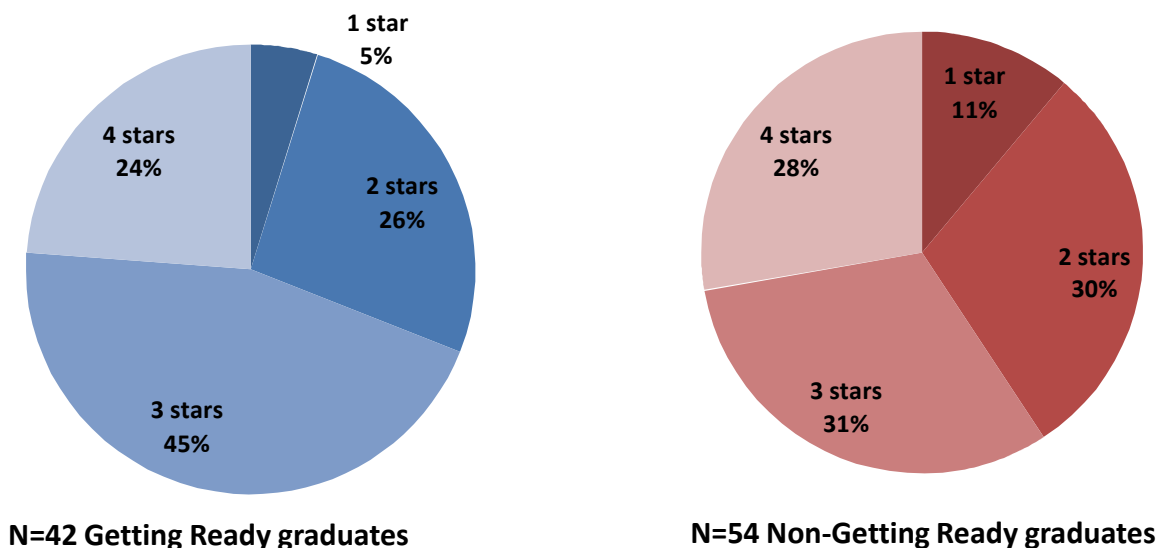
Source: Parent Aware Rating Tool Database, as of June 2011

Table 20 shows that Getting Ready graduates are significantly outscoring non-Getting Ready graduates in the Teaching Materials and Strategies category and in the Tracking Learning category. This corresponds to the finding earlier in this section that Getting Ready participants are making improvements in these two categories through their participation in Getting Ready.

In the Year One Evaluation Report, the 20 programs that had graduated from Getting Ready had received significantly higher initial star ratings than had comparable non-Getting Ready graduates. However, with a larger sample of Getting Ready graduates, the difference between Getting Ready graduates and non-Getting Ready graduates is not statistically significant. Getting Ready graduates are less likely than other programs to receive an initial one-star rating, but also slightly less likely to receive a four-star rating. The most common rating for Getting Ready graduates is three stars (see Figure 2 below).

Getting Ready graduates are significantly outscoring non-Getting Ready graduates in the Teaching Materials and Strategies category and in the Tracking Learning category.

Figure 2. Initial Parent Aware ratings for Getting Ready graduates compared to initial Parent Aware ratings for other programs rated in 2010 or 2011



Source: Parent Aware Rating Tool Database, as of June 2011

The purpose of Getting Ready was to support Parent Aware participation among populations of programs/providers that have had lower participation rates in Parent Aware and had expressed some reticence to join Parent Aware. These results demonstrate that Getting Ready is succeeding, not only by encouraging these programs to join Parent Aware, but by assisting them with Parent Aware preparation so that, despite their additional challenges and needs, they enter with ratings that are similar to other programs entering Parent Aware.

PROVIDERS' READINESS TO CHANGE

In recent years, increasing attention has been paid to the process by which providers engage in quality improvement and changes to their practice. Researchers and professional development providers, including Getting Ready staff members, have recognized that some providers are able to make improvements quickly while others need additional time and supports in order to be able to change their longstanding practices, a construct that has been called a provider's "readiness to change."²³

Readiness to Change is assessed using two measures designed by the Children's Institute: a self-report form completed by the provider herself and a coach form completed by one or more technical assistance providers (Mentor, Curriculum Consultant, ERS Consultant, or Outreach Specialist) who are working closely with the provider. The Stage of Change Scales consist of seven subscales:

²³ The development of this construct was described in more detail in the Getting Ready Year One Evaluation Report.

- Intention (assesses the learner’s intention to make a change),
- Awareness (assesses the learner’s awareness of the need to make a change),
- Seeking information (assesses the learner’s interest in learning new information about her practices),
- Effect on children (assesses the learner’s beliefs about the extent to which making a change would have an effect on children),
- Overcoming obstacles (assesses the learner’s beliefs in her ability to overcome obstacles to change),
- Social support (assesses the extent to which the learner believes that she has social support),
- Professional identity (assesses the extent to which the learner sees herself as a professional).

For each subscale, respondents must choose the one phrase that best describes the provider (in the context of her child care practices/program). For example, for the Intention subscale, the provider would choose from the following options: “I don’t plan to make any changes,” “I think about making a change but can’t do it,” “I’m planning to make a change,” “I’m working to change something right now,” or “I’m making sure I don’t go back to my old ways.” Each response corresponds to a score from 1 to 5, representing the stage of change the provider is in:

Stage 1: Precontemplation (not ready to change)

Stage 2: Contemplation (thinking about change, but overwhelmed by obstacles)

Stage 3: Preparation (ready to change)

Stage 4: Action (actively engaged in change)

Stage 5: Maintenance (maintaining change with vigilance)²⁴

Subscale scores can be examined individually or averaged together to create an overall score ranging from 1 to 5.

To explore the readiness to change of Getting Ready providers, the second edition of the Stage of Change Scale was administered to providers and their Mentors, Curriculum Consultants, ERS Consultants, and Outreach specialists (as applicable) at the beginning and the end of the provider’s participation in Getting Ready.

All Getting Ready staff who worked with a provider completed the “Coach Report” version of the Stage of Change Scale. The responses of the Mentors, Curriculum Consultant, ERS Consultants and Outreach Specialists (as available) were averaged for each provider to produce

²⁴ Peterson, S. M., Baker, A. C., & Weber, M. R. (2010). *Stage of Change Scale for Early Education and Care 2.0: Professional Manual*. Rochester, NY: Children’s Institute, p1.

a single “Coach” score for before and after the Getting Ready program.²⁵ Average overall scores on the Stage of Change Scale (at the beginning and end of Getting Ready) are provided below in Table 21, along with the averaged “Coach” score. At the beginning of the Getting Ready process, average scores on both the Self-Report form and the Coach form were between 3.4 and 3.9, indicating that providers were at the middle to high end of Stage 3, moving from “Preparation” toward “Action.”²⁶ After completing the Getting Ready program, “Coach” respondents and providers generally agreed that providers were at the start of Stage 4, “actively engaged in change,” based on reporting average overall Stage of Change Scale scores near 4.0.

Table 21. Readiness to Change scores as reported by Providers, Outreach Specialists, Mentors, and ERS Consultant

Person completing the Stage of Change Scale	Overall Readiness-to-Change score at the start of Getting Ready participation		Overall Readiness-to-Change score at the end of Getting Ready participation	
	Score	N	Score	N
Family child care provider (Self-Report)	3.7	(N=40)	3.9	(N=22)
Center-based provider (Self-Report)	3.9	(N=20)	4.1	(N=13)
Outreach Specialists	3.7	(N=12)	-	(N=0)
Mentors/Curriculum Consultants	3.4	(N=46)	4.1	(N=25)
ERS Consultants	3.4	(N=49)	4.0	(N=28)
Averaged “Coach” score	3.4	(N=55)	4.1	(N=35)

Source: *Stage of Change Scale 2.0 (Children’s Institute Inc.) as administered by Child Trends*

At the start of Getting Ready, there were some significant differences between levels of readiness-to-change depending on who was completing the Stage of Change scale (see Table 21 above).

- Center-based providers self-report higher levels of readiness to change than do family child care providers (marginally significant at $p=.09$).
- Providers self-report much higher levels of readiness to change than do their Mentors and their ERS Consultants ($p<.01$ for both).
- Outreach Specialists rarely complete Stage of Change scales for the providers they worked with, but when they do, they report higher levels of readiness to change than do ERS Consultants and Mentors.

²⁵ While Mentors, ERS Consultants, and Outreach Specialists have different relationships with providers and are focused on different topics, we are interested here in the provider’s *overall* readiness to change her child care practices. In some cases, a staff member did not complete the scale because she did not feel she knew the provider well enough to report on her readiness to change. By averaging the available scores from staff, we hope to provide the best possible report of a provider’s readiness to change from the individuals who know the provider best.

²⁶ See page 9 of the *Stage of Change Scale Professional Manual*, cited above.

At the end of Getting Ready, the average overall Readiness to Change reported by providers, Mentors, and ERS Consultants was very similar.

Table 22 compares self-reported subscale scores and Coach-reported subscale scores at the beginning and end of Getting Ready.

Table 22. Pre-Getting Ready and Post-Getting Ready Scores on the Stage of Change Scale 2.0

Scale item	Average score at start of Getting Ready		Average score at end of Getting Ready	
	Self-Report (N=60) ²⁷	Combined Coach-Report (N=55) ²⁸	Self-Report (N=35) ²⁹	Combined Coach-Report (N=35) ³⁰
Intention	3.72	3.55	3.86	3.99
Awareness	3.72	3.32	4.26	4.06
Seeking information	3.53	3.26	3.71	4.01
Effect on children	3.80	3.28	4.03	4.11
Overcoming obstacles	3.80	3.35	4.09	4.13
Social Supports	3.97	3.35	3.94	3.81
Professional Identity	4.00	3.44	4.20	4.24
Overall	3.79	3.37	4.01	4.05

Source: Stage of Change Scale 2.0 (Children’s Institute Inc.) as administered by Child Trends

As shown in Table 22, providers self-report the highest scores on the “Professional identity” subscale and the “Social support” subscale, though a closer look at the data reveals that providers from center-based programs are driving the high scores in “Professional Identity”

²⁷ Self-Report Forms were completed by 40 family child care providers and 20 center-based providers at the start of their participation in Getting Ready.

²⁸ Mentors completed a Coach Form for 31 family child care providers and 15 center-based providers at the start of their participation in Getting Ready. ERS consultants completed a Coach Form for 32 family child care providers and 17 center-based providers at the start of their participation in Getting Ready. Outreach specialists completed a Coach Form for 12 family child care providers at the start of their participation in Getting Ready. At least one Coach Form was completed for 36 family child care providers and 19 center-based providers, for a total of 55 providers for whom an “Average Score on Coach Form at start of Getting Ready” could be calculated.

²⁹ Self-Report Forms were completed by 22 family child care providers and 13 center-based providers at the end of their participation in Getting Ready.

³⁰ Mentors completed a Coach Form for 16 family child care providers and 9 center-based providers at the end of their participation in Getting Ready. ERS consultants completed a Coach Form for 16 family child care providers and 12 center-based providers at the end of their participation in Getting Ready. No Outreach Specialists completed a Coach Form for any provider at the end of their participation in Getting Ready. At least one Coach Form was completed for 20 family child care providers and 15 center-based providers, for a total of 35 providers for whom an “Average Score on Coach Form at end of Getting Ready” could be calculated.

while family child care providers are driving the high scores in “Social Support.” According to the coaches, providers were strongest on the “Intention” subscale at the start of Getting Ready. Providers and “Coach” respondents agreed that at the start of Getting Ready, providers showed the lowest level of readiness in their interest in learning new information about their practices.

At the end of Getting Ready, center-based providers continue to give themselves the highest marks in “Professional identity” but also score themselves equally high in “Awareness.” In contrast, at the end of Getting Ready, family child care providers no longer give themselves high marks in “Social Support” and instead give themselves their highest marks in “Awareness.” In contrast, coaches give both center-based providers and family child care providers the highest marks in “Professional Identity” at the end of Getting Ready participation.

In the tables above, the pre-Getting Ready scores include all 60 providers that are participating in the evaluation, but post-Getting Ready scores are available only for the 35 providers that have completed the Getting Ready process. To compare the improvement made from the beginning to the end of the Getting Ready process, we look only at providers for which we have the Self-Report Stage of Change Scale both at the beginning and at the end of the program or the Coach-report Stage of Change Scale both at the beginning and at the end of the program. Table 23 shows the improvement seen on the Stage of Change Scale from the beginning of Getting Ready to the end of Getting Ready.

Table 23. Progress on the Stage of Change Scale (SCS)

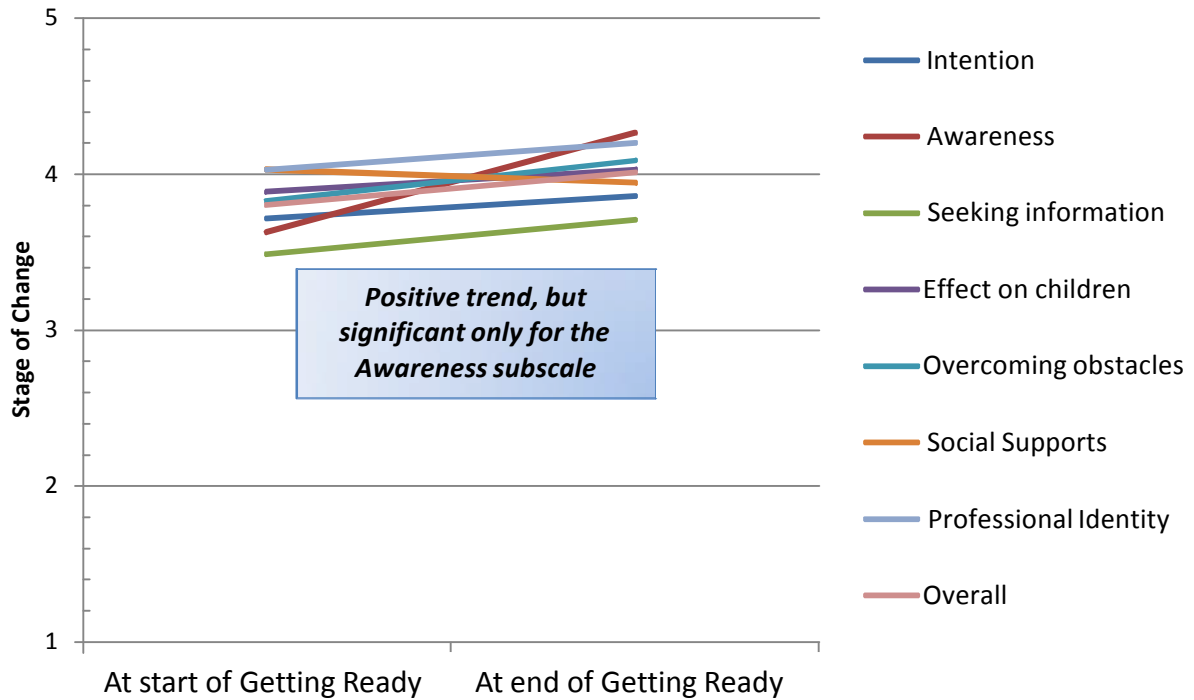
Method of tracking progress	Center-based programs (N=13 for Self-Report N=15 for Coach-Report)	Family child care providers (N=22 for Self-Report N=20 for Coach-Report)	All programs (N=35 for Self-Report N=35 for Coach-Report)*
Average change in overall Self-Report Stage of Change Scale score from start to end of Getting Ready	6% increase in SCS average score from pre (3.9) to post (4.12)	5% increase in SCS average score from pre (3.74) to post (3.94)	6% increase in SCS average score from pre (3.8) to post (4.01)
Average change in overall Coach-Report Stage of Change Scale score from start to end of Getting Ready	14% increase in SCS average score from pre (3.70) to post (4.21)	16% increase in SCS average score from pre (3.38) to post (3.93)	15% increase in SCS average score from pre (3.52) to post (4.05)

**There are 35 providers that submitted a Self-Report Stage of Change Scale at the beginning AND at the end of Getting Ready. Likewise, there are 35 providers for whom at least one staff person submitted a Coach-Report Stage of Change Scale at the beginning of Getting Ready and at least one staff person submitted a Coach-Report Stage of Change Scale at the end of Getting Ready. However, these are not the same 35 providers.
Source: Stage of Change Scale 2.0 (Children’s Institute Inc.) as administered by Child Trends*

Table 23 shows that across self-report measures and coach-report measures, providers (both in center-based programs and family child care) have significantly improved their scores on the Stage of Change Scale ($p < .01$). Providers reported an improvement of just 5.5% in their readiness to change while Coaches reported an improvement of 15.1%.

Next we examine in which subscales the greatest progress is found.

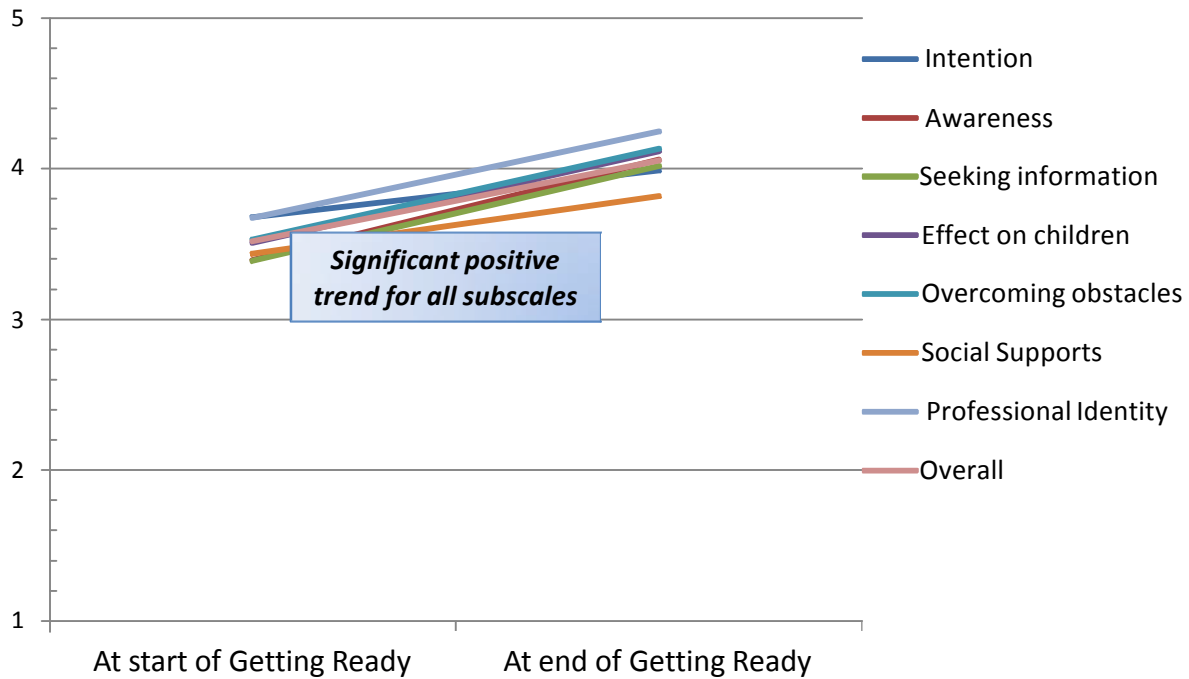
Figure 3. Differences in Self-Reported Readiness to Change from the start of Getting Ready to the end (N=35)



Source: Stage of Change Scale 2.0 (Children’s Institute Inc.) as administered by Child Trends.

The greatest change in self-reported readiness to change was seen in the Awareness subscale, which is a measure of the learner’s awareness of the need to make a change (see Figure 3). Providers self-reported, on average, an 18% increase in their awareness of the need to make a change, a statistically significant improvement. In contrast, changes were not found to be significant on any of the other subscales.

Figure 3. Differences in Coach-Reported Readiness to Change from the start of Getting Ready to the end (N=35)



Source: Stage of Change Scale 2.0 (Children’s Institute Inc.) as administered by Child Trends.

Improvements from the Coach pre-scale to the Coach post-scale were statistically significant for all seven subscales. However, Coach respondents reported the greatest improvement in the provider’s intention to make a change (20% increase), the provider’s interest in learning new information about her practices (19% increase), the provider’s beliefs about the extent to which making a change would have an effect on children (17% increase), and the provider’s ability to overcome obstacles to change (17% increase). Coach respondents reported the smallest percentage of improvement in the extent to which the provider believes that she has social support (11% increase).

In summary, providers who enter Getting Ready perceive themselves (and are perceived by their Mentors and ERS Consultants) as ready to change (the Preparation stage), and moving toward being actively engaged in change (the Action stage). Both center-based providers and family child care providers initially report their own readiness to change as higher than is perceived by their Mentors and ERS Consultants. However, by the end of Getting Ready, providers’ self-report of their own readiness to change is the same (for center-based providers) or lower than (for family child care providers) their Mentors’ and ERS Consultants’ perceptions. At both time points, center-based providers perceive themselves as more ready to change than do family child care providers. By the end of Getting Ready, improvement in readiness-to-change is significant, both by providers’ self-report and by coaches’ report, providing evidence that Getting Ready is effective in moving providers toward readiness-to-change.

SUMMARY AND IMPLICATIONS

To summarize findings from this report, we return to the research questions that guided the Evaluation, review the relevant evidence, and provide a brief synopsis of the conclusions.

ANSWERING THE RESEARCH QUESTIONS

1. What are the characteristics and initial quality level of programs who participate in the Getting Ready project? Is Getting Ready serving the intended population?

Evidence:

- Getting Ready serves 58 family child care programs and 31 center-based programs in Minneapolis and St. Paul.
- Two-thirds of Getting Ready participants are family child care programs and nearly one-third of participants are English language learners.
- Getting Ready programs serve over 2,000 children, 37% of whom receive child care assistance to pay for their care, and 18% of whom are English language learners.
- At the start of Getting Ready, just 9% of participating family child care providers answered “Yes” to at least 40% of the questions on the Getting Ready Checklist, the yardstick used to measure a program’s readiness to be rated by Parent Aware.
- In contrast, center-based programs have a higher initial level of quality. The majority of center-based programs (87%) met the criterion for being ready to enter Parent Aware at the start of their Getting Ready participation.

Summary of findings: Getting Ready has succeeded in recruiting family child care programs and non-English speaking providers, the two under-represented groups identified as targets for recruitment into Parent Aware. Moreover, family child care programs in Getting Ready report a low level of initial program quality and serve a higher-risk population of children than are served by family child care programs in Parent Aware. Getting Ready also serves center-based programs. These programs are more similar to typical Parent Aware participants in that they serve a lower percentage of high-risk children and are starting with a higher level of program quality than family child care programs. Family child care programs that enrolled in Getting Ready earlier serve a higher percentage of children who are English language learners and a higher percentage of children receiving subsidies than do family child care programs that were enrolled later. This implies that it could be difficult to continuously find, recruit, and enroll programs that serve a high risk population.

2. How effective is the Getting Ready process as a strategy for assessing and addressing individual provider needs? Do providers report being satisfied with the services offered?

Evidence:

- The Getting Ready Checklist is administered to providers, with the support of the Getting Ready Project Coordinator, as a self-assessment of the program's needs. The Checklist succeeds in distinguishing differences in quality between programs and across time.
- Child care programs receive Getting Ready services for approximately 9 months. During that time, nearly all participating programs receive the supports of an ERS Consultant and a Mentor or Curriculum Consultant. ELL providers also receive the support of an Outreach Specialist.
- Two-thirds of providers report positive or neutral experiences with their ERS Consultant, 100% of center-based providers report positive or neutral experiences with their Curriculum Consultant, and 100% of family child care providers report positive or neutral experiences with their Mentor.
- Family child care providers and Mentors report engaging in a broad range of activities together, with no single activity reported by all providers.
- Providers and ERS Consultants report a more consistent set of activities that they engage in together, but also some individualization.
- Three-quarters of programs received training on the Creative Curriculum and Assessment Tool through Getting Ready, a change that is likely related to the high scores of Getting Ready graduates in the Teaching Materials and Strategies category and the Tracking Learning category of Parent Aware.

Summary of findings: The Getting Ready Checklist is functioning well as a self-assessment of baseline quality, particularly when administered with the support and guidance of the Project Coordinator, who is knowledgeable about the Parent Aware quality indicators. The Getting Ready process – involving supports provided by Mentors, Curriculum Consultants, ERS Consultants, and Outreach Specialists – has been successful in helping programs meet the Parent Aware indicators of quality. Mentors take a highly-individualized approach to serving providers' needs while ERS Consultants report taking a more standardized approach. Providers are generally satisfied with their experiences working with both their Mentor and their ERS Consultant. Those who received the services of an Outreach Specialist reported being very appreciative of these supports.

3. How are services coordinated across multiple service providers, and how does the provision of multiple supports serve the needs of providers?

Evidence:

- Three-quarters of interviewed providers reported that they liked working with multiple people and would not have preferred to have just one service provider, but a minority of providers found it confusing and complicated to work with multiple individuals.

- Getting Ready staff report that their job involves many and varied skills, and these skill sets overlap across staff types.
- Getting Ready staff report that they would benefit from additional training on the Parent Aware rating system and from increased coordination with Parent Aware staff.
- Most Getting Ready staff report that they both enter notes into GoogleDocs and review information on GoogleDocs less than monthly. Thus, although GoogleDocs was intended to be a primary vehicle for communication among staff, it is not being used for that purpose frequently.
- Getting Ready staff reported collaborating with other staff members about the same amount in the second year of implementation as in the first.

Summary of findings: With multiple supports being provided by multiple staff members, it is possible that providers might report that they are overwhelmed by the number of people with whom they have contact. This is not the case. Instead, the majority of interviewed providers reported that they liked working with multiple staff members. However, providers did not perceive that their Mentor and ERS Consultant worked together to better support them. Likewise, most Getting Ready staff members report communicating with other staff no more than once a month. Thus, internal communication and collaboration across staff with different functions does not happen frequently in Getting Ready but, overall, this level of communication does not appear to be negatively impacting the provision of supports.

4. Does the quality of participating programs improve by the end of the Getting Ready process?

Evidence:

- Whereas at the start of Getting Ready only 9% of family child care programs met the criterion to be considered “ready” to enter Parent Aware, by the end of Getting Ready (9 months later, on average) 91% of family child care programs reached that benchmark.
- Center-based programs also showed improvement, but began Getting Ready at a higher level of initial quality. Most (87%) center-based programs were considered ready to enter Parent Aware at the start of Getting Ready and 100% were considered ready by the end of Getting Ready.
- Family child care programs showed the most substantial improvements in the categories of Teaching Materials and Strategies and Tracking Learning, with approved curriculum or assessment tools being used by fewer than 10% of programs at the outset and by at least 78% at graduation from Getting Ready.
- The greatest gains among center-based programs were seen in specific Teaching Materials and Strategies indicators, such as experience with observational tools, and professional development indicators, such as documenting staff training and education in the MNCPD Registry.

Summary of findings: Getting Ready graduates demonstrate significant improvements in their quality as measured by the Getting Ready Checklist. Family child care programs experience

bigger improvements than do center-based programs, in part because center-based programs report higher levels of quality at intake. Providers reported that their most significant improvements were in the areas of: changes in their environment, implementing a curriculum and lesson planning, and providing children with appropriate learning materials. These changes are taking place over an average of 9 months.

5. Are providers more open to and focused on the process of quality improvement by the end of Getting Ready?

Evidence:

- Providers self-reported, on average, an 18% increase in their awareness of the need to make a change in their child caring practices and a 5.5% increase in their overall readiness to change.
- Getting Ready staff reported a 15% increase in providers' readiness to change, from the start of the Getting Ready process to the end.

Summary of findings: Providers who enter Getting Ready perceive themselves as ready to change and moving toward being actively engaged in change. Both center-based providers and family child care providers initially report their own readiness to change as higher than is perceived by their Mentors and ERS Consultants. However, by the end of Getting Ready, providers' self-report of their own readiness to change is the same (for centers) or lower than (for family child care providers) their Mentors' and ERS Consultants' perceptions. At both time points, center-based providers perceive themselves as more ready to change than do family child care providers. Improvement in readiness-to-change from the beginning to the end of Getting Ready is significant, both by providers' self-report and by coaches' report.

6. Do providers participating in Getting Ready services enroll in Parent Aware? How are these programs rated in Parent Aware?

Evidence:

- As of the end of the Parent Aware pilot in June 2011, 42 Getting Ready graduates had been rated by Parent Aware.
- Getting Ready graduates account for 59% of the programs that received initial Parent Aware ratings between July 2010 and June 2011.
- Getting Ready graduates receive star ratings that are not significantly different than the star ratings received by other programs joining Parent Aware at the same time.
- Getting Ready graduates are significantly outscoring non-Getting Ready graduates in the Teaching Materials and Strategies category and in the Tracking Learning category.

Summary of findings: Getting Ready is succeeding, not only by encouraging underserved programs to join Parent Aware, but by assisting them with Parent Aware preparation so that they enter with ratings that are similar to other programs entering Parent Aware.

IMPLICATIONS FOR FUTURE WORK

Overall, Getting Ready has been a successful child care quality improvement initiative that has supported the growth of Parent Aware, Minnesota's Quality Rating and Improvement System (QRIS). Three key lessons emerge that can be applied to quality improvement efforts as Parent Aware expands to new areas of the State. First, a targeted recruitment plan and culturally-appropriate program staff can engage non-English speaking family child care providers in QRIS. However, finding and recruiting programs with high needs can be challenging, particularly after the "easy-to-recruit" have already joined. Second, providing child care programs with training and supports that are intentionally aligned with the QRIS quality standards can result in significant improvements being made in a relatively short time frame. Family child care programs appear to be more able to make changes quickly, so additional supports for center-based programs should be explored. Finally, working with multiple technical assistance providers can be challenging for some child care providers, but most report benefitting from multiple forms of assistance. Improving communication and collaboration between these technical assistance providers can only improve services.