



BENCHMARKS FOR QUALITY IMPROVEMENT

Measuring Progress in State and Territory Program Quality Improvement Efforts

President Obama charged Federal departments to focus on a limited number of high-priority performance goals. In 2010, the U.S. Department of Health and Human Services (HHS) adopted the following high priority goal:

...strengthen the quality of early childhood programs by advancing recompetition, implementing improved performance standards, and improving training and technical assistance systems in Head Start; promoting community efforts to integrate early childhood services; and by expanding the number of states with Quality Rating[s] Improvement Systems that meet *high quality benchmarks* for child care and other early childhood programs developed by Health and Human Services in coordination with the Department of Education.¹

The Office of Child Care (OCC) recognizes that States are using quality rating and improvement systems (QRIS) as a framework for organizing, guiding, and gauging the progress of early care and education (ECE) quality initiatives at the State level. In many cases, QRIS is the foundation of a cross-sector ECE system.² States' leadership in creating and implementing QRIS has produced a more systemic state-level approach to quality efforts and accountability. OCC strongly supports systemic quality approaches, recognizing that every State is at a different stage of the process.

The goal of the Benchmarks for Quality Improvement Project (BQI) is to assist States and Territories (States) in assessing and measuring progress in program quality improvement systems and to assess their current status in improving their early education and school age care quality. OCC established benchmarks that are easy to understand, measurable, and that will help States better plan for use of the Child Care and Development Fund (CCDF) to improve the quality of their early education and school age care. The benchmarks have been intentionally constructed to mirror the Child Care and Development Fund Preprint in which States set goals for quality improvement within the QRIS framework. The benchmarks consist of five elements, each of which includes a progression of indicators that detail the expectations for progress toward or achievement of program quality.

The BQI establishes a common language for discussing quality improvement goals and a consistent structure for measuring progress. The BQI can be used by States as a strategic planning and tracking tool. It provides an opportunity for States to measure progress in a consistent manner, track investments, and assess their readiness to work on future goals. There is a close correlation between the elements and indicators in the BQI, the quality goals that States were asked to set in their CCDF plans, and the questions they will be responding to in the Quality Performance Report. OCC will use information from the

¹ Office of Management and Budget. (2010). *The President's FY 2011 budget: Analytical perspectives, performance and management*. Retrieved July 14, 2010, from <http://www.whitehouse.gov/sites/default/files/omb/budget/fy2011/assets/management.pdf>

² The term "early and school-age care and education (ECE) system" encompasses the centers, family child care homes, and schools in which early care and learning happen for children birth through school age.

benchmarking, as well as information from the CCDF Plans, to guide technical assistance and research efforts.

Whether or not a QRIS is in place, all States have been investing in various quality activities and initiatives that align with this framework and provide the foundation for program quality improvement systems. A review of quality initiatives reveals that all States have been involved, to varying degrees, in all areas of this framework. For example, States are:

- Updating and strengthening mandatory licensing standards;
- Implementing and aligning early learning guidelines with other program standards;
- Building and expanding coordinated professional development systems;
- Creating program and practitioner supports;
- Establishing financial supports tied to measurable quality improvement; and
- Providing families and practitioners with access to information on program quality.

Vision

State and Territory program quality improvement systems apply to all sectors and address the needs of all children, families of all cultural-socio-economic backgrounds, and all practitioners regardless of role or employment setting. At the same time, they allow us to track progress on serving more low-income children in higher quality settings. Program quality improvement systems:

- Address the social, emotional, cognitive, and physical development needs of all children, including infants and toddlers, preschoolers, school-age children in out-of-school-time programs, English language learners, children with disabilities, and other special populations.
- Build on or integrate existing standards and decrease duplication of effort to establish program quality standards that support a continuous process to improve classroom environments, instructional practices, and adult-child interaction.
- Provide targeted training, technical assistance, and financial supports to help programs and practitioners attain and sustain higher levels of quality.
- Include effective and efficient methods, including reliable and valid measures, for evaluating programs' progress toward and attainment of program quality standards.
- Promote public awareness and understanding of the rating and improvement system.
- Include objective review and evaluation processes of the quality standards and levels to validate their appropriateness and document outcomes.

Guiding Principles

Meaningful, realistic, and practical benchmarks are established to guide decision-making during planning, implementation, and evaluation processes. The following principles apply to the Office of Child Care benchmarks for quality improvement:

- The benchmarks are based on meaningful common elements of quality improvement initiatives that States are currently implementing.
- The benchmarks align with the CCDF quality goal areas and the Quality Performance Report's request for information on progress on overall goals.
- The benchmarks recognize variations in State context and stage of development of quality improvement initiatives, providing a range of opportunities to achieve or address the benchmark.
- The benchmarks allow flexibility in meeting indicators and reporting progress over time.

- The benchmarks promote collaboration within and across sectors.
- The benchmarks are aligned with the most current research findings and best practices.

Areas of Expectation for States and Territories

Using the QRIS framework, the Office of Child Care is setting benchmarks for State and Territory program quality improvement systems in the following five areas:

1. Program Standards,
2. Supports For Programs and Practitioners,
3. Financial Incentives,
4. Quality Assurance and Monitoring, and
5. Consumer Education.

Responsive, high-quality practitioners are the most important factor in achieving positive outcomes in children's development and learning. OCC recognizes that professional development systems and workforce initiatives are at the heart of quality improvement efforts. This document contains key indicators that are directly linked to program standards, but it does not include all indicators of effective professional development and workforce quality improvement systems. Through additional consultation, OCC will consider whether additional workforce-related indicators need to be developed and aligned with the program quality benchmarks.

Scope of Indicators

Under each element, the indicators measure progress in the structural aspects of quality improvement systems (e.g., alignment of standards and supports) and the extent to which quality improvement systems apply to all sectors, children, families, and practitioners.

- *All sectors:* Licensed or regulated child care, Head Start, state-funded preschool, programs serving children under IDEA, and out-of-school-time programs for school-age children.
- *All settings:* Licensed or regulated family child care homes and center-based programs, including for profit and nonprofit, school-based, faith-based, community-based, proprietary, full-time, full-year, part-time, and part-year.
- *All children:* Infants and toddlers, preschool, and school-age children; children with special developmental, language, or social/emotional needs.
- *All families:* immigrant families, migrant families, foster families, low-income families, working families, families participating in school and training, and the variety of diverse family structures.
- *All practitioners:* teachers, directors, support staff, family child care providers, and others that work with or on behalf of children and families.

The progression of indicators moves from the State currently taking no action to the State being in some stage of development regarding the indicator. "Developing" may involve a review or compilation of current standards, opportunities, and activities or it may involve first steps toward implementation. "Implementing" means that the State has a standard, required activity, or offers supports but it does not apply to or is not available to multiple sectors or is in some other way in a limited state of implementation. "Fully implementing" means that the State program quality system has standards, required activities, or supports that are research-based, demonstrate best practices, and are available to multiple sectors.

Definitions of Standards

Program standards establish commonly accepted expectations for quality which identify different levels of and pathways to program improvement. Program standards cover a number of areas and vary based on the purpose, target population, and program requirements. Within these benchmarks, "Program Standards" refers to State QRIS and other State quality improvement system standards, licensing standards, State prekindergarten program standards, Head Start Performance Standards, and other program standards. The use of the term "program standards" recognizes that State's use a variety of approaches, as well as builds on current structures, to improve and maintain program quality for all children.

Professional standards define expectations for what adults working with children or on behalf of children need to know and be able to do to support children's learning and development. Core knowledge and competencies, career lattice levels, practitioner registry levels, credentials, and degrees all define professional standards for practitioners in their various roles.

Early Learning Guidelines, or early learning standards, describe what children need to know and be able to do and their disposition toward learning. Within the benchmark documents, "early learning guidelines" is a term used to include infant and toddler guidelines, preschool guidelines, and school-age guidelines for children and youth in out-of-school time programs. Infant-toddler guidelines should align with early learning and school-age guidelines, which also align with K-12 or P-21 standards.

Core Elements

Element 1: Program Standards

The State's quality framework ensures the health and safety of all children in out of home care through links to a strong regulatory system and articulates a vision for moving all programs to a level of quality that will support healthy development and school success for all children. The State's common quality framework, or QRIS, incorporates and aligns early learning, practitioner, and program standards that apply across sectors and age ranges.

An important note about program standards indicators: For a quality improvement system to provide a meaningful difference in the development and school readiness of children, the State system needs to provide universal standards for health, safety, development, and family support that assures all children are protected from physical and emotional harm and are prepared for success in school and in life. Yet, State standards vary widely in how well they establish a mandatory floor for quality, whether significant portions of providers are exempted, and how high their aspirations are for programs at the highest level of the QRIS. Due to the wide variety of State standards, these benchmarks do not include comprehensive indicators about content of standards. OCC recommends that States use *Caring for Our Children* as a marker for their regulatory systems and that they do a comparative analysis of their standards with other research-based, high quality program standards to validate all levels of the QRIS. The current program standards indicators encourage these types of approaches.

Standards Indicator #1 – Graduated program quality standards create a pathway to excellence.

The State has established graduated program quality standards that are built on a foundation of licensing. The standards serve as a tool to unite early childhood programs under a common vision of quality that applies to all settings and sectors. (For example, child care centers and family child care programs participate, as well as Head Start programs and State-funded preschool programs, and programs serving young children under IDEA.)

No Action: The State has not developed graduated program quality standards.

Developing: The State has developed or is developing graduated program standards for at least one setting and one sector.

Implementing: The State has developed and is implementing graduated program standards for more than one setting and more than one sector (e.g., family child care, child care centers, and Head Start).

Fully Implementing: The State has developed and is implementing graduated program standards, and all settings and sectors are eligible to participate.

Standards Indicator # 2: Graduated program quality standards integrate expectations for children's school readiness and success, teacher knowledge and skills, and program quality. The State has established graduated program quality standards and criteria, built on current standards, that reflect a common core across sectors, incorporate teacher's knowledge and skills (as expressed in professional standards), and children's school readiness and success expectations (as expressed in learning and development guidelines). The standards foster high-quality, accessible, inclusive, and culturally and linguistically competent early care and learning services for infants, toddlers, preschoolers, and their families.

No Action: The State has not developed graduated program quality standards.

Developing: The State has reviewed current State program and professional standards, and learning and development guidelines to identify areas of needed improvement.

Implementing: The State has established graduated program quality standards based on the review of current standards.

Fully Implementing: The State has integrated program, professional, and child standards.

Standards Indicator #3: The graduated program quality standards are aligned with other program standards. The State's program quality standards contain some content and criteria that is the same or equivalent to other State and national program standards, such as State preschool program, Head Start performance, or national preschool and school-age accreditation standards, resulting in a common core of program standards across sectors and creating a pathway to excellence.

No Action: The State has not developed graduated program quality standards.

Developing: The State has graduated program standards where being licensed is included in the first level of the graduated standards or is a prerequisite for participation.

Implementing: The State graduated program standards are built on a foundation of licensing and some of the content is the same as the content from at least one other set of standards.

Fully Implementing: The State graduated program standards are built on a foundation of licensing and some of the content is the same as the content from more than one other set of standards. This in essence creates a "common core" of standards that applies to multiple sectors

and makes it possible for programs to meet the quality standards if they are already meeting another set, such as accreditation or Head Start.

Standards Indicator #4: The State's program quality standards support the professional preparation and ongoing development of all practitioners. The State's program quality standards require specific knowledge, skills, and dispositions for those working with children via approved training, credentials, or degrees.

No Action: The State's program quality standards do not address staff qualifications.

Developing: The State program quality standards require preservice qualifications for teachers/FCC that include early childhood content.

Implementing: The State's program quality standards require preservice qualifications for teachers/FCC that include a State or national credential.

Fully Implementing: The State's program quality standards require specific preservice qualifications and ongoing professional development for teachers/FCC that is comparable to Head Start standards.

Standards Indicator #5: The State's program quality standards support children's learning through the use of curricula/learning activities that are based on the State learning and development guidelines. Planned learning activities that are based on expectations for what children need to know and be able to do are associated with improved child outcomes.

No Action: The State's program quality standards do not address learning activities.

Developing: The State's program quality standards require a written plan of daily learning activities.

Implementing: The State program quality standards require planned, developmentally appropriate use of curricula/learning activities based on learning and development guidelines.

Fully Implementing: The State's program quality standards require planned curricula/learning activities based on the learning and development guidelines, and implementation is validated through observation or data collection.

Standards Indicator #6: Program quality standards support improved teaching and learning and targeted program improvement through child assessment. The State's program quality standards require child assessments to help parents understand their child's development, inform classroom practice, and guide individualized instruction.

No Action: The State's program quality standards do not require assessments.

Developing: State program quality standards require observation or other assessment methods to document children's development and to inform parents.

Implementing: State program quality standards require observation or other assessment of children's development that is aligned with learning and development guidelines.

Fully Implementing: State program quality standards require ongoing assessment of children's progress to individualize instruction or target program improvement.

Standards Indicator #7: Program quality standards protect child health and promote positive developmental outcomes for all children. The State program quality standards require screenings, developmental assessments, and referrals to intervention services.

No Action: Program quality standards do not require health screenings.

Developing: The program quality standards require programs to collect and track information about each child's health status through physical exams, immunization records, and routine health checks.

Implementing: The program quality standards require an initial developmental screening and referrals as appropriate.

Fully Implementing: The State program quality standards require developmental screenings that meet or exceed the Head Start Performance Standards criteria regarding timeframes, working with parents and developmental specialists, and ongoing observations and referrals.

Standards Indicator #8: The program quality standards promote family engagement. The State program quality standards require programs to support families' involvement with their children's learning, and to strengthen partnerships with families.

No Action: The program quality standards do not include family engagement activities.

Developing: The program quality standards require programs to have regular communication with parents that supports children's learning and development.

Implementing: The program quality standards require programs to provide regular communication and opportunities for parents to participate in children's activities, parenting education activities, and activities that support social networking or connections.

Fully Implementing: The State's program quality standards require a family strengthening strategy that includes coordination with health, nutrition, mental health, and other community human resources and services that support families.

Standards Indicator #9: Program quality standards reflect the unique developmental needs of children in each age group (infant-toddler, preschool, and school age). The standards set expectations for children's activities, programming, and practitioner knowledge and skills that address the special needs of each age-group of children. The standards are research-based and foster high-quality, accessible, inclusive, and culturally and linguistically competent services for all children.

No Action: The State has not developed program quality standards that include specific criteria related to the care of at least one age group of children.

Developing: The State program quality standards include specific criteria related to the care of at least one age group of children.

Implementing: The State program quality standards include specific criteria related to the care of all age groups of children.

Fully implementing: The State program quality standards include specific criteria related to the care of all age groups of children, and include additional components, such as requirements for specialized credentials or use of appropriate program assessments, for settings serving each age group.

Standards Indicator #10: Program quality standards acknowledge the unique needs of special populations of children. The State program quality standards require individualization for special populations (e.g., children with disabilities, English language learners, dual language learners, etc) and coordination with specialized services as needed.

No Action: The State has not developed program quality standards that include specific criteria (such as staff qualifications, staff-child interactions, etc.) or that require individualization for special populations of children (e.g., children with disabilities, English language learners).

Developing: The State program quality standards require individualization for special populations of children.

Implementing: The State program quality standards require individualization for special populations of children and coordination with appropriate specialists, such as through the Child Find system, when needed.

Fully implementing: The State program quality standards require individualization for special populations of children, coordination with specialized services, and written policies on implementation of IEPs or IFSPs.

Element 2: Supports for Programs and Practitioners

The program quality improvement effort is supported by a coordinated system of program and practitioner supports that is based on nationally recognized quality standards and applies to all settings and sectors of the formal ECE system. An effective program quality improvement system includes locally accessible supports for programs and practitioners, such as training, mentoring, and consultation, to help programs achieve and sustain higher levels of quality.

Support Indicator #1: Programs receive technical assistance to move up the pathway to quality. The State provides technical assistance (TA)³ that is aligned with program quality standards, to programs across sectors of the formal ECE system.

No Action: The State has not developed TA for programs.

Developing: The State offers TA for programs that is available across settings and sectors.

Implementing: The State's TA is aligned with the program quality standards and designed to help programs meet standards, move up to higher levels of quality, and maintain quality improvements.

Fully Implementing: The State offers customized TA based on each program's needs to meet quality standards (e.g., individualized program improvement plans).

³ In this indicator, TA refers to supports for programs.

Support Indicator #2: The State offers professional development (PD)⁴ to promote movement along a career pathway and improve program quality. The State's PD supports are aligned with professional standards and available to professionals working in all sectors of the formal early and school-age care and education system.

No Action: The State does not offer PD supports.

Developing: The State offers PD that is aligned with professional standards and supports movement along a career pathway.

Implementing: The State offers multiple forms of PD aligned with professional standards that support movement along a career pathway and is available to practitioners across sectors.

Fully Implementing: The State offers customized TA to improve practitioner knowledge and skills (e.g., an individual professional development plan) that is aligned with professional standards, supports movement along a career pathway, and leads to attaining and sustaining program quality.

Support Indicator #3: PD and TA⁵ supports are aligned with expectations for children's school readiness and success. The State offers PD and TA on the range of domains that are covered in the State learning and development guidelines to help programs meet quality standards. Targeted PD and TA are available for practitioners and programs caring for children in all age ranges and special populations (e.g., dual language learners, children with disabilities).

No Action: The State has not developed training on the State learning and development guidelines to help programs meet quality standards.

Developing: The State offers locally accessible training based on the State learning and development guidelines.

Implementing: The State's PD offerings cover domains of the State learning and development guidelines and include content on some special populations and age ranges.

Fully Implementing: The State's PD and TA system provides assistance in all domains that are covered by the State learning and development guidelines and provides targeted, customized support regarding all age ranges and special populations.

Element 3: Financial Incentives and Supports

Initiatives to improve program quality are supported by a set of financial supports for programs and practitioners. Financial incentives can be a powerful motivator for programs and practitioners to achieve and sustain higher levels of quality. States already invest in a variety of financial incentives that can be aligned through a quality improvement framework to promote more effective investment and sustainable quality results.

⁴ In this indicator, PD refers to all forms of practitioner supports, including all forms of TA targeted to practitioners.

⁵ In this indicator, PD refers to all forms of practitioner supports and TA refers to all forms of program supports.

Financial Incentives Indicator #1: Financial incentives reward and sustain program quality improvements. The State provides financial supports to programs to help them meet, achieve, and maintain higher quality program standards.

No Action: The State does not provide financial supports to programs based on meeting quality standards.

Developing: Limited, one-time bonus awards are available to help programs meet quality standards.

Implementing: Financial supports, including tiered reimbursement, are available on a periodic, predictable basis, statewide, and are designed to help programs meet and maintain quality standards.

Fully Implementing: The State uses multiple funding streams to provide ongoing financial support, statewide, that rewards and sustains program quality improvement based on standards.

Financial Incentives Indicator #2: Financial incentives support professional commitment and career advancement. The State provides financial supports to practitioners based on professional and program standards.

No Action: The State does not provide financial supports for practitioners.

Developing: Limited, one-time financial supports are available to practitioners who advance in training and education.

Implementing: Financial supports for practitioners are available on a periodic, predictable basis and are designed to help attract and retain qualified professionals.

Fully Implementing: The State uses multiple funding streams to provide ongoing financial support to practitioners that move up the career pathway and stay in the early childhood or school-age profession.

Financial Incentives Indicator #3: Financial incentives effectively improve quality. The State has methods to evaluate the effectiveness of program and practitioner financial supports in meeting quality improvement goals.

No Action: The State has not developed a method to track the financial supports to programs and practitioners to meet program quality standards.

Developing: The State has a method to track financial supports to programs and/or practitioners to meet quality standards.

Implementing: The State has a method to track financial supports and determine if the amounts given to programs and practitioners are sufficient to meet quality improvement goals.

Fully Implementing: The State uses an analysis of financial supports to determine future needs for supports and adjust quality improvement goals.

Element 4: Quality Assurance and Monitoring

The State has assessment mechanisms in place to ensure that programs and practitioners meet quality standards. Accountability and monitoring processes track progress toward, attainment of, and maintenance of program quality standards. Monitoring and evaluation also provide a basis of accountability for programs, parents, and funders by creating benchmarks for measuring compliance with standards.

Quality Assurance Indicator #1: States uses a validated assessment to conduct program assessment. The State objectively assesses program quality, based on all content areas of the graduated program quality standards, using validated program assessment tools.

No Action: The State does not conduct an objective, external assessment of program quality using a validated program assessment tool.

Developing: The State offers technical assistance to programs and practitioners on how to use validated program assessment tools (QRIS criteria, ERS, CLASS, PAS, etc.) for program improvement.

Implementing: Some programs are assessed by an objective, external assessor using validated program assessment tools to measure quality.

Fully Implementing: The State employs a statewide quality assessment system that measures the level of quality based on all content areas of the standards, using validated assessment tools, available to all settings and sectors.

Quality Assurance Indicator #2: The State effectively monitors program quality across sectors. The State/Territory coordinates program quality assurance and monitoring processes across funding and regulatory agencies to avoid duplication of functions and activities.

No Action: The State has not developed a method to map the various types of assessments that are conducted to measure program quality.

Developing: The State has mapped the various program quality assessment/monitoring activities to avoid duplication.

Implementing: The State has a mechanism that allows compliance monitoring in one sector (e.g., Head Start/Early Head Start, prekindergarten, CACFP, accreditation) to serve as validation for compliance in another without further review.

Fully implementing: The State establishes a coordinated system of reciprocity across all sectors so that monitoring in any sector serves as validation for compliance in the others without further review.

Quality Assurance Indicator #3: Data is used to inform decisionmaking and promote access to high-quality care. The State uses data to track the participation of programs that have attained different levels of quality within the QRIS and the numbers of children they serve.

No Action: The State does not track the participation of programs at different levels of quality.

Developing: The State can track participation of programs by various demographics, and can track individual and aggregate movement of programs up and down quality levels.

Implementing: The State can track and report the number of children who are participating in programs at each level of quality.

Fully Implementing: The State can track children's participation by program quality level and can disaggregate the data for subgroups of children, including children from low-income families and children with disabilities, in order to monitor State progress in providing these children access to higher quality care and adjust strategies as needed.

Quality Assurance Indicator #4: Program and practitioner supports effectively improve quality. Quality assurance processes are in place to ensure that program and practitioner supports are effective in meeting expectations for teacher practice, school readiness and success, and program quality. These processes may include approval of content of PD or TA⁶, qualifications for trainers and TA providers, the use of a practitioner registry to document qualifications, and coordination of TA across sectors.

No Action: The State has not developed a process to ensure that PD and TA are effectively improving quality.

Developing: The State has approval processes for some PD and TA based on program and professional standards.

Implementing: The State has approval processes for all publicly funded PD and TA based on program and professional standards.

Fully Implementing: The State has a process to evaluate the effectiveness of public investments in PD and TA supports to ensure that it is high quality and linked to the expectations laid out for children's school readiness, teacher knowledge and skills, and program quality.

Quality Assurance Indicator # 5: The State ensures the ongoing validity and appropriateness of program quality standards. The State periodically reviews and validates the standards, indicators, and levels as measures of quality.

No Action: The State has no process for review of the standards.

Developing: The State conducted a pilot or limited implementation of the program quality standards to review and revise the standards.

Implementing: The States has conducted or has developed a plan for a one-time evaluation of the standards.

Fully Implementing: The State has a process for periodic review, validation, and revision of graduated program quality standards, criteria, and levels using an external researcher or evaluator.

Element 5: Consumer Education

Program quality improvement systems provide a framework for educating parents about the impact of early and school-age care and education environments on children's education, development, and well-being. These systems provide a simple rating or descriptive method for families to assess program strengths and make informed choices that meet the family's and child's need. The State has in place easy-to-understand tools aimed at encouraging consumers (families), policymakers, and public and private partners to use quality standards to guide decision-making and to promote awareness, understanding, and use of information on child care quality for families, programs, practitioners, and the general public.

⁶ PD and TA are used here to indicate PD supports for practitioners (including all types of TA) and TA to programs.

Consumer Education Indicator #1: The State provides easy-to-understand information about child care quality. The State has established a QRIS or another quality framework that uses symbols or other methods to designate quality levels.

No Action: The State has not designed a quality framework that uses symbols or other methods to designate quality levels.

Developing: The State has designed, but not yet implemented, a quality framework with easy-to-understand symbols or methods to designate quality levels.

Implementing: The State uses symbols or other methods to designate quality levels and has distributed information that explains the quality levels to families, practitioners, and programs.

Fully Implementing: The State provides program-specific information regarding quality levels (e.g., a Web-based program quality report). This information is displayed at each quality-designated program, on at least one public Web site, and is included in referral databases or other information systems used by families, practitioners, and human/community service agencies.

Consumer Education Indicator #2: The State raises public awareness about child care quality standards to parents, programs, and the general public. State is using multiple strategies (e.g., Web sites, listservs, social marketing, targeted print and online advertising, signage, billboards, public service announcements, newsletter articles, letters to the editor) to promote awareness, understanding, and use of information on child care quality for families, programs, practitioners, and the general public.

No Action: The State does not have any outreach and consumer education strategies in place.

Developing: The State is implementing outreach and consumer education strategies targeted to all families to ensure that they understand child care quality standards and are able to use this information in decisionmaking.

Implementing: The State complements its general consumer education strategies with targeted information to special populations, including, but not limited to, low-income families, non-English-speaking families, parents with low levels of literacy, or families of children with special needs.

Fully Implemented: The State assesses the effectiveness of the consumer education and outreach strategies in promoting understanding of child care quality standards and the use this information in decisionmaking.

National Center on Child Care Quality Improvement, A Service of the Office of Child Care
9300 Lee Highway, Fairfax VA, 22031 | Phone: 877-296-2250 | Email: OCCQualityCenter@icfi.com