

National Professional Development Center on Inclusion

Helping states achieve an integrated professional development system that supports high quality inclusion



Why Program Quality Matters for Early Childhood Inclusion

Recommendations for Professional Development

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The quality of the early childhood workforce¹ 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 NAEYC 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;³ 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.)

PROFESSIONAL DEVELOPMENT is facilitated teaching and learning experiences that are transactional and designed to support the acquisition of professional knowledge, skills, and dispositions as well as the application of this knowledge in practice. The key components of professional development include: (a) the characteristics and contexts of the learners (i.e., the “who” of professional development, including the characteristics and contexts of the learners and the children and families they serve); (b) content (i.e., the “what” of professional development; what professionals should know and be able to do, generally defined by professional competencies, standards, and credentials); and (c) the organization and facilitation of learning experiences (i.e., the “how” of professional development; the approaches, models, or methods used to support self-directed, experientially-oriented learning that is highly relevant to practice).

See *What Do We Mean by Professional Development in the Early Childhood Field* at <http://community.fpg.unc.edu/resources>

³ Current data from the U.S. Department of Education indicate that the majority of states are making some progress in serving children with disabilities in inclusive programs. Thirty-six states and territories reported serving 50% or more of their preschoolers with disabilities in regular education programs. The complete analysis can be found at U. S. Department of Education, Office of Special Education Programs. (Ed.). (2007). *Part B SPP/APR indicator analyses*. Available online at: http://www.rrfnetwork.org/images/stories/ERC/spp_mat/2007_Aug/part%20b%20spp-apr%20indicator%20analyses%2008-02-07.doc

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.⁴ 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.⁵

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.

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 February 2009.

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/IFSP⁶ goals, professional development). 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).

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-

zations, 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

Buysse, V., Winton, P. J., & Rous, B. (in press). Reaching consensus on a definition of professional development for the early childhood field. *Topics in Early Childhood Special Education*.

National Professional Development Center on Inclusion (NPDCI). (2008). *What do we mean by professional development in the early childhood field?* Chapel Hill: The University of North Carolina, FPG Child Development Institute, Author. Available at http://www1.fpg.unc.edu/community/npdci/assets/NDPCI-CoP_ProfessionalDevelopment_02-13-08.pdf

HIGH QUALITY INCLUSION

Buysse, V., Skinner, D., & Grant, S. (2001). Toward a definition of quality inclusion: Perspectives of parents and practitioners. *Journal of Early Intervention*, 24, 146-161.

Buysse, V., Wesley, P. W., Bryant, D., & Gardner, D. (1999). Quality of early childhood programs in inclusive and noninclusive settings. *Exceptional Children*, 65, 301-314.

Division for Early Childhood (DEC). (1993). *Inclusion* (Position statement). Missoula, MT: Author. Available in the DEC Web site at http://www.dec-sped.org/pdf/positionpapers/PositionStatement_Inclusion.pdf

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

HIGH QUALITY EARLY CHILDHOOD PROGRAMS

Bryant, D. M., Maxwell, K. L., & Burchinal, M. (1999). Effects of a community initiative on the quality of child care. *Early Childhood Research Quarterly*, 14, 449-464.

Division for Early Childhood (DEC). (2007). *Promoting positive outcomes for children with disabilities: Recommendations for curriculum, assessment, and program evaluation*. Missoula, MT: Author.

Early, D. M., Maxwell, K. L., Burchinal, M., Bender, R. H., Ebanks, C., Henry, G. T., et al. (2007). Teachers' education, classroom quality, and young children's academic skills: Results from seven studies of preschool programs. *Child Development*, 78, 558-580.

Gallagher, J. J., Rooney, R., & Campbell, S. (1999). Child care licensing regulations and child care quality in four states. *Early Childhood Research Quarterly*, 14, 313-333.

Howes, C., Phillips, D. A., & Whitebrook, M. (1992). Thresholds of quality: Implications for the social development of children in center-based care. *Child Development*, 63, 449-460.

La Paro, K. M., Sexton, D., & Snyder, P. (1998). Program quality characteristics in segregated and inclusive early childhood settings. *Early Childhood Research Quarterly*, 13, 151-168.

National Early Childhood Accountability Task Force. (n.d.). *Taking stock: Assessing and improving early childhood learning and program quality*. On the Web at http://www.pewtrusts.org/uploadedFiles/wwwpewtrustsorg/Reports/Pre-k_education/task_force_report1.pdf

- Peisner-Feinberg, E. S., Burchinal, M. R., Clifford, R. M., Culkin, M. L., Howes, C., Kagan, S. L., & Yazejian, N. (2001). The relation of preschool child-care quality to children's cognitive and social development through second grade. *Child Development, 72*, 1534-1553.
- Phillipson, L. C., Burchinal, M. R., Howes, C., & Cryer, D. (1997). The prediction of process quality from structural features of child care. *Early Childhood Research Quarterly, 12*, 281-303.
- Tout, K., Zaslow, M., & Berry, D. (2005). Quality and qualifications: Links between professional development and quality in early care and education settings. In M. Zaslow, & I. Martinez-Beck (Eds.), *Critical issues in early childhood professional development* (pp. 77-110). Baltimore: Brookes.

QUALITY MEASURES

- Cryer, D., Harms, T., & Riley, C. (2003). *All about the ECERS-R: A detailed guide in words and pictures*. Lewisville, NC: Kaplan.
- 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.
- Environment Rating Scales. Web site at <http://www.fpg.unc.edu/~ecers>
- Halle, T., & Vick, J. E. (2007). *Quality in early childhood care and education settings: A compendium of measures*. Washington, DC: Child Trends. On their Web site at <http://www.childcareresearch.org/SendPdf?resourceId=13403>
- Harms, T., Clifford, R., & Cryer, D. (2005). *Early childhood environment rating scale (ECERS-R)* (Rev. ed.). New York: Teachers College Press.
- 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.
- Pianta, R. C., LeParo, K. M., & Hamre, B. K. (2008). *Classroom Assessment Scoring System (CLASS) manual*. Baltimore: Brookes.
- Wolery, M., Pauca, T., Brashers, M. S., & Grant, S. (2000). *Quality of inclusive experiences measure (QuIEM)*. Unpublished manuscript.

QUALITY RATING AND IMPROVEMENT SYSTEMS

- McDonald, D. (2007, December). *Elevating the field: Using NAEYC early childhood program accreditation to support and reach higher quality in early childhood programs*. Washington, DC: National Association for the Education of Young Children. Available on their Web site at <http://www.naeyc.org/policy/state/pdf/NAEYCpubpolReport.pdf>
- Mitchell, A. W. (2005, July). *Stair steps to quality: A guide for states and communities developing quality rating systems for early care and education*. Alexandria, VA: United Way of America Success by 6.
- 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>
- Zellman, G. L., & Perlman, M. (2008). *Child-care quality rating and improvement systems in five pioneer states: Implementation issues and lessons learned*. Santa Monica, CA: Rand Corporation. On the Web at http://www.rand.org/pubs/monographs/2008/RAND_MG795.pdf

STATE AND NATIONAL PROGRAM QUALITY STANDARDS AND PRACTICE GUIDELINES

Bredekamp, S., & Copple, C. (Eds.). (1997). *Developmentally appropriate practice in early childhood programs* (Rev. ed.). Washington, DC: National Association for the Education of Young Children.

Council of Chief State School Officers (CCSSO) State collaborative on early childhood education assessment (ECEA-SCASS). *State early learning standards and early childhood program standards birth to third grade*. On their Web site at http://www.ccsso.org/content/PDFs/State_ECstandardsMATRIX11.27.07.pdf

Head Start Program Performance Standards

<http://eclk.ohs.acf.hhs.gov/hslc/Program%20Design%20and%20Management/Head%20Start%20Requirements/Head%20Start%20Requirements>

NAEYC Early Childhood Program Standards and Accreditation Criteria

<http://www.naeyc.org/academy/standards/>

Sandall, S., Hemmeter, M. L., Smith, B. J., & McLean, M. E. (Eds.). (2005). *DEC recommended practices: A comprehensive guide for practical application in early intervention/early childhood special education*. Longmont, CO: Sopris West.

TIERED APPROACHES IN EARLY CHILDHOOD

Barnett, D. W., Elliott, N., Wolsing, L., Bunger, C. E., Haski, McKissick, H., & Vander Meer, C. D. (2006). Response to intervention for young children with extremely challenging behaviors: What it might look like. *School Psychology Review, 35*, 568-582.

Brown, W. H., Odom, S. L., & Conroy, M. A. (2001). An intervention hierarchy for promoting preschool children's peer interactions in natural environments. *Topics in Early Childhood Special Education, 21*, 162-175.

Coleman, M. R., Buysse, V., & Neitzel, J. (2006). *Recognition and response: An early intervening system for young children at-risk for learning disabilities. Full report*. Chapel Hill: The University of North Carolina, FPG Child Development Institute.

Hemmeter, M. L., Ostrosky, M., & Fox, L. (2006). Social and emotional foundations for early learning: A conceptual model for intervention. *School Psychology Review, 35*, 583-601.

Recognition and Response implementation guide. (2008). Chapel Hill: The University of North Carolina, FPG Child Development Institute. On the Web at <http://www.fpg.unc.edu/~randr>.

Sandall, S. R., & Schwartz, I. S. (2002). *Building blocks for teaching preschoolers with special needs*. Baltimore: Brookes.

School Psychology Review, Vol. 35, #4.

Wolery, M. (2005). DEC recommended practices: Child-focused practices. In S. Sandall, M. L. Hemmeter, B. J. Smith, & M. E. McLean (Eds.), *DEC recommended practices: A comprehensive guide for practical application in early intervention/early childhood special education* (pp. 71-99). Longmont, CO: Sopris West.

UNIVERSAL DESIGN FOR LEARNING

Center for Applied Special Technology. (2007). *Universal design for learning*. On their Web site at <http://www.cast.org/>

Appendix B: Key Features of QRIS in 15 States

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
CO	2000	Qualistar Rating System www.qualistar.org	5-level system (Star 4, Star 3, Star 2, Star 1, Provisional); mandatory for some providers and voluntary for others	Learning environment Family partnerships Training and education Staff/child ratios and group size Accreditation	ECERS-R ITERS FDCRS Classroom Environment Tool ^a Accreditation by an approved organization ^b	
IL	2007	The Quality Counts: QRIS http://www.inccrra.org/overview.aspx?id=3801	4-star voluntary system for licensed centers and licensed family/group home child care providers	Learning environment Program administration Provider qualifications and training	ECERS-R ITERS-R FCCERS-R SACERS Accreditation by an approved organization Head Start validation BAS ^c PAS ^d	
			Voluntary system of 3 training tiers for license-exempt family child care providers	Training topics: Child growth and development Health, nutrition, and safety issues for group care Observation and guidance Learning happens in relationships Family and community relationships Personal and professional development		

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
IN	2008	Paths to Quality http://www.in.gov/fssa/2554.htm	4-level voluntary system, with Level 1 meeting licensing/ registration standards	Health and safety needs are met Environment supports children's learning Planned curriculum supports children's development Accreditation	Accreditation by an approved organization	Levels 3 and 4 require that written plans and environmental accommodations 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.
IA	2006	Iowa's Quality Rating System www.dhs.state.ia.us/iqrs/	5- level voluntary system, with Level 1 meeting licensing standards (centers)/ registration with the Department of Human Services (homes)	For levels 3 – 5: Professional development Health and safety Environment Family and community partnership Leadership and administration	ECERS ITERS FDCRS SACERS Accreditation by an approved organization Head Start Program Performance Standards	
KY	2001	STARS for KIDS (Kentucky Invests in Developing Success) NOW Child Care Quality Rating System www.kde.state.ky.us/KDE/Instructional+Resources/Early+Childhood+Development/SARS++for+KIDS+NOW+%28Quality+Rating+System%29.htm	4-star voluntary system, with all star levels exceeding minimum licensing requirements	Staff/child ratios Group size Curriculum Parent involvement Training/education of staff Regulatory compliance Personnel practices	ECERS-R ITERS FDCRS Accreditation by an approved organization	

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
ME	2008	Quality for ME http://www.maine.gov/dhhs/ocfs/ec/occhs/qualityforme.htm	4-step voluntary system, with Step 1 meeting minimum licensing standards	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	ECERS-R ITERS-R FDCRS SACERS Accreditation by an approved organization Head Start Program Performance Standards High Scope	
MT	2002	Star Quality Rating System www.dphhs.mt.gov/programsservices/starqualitychildcare.shtml	3-level system (2-Star, 1-Star, Licensed/Registered)	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	Accreditation by an approved organization	

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
NH	2006	Licensed Plus www.dhhs.state.nh.us/DHHS/CDB/licensedplus.htm	3-level voluntary system (Accreditation, Licensed Plus, Licensed)	Licensed Plus Standards:^e Regulation Administration and business practices Learning environment Parent/family involvement Children with special needs Professional development Staff qualifications and compensation Program evaluation	ECERS-R ECERS ITERS-R ITERS FDCRS SACERS	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.
NM	2005	Look for the Stars www.newmexicokids.org/caregivers	5-star system, with 1-Star meeting minimum licensing requirements	Staff training and education Environment Daily learning activities Family involvement Assessment Staff/child ratios and group size	ECERS-R ITERS-R FDCRS SACERS Accreditation by an approved organization	Listed under standards category: Environment For 2 Stars, learning centers must include modifications to meet any special needs. Listed under standards category: Curriculum and Assessment of Children's Progress 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.

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
NC	1999	North Carolina Star Rated License http://ncchildcare.dhhs.state.nc.us/providers/pv_sn2_ov_sr.asp	5-star voluntary system, with 1-Star meeting minimum licensing requirements	Program standards (e.g., personnel policies, classroom activity areas, staff/child ratios) Staff education (e.g., credentials, coursework, experience) ^f	ECERS-R ITERS-R FDCRS SACERS	
OH	2006	Step Up to Quality www.stepuptoquality.org	3-step voluntary system for child care centers, with all steps exceeding Ohio's state licensing regulations	Staff/child ratios and group size Staff education and qualifications Specialized training Administrative practices Early learning ^g	ECERS-R ELLCO ITERS SACERS Accreditation by an approved organization	Listed under the standards category: Early Learning 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.
OK	1998	Reaching for the Stars www.okdhs.org/programsandservices/cc/stars	4-level system (3-Star, 2-Star, 1-Star Plus, and 1-Star), with 1-Star meeting minimum licensing requirements	Licensing compliance status Administrative policies Director qualifications Learning environment Staff/child ratios Staff education/ master teacher qualifications Staff compensation Parent involvement Program evaluation Accreditation	ECERS ITERS FDCRS SACERS Accreditation by an approved organization	

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
PA	2002	Keystone STARS (Standards, Training/Professional Development, Assistance, Resources, and Support) http://www.dpw.state.pa.us/PartnersProviders/ChildCareEarlyEd/KeyStoneStarChildCare/	5-level system (Star 4, Star 3, Star 2, Star 1, Start with STARS)	Staff qualifications and professional development Early learning program Partnerships with family and community Leadership and management	ECERS-R ITERS-R FCCERS-R SACERS Accreditation by an approved organization	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.

State	Start Date	Title of QRIS and Website	System	QRIS Standards	Standardized Accountability Measures	Standards Relating to Including Children with Disabilities
TN	2001	Child Care Evaluation and Report Card Program http://www.tnstarquality.org/html/report_cards.htm	4 levels on report card for each area under QRIS Standards; mandatory system	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	ECERS-R ITERS-R FDCRS SACERS	
		Star-Quality Child Care Program http://www.tnstarquality.org/html/star-quality.htm	3-star voluntary system	Family and group home standards: Caregiver training and education Compliance history Parent and family involvement Business management practices Program assessment		
VT	2003	STARS (STep Ahead Recognition System) www.STARSstepahead.org	5-star voluntary system, with all star levels exceeding basic regulatory standards	Compliance history Qualifications and training Families and community Program assessment Administration ^h	Accreditation by an approved organization	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.

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> States with a tiered reimbursement system, but without a QRIS were not included in this appendix.

QRIS—Quality Rating and Improvement System

ECERS-R—Early Childhood Environment Rating Scale, Revised Edition (Harms, Clifford, & Cryer, 2005)

ELLCO—Early Language and Literacy Classroom Observation (Smith, 2002)

ITERS-R—Infant/Toddler Environment Rating Scale, Revised Edition (Harms, Cryer, & Clifford, 2003)

ITERS—Infant/Toddler Environment Rating Scale (Harms, Cryer, & Clifford, 1990)

FCCERS-R—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

Focus of Indicators	Items
<ul style="list-style-type: none"> • Accessibility 	<ul style="list-style-type: none"> • Item 1: Indoor space • Item 4: Room arrangement for play • Item 7: Space for gross motor play • Item 12: Toileting/diapering
<ul style="list-style-type: none"> • Adaptations and Modifications of Materials and Equipment 	<ul style="list-style-type: none"> • Item 2: Furniture for routine care, play, and learning • Item 8: Gross motor equipment • Item 20: Art • Item 21: Music
<ul style="list-style-type: none"> • Representation of People with Disabilities 	<ul style="list-style-type: none"> • Item 15: Books and pictures • Item 24: Dramatic play • Item 28: Promoting acceptance of diversity
<ul style="list-style-type: none"> • Facilitation of Participation in Activities 	<ul style="list-style-type: none"> • 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

Measures to Assess the Quality of Early Childhood Inclusion

The Quality of Inclusive Experiences Measure (QuEM) (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 QuEM 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.

National Professional Development Center on Inclusion

Helping states achieve an integrated professional development system that supports high quality inclusion

Pam Winton, Principal Investigator
Virginia Buysse, Camille Catlett, & Shelley deFosset, Co-Principal Investigators

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.

NPDCI is a project of the FPG Child Development Institute at the University of North Carolina at Chapel Hill and is funded by the Office of Special Education Programs at the US Department of Education.

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

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