

KENTUCKY STARS FOR KIDS NOW PROCESS EVALUATION

Evaluation Brief #2

Overview of Methods

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www.kentuckypartnership.org/starsevaluation

The Process Evaluation of Kentucky STARS for KIDS NOW was initiated by the Kentucky Department for Community Based Services, Division of Child Care to provide an examination and assessment of existing STARS components and to provide a basis for recommendations to improve STARS implementation statewide.

Kentucky is unique nationally in its investment in a process evaluation to address a set of comprehensive questions about the functioning of its QRIS after operating for over a decade.

The Evaluation questions and activities focused on five broad, interrelated components of STARS:

- The quality standards and measurement strategies
- The rating structure and process for assigning STARS levels
- The technical assistance provided to promote improvement
- The outreach methods to promote STARS to providers and to parents
- The collaboration, coordination, and administrative processes most supportive for STARS.

The Evaluation was conducted by Child Trends, a nonpartisan research organization located in Washington DC. The Evaluation was supported by funds from the American Recovery and Reinvestment Act provided by the Kentucky Cabinet for Health and Family Services, Department of Community Based Services, Division of Child Care.

A series of Evaluation Briefs were created to provide summaries of the key findings. These Briefs include:

- [Executive Summary of the Kentucky STARS for KIDS NOW Process Evaluation](#)
- [Kentucky STARS for KIDS NOW Process Evaluation: Overview of Methods](#)
- [Providers' Perceptions of the Kentucky STARS for KIDS NOW Rating Process](#)
- [Technical Assistance Provided to and Received by Kentucky STARS for KIDS NOW Programs](#)
- [Collaboration and Coordination in the Kentucky STARS for KIDS NOW Technical Assistance System](#)
- [Alternative Rating Structures for Kentucky STARS for KIDS NOW](#)
- [Evaluation of Kentucky's Child Care Resource and Referral System](#)
- [Findings from the Kentucky Early Care and Education and School-Age Care Household Survey](#)

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KENTUCKY STARS FOR KIDS NOW PROCESS EVALUATION: OVERVIEW OF METHODS

This Methods Brief provides an overview of STARS for KIDS NOW and brief information on the context for Evaluation. Details are provided about the specific research questions, methods and data sources used in the Evaluation.

KENTUCKY STARS FOR KIDS NOW OVERVIEW

STARS for KIDS Now is Kentucky's statewide voluntary Quality Rating and Improvement System (QRIS) for early care and education programs. All licensed Type I and Type II facilities and Certified family child care homes are eligible to be rated. The rating system is comprised of four levels and provides a set of quality standards against which programs are measured. In order to achieve a particular level, a program must meet all the requirements of that level and all the requirements of the lower levels. The quality standards for Type I facilities fall into four categories: Ratios, Curriculum, Training, and Personnel. The quality standards for Type II facilities and Certified homes also fall into four categories: Ratios, Curriculum, Training, and Business Practices.

Compliance with standards is verified through documentation of practices and observation of the program. The observation includes time for document review and administration of the appropriate Environment Rating Scale(s): Early Childhood Environment Rating Scale-Revised (ECERS-R)¹, Infant/Toddler Environment Rating Scale-Revised (ITERS-R)², the Family Child Care Environment Rating Scale-Revised (FCCERS-R)³, and the School-Aged Care Environment Rating Scale (SACERS).⁴

Programs that enroll in STARS are eligible to receive technical assistance and support through the Quality Enhancement Initiative. This includes the provision of a STARS Quality Coordinator (SQC) who will explain the STARS rating requirements and process, assist the program in conducting an assessment of its needs and areas of improvement, provide technical assistance to improve program quality, and shepherd the program through the STARS rating process. Once a program is rated, it is eligible for a STARS Achievement Award. Additional funds may also be available to some programs to support their ongoing achievement and service to low-income children.

¹ Harms, T., Clifford, R.M., & Cryer, D. (2005). *Early Childhood Environment Rating Scale (Rev. Ed.)*. New York: Teachers College Press.

² Harms, T., Cryer, D., & Clifford, R.M. (2006). *Infant/Toddler Environment Rating Scale (Rev. Ed.)*. New York: Teachers College Press.

³ Harms, T., Cryer, D., & Clifford, R.M. (2007). *Family Child Care Environment Rating Scale (Rev. Ed.)* New York: Teachers College Press.

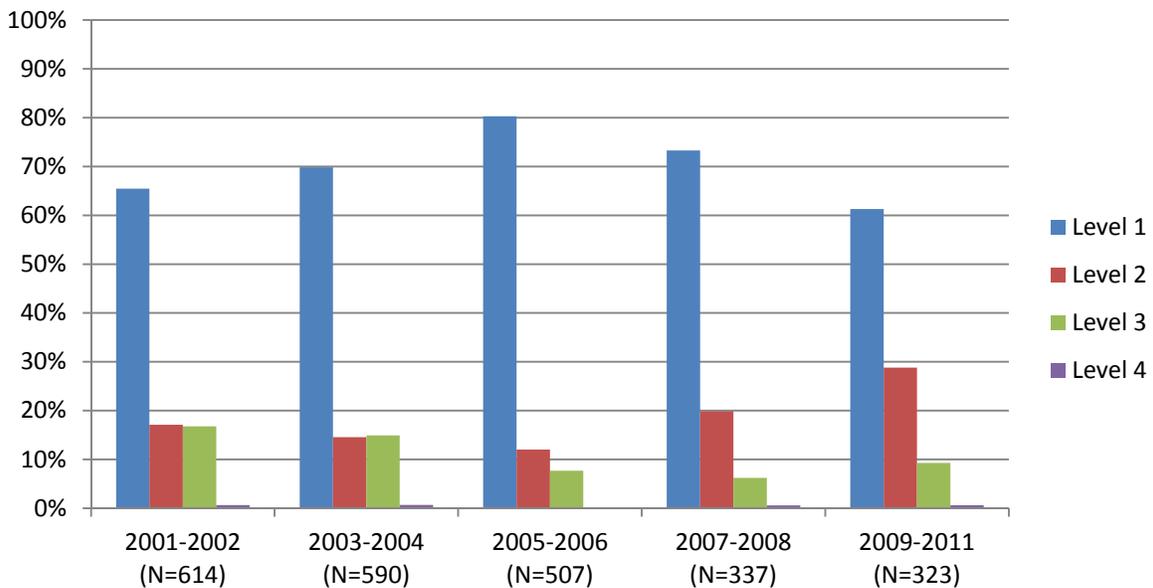
⁴ Harms, T., Jacobs, E.V., & Romano, D. (1995). *The School-Age Care Environment Rating Scale*. New York: Teachers College Press.

Since the beginning of STARS in 2001, 2,371 programs have been rated at least once by STARS and a total of 5,951 ratings have been issued. As of May 25, 2011 there were 865 programs currently rated by STARS. Below, we examine these programs and ratings in more detail.

STARS OVER TIME

Figure 1 shows the distribution of first-time ratings in each of five time periods. It shows that at all times in the history of STARS, the majority of child care programs have entered STARS with a Level 1 rating. Since 2009, however, it has become more common for programs to enter STARS at Level 2 or higher, with nearly 30% of programs entering STARS at Level 2 and another 10% entering at Level 3 or 4.

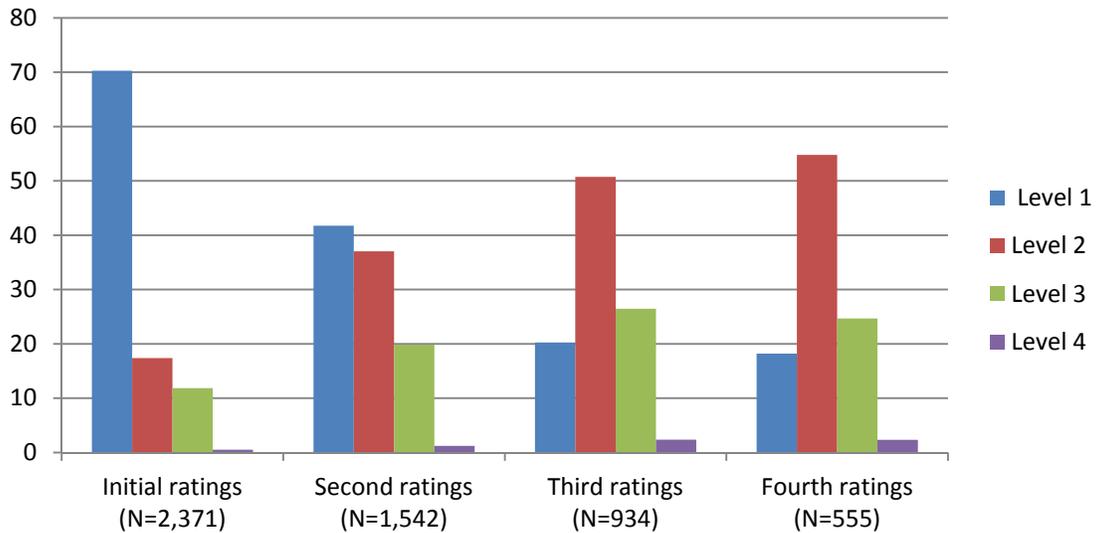
Figure 1. Distribution of First-Time STARS Rating Levels over Time



Source: DCC Administrative Ratings Data, as of May 13, 2011.

Of the 2,371 child care programs that have been rated at least once by STARS, 65% have been rated more than once. Figure 2 shows how the distribution of STARS levels changes as programs are rated a second, third, and fourth time.

Figure 2. Distribution of Levels as programs are re-rated

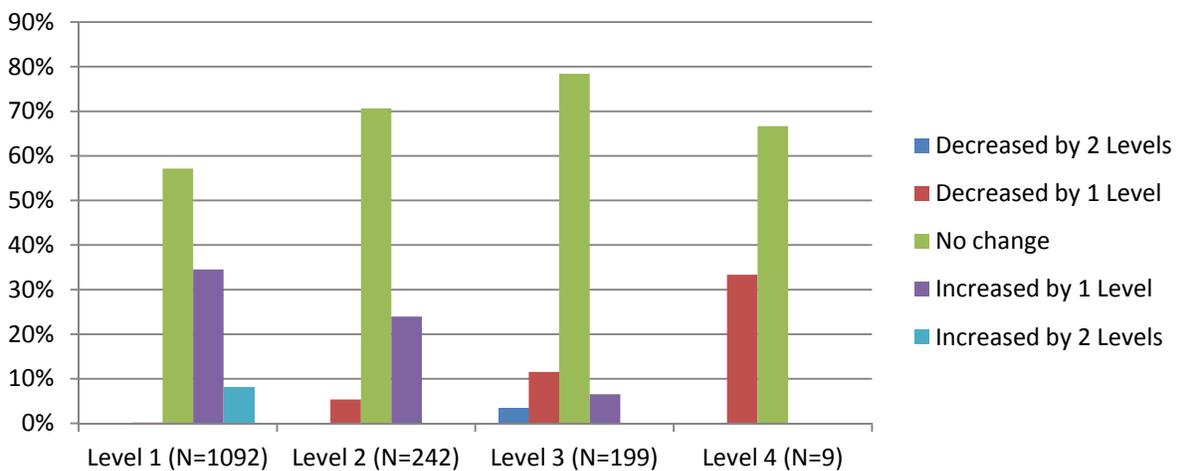


Source: DCC Administrative Ratings Data, as of May 13, 2011.

In Figure 2, it is noteworthy that on average, just over 70% of programs enter STARS at Level 1, but only 42% of programs receive a Level 1 rating in their second rating. The percentage of Level 1 programs decreases as programs are re-rated while the percentage of programs at Levels 2, 3 and 4 increases.

To better understand where these changes are occurring, Figure 3 shows which programs are improving from their first rating to their second rating and by how many levels.

Figure 3. Change in Level from First Rating to Second Rating, by First Rating Level



Source: DCC Administrative Ratings Data, as of May 13, 2011.

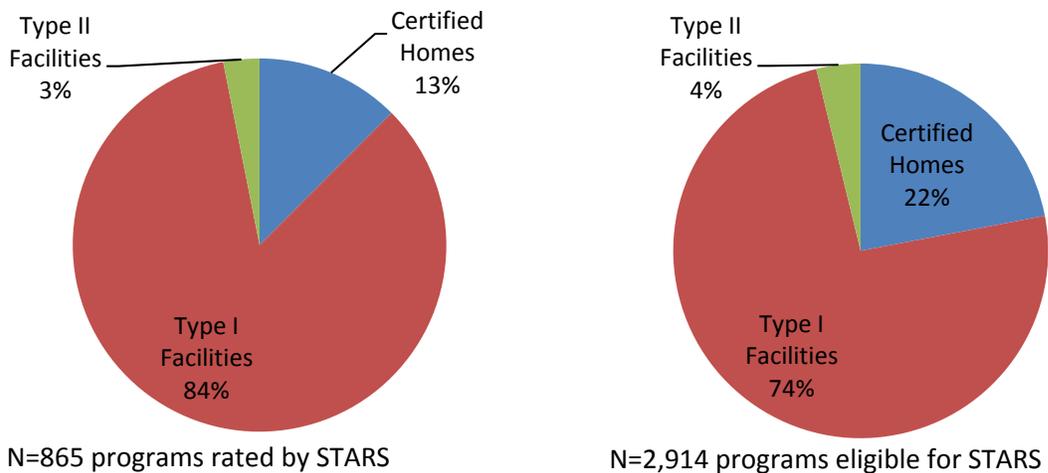
As Figure 3 shows, Level 1 programs are the most likely to improve from their first rating to their second, with 35% improving by one level to receive a Level 2 rating and 8% improving by two levels to receive a Level 3 rating. Nearly a quarter (24%) of programs that initially receive a Level 2 rating improve to a Level 3. Programs that begin at Level 3 are the least likely to experience a change in their Level from their first to their second rating, which is not surprising since very few programs reach Level 4. It can be seen that one third of programs that receive a Level 4 rating initially are unable to maintain that level and drop to a Level 3 in their second rating.

DIFFERENCES BY FACILITY TYPE

While Kentucky STARS is open to Type I facilities, Type II facilities, and Certified homes, different types of facilities have different experiences in STARS. This section examines the differences in participation rates by facility type and differences in STARS levels by facility type.

Figure 4 shows the distribution of facility type among the 2,914 child care programs in Kentucky that were eligible for STARS as of May 25, 2011 compared to the distribution of facility type among the 865 STARS-rated programs.

Figure 4. Licensed and Certified Child Care Facilities Eligible for STARS and Participating in STARS

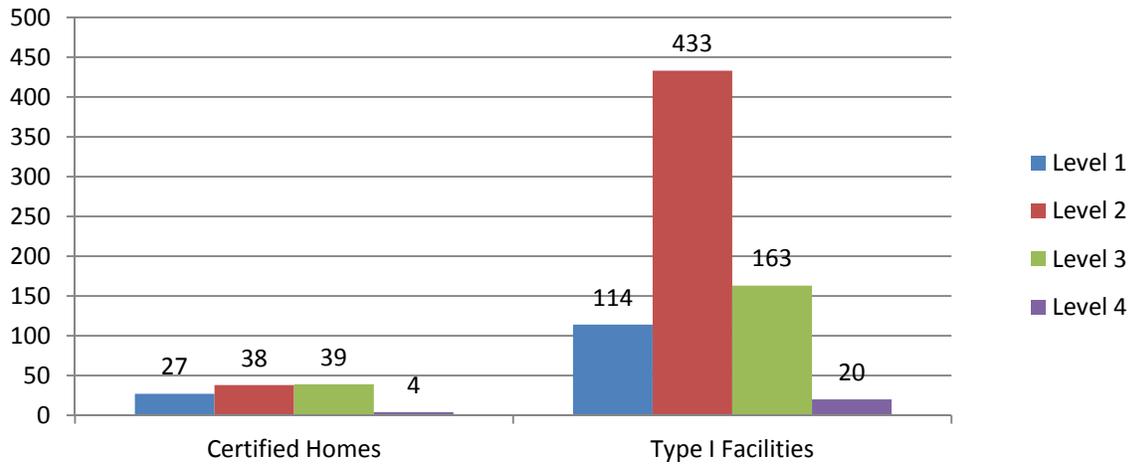


Source: Quality Tracking System – current facility data, as of May 25, 2011.

As Figure 4 demonstrates, the distribution of facility types among STARS-rated programs is similar to the distribution of facility types in the larger eligible population in that Type I facilities make up the largest portion of the facilities. However, Type I facilities are participating in STARS at a higher rate (34%) than Type II facilities (24%) or Certified Homes (17%). The resulting overall rate of participation, as of May 25, 2011, was 30%. This participation rate is

comparable to average participation rates in other states with a voluntary QRIS system⁵. Data from September, 2011 from the Human Development Institute at the University of Kentucky indicated a participation rate of 40%. The participation rate in STARS appears to be improving in recent months.

Figure 5. STARS levels of Currently Rated Type 1 facilities and Certified homes



Source: Quality Tracking System – current facility data, as of May 25, 2011.

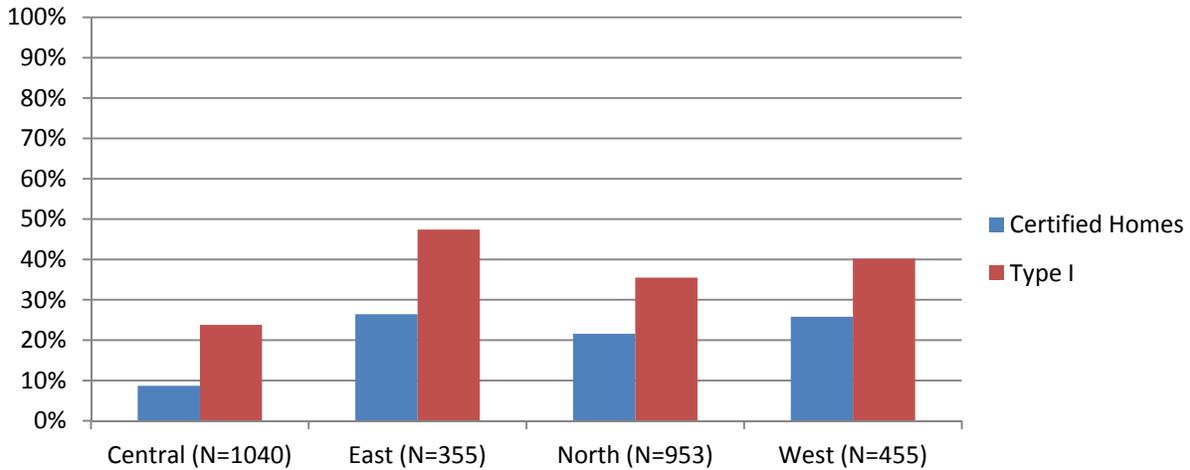
Figure 5 demonstrates the distribution of facilities across level. Type I facilities are concentrated in Level 2, while Certified Homes are more evenly distributed. Type II facilities were excluded from this analysis because the number of Type II facilities participating is so small.

DIFFERENCES BY REGION

Just as differences are found by facility type, difference in STARS participation and STARS levels are also noted by region. Differences by region are seen in Figure 6.

⁵ Tout, K., Starr, R., Moodie, S., Soli, M., Kirby, G. & Boller, K. (2010). *ACF-OPRE Report. Compendium of Quality Rating Systems and Evaluations*. Washington, D.C. U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation.

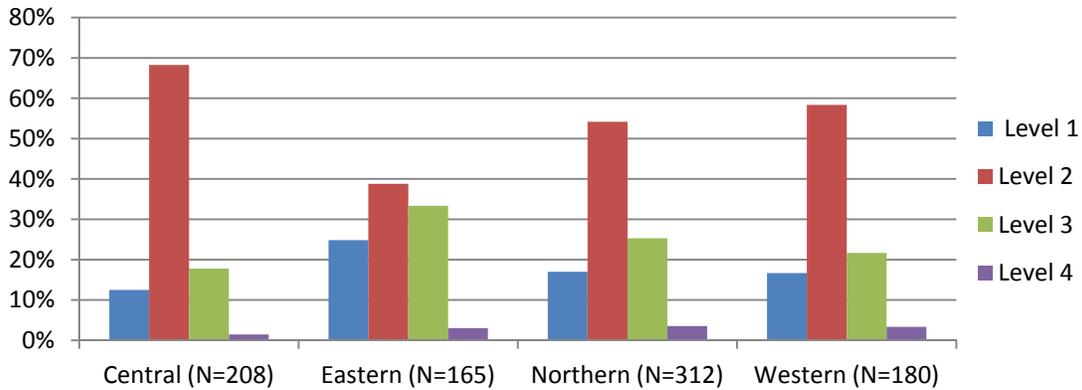
Figure 6. Participation Rate of Certified Homes and Type I Facilities by Region



Source: Quality Tracking System – current facility data, as of May 25, 2011.

For both Certified homes and Type I facilities, participation is lowest in the central region and highest in the Eastern Region. Notably, the Central region has both the lowest participation rate and also the highest number of eligible programs. The East region has both the highest participation rate and the lowest number of eligible programs.

Figure 7. Distribution of STARS levels by region



Source: Quality Tracking System – current facility data, as of May 25, 2011.

Figure 7 presents the distribution of STARS levels across regions. While Level 2 is the most common rating across all regions, there are some notable differences by region. The Northern and Western regions look very similar to one another, while the Eastern region shows a different pattern, a difference that is statistically significant (Chi-square, $p < .001$) with a more equal distribution across Levels 1, 2, and 3. The Central region also shows a significantly different pattern, with a higher concentration of programs at Level 2. In other words, the region with the highest participation rate shows the most equal distribution of programs across STARS levels

while the region with the lowest participation rate shows the most unequal distribution of programs across STARS levels.

SUMMARY

This brief review of basic STARS details reveals important trends that serve as context for the process evaluation. First, programs tend to enter STARS at lower levels (one or two). While programs do improve over time in their STARS level, the bulk of programs remain at the lower levels of the rating system, and very few programs achieve a level four. The participation rates for STARS is in the middle to high range of other voluntary QRIS and, after hitting a plateau in recent years, appears currently to be on an upward trend.

OVERVIEW OF THE PROCESS EVALUATION

Child Trends was contracted by the Kentucky Department for Community Based Services, Division of Child Care to conduct a process evaluation of STARS. The Department for Community Based Services, Division of Child Care defines an effective Quality Rating and Improvement System (QRIS) as one “that is: 1) consistently implemented across the state; 2) designed with appropriate checks and balances to ensure reliability and validity of the system; 3) non-duplicative and uses resources wisely; and 4) transparent to all involved.” The purpose of the process evaluation is to examine existing components of STARS, assess the degree to which they meet the stated criteria for an effective QRIS, and make recommendations for improvements.

The evaluation consists of five components that focus on the STARS quality standards and measurement strategies, rating structure and process for assigning STARS levels, technical assistance to promote improvement, outreach methods to promote STARS to providers and to parents, the collaboration, and the coordination and administrative processes that are most supportive for STARS. The evaluation also focused on Kentucky’s Child Care Resource and Referral system. The questions and plans for each component were developed in collaboration with staff from the University of Kentucky and the Kentucky Department for Community Based Services, Division of Child Care.

RESEARCH QUESTIONS

This section lists the research questions addressed in each component of the evaluation and a note about the specific Evaluation Brief in which descriptions of the findings are described.

Component 1: Quality Standards and Measurement Strategies. How well do current STARS standards align with existing quality frameworks? Which improvements can be made to the current STARS measurement strategy?

Findings:

- Appendix 1: Recommendation on updating observational measures of quality used in STARS
- Appendix 2: Crosswalk comparing STARS and other quality frameworks

Component 2: Rating Structure and Process. For Assigning Quality Levels. What rating structure and process will effectively produce a valid rating that reflects the quality of programs and will promote participation by programs across star levels?

Findings:

- Evaluation Brief: Motivation to Participate and Perceptions of the Rating Process & STARS Grid Requirement Challenges
- Evaluation Brief: Collaboration and Coordination in the STARS Technical Assistance System
- Evaluation Brief: Alternative Rating Structures

Component 3: Technical Assistance. What recommendations can be made to enhance the STARS technical assistance process?

Findings:

- Evaluation Brief: Technical Assistance Provided to and Received by STARS Programs
- Evaluation Brief: Collaboration and Coordination in the STARS Technical Assistance System

Component 4: Methods to Promote Participation in STARS. What recommendations can be made to administrative processes that would enhance STARS participation? What strategies can be used to engage parents in using STARS?

Findings:

- Findings from the Kentucky Household Survey
- Appendix: Development of a Plan for Implementation of a Kentucky Child Care Workforce Survey

Component 5: Collaboration, Coordination and Administrative Processes. What processes promote provision of services that are coordinated and delivered in a non-duplicative, efficient and effective way?

Findings:

- Evaluation Brief: Collaboration and Coordination in the STARS Technical Assistance System

DATA SOURCES

The Kentucky STARS process evaluation draws upon multiple pre-existing data sources for its analyses, including:

- Kentucky Early Childhood Quality Self Study
- Kentucky Early Childhood Core Content
- National Accreditation Standards
- Compendium of Quality Rating Systems and Evaluations
- Kentucky Child Care Licensing Regulations
- The Early Care and Education Training Records Information System (ECE-TRIS)
- Student evaluations of trainings offered through the CCCR&R
- The Department for Community Based Services, Division of Child Care's QRS/CQS system (Child Care Data System).
- The Quality Enhancement Initiative's Quality Tracking System

To complete the evaluation, the research team also collected new data in the following ways:

- Telephone interviews with child care providers
- Telephone interviews with STARS Quality Coordinators
- Online survey of Professional Development Counselors
- Online survey of STARS Quality Coordinators about their use of QTS
- Online survey of STARS Raters
- Telephone interviews with key CCR&R staff
- Telephone Interviews with CCR&R stakeholders
- Online survey of child care providers about their experiences with CCR&R
- Household Survey

Each of these data sources is described in greater depth below.

Kentucky Early Childhood Quality Self Study (QSS)

The QSS was created in 2005 by the Kentucky Department Education. It is a tool early care and education (ECE) providers can use to assess their own efforts toward adopting research-based practices and policies demonstrated to support program quality and successful outcomes for young children. Since center-based ECE providers in Kentucky have been encouraged to use this document to assess their quality, it was important to examine the QSS indicators and their alignment with the STARS grid requirements. The QSS includes 257 quality indicators that focus on the following five categories of quality including: Program Structure and Personnel; Child Experiences in the Environment; Child Experiences with Curriculum and Assessment; Health, Safety, and Nutrition; and Family and Community Involvement.

Kentucky Early Childhood Core Content (ECCC)

The ECCC was created by the Kentucky Department of Education in 2004. It outlines the specific skills, knowledge, and competencies early childhood educators should integrate into their practice to promote positive outcomes for young children. Since early care and education providers are encouraged to use the ECCC to help set their professional goals, it was helpful to compare this document to STARS requirements. The ECCC identifies a set of specific skills and abilities early childhood care providers should attain for each of five credential levels ranging from no credential to degrees above a bachelor's. The ECCC is divided into seven subject areas, including: child growth and development; health, safety, and nutrition; professional development, professionalism; learning environments and curriculum; child assessment; family and community partnerships; and program management and evaluation.

National Accreditation Standards

Though there are several accrediting organizations, we compared the STARS grid requirements to the National Association for Family Child Care (NAFCC) and the National Association for the Education of Young Children (NAEYC). The purpose of this comparison was to determine the aspects of quality programs at the highest STARS level are required to demonstrate in addition to those on the STARS grid in order to obtain national accreditation.

Compendium of Quality Rating Systems and Evaluations

The Office of Planning, Research, and Evaluation in the Administration for Children and Families sponsored the development of a recently released Compendium of Quality Rating Systems and Evaluations (Compendium), which profiles 26 efforts nationwide to measure, monitor, and promote high-quality child care. The Compendium provides a wealth of descriptive and comparative information that can be used to help the early care and education community understand various approaches and strategies used to develop QRIS. We compared the state profiles in the Compendium to STARS requirements in order to identify broad categories of quality that may not be captured by STARS.

Kentucky Child Care Licensing Regulations

In addition to the resources identified above, the research team reviewed the Kentucky Child Care Licensing Regulations in order to ensure and understanding of requirements providers must meet in order to be eligible for STARS.

The Early Care and Education Training Records Information System (ECE-TRIS)

The evaluation team plans to conduct analyses of administrative data from the Early Care and Education Training Records Information System (ECE-TRIS), Kentucky's professional development registry for early care and education providers. Data to be analyzed includes CCR&R trainings offered, provider use of trainings, and provider training evaluations.

Student Evaluations of CCR&R Trainings

The evaluation team examined student evaluations of CCR&R trainings collected over the last year by local CCR&R agencies.

The Department for Community Based Services, Division of Child Care's QRS/CQS system (Child Care Data System)

This data includes ERS scores, grid scores, and final star ratings for 5,951 ratings issued since 2001. For more details, see Evaluation Brief on Alternative Rating Structure.

The Quality Enhancement Initiative's Quality Tracking System

This data includes:

- Facility Data – Current program characteristics
- TA Plan Data – TA plans and the ratings that followed them
- Needs Assessment Data – Results of the Needs Assessment conducted with providers at the start of a TA cycle
- High Low Needs Dimensions Data – Results of the High Low Needs Dimensions tool completed by QEI staff at the start of a TA cycle

Telephone interviews with providers

The evaluation conducted interviews with participating providers in order to obtain information about:

- how participating providers perceive the STARS rating structure and process,
- how providers perceive their own abilities and needs, and
- how providers perceive the technical assistance supports available to them.

With the help of STARS staff in Kentucky, Child Trends identified four geographical areas (each containing one or two administrative regions) to include in data collection. These geographical areas are: KIPDA, Pennyriple and Purchase, Lake Cumberland and Cumberland Valley, and Bluegrass and Northern Kentucky. Because so few Type II facilities participate in STARS, Type II facilities were excluded from the sampling strategy. Our intention was to interview one program per region at levels 3 & 4 and two programs per region at levels 1& 2 for both Certified Homes and Type I Facilities. Child Trends intentionally chose to interview more programs at Levels 1 and 2 in order to collect more information about what challenges prevented these programs from scoring at higher levels and what technical assistance they receive and what additional supports are needed.

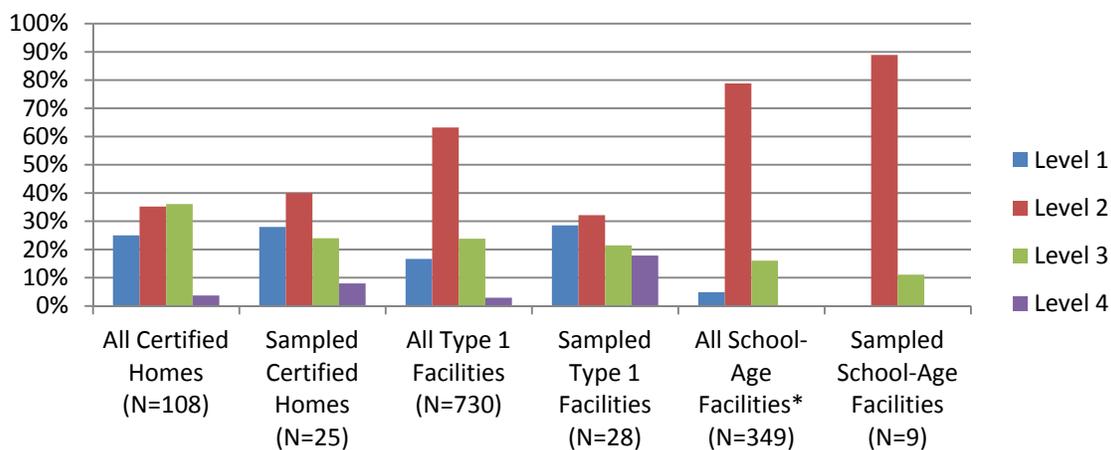
The evaluation also identified an additional sample of 8 to 10 Type 1 facilities that serve only (or primarily) school-age children. While small, this sample allows the evaluation to consider the unique perspective of School-Age Type I facilities as distinct from other Type 1 facilities.

Programs were deemed eligible for selection if they had a STARS rating that was issued on or before 1/25/2011 and if that rating did not expire before 3/15/2011. Eligible programs in the identified geographical regions were randomly assigned an interview priority number. Child Trends researchers contacted the programs first by mail and then by phone and invited them to be a part of the study in order of this assigned priority number. When there were not enough eligible Level 4 programs available or willing to participate in the interviews, additional Level 3 programs were recruited to participate. When there were not enough eligible Level 1 programs available or willing to participate in the interviews, additional Level 2 programs were recruited

to participate. When a sufficient number of programs had been reached at each level in each region, no additional programs were contacted. Therefore, not every program had the opportunity to participate. In total, telephone interviews were conducted with a sample of 25 Certified Homes, 28 Type I Facilities that serve primarily non-school-age children, and 9 Type 1 School-Age Facilities. Interviews occurred in February and March 2011 and lasted, on average, 35 to 45 minutes. Providers received a \$20 gift card upon completion of the interview as a token of appreciation for their time.

It is important to note that because of this sampling strategy, the sample of interviewed programs is not necessarily representative of the full population of rated programs (See Figure 8 below). Notably, for Type 1 facilities, a lower proportion of Level 2 programs and a higher proportion of Level 4 programs were included in the sample than are represented in STARS overall.

Figure 8. Distribution of sampled facilities compared to distribution of all STARS facilities



Source: Distribution among all STARS facilities is derived from the Quality Tracking System – current facility data, as of March 9, 2011.

**Whether a facility serves primarily School-Age facilities could not be consistently determined using QTS facility data. Instead, we used DCC Ratings data April 4, 2011 and pulled all programs that had only a SACERS conducted (no ECERS or ITERS) and were currently rated. In our interview recruitment process, we found that some of these programs did serve other age groups, so we consider this distribution to be only an estimate.*

Interviews were conducted by Child Trends staff with the director of the program or with the person most closely involved with the STARS rating process. Interview questions were designed to collect information about:

- the program’s characteristics,
- the director/lead provider’s characteristics,
- the director/lead provider’s perceptions of the STARS process,
- the program’s ability to meet current STARS indicators above their current STARS level (the interview assumed that programs met all the indicators required for their current STARS level),
- the program’s use of other best practices in child care,

- the services and supports provided by the SQC,
- and the quality improvement services and supports provided by other individuals and organizations in Kentucky.

Some interview questions required interviewees to choose from among a preset list of possible answers. For example, when a provider was asked if her program currently met a STARS indicator, if the program did not, she was then asked how easy or difficult it would be to meet that indicator. The respondent could choose from the following responses: Very easy, Somewhat easy, Neither easy nor difficult, Somewhat difficult, or Very difficult. Findings from these questions are reported on in a quantitative manner.

Other interview questions were open-ended, allowing respondents to answer more freely. Responses to these questions were examined using qualitative analysis strategies.

Telephone interviews with STARS Quality Coordinators

Interviews were conducted with STARS Quality Coordinators to obtain information about:

- how SQCs perceive the STARS rating structure and process (and its impact on program participation)
- how SQCs perceive the abilities and needs of participating programs,
- the technical assistance supports that SQCs provide,
- and how SQCs are collaborating with other individuals and organizations to support child care programs.

STARS Quality Coordinators were interviewed about their practices and experiences with a single program or provider rather than requesting that SQCs generalize about their practices across the providers they work with. This approach facilitated the interview process and allowed the evaluation team to collect more specific examples of the assistance that SQCs provide. Because the evaluation team had identified a subsample of programs for interviewers, these programs were selected to be the subjects of the SQC interviews.

The SQC of each of the interviewed programs was contacted and asked to complete an interview about their experience with that particular program. This also allowed the evaluation to compare the responses of STARS Quality Coordinators with the responses of the providers when appropriate. Two of the interviewed providers reported that they had not worked with a SQC at all within the last year. In these two cases, we did not attempt to interview the assigned SQC about the program. In another two cases, the SQC declined to complete the interview because they had not worked with the program enough to be able to report on supports provided or to speak intelligently about the program's needs and motivations.

Because interviews with SQCs were based on the sample of interviewed programs, a SQC could be interviewed more than once if she served more than one of the sampled programs. A total of 58 interviews were conducted in March and April 2011 with 16 STARS Quality Coordinators. Each of the 16 interviewed SQCs completed between one and seven interviews.

Thus, when reporting on the findings from these interviews, we will not be describing the number of SQCs that expressed a particular view but rather the number of programs whose SQC held a particular view.

SQCs in our sample have been working as a SQC for an average of 4.7 years, with 19% of the 16 interviewed SQCs reporting that they have worked as an SQC since the beginning of STARS (11 years). These SQCs reported having, on average, 18 years of experience in the Early Care and Education field, with a quarter reporting more than 25 years in the field. Most SQCs (87%) had at least a bachelor's degree, although not all degrees were in an ECE-related field.

Online survey of Professional Development Counselors

An online survey of Professional Development Counselors (PD Counselors) was administered in order to obtain information about:

- the services and supports PD Counselors offer providers,
- the extent to which PD Counselors have a good working relationship with CCR&Rs, SQCs, and community colleges, and
- PD Counselor's insights on how well aspects of the STARS system of technical assistance work together to support providers.

The anonymous survey consisted of 25 questions, both multiple choice and open-ended. Nearly all (13 out of 15) PD Counselors completed the survey in late April or early May 2011. Since the survey was administered anonymously, responses cannot be directly linked to individual CCR&Rs, SQCs, community colleges, geographical areas, or administrative regions. Instead, data collected from this survey can be used to identify consistent themes among PD Counselors' experiences and their unique perspectives on how well different technical assistance agencies and individuals work together within STARS.

Online survey of STARS Quality Coordinators about their use of QTS

An online survey of STARS Quality Coordinators (SQCs) was administered in order to obtain information about:

- How SQCs currently use and perceive QTS
- Challenges that SQCs face in using QTS
- How SQCs would like to utilize QTS and its data

The survey consisted of 17 questions, primarily multiple choice questions but with a few open-ended responses. Most SQCS (19 out of 25) completed the survey in July 2011.

Online survey of Kentucky Regional STARS Raters (Raters)

An online survey of Kentucky Regional STARS Raters (Raters) was administered in order to obtain information about:

- average hours spent on specific activities,
- resources and support they received,
- processes they engaged in to maintain reliability,
- rater's interest in continuing education and further professional development opportunities, and
- perceptions of changes to STARS.

The anonymous survey consisted of 41 questions, both multiple choice and open-ended. All seven Raters completed the survey in July 2011. Since the survey was administered anonymously, responses cannot be directly linked to individual CCR&Rs, SQCs, community colleges, geographical areas, or administrative regions. Instead, data collected from this survey can be used to identify consistent themes among Raters' experiences and unique perspectives on their participation in STARS.

Telephone interviews with CCR&R staff and other stakeholders

Telephone interviews were conducted with at least one staff member from each of the CCR&Rs in Kentucky to assess their perceptions of parent use of CCCR&R services, their primary roles and responsibilities, and their collaboration with other stakeholders and partners. Fifteen Kentucky CCR&R employees were interviewed (n=15); nine agency directors and six staff members from smaller agencies that do not have their own director.

Fifteen stakeholder interviews were conducted with representatives of Community Early Childhood Councils, Family Resource and Youth Services Centers, Child Care Health Consultants, Early Childhood Mental Health Specialists, Institutes of Higher Education, and Regional Training Centers. Possible interviewees were e-mailed requesting their participation in the study. Based upon the response of various stakeholders, additional possible interviewees were contacted until at least one stakeholder had been interviewed from each collaboration agency, for a total of 15 respondents. Stakeholders were asked about their collaboration with CCR&Rs.

Online survey of child care providers

Online surveys were sent child care providers who had taken a CCR&R training in the past year. The surveys included questions on provider awareness of, perceptions of, and use of CCR&R services. Results are based on 75 respondents, working with at least 11 different CCR&Rs, who consented to participate and answered at least two survey questions.

Household Survey

A statewide telephone survey of households in Kentucky was completed in July, 2011. Households with at least one child age twelve years or under who used some type of non-parental care were eligible for the survey. A total of 501 households participated in the survey. The survey asked eligible families to report on several topics: Type of non-parental care used,

awareness of resources, aspects of child care selection, parent perception of current care, how families pay for child care, resources used for child care, and child and family characteristics. Findings will inform program administrators and policy-makers on what parents value and how they make their child care decisions, what services parents use, and how services can be better marketed to parents.

Workforce Survey

A survey of the early care and education workforce will provide demographic information about the workforce, as well as information on wages, benefits, supports in the workplace, and the need for professional development opportunities. The workforce survey will go beyond data that is collected about programs in the Market Rate Survey (i.e., programs hours, children served) to describe characteristics of the workforce, their background, their needs, and the supports provided to them. The information gained about the needs of practitioners will help in planning for professional development opportunities that are accessible to all practitioners. Information about the workforce also has the potential to act as a starting point for discussions to develop/revise initiatives to improve the workforce and working conditions (i.e. increased wages, benefits, education levels) that may link to improved outcomes. For example, information about the workforce, their background, needs, and use of professional development opportunities can inform how Kentucky STARS for KIDS NOW might best serve practitioners toward the goal of improving program quality. The evaluation team provided data collection protocols that can be used to conduct a Workforce Survey in the spring of 2012.

DATA ANALYSIS AND REPORTING

Qualitative data collected in the evaluation through open-ended responses in a telephone or electronic interview were analyzed by reviewing interview notes and coding for common themes. Some data were coded directly during the interview using predetermined categories. These responses were reviewed and tabulated. When possible, responses to particular themes were quantified to determine prevalence.

Throughout this Evaluation, different strategies are used to group the responses. In some instances, the responses of providers from all 58 interviewed programs are reported. In other instances, the responses of a particular subgroup of programs are reported, such as the 28 Type 1 Facilities interviewed or the 25 Certified Home providers interviewed.

To describe the prevalence of particular responses or themes, systematic conventions and terms were used as shown in Table 1.

Table 1. Qualitative terminology and corresponding parameters to describe the prevalence of responses, by provider type

Term	Approximate Percentage of Programs	All Programs (N=62)	SQCs (N=58)	Type I Facilities (N=28)	Certified Homes (N=25)	PD Counselors (N=13)	School-Aged (N=9)
All	100%	62	58	28	25	13	9
Most	50% ~ 99%	31-61	29-57	13-27	13-24	7-12	5-8
Many	26% ~ 49%	15-30	14-28	7-12	7-12	4-6	4
Several	4 programs ~ 25%	4-14	4-14	4 - 7	4-7	N/A	N/A
A few	3 programs	3	3	3	3	3	3
A couple	2 programs	2	2	2	2	2	2

For example, if 35 SQC responses indicated that the SQC met monthly with the program in question, then we would report, “According to SQCs, most programs were visited monthly.” Similarly, if 6 school-aged facilities reported being motivated to participate in STARS by a desire for technical assistance and 3 specifically named the desire for consultation on the SACERS, then we would report, “Most School-Aged facilities reported being motivated to join STARS by a desire for technical assistance, and a few specifically expressed interest in consultation on the SACERS.”