EQUIP Evaluation Highlights the Role of Coaching in Supporting Child Care Quality Improvement in Philadelphia

Katherine Falletta, Julianna Carlson

About EQUIP

In 2019, First Up launched the Early Education Quality Improvement Program (EQUIP), a quality improvement initiative providing tailored technical assistance and other resources to center- and home-based child care providers in Philadelphia. EQUIP is designed to support child care providers in improving the quality of their programs and moving up in levels in Keystone STARS, Pennsylvania’s child care quality rating and improvement system (QRIS; see text box for additional details on Keystone STARS).1

EQUIP is a two-year program open to center- and home-based child care providers who are currently at a STAR level 2 and are interested in moving up in STAR levels. Participants in EQUIP have access to a range of quality improvement supports, including coaching, mentorship, case management, tailored professional development (PD), free program assessments, access to program improvement funds, teacher and director learning circles, and communities of practice (CoPs). During the first cohort of EQUIP, some of these activities were temporarily paused or modified due to the COVID-19 pandemic. For example, coaching was delivered remotely via a virtual platform. Trainings and meetings (e.g., for case management and CoPs) also took place virtually.

Forty programs participated in the first iteration of EQUIP, which concluded in December 2022. Of those, three quarters (n=30, 75%) moved up to STAR 3 or 4, with 4 programs earning a STAR 3 rating and 26 earning a STAR 4 rating. Forty-nine programs were accepted into the second iteration of EQUIP, which began in December 2022 and is scheduled to conclude in December 2024.

Keystone STARS

Keystone STARS (Standards, Training/Professional Development, Assistance, Resources, and Supports) is Pennsylvania’s quality rating and improvement system (QRIS). It includes quality standards in four areas:

- Staff education
- Learning environment
- Leadership/management
- Family/community partnerships

Participating programs earn a score from STAR 1 to STAR 4.

The process for moving up in STAR levels changed during the pandemic, shifting from external assessments to an internal, self-assessment process that requires providers to develop a plan for continuous quality improvement.

---

This report draws from an evaluation of EQUIP. It describes the methods used for the evaluation and key findings related to the role of coaching in supporting child care quality improvement in Philadelphia, including how coaches and providers think about quality, the role of coaches—including their role providing emotional support to providers—and programs’ capacity to engage in quality improvement.

**Methods**

First Up contracted with Child Trends to conduct an implementation evaluation of EQUIP drawing on the experiences of child care providers, coaches, and other key First Up staff. Child Trends and First Up engaged in multiple rounds of data collection, including focus groups, interviews, and surveys, and analysis in order to generate real-time recommendations for First Up to improve the experiences of educators and coaches in the initiative.

**Coaching and Quality Improvement**

Coaching, which is the centerpiece of EQUIP, is provided by a team of seven coaches with support from a program manager. Some coaches work full time on the initiative and carry caseloads of 8-10 programs, while others work part time on the initiative, each supporting 1-4 sites. All EQUIP coaches have a background in early care and education and have knowledge of Keystone STARS. Most have previously been directors of STAR 3 or 4 centers, and some have previously worked as Keystone STARS Quality Coaches. All EQUIP coaches are trained in the Coaching with Powerful Interactions framework.

**Understanding quality**

EQUIP coaches and providers described “quality” as a multi-dimensional concept, with facets including teaching and classroom practices, business practices, assessments, enrollment, and relationships with staff and parents. Coaches expressed that while many providers did not initially define quality the same way they did, over time their definitions became more aligned. One coach described this process saying, “I don’t think they always understand how much is involved in quality, but we do, so we school them on this. We are sometimes on different wavelengths, but that gap has kind of closed.” EQUIP providers echoed this sentiment, expressing that their EQUIP coaches were instrumental in deepening their understanding of quality. One provider explained,

“I thought it was more so about what the children were learning. But I learned in EQUIP that it’s more than that. It’s the relationship you have with children, families, and staff. It’s about your environment. Being able to assess your environment and make the necessary changes to make it better. No one thing makes quality—it’s everything put together.”

Coaches expressed that for them, the true definition of quality goes beyond strictly focusing on compliance or meeting Keystone STARS standards. Coaches shared that these standards may fail to account for the impact of COVID-19 on child care and communities and raised equity-related concerns about whether these quality standards are culturally sensitive or appropriate for all communities. For example, one coach explained,

“Any quality improvement assessment needs to be reexamined to meet the needs of the center in which they serve their clients...we still stick to standards that don’t exemplify what centers are doing. If you take a real look and a deeper dive, some is based on culture and ethnicity. It could be high quality but we have our own definition of that.”
The role of coaches

Coaches described taking a strengths-based perspective and working alongside providers to support them in overcoming challenges and meeting goals. They defined their role as helping providers to understand the definition of quality, employ best practices to improve quality, and sustain quality after their participation in EQUIP ends.

This is consistent with how providers described the role of their coaches. They saw coaches as working to build their knowledge, identify existing strengths and areas for quality improvement, and help providers understand how to apply guidelines related to curriculum, health and safety, and business best practices. They also described receiving support from coaches to address barriers to quality improvement. For example, they described their coaches supporting them in reorganizing their classrooms, addressing health and safety concerns, preparing them for Program Administration Scale (PAS)\(^2\) and Business Administration Scale (BAS)\(^3\) assessments, applying for grants, and coordinating with Quality Coaches provided through Keystone STARS. Providers described their coaches as accessible and responsive; one provider summed up the support she had received from her coaching by saying, "My coach is amazing. She's been in the field and worn so many different hats. She is an encyclopedia of early childhood education. I'm glad to have a coach that fits the mission and vision of my program."

Coaches shared that the most common area of focus with EQUIP programs was moving up the quality scale in Keystone STARS. In interviews, coaches noted that this involved helping directors navigate the self-assessment process, organizing and uploading required documents, providing training or support around learning environments and the Environment Rating Scale (ERS)\(^4\), and supporting programs in using approved curricula. This was markedly different than before the pandemic, when coaches spent more time directly supporting teachers and classrooms (e.g., by observing and doing mock assessments). Coaches also described helping programs whose practices may not align with "standard" definitions of quality navigate the rating process to maximize their scores while preserving important cultural elements of care.

Coaches explained that they know quality improvement is occurring when they observe a change in behaviors and practices, including seeing programs incorporate the views of families and teachers and "making sure the entire community is part of the conversation." As one coach explained, "[Programs] are part of the community and they can provide a service. So coaching is helping them see the entire picture and letting them make these connections. When they do that, they become a valuable part of the community." Other indications of quality improvement included calmer and more peaceful environments within centers, and staff beginning to "dig deeper and ask questions" as they engage in quality improvement efforts, including those focused on program sustainability.


Coaching and emotional support

Across multiple data collection activities, coaches shared that a big part of their work, particularly after the onset of the COVID-19 pandemic, involved providing emotional support to program staff. Coaches described the importance of checking in with providers about their well-being and that of their families and neighbors. As one coach stated in a September 2020 focus group, “There is a lot of anxiety and fear amongst teachers and directors.” She added, “They have many other issues they are dealing with. COVID-19 brought to the forefront many of the issues we are facing like lack of resources, funding, and racial injustice. [There is] a lot of trauma and death. Folks are still in the midst of dealing with a lot of loss. Folks are grieving their lives pre-COVID but we are still moving forward.”

Coaches identified the emotional and mental health of program staff as being instrumental to quality improvement. Understanding the personal circumstances of providers—including loss, grief, and recovery—helped coaches meet them where they were and better understand their capacity to engage in quality improvement activities and coaching in a meaningful way. One coach described her approach by saying, “I look at folks I’m serving, make connections, honor where they are, and help them process. Helping practitioners understand I see them beyond the work we do, that they are a human being and it’s been hard.”

Providers commented on the value and impact of the emotional support their coaches provided both during and after the height of the COVID-19 pandemic. One provider underscored the impact of the emotional support she received from her coach and other EQUIP staff during the height of the pandemic saying, “Basically they were all I had, and I was so grateful for that.” Others described the positive impact of their coaches on their personal and professional trajectories. For example, one provider described her relationship with her coach as “a sisterhood” and explained, “[My coach] supports me all the time. She encouraged me to go back to school. At first, I was scared, I thought at this age I’m too old. But I started last summer, and it’s been going good. I’ve learned so much. I’m glad she encouraged me.”

While this was impactful, coaches also described how providing emotional support to providers affected their own well-being. One coach said, “While we’re successful, the emotional toll has been enormous for all of us.” They explained that this emotional toll is compounded by systemic challenges—including low wages for early care and education workers and structural racism—and has adversely affected their social, emotional, and mental health. To mitigate this adverse impact, they recommended reducing coaches’ caseloads and implementing organizational supports for self-care and well-being.

Programs’ capacity for quality improvement

Coaches identified several barriers to programs engaging in quality improvement, including the COVID-19 pandemic, low wages and the related staffing crisis, and historical and continued racial inequities. The ongoing COVID-19 pandemic shifted program priorities from quality improvement, as traditionally defined, to a focus on safety. One coach described this transition saying, “There was some redirection when the shutdown occurred. Quality was placed on the back burner, and we focused on custodial care. Folks had to shift their way of thinking—quality is now about how we’re going to keep children physically, mentally, emotionally, spiritually safe...so quality became something very different. Then reopening occurred and we had to begin thinking about quality again.”

Even as communities began adjusting to the pandemic, significant barriers to focusing on quality persisted. Coaches emphasized the overall lack of financial resources available to the early care and education industry, which has affected quality in multiple ways. Providers similarly identified limited funding and funding restrictions as barriers.
Coaches explained that limited financial resources and resulting low wages for child care workers have resulted in a staffing shortage, which was exacerbated by the COVID-19 pandemic. This has also affected quality, as programs had to focus on “putting bodies in a room to open classrooms,” rather than quality improvement. Providers also identified staffing shortages as a barrier to quality improvement with both professional and personal implications. Several described having to fill roles as teachers in addition to completing their work as directors, making it more challenging to focus on quality improvement. One provider shared that the stress of this dual burden caused her to develop a serious health problem. The coaches indicated that in the absence of intervention they expect these conditions to continue or worsen in the future. One coach said, “We do it because we love it, but we have another generation who is coming up...[and] this generation is not willing to incur debt and not get a livable wage.” Another reiterated, “We need a workforce and we don’t have it.”

Related to the COVID-19 pandemic, the systemic challenges mentioned above, and intergenerational trauma stemming from racism and racial inequity, coaches also identified the emotional and mental health of staff as a barrier to engaging in quality improvement. One coach explained, “We need to focus on the social, emotional, and mental health of our industry as a whole, so that we can get to the point where we can focus on quality in a transitional sense.”

Despite these challenges, coaches reported feeling encouraged by the tenacity and commitment of the providers with whom they worked. For example, one coach said, “I have no one who says, ‘I can’t do this.’ They might say, ‘Not today’, but they are always willing to problem solve.” Another commented on her programs’ continued progress towards their quality improvement goals, saying, “In the midst of everything there’s been good momentum. We’re creating some sense of normalcy and programs have been moving up.”

Conclusion

As cities and states around the country consider how to make quality improvement a more equitable and sustainable process, the implementation of EQUIP can offer important insights into the value of relationship-based coaching. Across data collection efforts, coaches and providers in EQUIP consistently described the importance of their relationships to supporting programs in multiple dimensions of quality improvement. The individualized, relationship-based approach to coaching proved instrumental in supporting programs as they navigated the COVID-19 pandemic and overlapping systemic challenges, including low wages, the child care staffing crisis, and historical and continued racial inequities. Coaches represent a key strategy in addressing the ongoing barriers that programs face to making lasting quality improvements to benefit educators, children, and families.

Acknowledgments

The Child Trends team would like to thank EQUIP coaches and participating providers for sharing their time and expertise throughout multiple data collection activities. We also thank Lisa Schultz, Alyssa Cruz, Drew Martin, Sara Shaw, Catherine Schaefer, and Jessica Conway for their feedback and support.

Suggested citation