

Research Notes

Alternative Pathways to Quality in Family Child Care Quality Rating and Improvement Systems

Numerous states include family child care in their quality rating and improvement systems (QRIS) and many of these utilize alternative pathways to provide evidence of quality at specific QRIS levels. However, research examining the variation in QRIS models for family child care and the validity of alternative pathways as aligned measures of quality is limited.

The variation across states is especially evident in the use of different quality measures. Some states conduct external assessments using scaled tools with threshold scores required to attain quality rating levels while other models utilize self-assessments to determine if programs meet required criteria. Some models require a combination of assessment scores as well as accreditation status. Still others use accreditation status as an alternative pathway or proxy for certain indicators to achieve a rating level.

Kelton, Talan, and Bloom recently published a study evaluating the validity of Illinois' alternative pathway model for family child care programs.¹ They examined the relationship between three accountability measures frequently used in QRIS to measure quality in family child care programs: accreditation from National Association for Family Child Care (NAFCC), the *Family Child Care Environment Rating Scale—Revised Edition* (FCCERS-R),² and the *Business Administration Scale for Family Child Care* (BAS).³ The study compared the average FCCERS-R and BAS scores of NAFCC-accredited family child care programs participating in Illinois' QRS and the likelihood of an accredited program meeting the FCCERS-R and BAS threshold scores set for the alternative pathway.⁴

SAMPLE AND METHODS

When the data for the study were collected in 2011, family child care programs in Illinois could follow one of two pathways to achieve a 3-star level in the state's 4-star level QRS. The first pathway involved achieving an average score of 4.25 on the FCCERS-R and an average score of 4.25 on the BAS while the second pathway required programs to demonstrate NAFCC accreditation status. Star levels 1 and 2 required FCCERS-R threshold scores of 3.00 and 3.50 respectively and star level 4 required FCCERS-R and BAS threshold scores of 5.00 as well as NAFCC accreditation status.

Thirty-one 3-star rated family child care programs in Illinois QRS comprised the sample. The data for the programs came from two data sets. One data set included 18 programs that had achieved a 3-star rating and had made application to advance to star level 4. The other data set included 13 accredited 3-star programs that volunteered to be a part of the study. These programs were contacted from a public list of 3-star family child care programs participating in the QRS.

Data collection included conducting FCCERS-R and BAS assessments in each of the participating family child care programs. All of the FCCERS-R and BAS were conducted by assessors who had been trained to reliability by authors and maintained inter-rater reliability of 85% or above throughout the study. Each of the programs had achieved NAFCC accreditation status prior to the study.

RESULTS

FCCERS-R and BAS scores varied greatly; however, the sample's average scores for both tools fell below the threshold required for 3-star non-accredited programs. As Table 1 demonstrates, the average FCCERS-R score for accredited programs was 3.29, falling .96 below the threshold score of 4.25 required of non-accredited programs. The average BAS score for the sample was 3.81, falling .44 below the 4.25 threshold.

TABLE 1.
RANGE OF SCORES, MEANS, AND STANDARD DEVIATIONS
FOR FCCERS-R AND BAS ASSESSMENTS (N = 31)

Assessment	Possible Range	Actual Range	M	SD
FCCERS-R	1.00 – 7.00	1.67 – 4.47	3.29	.61
BAS	1.00 – 7.00	2.30 – 5.89	3.81	1.03

The results indicated that if accredited family child care programs in this study had been required to achieve a 3-star rating through the assessment pathway (BAS and FCCERS-R scores of 4.25 or higher), only one program would have qualified. The data suggested that 13 programs would have qualified for a 2-star rating, 11 would have qualified for a 1-star rating, and 6 programs would not have qualified for any star rating.

Table 2 demonstrates the star levels that programs would have achieved if the alternative pathway had not automatically placed them at star level 3.

TABLE 2.
STAR LEVEL RATINGS BASED ON FCCERS-R AND BAS SCORES
(N = 31)

QRIS Star Level	No Star	1 Star	2 Star	3 Star	4 Star
Number of Programs	6	11	13	1	0

Note: Because Illinois only required a BAS threshold score at star levels 3 and 4, programs that did not achieve a BAS score of 4.25 or greater were categorized based on their FCCERS-R scores alone.

LIMITATIONS

Caution should be used when generalizing the results of this study. The study was conducted on a small sample of licensed family child care programs in Illinois that met specific criteria. Only programs that had attained a 3-star rating in the Illinois QRS through NAFCC accreditation were included, and as a requirement of their participation in the QRS, all had completed training on the FCCERS-R and the BAS.

IMPLICATIONS FOR POLICY, PRACTICE, AND RESEARCH

These findings suggest that the validity of alternative pathways and their respective threshold definitions should be re-examined. As states develop flexible QRIS models, careful attention is needed when using different instruments. While the process of applying for and achieving accreditation requires family child care providers to actively monitor and improve the quality of their programs, a moderate yet significant correlation between the FCCERS-R and BAS scores ($r = .35, p < .05$) and lack of alignment between program scores of 4.25 and NAFCC accreditation may suggest that the standards measured by accreditation are distinct from those measured by the BAS and FCCERS-R.

The incongruence found in this research between NAFCC accreditation status and threshold scores for scaled instruments (FCCERS-R and BAS) highlight the challenge in designing a system that uses tools created for different purposes. Consideration should be given to how measures

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such as FCCERS-R, BAS, and program accreditation status are applied to various levels of QRIS and empirical data should be used to determine score thresholds. Additional research may help to articulate the rationale behind the use of alternative pathways and to verify the assumption that participation in quality enhancement efforts with higher quality standards automatically equate with higher quality daily practices. However, without research examining these relationships, there is no empirical evidence to guide policymakers in the design and refinement of the categories that define states’ distinguishing levels of program quality.

REFERENCES

1. Kelton, R. E., Talan, T. N., & Bloom, P. J. (2013). Alternative pathways in family child care quality rating and improvement system. *Early Childhood Research & Practice*, 15(2), 1–10.
2. Harms, T., Cryer, D., & Clifford, R. (2007). *Family Child Care Environment Rating Scale (Rev. ed)*. New York: Teachers College Press.
3. Talan, T. N., & Bloom, P. J. (2009). *Business Administration Scale for Family Child Care*. New York: Teachers College Press.
4. The Illinois Quality Counts—Quality Rating System was launched in 2007. Effective July 2013, Quality Counts—QRS became ExceleRate Illinois QRIS. This change reflects an increased emphasis on program improvement (the I in QRIS) to enhance the learning and developmental outcomes for young children. The new cross-sector system includes early childhood programs in schools and centers. Programs in licensed family child care homes will be included in the new system in 2015.

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