



Brief & to the Point

Wisconsin Child Care Research Partnership

Issue Brief No. 13 December 2003

What can research contribute to child care consumer rating systems?

This Brief uses data from the Wisconsin Child Care Research Partnership as a catalyst to inform development of a statewide child care rating system, which could build on basic licensing standards to assist parents in selecting quality child care.

Parent perspective

Choosing child care is one of the most important tasks facing parents of young children, yet most families rely on friends and neighbors, or newspaper and telephone directory advertisements, and do not “comparison shop.”¹ As they seek to balance cost, convenience, reliability, access (e.g. transportation, openings), and job schedules, parents are often either unable to gauge quality or unable to find high quality programs.² Parents may use the internet, brochures, checklists, and public education materials to search for child care information. However, there is currently limited factual information about the quality of specific programs to help families understand or exercise their power as consumers to influence the supply of quality.³ Providing parents with quality rating information could make them more effective child care consumers.

Government perspective

Funding from federal block grants is used primarily to provide child care subsidies that allow increasing numbers of low-income parents to work. It also supports child care regulation and enforcement, technical assistance, training initiatives, and child care resource and referral (CCR&R) services. Despite government efforts, child care quality continues to be a challenge, and may improve significantly only when child care providers, consumers, and the state work together to identify and then reward higher quality.

Provider perspective

The Wisconsin Child Care Research Partnership has demonstrated that the average quality of care in Wisconsin licensed centers is “mediocre.” The highest educational level for 58% of teachers is a high school diploma;⁴ 56% of teachers earn less than \$8 per hour;⁵ staff turnover averages 40% annually;⁵ and fewer than 10% of centers are nationally accredited.⁵ It is difficult to attract and retain highly qualified staff, and to provide the salaries and benefits these teachers deserve when parents seldom even consider provider qualifications in making their child care decisions.²

State efforts to rate quality

At least 13 states have developed consumer-friendly standards for child care facilities, much like quality rating systems for hotels and restaurants.⁶ For example:

North Carolina. A 5-star system uses staff education, regulatory compliance history, and observed quality of care to assess all programs. Significant state resources were invested in 2000 to embed ratings into state licensing. Facilities receive differential rates of reimbursement for subsidy, based on the number of stars received.⁷

Colorado. A voluntary 4-star system, to be implemented in 2004 for selected sites, will include ratings of learning environments, family partnerships, adult/child ratios, staff training, and accreditation, and will be communicated through that state’s CCR&R system.⁸

A consumer rating system for Wisconsin

A national panel recently highlighted challenges associated with development of consumer rating systems.⁹ Members argued that the quality of a child care program is most accurately assessed through direct observation, but because such measures are costly to collect consistently across programs, indirect measures of quality, including telephone interviews, consumer surveys, or structural measures, might also be used. If Wisconsin were to develop a consumer rating system, it would likely emphasize structural (rather than observed) measures. It might also be implemented statewide (rather than voluntarily), be conducted in collaboration with state licensing and CCR&Rs, and be designed to meet the following criteria:

- **Research-based.** Indicators selected for measurement must be related to observed child care quality and significant enough to have a potential impact on children’s outcomes.
- **Simplicity.** From a parent perspective, ratings must provide useful information, be easy to access, and be easy to understand.
- **Efficiency.** From a government perspective, ratings must be objective, verifiable, and able to be collected easily and at minimal cost.
- **Validity.** From a provider perspective, ratings must be fair and representative of the care that child care programs typically provide.

Of course, no quality indicator system could provide the most important information that parents can glean only from observations of child care programs in action.



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Wisconsin Data

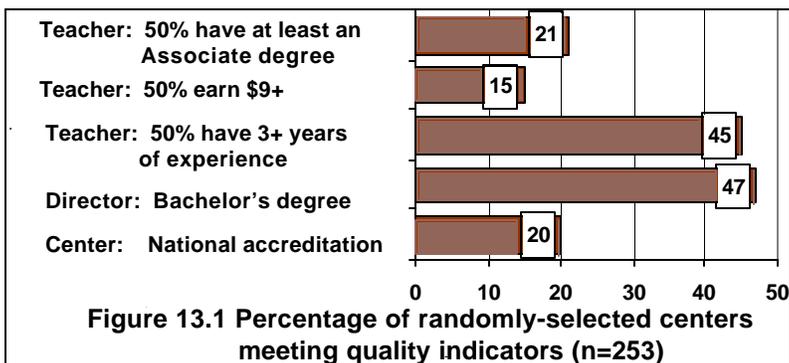
In this Brief, we use data from questionnaires completed by child care directors from randomly-selected centers participating in the state subsidy program (n=253) to illustrate a potential quality indicator model. We test the validity of this model by comparing quality as assessed by structural indicators against quality as assessed through observation in 26 randomly-selected centers and 26 centers that participated in a state-sponsored quality improvement project. We caution that the particular measures selected may be neither necessary nor sufficient, and we acknowledge that alternative measures (e.g. ratios, group size, absence of major licensing violations, cost of care) may be preferable. We introduce this model as a means of opening the dialogue for a statewide conversation about a potential quality indicator system that could eventually include all Wisconsin center and family child care programs.

What measures could a quality indicator model include?

For this Brief, we selected teacher, director, and center characteristics as measures of child care quality. Centers were assigned one “star” for each measure for which their center met the designated criteria. Validity of the model was tested by comparing the number of “stars” received by centers with measures of their observed child care quality.

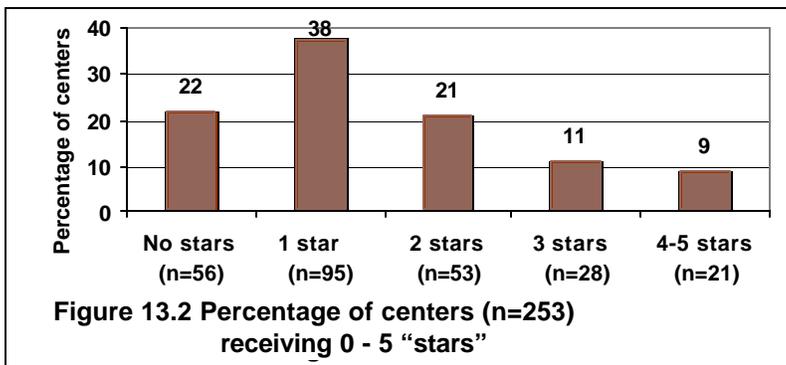
Distribution of quality indicators

Figure 13.1 displays the percentage of randomly-selected centers meeting designated criteria on each of five quality indicators. Research has demonstrated significant relationships between these measures (teacher education, wages, experience, director education, and center accreditation) and observed measures of classroom quality.⁵



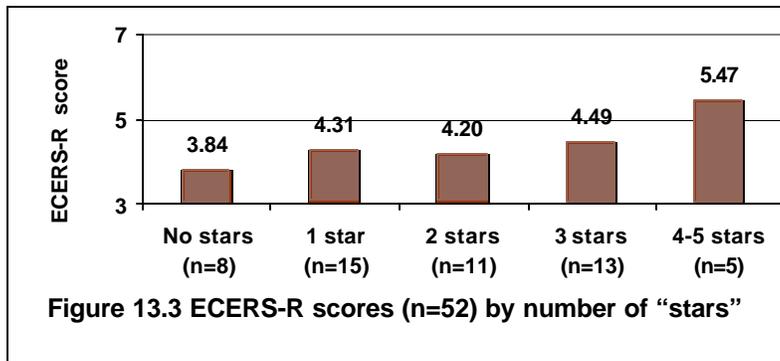
Distribution of total “stars”

Figure 13.2 displays the distribution in the total number of “stars” received by randomly-selected centers, using these quality indicators. Although all centers were licensed, 22% met none of the criteria for quality care, and therefore received no “stars.” Only 9% of centers received 4-5 “stars.”



Validity of a quality indicator model

Figure 13.3 demonstrates a consistent relationship between the number of “stars” assigned and the observed quality of care in classrooms, using the Early Childhood Environment Rating Scale (ECERS-R).¹⁰ These findings, indicating that centers with more stars earn higher ratings on the 7-point ECERS-R scale, suggest that it may be possible to estimate child care quality without actually observing in child care classrooms.



Collecting quality indicator data

Wisconsin currently has several systems in place for collecting and verifying data on teacher, director, and center characteristics:

- Wisconsin child care centers are licensed by the Department of Health and Family Services (DHFS). Data on teacher and director employment history and qualifications are routinely verified during unannounced licensing visits.
- Teachers and directors are required to submit their educational credentials to *The Registry*, Wisconsin's recognition system for the early care and education profession. Levels on the career ladder are established by documentation of degrees and credentials.
- Lists of nationally-accredited programs are readily accessible on selected websites:
Child care centers: www.naeyc.org
School age programs: www.nsaca.org
Family child care programs: www.nafcc.org

Although there are current inefficiencies in these systems, it is possible to envision a collaborative model, facilitated by a statewide shared data system (see Figure 13.4). In this hypothetical model, child care centers and family child care providers use standard reporting procedures for summarizing program data. *The Registry* systematically verifies provider credentials. State licensing staff send confirmation of data to the state CCR&R Network for upgrading agencies' referral databases. The child care license itself might also be modified to reflect program status on quality indicators, as seen in Figure 13.5.

Sharing quality indicators with consumers

Over 26,000 Wisconsin families received CCR&R child care referrals and consultations in 2002.¹¹ Enhancing standard referral information with research-based objective information about child care quality would increase CCR&Rs' value to consumers and consumers' power to choose quality care.

Shared data from the Department of Workforce Development, DHFS licensing specialists, *The Registry*, and CCR&Rs could be used to develop profiles for each program based on assignment of "stars," reflecting the status of designated criteria. Information could be shared with families in a variety of ways. CCR&Rs and other groups could provide training for providers seeking to reach higher quality standards. As seen in Figure 13.4, communication and data sharing among partners would be necessary in order to achieve the ultimate goal of better informing families about quality child care choices.

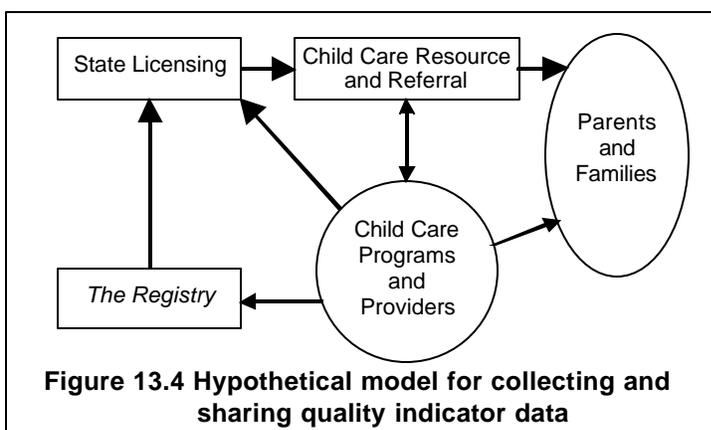


Figure 13.4 Hypothetical model for collecting and sharing quality indicator data

Policy Implications

1. **Parents:** A quality indicator system could increase parents' knowledge about child care quality, enhance their abilities to identify quality characteristics, and improve their chances of selecting higher quality programs for their young children. CCR&Rs provide one natural outlet for this effort, since they currently serve thousands of parents annually with referrals and consultations.
2. **Government:** Government support for a child care rating system could lead to quality improvement by strengthening marketplace forces for consumer choice. The state could further leverage high quality through tiered reimbursement or through provision of incentives for quality improvement.
3. **Providers:** A quality indicator system could add healthy competition to the private market, thereby encouraging providers to strive for higher quality levels.

End Note: The next *Issue Brief* will focus on parents using the subsidy system.

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University of Wisconsin-Extension (UWEX), Wisconsin Department of Workforce Development (DWD) Office of Child Care, and Wisconsin Child Care Resource and Referral (CCR&R) Network have joined in partnership to assess the quality of child care for low-income children.

Leaders in the Research Partnership include Mary Roach, Diane Adams, Dave Riley and David Edie (UW-Extension), and Jane Penner-Hoppe (Child Care Resource & Referral Network). Data collectors include staff from Wisconsin CCR&R agencies. Data analyses are conducted by UW-Extension staff: Diana Durant and Jason Bierbrauer. "Brief & to the Point" is produced by Deb Zeman.

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We are grateful to the child care programs and providers who enthusiastically responded to our research requests, and we dedicate our findings to the young children in Wisconsin who depend upon high quality child care for their "good beginnings."



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