Why Program Quality Matters for Early Childhood Inclusion

Recommendations for Professional Development

The quality of the early childhood workforce\(^1\) is a critical factor and may be of overriding importance in determining whether early education and intervention is of high or poor quality. Along with a safe and well-equipped early learning environment, it is the characteristics and behaviors of the practitioners themselves that likely contribute most to the quality of the program and its effectiveness for young children and their families.

Professional development to help practitioners acquire knowledge or improve teaching and intervention practices should reflect this vital connection between the quality of the program and the quality of the early childhood workforce. In an earlier publication, we defined professional development and described a framework for planning and organizing professional development (see sidebar and NPDCI, 2008, under Definition of Professional Development in the Resources section). This document advocates for the need to link early childhood program quality and professional development, with a particular focus on how this topic relates to early childhood inclusion.\(^2\)

\(^1\) The early childhood workforce represents a disparate collection of professionals from the following fields: early care and education, early childhood special education, early intervention, infant and child mental health, psychology, social work, medicine, public health, and the allied health professions, among others.

\(^2\) According to the draft of Early Childhood Inclusion: A Joint Position Statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC), “Early childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and contexts as full members of families, communities, and society” (p. 2). The entire draft position statement on early childhood inclusion may be accessed online at: http://community.fpg.unc.edu/resources/articles/Early_Childhood_Inclusion/view
Within the general early childhood field, program quality is assessed against, and improvements are guided by, early childhood program standards (e.g., the NAECF Early Childhood Program Standards and Accreditation Criteria). Because existing early childhood program standards primarily reflect the needs of the general population of young children, improving the overall quality of an early childhood classroom is necessary, but might not be sufficient to address the individual needs of children with developmental delays, cerebral palsy, Autism Spectrum Disorders (ASD), and other disabilities. Combined with what we already know about program quality for young children in general, dimensions of inclusive program quality are needed to guide professional development on early childhood inclusion.

The sections that follow present: (1) recognized components of global program quality and the quality improvement movement; (2) the need for additional dimensions of program quality to define high quality inclusion, given the growing number of inclusive early childhood programs that serve young children with disabilities and their families; and (3) recommendations for infusing content on inclusive program quality in professional development using the *who*, the *what*, and the *how* conceptual framework (see sidebar).

**Components of Global Program Quality and the Quality Improvement Movement**

**Dimensions of Program Quality**

Various aspects of program quality may be grouped into two broad dimensions: (a) the quality of the curriculum and intentional teaching (e.g., planning, delivering and evaluating instruction, relating positively to children and adults); and (b) environmental and structural quality indicators (e.g., physical environment, child-staff ratio, staff qualifications, communication and collaboration with families, administrative leadership, compensation). Both dimensions appear to be important in defining the quality of early childhood programs and in predicting whether these early experiences ultimately promote higher rates of learning and development in young children. (See Appendix A: Resources, for a listing of program quality standards and practice guidelines.)

**Program Quality and Child Outcomes**

There is now substantial research evidence to suggest a causal link between program quality and developmental outcomes in young children enrolled in early education programs. Among the general population of young children who participate in early education programs, high quality early care and education offer a strong foundation for school readiness across key domains of learning and set the stage for future school success. The link between program quality and positive outcomes for children and families has spawned a number of initiatives throughout the United States that are focused on improving early childhood program quality.

**Initiatives Focused on Improving Early Childhood Program Quality**

Since 1996, the Child Care and Development Fund (CCDF) has been an important resource in helping states to make significant investments in improving the quality of a wide range of early care and education programs and services. In 2002, the Good Start, Grow Smart initiative sparked a national focus on improving program quality through strategies aimed at enhancing professional development and the creation of state-wide early learning standards to address children's school readiness goals.

Many states have developed and continue to be engaged in efforts to establish program standards and early learning guidelines. Such standards and guidelines provide a foundation for improving early childhood program quality. These standards, guidelines and criteria for improving program quality should be used within professional development efforts to help define what early childhood practitioners need to know and be able to do to create high quality early education and intervention services for all children and families. The following section describes another program quality movement affecting almost all states across the nation.

*The Quality Rating and Improvement System (QRIS) Movement.* A critically important initiative aimed at improving early childhood program quality is the Quality Rating and Improvement System movement. To date, 15 states have developed a QRIS and many others are developing these systems as a way of assessing program quality, documenting program quality improvements, and communicating information about program quality to parents and other consumers. A QRIS enables early childhood programs to set measurable quality improvement goals and could help families to identify high quality programs for their children. Appendix B describes key features of existing standards in the 15 states with a fully implemented statewide QRIS.

*Quality Standards Addressing the Needs of Children With Disabilities and Their Families.* Of the 15 states that have a QRIS, only New Hampshire’s QRIS includes a separate standard entitled *Children with Special Needs*, and five additional states – Indiana, New Mexico, Ohio, Pennsylvania, and Vermont – have performance standards specifically addressing the needs of children with disabilities and their families embedded within general QRIS standards.

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4 QRIS is the most recent terminology, though many states still refer to these systems as Quality Rating Systems (QRS).

5 Appendix B includes information publicly available via state QRIS websites and from the website of the National Child Care Information Center as of October 2008.
A review of existing QRIS standards suggests that these six states emphasize different aspects of inclusion (e.g., accommodations and modifications, activities to meet IEP/IFSP goals, professional development on accessing services). A consensus has not been reached on which dimensions of program quality are related to inclusive program quality, over and above general program quality. There is a pressing need for attention to quality program standards that address the characteristics and priorities of children with disabilities and their families.

**Measuring Early Childhood Program Quality.** The *Early Childhood Environment Rating Scale, Revised Edition* (ECERS-R) (Harms, Clifford, & Cryer, 1998) and related scales are widely used as accountability measures in conjunction with state QRIS standards to document program quality. (See Appendix C for more information on the ECERS-R).

Other measures of program quality used in QRIS vary by state and include, among others, family questionnaires, written improvement plans, accreditation, and history of compliance with child care regulations. The early childhood field needs additional measures designed specifically to assess the quality of intentional teaching across key domains of learning and development, along with measures of quality inclusive practices. Appendix C provides more information on two promising measures for assessing the quality of inclusive programming. Both measures require further validation through research, but hold promise as comprehensive measures of quality inclusive programming.

**Considerations for Additional Dimensions of Quality Inclusion**

There is some empirical evidence to show that the quality of early childhood programs that enroll young children with disabilities generally is as good as, or slightly better than, the quality of programs that do not enroll these children. However, previous efforts to define and measure quality in early childhood have focused on the *overall program quality* and have not specifically addressed *inclusive program quality* for children with disabilities.7

A draft DEC/NAEYC joint position statement on early childhood inclusion currently under development may serve as a guide for identifying the desired results (belonging, membership, positive social relationships including friendships, development, and learning) and key components of high quality inclusive programs: access, participation, and supports (see http://community.fpg.unc.edu/resources/articles/Early_Childhood_Inclusion/view).

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6 Individualized Education Program/Individualized Family Service Plan.

7 The National Early Childhood Accountability Task Force recently recommended that all children, including those with disabilities, be included as part of states’ accountability and program improvement efforts. The Task Force report may be accessed online at: http://www.pewtrusts.org/uploadedFiles/wwwpewtrustsorg/Reports/Pre-k_education/task_force_report1.pdf
Recommendations for Infusing Content on Inclusive Program Quality in Professional Development

There is a need for the early childhood field to reach consensus on dimensions of inclusive program quality and to define the criteria and specific practices by which programs can meet standards for high quality inclusion. Dimensions of inclusive program quality, over and above general program quality, should be incorporated into the content of professional development efforts. In this section, we provide recommendations that can support connections between program quality initiatives and efforts focused on improving professional development on inclusion. The conceptual and organizing framework of three intersecting components (the who, the what, and the how) as defined by NPDCI (2008) can be used for planning and organizing professional development. Although a comprehensive system of professional development must take into account a variety of other factors such as access to learning opportunities and incentives to participate, the who, the what, and the how may be viewed as the core of a professional development framework aimed at promoting highly effective teaching and intervening, and are used as an organizing framework for presenting the following recommendations:

1. **Consider the characteristics (the who) of both the learners and the providers of professional development in the context of the quality improvement movement.**
   - Identify the primary learners for professional development related to program quality—the teachers, paraprofessionals, specialists, and others who work directly with young children and families in a variety of home- and center-based programs. In designing professional development activities that will be relevant and acceptable to end users, consider the characteristics of these learners such as their educational backgrounds, work experience, and the settings and contexts within which they work, as well as the characteristics of the children and families they serve (e.g., age groups, community contexts, cultural and linguistic backgrounds).
   - In addition to teachers, families, specialists, and administrators who represent the frontline implementers of inclusive practices, a primary audience for professional development should include those who provide professional development, consultation, or technical assistance to improve the quality of early childhood programs and services. Consider how learning opportunities provided through professional development will match the characteristics of these learners.

2. **Redefine the content (the what) of professional development to reflect what is currently known about program quality standards, practices, and measures.**
   - To help determine which professional practices constitute foundational knowledge on inclusion, the field needs to consider research syntheses and evidence-based practice websites, position statements from leading professional organi-
izations, recommended practice guidelines, professional competencies and standards, quality program standards and QRIS criteria, and anticipated outcomes for children and families.

- Assist learners (both those preparing to enter the early childhood field and those who already serve young children and families) in assessing whether there are provisions in program quality standards related to serving children with disabilities and their families. Give learners opportunities to recommend changes to existing standards that would improve program quality for every child.

- Help learners acquire knowledge and skills related to measuring and documenting program quality, paying particular attention to high quality inclusive practices. Provide learners with opportunities to use this information to plan and implement quality improvements in early childhood programs as part of their field-based experiences or in conjunction with continuing education activities.

- Identify the models of collaboration and specialized instructional practices that constitute the foundational knowledge, skills, and dispositions that will be the focus of professional development on inclusion. For example, professional development activities may focus on promoting access to learning activities through Universal Design for Learning (UDL). Other professional development may provide content on scaffolding and individualized interventions that are part of a tiered approach, whereas yet other professional development activities may focus on effective collaboration with families. (See Appendix A for resources on tiered approaches and UDL.)

3. **Employ the most effective professional development methods (the how) to facilitate experientially-oriented learning that will promote improvements in both global program quality and quality inclusive programming.**

- A growing body of empirical evidence suggests that professional development on any topic is more likely to be effective when it is (a) content-specific and focused on well-defined professional practices rather than general issues; (b) aligned with intervention or instructional goals, learning standards, and the curriculum materials used in practice; and (c) intensive, sustained over time, and designed to give feedback and guidance through methods such as coaching, consultation, or facilitated group collaboration (Hill, 2007; Whitehurst, 2002; Winton & McCollum, 2008). Each of these aspects should be considered in professional development efforts focused on improving the quality of inclusive early childhood programs and services.
Dimensions of high quality inclusion should be incorporated into quality improvement efforts and professional development activities. This document provides several recommendations for how content on inclusive program quality may be incorporated in professional development. Professional development focused on dimensions of inclusive and global program quality represent a critical avenue for improving the quality of early childhood programs for all children, including those with disabilities.
Appendix A: Resources

**Definition of Professional Development**


**High Quality Inclusion**


Quality Interventions for Early Care and Education (QUINCE) Study. On the Web at http://www.fpg.unc.edu/~quince/

**High Quality Early Childhood Programs**


**Quality Measures**


Cryer, D., Harms, T., & Riley, C. (2004). *All about the ITERS-R: A detailed guide in words and pictures to be used with the ITERS-R.* Lewisville, NC: Kaplan.


Irwin, S. H. (2005). *SpecialLink child care inclusion practices profile and principles scale.* Winnipeg, Manitoba, Canada: University of Winnipeg, SpecialLink—the National Centre for Child Care Inclusion.


**Quality Rating and Improvement Systems**


National Child Care Information Center (NCCIC). Information on QRIS on their Web site at http://nccic.acf.hhs.gov/topics/topic/index.cfm?topicId=44

STATE and NATIONAL PROGRAM QUALITY STANDARDS and PRACTICE GUIDELINES


Head Start Program Performance Standards  
http://eclkc.ohs.acf.hhs.gov/hslc/Program%20Design%20and%20Management/Head%20Start%20Requirements

NAEYC Early Childhood Program Standards and Accreditation Criteria  
http://www.naeyc.org/academy/standards/


TIERED APPROACHES in EARLY CHILDHOOD


UNIVERSAL DESIGN for LEARNING

# Appendix B: Key Features of QRIS in 15 States

<table>
<thead>
<tr>
<th>State</th>
<th>QRIS Title</th>
<th>Website</th>
<th>System</th>
<th>Standardized Accountability Measures</th>
<th>QRIS Standards</th>
<th>Start Date</th>
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</thead>
<tbody>
<tr>
<td>CO</td>
<td>Qualistar Rating System</td>
<td><a href="http://www.qualistar.org">www.qualistar.org</a></td>
<td>5-level system (Star 4, Star 3, Star 2, Star 1, Provisionally mandatory for some providers and voluntary for others)</td>
<td>ECERS-R, ITERS, FICERS, Classroom Environment Tool, Accreditation by an approved organization</td>
<td>Learning environment, Family partnerships, Training and education, Staff/child ratios and group size, Accreditation</td>
<td>2000</td>
</tr>
<tr>
<td>State</td>
<td>Start Date</td>
<td>Title of QRIS and Website</td>
<td>System</td>
<td>QRIS Standards</td>
<td>Standardized Accountability Measures</td>
<td>Standards Relating to Including Children with Disabilities</td>
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<td>IN</td>
<td>2008</td>
<td>Paths to Quality <a href="http://www.in.gov/fssa/2554.htm">http://www.in.gov/fssa/2554.htm</a></td>
<td>4-level voluntary system, with Level 1 meeting licensing/registration standards</td>
<td>Health and safety needs are met Environment supports children’s learning Planned curriculum supports children’s development Accreditation</td>
<td>Accreditation by an approved organization</td>
<td>Levels 3 and 4 require that written plans and environmental accomodations be evident for children with special needs. Adaptations and accommodations to spaces and materials are mentioned as indicators. Another indicator is teachers including children with special needs in age-appropriate self-help activities.</td>
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<tr>
<td>IA</td>
<td>2006</td>
<td>Iowa’s Quality Rating System <a href="http://www.dhs.state.ia.us/iqrs/">www.dhs.state.ia.us/iqrs/</a></td>
<td>5-level voluntary system, with Level 1 meeting licensing standards (centers)/registration with the Department of Human Services (homes)</td>
<td>For levels 3 – 5: Professional development Health and safety Environment Family and community partnership Leadership and administration</td>
<td>ECERS ITERS FDCRS SACERS Accreditation by an approved organization</td>
<td>Head Start Program Performance Standards</td>
</tr>
<tr>
<td>KY</td>
<td>2001</td>
<td>STARS for KIDS (Kentucky Invests in Developing Success) NOW Child Care Quality Rating System <a href="http://www.kde.state.ky.us/KDE/Instrucational+Resources/Early+Childhood+Development/STARS**for+Kids+NOW+%28Quality+Rating+System%29.htm">www.kde.state.ky.us/KDE/Instrucational+Resources/Early+Childhood+Development/STARS**for+Kids+NOW+%28Quality+Rating+System%29.htm</a></td>
<td>4-star voluntary system, with all star levels exceeding minimum licensing requirements</td>
<td>Staff/child ratios Group size Curriculum Parent involvement Training/education of staff Regulatory compliance Personnel practices</td>
<td>ECERS-R ITERS FDCRS Accreditation by an approved organization</td>
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<td>State</td>
<td>Start Date</td>
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<td>ME</td>
<td>2008</td>
<td>Quality for ME</td>
<td>4-step voluntary system, with Step 1 meeting minimum licensing standards</td>
<td>Compliance history/licensing status, Learning environment/developmentally appropriate practice, Program evaluation, Staffing and professional development, Administrative policies and procedures, Parent/family involvement, Family resources, Authentic assessment</td>
<td>ECERS-R, ITERS-R, FDCRS, SACERS, Accreditation by an approved organization, Head Start Program Performance Standards, High Scope</td>
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<tr>
<td>MT</td>
<td>2002</td>
<td>Star Quality Rating System</td>
<td>3-level system (2-Star, 1-Star, Licensed/Registered)</td>
<td>Cognitive, physical, social/emotional and creative development, Personnel policies, Staff turnover, Level of staff members on the Montana Early Child Care and Education Career Registry, Communications with parents, Accreditation</td>
<td>Accreditation by an approved organization</td>
<td></td>
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<tr>
<td>NH</td>
<td>2006</td>
<td>Licensed Plus</td>
<td>3-level voluntary system (Accreditation, Licensed Plus, Licensed)</td>
<td>Licensed Plus Standards, Regulation, Administration and business practices, Learning environment, Parent/family involvement, Children with special needs, Professional development, Staff qualifications and compensation, Program evaluation</td>
<td>ECERS-R, ITERS-R, ITERS, FDCRS, SACERS</td>
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<td>Listed under standards category: Children with Special Needs, Licensed Plus requires modifications and reasonable accommodations for children with disabilities. Documentation may include written inclusion policy, for example in the parent handbook.</td>
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<td>State</td>
<td>Start Date</td>
<td>Title of QRIS and Website</td>
<td>System</td>
<td>QRIS Standards</td>
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<td>NM</td>
<td>2005</td>
<td>Look for the Stars <a href="http://www.newmexickids.org/caregivers">www.newmexickids.org/caregivers</a></td>
<td>5-star system, with 1-Star meeting minimum licensing requirements</td>
<td>Staff training and education Environment Daily learning activities Family involvement Assessment Staff/child ratios and group size</td>
<td>ECERS-R ITERS-R FDCRS SACERS Accreditation by an approved organization</td>
<td>Listed under standards category: <strong>Environment</strong>  For 2 Stars, learning centers must include modifications to meet any special needs. Listed under standards category: <strong>Curriculum and Assessment of Children’s Progress</strong>  For 3 and 4 Stars, the description of this category highlights observation as the main method for gathering information, but notes that other assessment and evaluation methods may be used, particularly for children with special needs. For 3 or more Stars, all staff are required to take a 6-hour course focusing on serving children with behavioral, social, and emotional needs.</td>
</tr>
<tr>
<td>NC</td>
<td>1999</td>
<td>North Carolina Star Rated License <a href="http://ncchildcare.dhhs.state.nc.us/providers/pv_sn2_ov_sr.asp">http://ncchildcare.dhhs.state.nc.us/providers/pv_sn2_ov_sr.asp</a></td>
<td>5-star voluntary system, with 1-Star meeting minimum licensing requirements</td>
<td>Program standards (e.g., personnel policies, classroom activity areas, staff/child ratios) Staff education (e.g., credentials, coursework, experience)</td>
<td>ECERS-R ITERS-R FDCRS SACERS</td>
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http://community.fpg.unc.edu/npdci
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<th>State</th>
<th>Start Date</th>
<th>Title of QRIS and Website</th>
<th>System</th>
<th>QRIS Standards</th>
<th>Standardized Accountability Measures</th>
<th>Standards Relating to Including Children with Disabilities</th>
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<tr>
<td>OH</td>
<td>2006</td>
<td>Step Up to Quality <a href="http://www.stepuptoquality.org">www.stepuptoquality.org</a></td>
<td>3-step voluntary system for child care centers, with all steps exceeding Ohio’s state licensing regulations</td>
<td>Staff/child ratios and group size, Staff education and qualifications, Specialized training, Administrative practices, Early learning⁹</td>
<td>ECERS-R, ELLCO, ITERS, SACERS, Accreditation by an approved organization</td>
<td>Listed under the standards category: <em>Early Learning</em>. Step 2 and Step 3 require a developmental screening for all children within 60 days of enrollment and completion of any needed referrals within 90 days.</td>
</tr>
<tr>
<td>OK</td>
<td>1998</td>
<td>Reaching for the Stars <a href="http://www.okdhs.org/programsandservices/cc/stars">www.okdhs.org/programsandservices/cc/stars</a></td>
<td>4-level system (3-Star, 2-Star, 1-Star Plus, and 1-Star), with 1-Star meeting minimum licensing requirements</td>
<td>Licensing compliance status, Administrative policies, Director qualifications, Learning environment, Staff/child ratios, Staff education/master teacher qualifications, Staff compensation, Parent involvement, Program evaluation, Accreditation</td>
<td>ECERS, ITERS, FDCRS, SACERS, Accreditation by an approved organization</td>
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<td>State</td>
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<td>Title of QRIS and Website</td>
<td>System</td>
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<tr>
<td>PA</td>
<td>2002</td>
<td>Keystone STARS (Standards, Training/Professional Development, Assistance, Resources, and Support) <a href="http://www.dpw.state.pa.us/PartnersProviders/ChildCareEarlyEd/KeyStoneStarChildCare/">http://www.dpw.state.pa.us/PartnersProviders/ChildCareEarlyEd/KeyStoneStarChildCare/</a></td>
<td>5-level system (Star 4, Star 3, Star 2, Star 1, Start with STARS)</td>
<td>Staff qualifications and professional development Early learning program Partnerships with family and community Leadership and management</td>
<td>ECERS-R ITERS-R FCCERS-R SACERS Accreditation by an approved organization</td>
<td>Listed under the standards category: Partnerships with Family and Community Center Standards: STAR 2 requires the request of a copy of the child’s IEP/IFSP to inform classroom practice. STAR 4 requires implementation of activities to meet IEP/IFSP goals. Family Day Care Home Standards: STAR 2 requires providers to obtain information about special needs issues of enrolled children. STAR 3 requires providers to (a) obtain information from any special needs assessments of enrolled children, (b) follow any prescribed special needs treatments, and (c) obtain a copy of IEPs/IFSPs, if applicable. STAR 4 requires all staff to have 2 clock hours of training on inclusive practices in early education and care, and requires providers to have available and to review with families the local school district’s transition policies for children with special needs. Group Day Care Home Standards: STAR 4 requires full time staff to have recent training on accessing services for children with disabilities.</td>
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<td>State</td>
<td>Start Date</td>
<td>Title of QRIS and Website</td>
<td>System</td>
<td>QRIS Standards</td>
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<tr>
<td>TN</td>
<td>2001</td>
<td>Child Care Evaluation and Report Card Program <a href="http://www.tnstarquality.org/html/report_cards.htm">http://www.tnstarquality.org/html/report_cards.htm</a></td>
<td>4 levels on report card for each area under QRIS Standards; mandatory system</td>
<td>Center standards: Director qualifications/experience, education, and training Teaching staff education, training, and previous work experience Compliance history Parent and family involvement Staff/child ratios and group size Pay and benefit plans for staff Program assessment</td>
<td>ECERS-R ITERS-R FDCRS SACERS</td>
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<tr>
<td>VT</td>
<td>2003</td>
<td>STARS (STep Ahead Recognition System) <a href="http://www.STARSstepahead.org">www.STARSstepahead.org</a></td>
<td>5-star voluntary system, with all star levels exceeding basic regulatory standards</td>
<td>Compliance history Qualifications and training Families and community Program assessment Administration</td>
<td>Accreditation by an approved organization</td>
<td>Listed under the standards category: Families and Community For two or three points (out of three total possible points) under this standard, programs must be prepared to serve children with special needs. Sample indicators include verification of program member participation on IEP/IFSP teams, and descriptions of how children with special needs are served.</td>
</tr>
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</table>

Information in Appendix B was obtained via the state QRIS websites listed in the table, and from the website of the National Child Care Information Center (NCCIC), a service of the Child Care Bureau: [http://www.nccic.org/index.html](http://www.nccic.org/index.html) States with a tiered reimbursement system, but without a QRIS were not included in this appendix.
QRIS—Quality Rating and Improvement System

ELLCO—Early Language and Literacy Classroom Observation (Smith, 2002)
ITERS—Infant/Toddler Environment Rating Scale (Harms, Cryer, & Clifford, 1990)
FCCERS—Family Child Care Environment Rating Scale, Revised Edition (Harms, Cryer, & Clifford, 2007)
FDCRS—Family Day Care Rating Scale (Harms & Clifford, 1989)
SACERS—School-Age Care Environment Rating Scale (Harms, Jacobs, & Romano, 1995)

BAS—Business Administration Scale for Family Child Care Programs (Talan & Bloom; no date provided)
PAS—Program Administration Scale (Talan & Bloom, 2004)

IEP—Individualized Education Program
IFSP—Individualized Family Service Plan

*a Based on the ECERS-R and the ITERS

*b Examples of accrediting organizations:
ACSI—Association of Christian Schools International
COA—Council on Accreditation
NAA—National AfterSchool Association
NAC—National Accreditation Commission for Early Care and Education Programs
NACCP—National Association for Child Care Professionals
NAEYC—National Association for the Education of Young Children
NAFCC—National Association for Family Child Care
NECPA—National Early Childhood Program Accreditation

*c For licensed family/group home child care providers applying for Star Level 3 or Star Level 4

*d For licensed centers applying for Star Level 3 or Star Level 4

*e Evidence of engagement in the Head Start Federal Review Process or in a national accreditation process may also be used to apply for a Licensed Plus rating

*f Prior to 2005, compliance history with child care regulations was an additional component; now, 75% compliance history is a minimum requirement for all licensed facilities

*g National accreditation is an alternate pathway for Step 2 and Step 3

*h A streamlined STARS process is available for nationally accredited programs and for Head Start and Early Head Start programs that have achieved a “Program of Quality” or “Program of Excellence” designation
Appendix C: Measures of Program Quality

ECERS-R

*Early Childhood Environment Rating Scale, Revised* (Harms, Clifford, & Cryer, 2005). The ECERS-R is an environmental rating scale designed for use in center-based classrooms for children from 2½ through 5 years of age. It contains 43 items within seven subscales: (1) Space and Furnishings, (2) Personal Care Routines, (3) Language and Reasoning, (4) Activities, (5) Interactions, (6) Program Structure, and (7) Parents and Staff. Each item is rated on a seven point scale (1 = inadequate, 3 = minimal, 5 = good, and 7 = excellent). The ECERS-R is completed through observation and teacher interview.

The ECERS-R is a comprehensive measure of global program quality. It does address aspects of program quality related to inclusion in that indicators and examples specific to children with disabilities are incorporated within several items (see below). Additionally, one item, Provisions for Children with Disabilities, specifically addresses the following needs of children with disabilities and their families:

- Collaboration with parents and professionals
- Individualization of child programming
- Modifications and adaptations of program
- Facilitation of inclusion

**Items with indicators or examples specific to children with disabilities**

<table>
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<tr>
<th>Focus of Indicators</th>
<th>Items</th>
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| Accessibility       | • Item 1: Indoor space  
|                     | • Item 4: Room arrangement for play  
|                     | • Item 7: Space for gross motor play  
|                     | • Item 12: Toileting/diapering |
| Adaptations and Modifications of Materials and Equipment | • Item 2: Furniture for routine care, play, and learning  
|                                                          | • Item 8: Gross motor equipment  
|                                                          | • Item 20: Art  
|                                                          | • Item 21: Music |
| Representation of People with Disabilities | • Item 15: Books and pictures  
|                                                   | • Item 24: Dramatic play  
|                                                   | • Item 28: Promoting acceptance of diversity |
| Facilitation of Participation in Activities | • Item 10: Meals and snacks  
|                                                  | • Item 16: Encouraging children to communicate  
|                                                  | • Item 18: Informal use of language  
|                                                  | • Item 29: Supervision of gross motor activities  
|                                                  | • Item 36: Group time |
The Quality of Inclusive Experiences Measure (QuIEM) (Wolery, Pauca, Brashers, & Grant, 2000) provides a comprehensive, individualized, assessment of the quality of inclusion through the use of seven subscales: (1) Program Goals and Purpose, (2) Staff Supports and Perceptions, (3) Accessibility and Adequacy of the Physical Environment, (4) Participation and Engagement, (5) Individualization, (6) Adult-Child Contacts and Relationships, and (7) Child-Child Contacts and Interactions.

The QuIEM is completed separately for each child with disabilities in a class through observation, interview, and document review. It can be used to improve services for a child with disabilities, to gather information for program evaluation, and to conduct research. It is intended to be used in conjunction with other global measures of classroom quality to provide a comprehensive assessment of the quality of the inclusive program.

SpeciaLink Child Care Inclusion Practices Profile and Principles Scale (Irwin, 2005) consists of two sub-scales for assessing the quality of an inclusive program. The SpeciaLink Child Care Inclusion Practices Profile is designed to rate the quality of the practices used to support inclusion and the SpeciaLink Child Care Inclusion Principles Scale is designed to assess the philosophy and commitment of the staff (e.g., director, teachers, assistants, support staff) toward inclusion. Both sub-scales are scored through observation, document review, and interviews with program staff.

The Inclusion Practices Profile consists of 11 items: (1) Physical environment and Special Needs, (2) Equipment and Materials, (3) Director and Inclusion, (4) Staff Support, (5) Staff Training, (6) Therapies, (7) Individual Program Plans, (8) Parents of Children with Special Needs, (9) Involvement of Typical Children, (10) Board of Directors and Other Similar Units, and (11) Preparing for Transition to School. The Inclusion Principles Scale consists of 6 items: (1) Zero Reject; (2) Natural Proportions; (3) Same Hours/Days of Attendance Available to All Children; (4) Full Participation; (5) Maximum Feasible Parent Participation at Parent’s Comfort Level; and (6) Leadership, Pro-active Strategies and Advocacy for High Quality, Inclusive Child Care. The items in the scale and profile are assessed using a rating scale with detailed indicators.
The National Professional Development Center on Inclusion (NPDCI) works with states to help them achieve a system of high quality, cross-sector professional development to support inclusion of young children with disabilities in early childhood settings. NPDCI offers states an integrated, facilitated sequence of planning and technical assistance to develop, implement and monitor a plan for professional development and inclusion, along with tools and products to support state efforts. NPDCI is devoted to collective learning and system improvements in professional development for early childhood inclusion.

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Visit http://community.fpg.unc.edu/npdci for more information.

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