



Infant Toddler Quality Improvement Project

2010

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Overview of Infant Toddler Services

- In 2010, two CCCW Infant Toddler Specialists administered the Infant Toddler Environment Rating Scale, revised edition (ITERS-R) in 19 licensed child care centers in Westchester County. In addition, the Specialists administered the Family Child Care Environment Rating Scale, revised edition (FCCERS-R) in 6 family/group family child care programs.
- This work is funded by the Westchester County Office for Women and the New York State Office of Children and Family Services.

Overview of the Environment Rating Scales (ERS)

- The ITERS-R and FCCERS-R are a part of a family of Environment Rating scales, designed to assess quality in early childhood programs.
- The ERS are designed to assess “process quality”, which consists of the interactions in a classroom between staff and children, staff and other adults, among the children, as well as the interactions children have with the materials and activities in their environment.

Overview of the ERS, continued

- The scales (ERS) have proven reliability and validity and are used internationally.
- The scales address the three basic needs of children:
 1. Protection of their health and safety
 2. Building positive relationships
 3. Opportunities for stimulation and learning from experience

Meaning of the Scores

- The ITERS-R and FCCERS-R are each divided into seven subscales and approximately 38 items.
- Each of the items is scored 1 – 7.
1= inadequate; 3= minimal; 5= good; 7= excellent.
- Generally, an item scoring under 5 is considered an area to be addressed through further technical assistance and/or training.

Intensive Technical Assistance Process

- A similar process for the administration of the ITERS-R/FCCERS-R was followed in each program.
- The Specialist met with the head of the program to give an overview of the ERS, explained the availability of program improvement grants ranging from \$250 to \$500 to be utilized in the implementation of the plan of action and arrange the anticipated schedule of assessments, meetings, and technical assistance visits.
- The Specialist administered the ERS, either in part or whole, to assess one or more classrooms (or the entire program in the case of a family/ group family child care provider).
- The Specialist reviewed the ERS results with the Director and Head Teacher or the Provider, and *together* developed a Plan of Action for addressing some or all of the low-scoring ERS items/areas.

Process Continued

- Technical assistance visits were a key part of the Plan of Action. During these visits, the Specialist worked alongside staff as a partner, modeling best practices. At the end of each session, she spoke with the staff about observed improvements and areas needing further attention. Sometimes she scheduled training on a particular topic.
- After some time spent in the classroom the Specialist returned for the second or “post” administration of the ERS tool. This was typically 3-5 months after the first visit.
- After the Specialist scored the post ERS, she returned for a final meeting to review gains and celebrate successes! This was also an opportunity for the program staff & Specialist to discuss a plan for ongoing quality improvement.

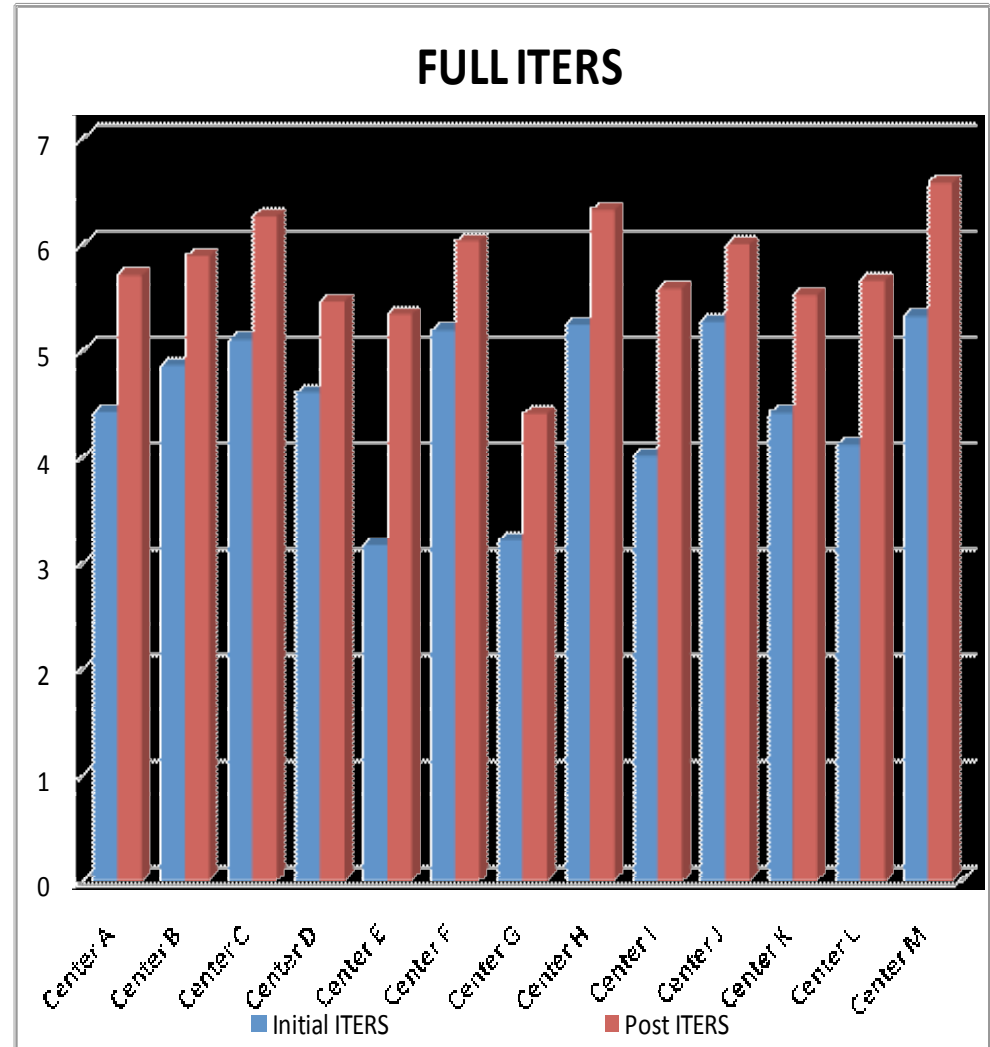
Participating Programs/Providers

- The centers and home-based programs were located in: Yonkers, Port Chester, White Plains, Mamaroneck, Tarrytown, Rye, Yorktown, Cortlandt Manor, Peekskill, and Bedford Hills.
- Three of these programs were initially referred for support/quality improvement by the Spring Valley Regional OCFS Office.
- All of these programs had been in operation for at least 2 years; most were well-established, long-running programs.
- For the majority of programs, this was their first experience with the Environment Rating Scales.

Pre/Post Scores

Full ITERS

	PRE ITERS	POST ITERS	CHANGE
Ctr A	4.42	5.71	1.29
Ctr B	4.86	5.89	1.03
Ctr C	5.1	6.26	1.16
Ctr D	4.6	5.46	.86
Ctr E	3.16	5.34	2.18
Ctr F	5.19	6.03	.84
Ctr G	3.21	4.4	1.19
Ctr H	5.24	6.32	1.08
Ctr I	4	5.58	1.58
Ctr J	5.27	6	.73
Ctr K	4.41	5.52	1.11
Ctr L	4.11	5.66	1.55
Ctr M	5.32	6.58	1.26

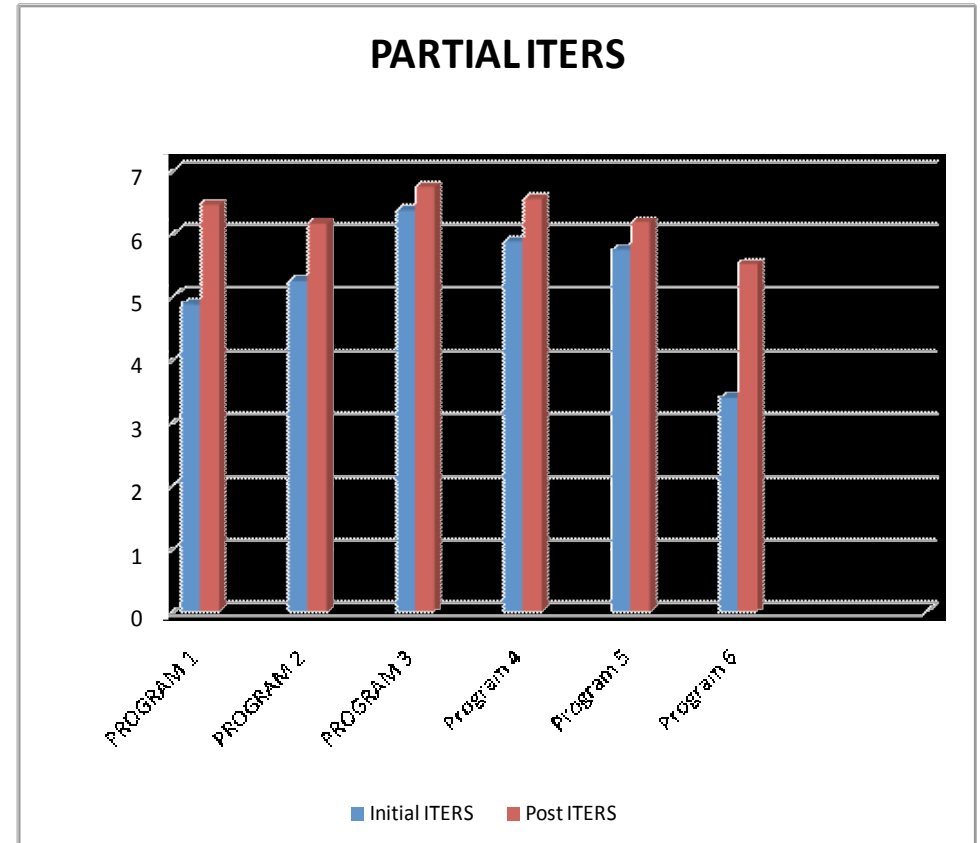


Full ITERS – Findings

- 5 out of 13 classrooms obtained scores of 5 or more on the pre-ITERS, none scored 6 or higher.
- On the Post-ITERS, 12 classrooms earned scores of 5 or better; including 5 earning at least a 6, considered a very good score
- 10 classrooms raised ERS scores by a full point or more, considered a statistically significant change

Pre/Post Scores Partial ITERS

	PRE ITERS	POST ITERS	Change
Program 1	4.88	6.47	1.59
Program 2	5.26	6.16	.9
Program 3	6.38	6.75	.37
Program 4	5.88	6.56	.68
Program 5	5.75	6.19	.44
Program 6	3.4	5.53	2.13



Partial ITERS - Findings

- 4 out of 6 classrooms obtained scores of 5 or more on the pre-ITERS, none scored 6 or higher.
- On the Post-ITERS, 6 out of 6 classrooms earned scores of 5 or better; including 5 earning at least a 6, considered a very good score
- 2 of these 6 classrooms raised ERS scores by a full point or more.

Progress by Subscale-ITERS

ITERS Subscale	Pre TA Mean	Post TA Mean	Change	% Change
Space and Furnishings	4.58	5.68	1.1	24%
Personal Care Routines	3.33	4.80	1.47	45%
Listening and Talking	5.23	6.21	.98	19%
Activities	4.26	5.72	1.46	34%
Interaction	5.97	6.5	.53	9%
Program Structure	5.45	5.99	.54	10%
Parents and Staff	5.29	5.43	.14	3%

ITERS Subscales - Findings

Greatest improvements in both full and partial ITERS occurred in the following areas:

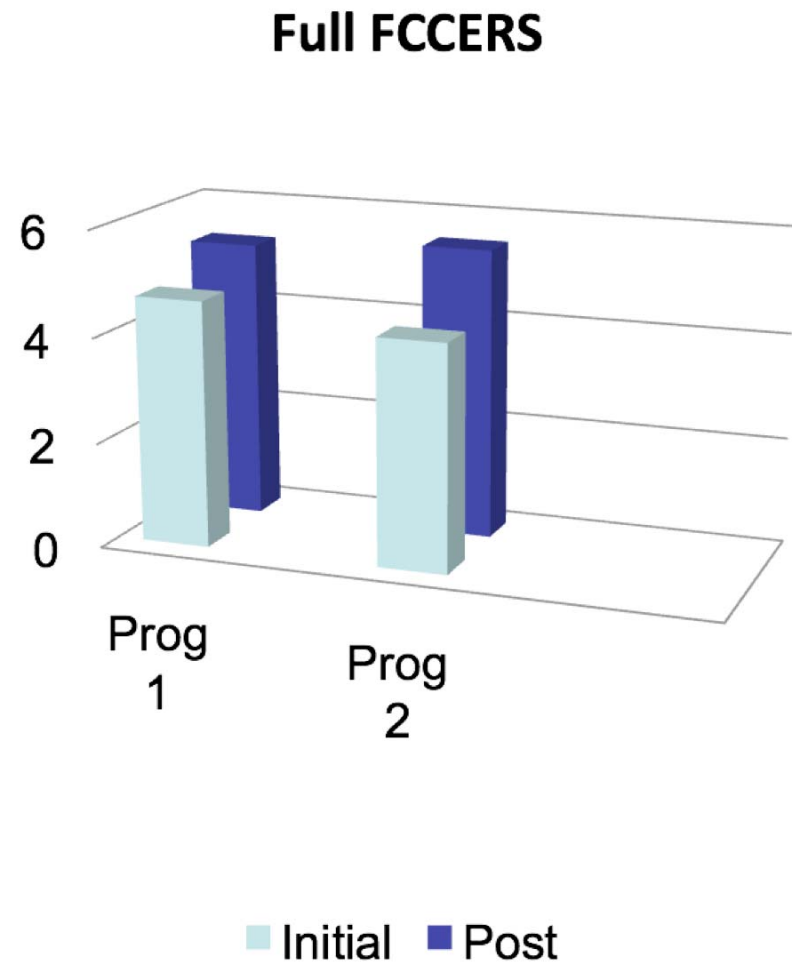
- Personal Care Routines
- Activities

Least improvements in both full and partial ITERS occurred in the following areas:

- Parents & Staff
- Program Structure

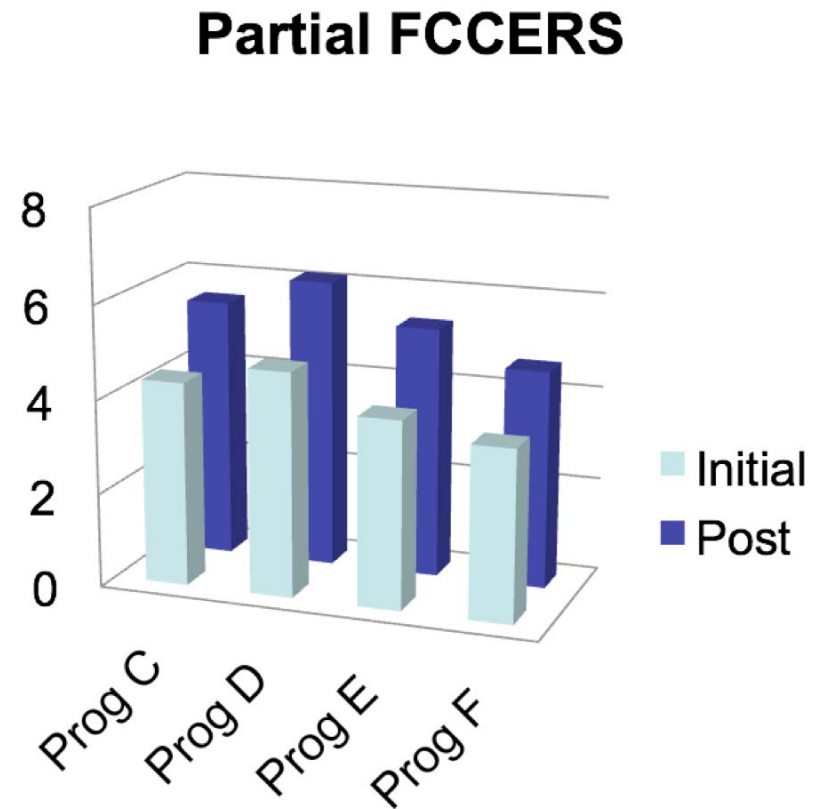
Pre/Post Scores-Full FCCERS

	Pre FCCERS	Post FCCERS	Change
Program 1	4.68	5.28	.6
Program 2	4.29	5.5	1.21



Pre/Post Scores-Partial FCCERS

	Pre FCCERS	Post FCCERS	Change
Program C	4.35	5.53	1.18
Program D	4.78	6.14	1.36
Program E	4	5.33	1.33
Program F	3.65	4.63	.98



Combined Full and Partial FCCERS

Findings

- 5 out of 6 programs obtained scores of 4 or more on the pre-ITERS, none scored 5 or higher.
- On the Post-FCCERS, 5 programs earned scores of 5 or better; including 1 earning at least a 6, considered a very good score.
- 4 programs raised FCCERS scores by a full point or more, considered a statistically significant change.

Progress by Subscale-FCCERS

FCCERS Subscale	Pre TA Mean	Post TA Mean	Change	% Change
Space and Furnishings	4.25	5.17	.92	22%
Personal care Routines*	2.75	3.40	.65	24%
Listening and Talking	4.67	6.00	1.33	28%
Activities	4.01	5.60	1.59	40%
Interaction	5.13	6.88	1.75	34%
Program Structure	4.64	5.74	1.1	24%
Parents and Provider	none			

FCCERS Subscales - Findings

Greatest improvements in both full and partial

FCCERS occurred in the following areas:

- Listening and Talking
- Activities
- Interactions

Least improvements in both full and partial

FCCERS occurred in the following areas:

- Personal Care Routines
- Space and Furnishings

What Does It All Mean?

- The greatest rate of improvement occurred in the programs with the lowest initial scores. These programs increased 37-69%.
- The highest scoring programs showed the lowest rate of improvements (6-15%)

Range of Scores	Mean Scores
Pre: 2.75-5.97	Pre: 4.58
Post: 3.4-6.88	Post: 5.62
Increase:3-45 %	Increase: 24.3%

Discussion

- Each participating program improved quality, since those areas that were lower-scoring were also areas that required improvement; and programs received help from Specialists to specifically address those areas.
- The key factors associated with making improvements were active participation from directors, teachers, and providers, and a belief in the need for quality improvement.
- Specialists were engaged with both centers and home-based programs for an average of 4-6 months.
- Specialists found that the subscale of “Activities” was the easiest area to address, particularly when the program received funds to purchase new materials. The following areas were more challenging to address: “Staff-Child/Provider-Child” Interactions because they required changing practices.

Discussion

- No regulatory violations were observed or reported during the project period.
- Some staff were apprehensive, which is why Specialists strived to build relationships with staff and providers. At times, the director made sure that each teacher in the room was included in the process, for example- by bringing them into the Plan of Action meetings. Other times, the director took on the most active role herself, and made decisions about improvements and purchases herself.
- The greater increase of scores in programs receiving grants can be attributed to the partial ITERS-R and FCCERS-R observations including the Activities section. This section involves having specific and varied numbers of materials. The grant allowed programs to purchase these items.

Discussion

- In some cases there was familiarity with the ERS on the part of the director and teachers; in other cases just the director had been trained on the tool. In some programs, neither staff nor director (or provider) had any familiarity with the tools.
- Staff received positive reinforcement & coaching to make changes and reported feeling energized and very satisfied with their roles in increasing the quality of their own classrooms. Some programs continued to strive for higher quality even after the ITERS/FCCERS process was concluded by addressing those remaining items which still scored under a 7. Programs with an education coordinator were more likely to continue to pursue quality improvement.

Conclusions

- ERS-based technical assistance delivers measurable improvements in program quality across different types of classrooms and family providers.
- Participation in this type of project raises self awareness in program staff related to the status of their classroom's level of quality.
- Programs that participated will be well prepared for QUALITYstarsNY.

Feedback from Participants

- *“Many times you can become entrenched in the day to day goings on and some things go unnoticed unintentionally. Going through the ITERS process is a truly helpful, painless, beneficial way to assess what you are doing, or not doing, in some cases, through another pair of eyes. Miriam Kerness was behind that pair of eyes and was a great help to us. She was able to point out our shortcomings in the most unobtrusive fashion imaginable and set us on a course of self improvement.”*
- *“ The ITERS helped us create a cozy corner which has become the focal point in the Toddler Room. The children and teachers now spend a huge part of the day reading in the cozy corner.”*
- *“As a team, the Infant Toddler Specialists supported us and provided our center with ideas and tools to raise the bar of excellence in our center! Their guidance was a great stepping stone to fine tuning our program.”*

**Thank you to our funders:
The Westchester County Office for Women and
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