
Working Together for Children and Families

Findings from the National Descriptive Study of Early Head Start-Child Care Partnerships

Presentation at the Executive Directors Consortium (EDC) of Head Start Annual Meeting

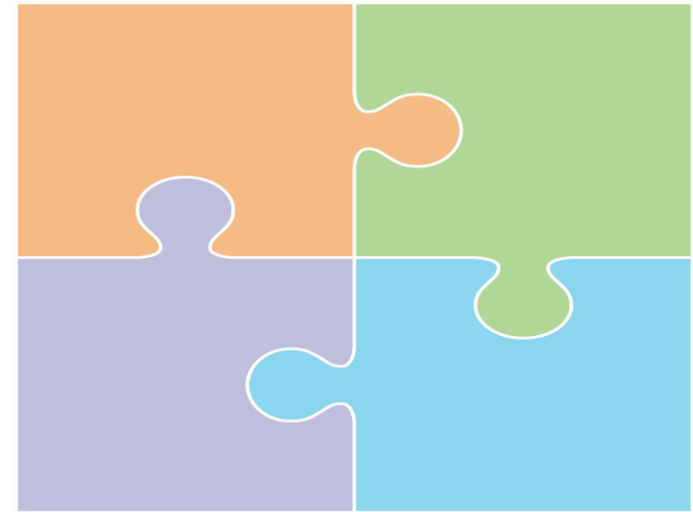
Washington, DC

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Patricia Del Grosso • Jaime Thomas

The promise of partnerships

- Offer opportunities to increase providers' competencies and credentials, assure ongoing support and coaching, provide materials and supplies, and help to ensure that providers meet high standards
- Partners work together and may combine funds, resources, materials, and staff to
 - Serve additional children
 - Provide comprehensive services
 - Enhance service quality
 - Provide full-day, full-year ECE
 - Better meet families' needs



Early Head Start-Child Care Partnership grants

- First cohort awarded in FY 2015 by ACF
- Included 275 Early Head Start-Child Care (EHS-CC) Partnership and Expansion grants
- Aim to promote comprehensive services and high quality early learning opportunities



Terminology

“Partnership grantee” = Organization that received an EHS-CC Partnership grant award in which some or all of the enrollment slots are administered through child care partners

“Child care partner” = Child care center or family child care home that partners with a grantee to provide services to enrolled infants and toddlers

“Partnership program” = A grantee and all of the child care partners that work together to provide services to enrolled families and their infants and toddlers

National Descriptive Study of EHS-CC Partnerships

- **Funded by OPRE**
- **Purpose: Learn about the characteristics and activities of partnership programs that aim to improve professional development and service quality to better meet families' needs**



Study design

Primary research topics

- **Characteristics of partnership programs (grantees and child care partners)**
- **Activities to develop and maintain partnerships**
- **Comprehensive services for children and families**
- **Quality improvement activities**
- **Funding allocated and used to support partnership programs**
- **Family experiences with partnership services**

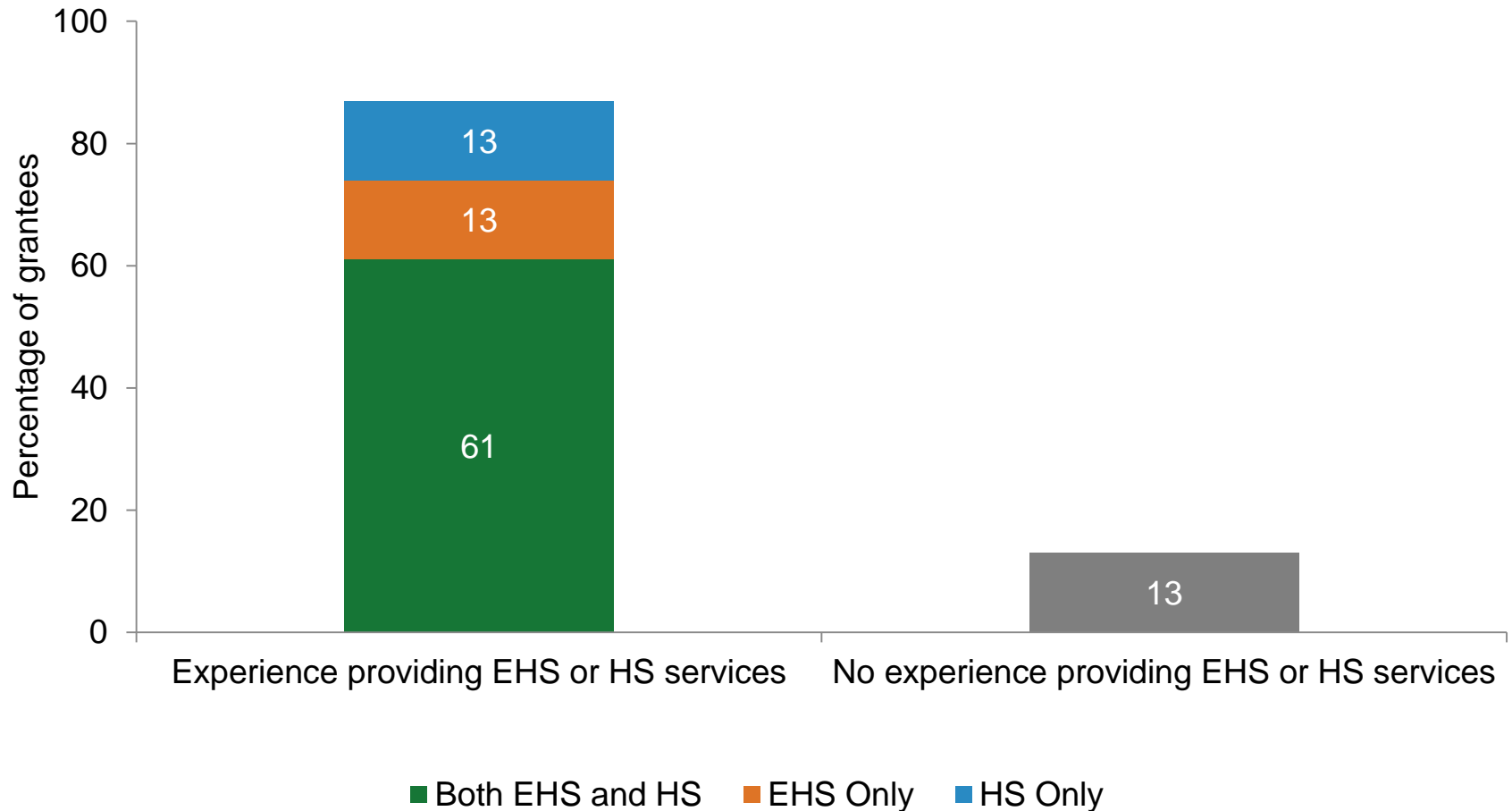
Study components

- **Web-based survey of partnership grantees**
 - Conducted about one year after grant award
 - 220 of 250 grantees completed the survey (88%)
 - Identified 1,892 child care partners
- **Web-based survey of randomly selected group of child care partners**
 - 386 of 470 randomly selected child care partners completed the survey (82%)
- **Case studies of 10 partnership programs**
 - Site visits to conduct interviews and focus groups with grantee and child care partner staff and parents



Characteristics of partnership programs

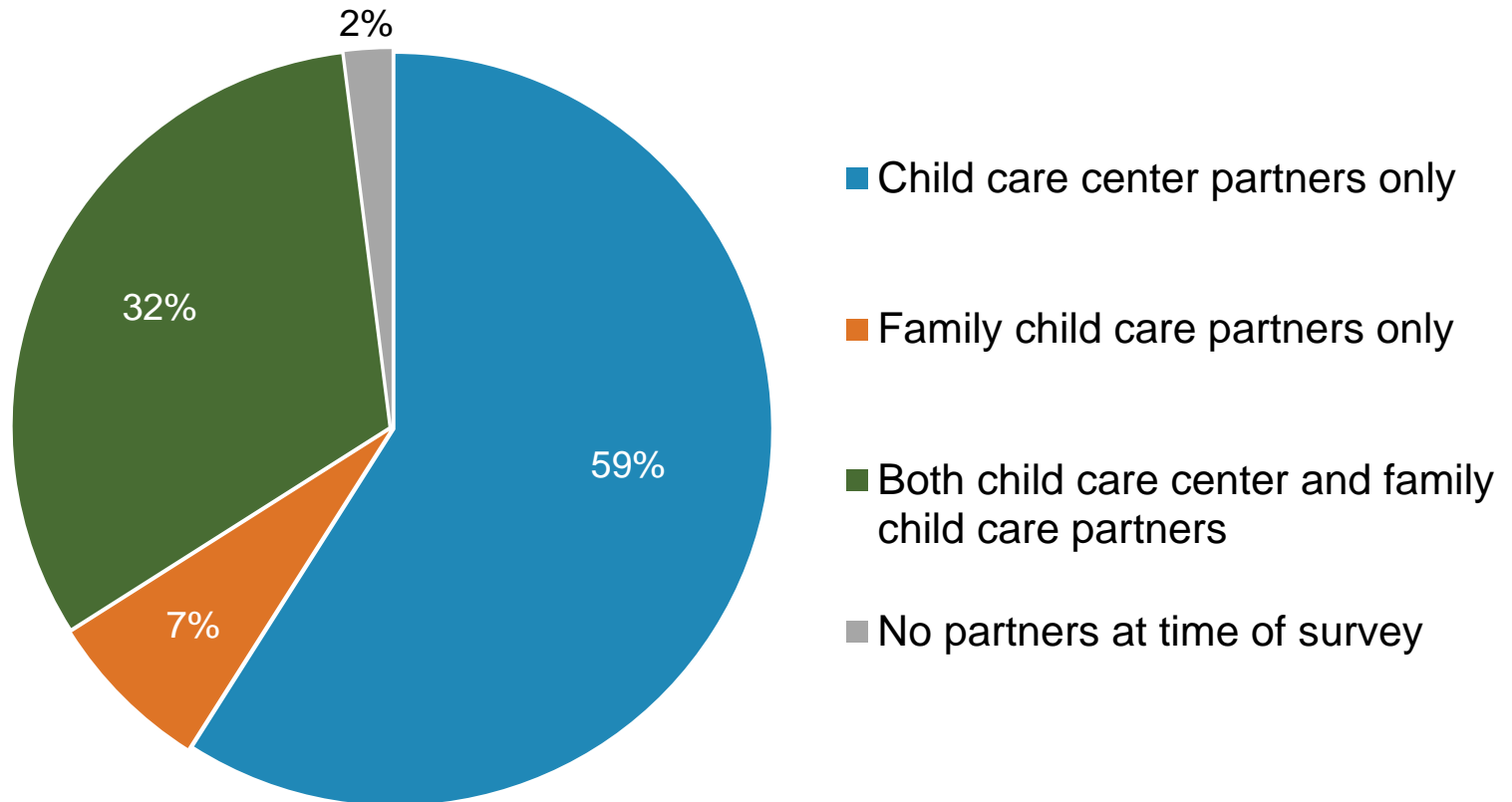
Most grantees had experience providing Early Head Start and Head Start services



Source: EHS-CC Partnership Grantee and Delegate Agency Director Survey.

Note: N = 220.

Most grantees partnered with child care centers



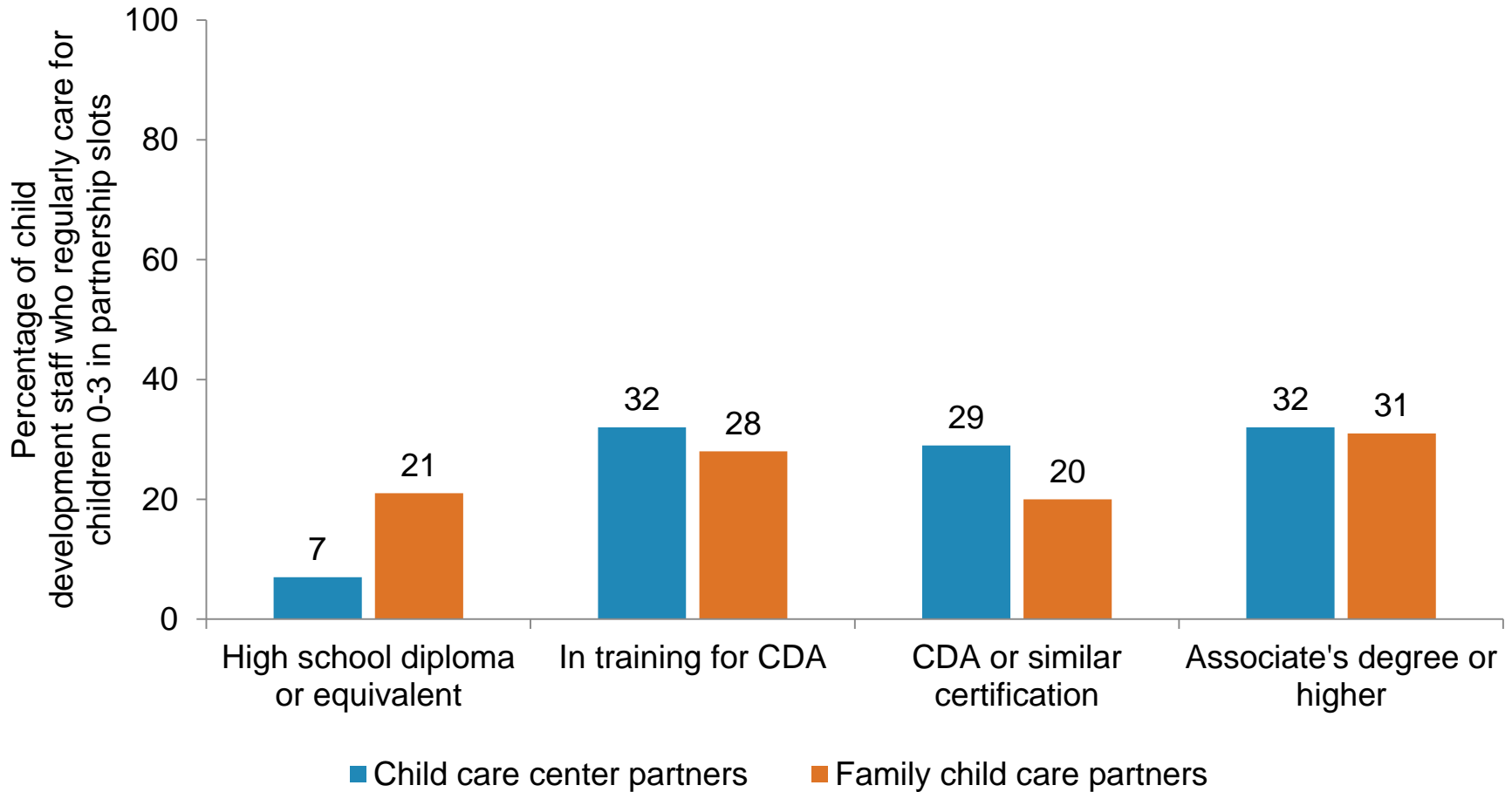
Source: EHS-CC Partnership Grantee and Delegate Agency Director Survey.

Note: N = 220.

Lessons from the case studies: Recruiting child care partners

- **Looked for partners that offered or seemed to have the capacity to offer quality care**
 - QRIS ratings, input from local licensing agencies, visits to providers to informally observe quality
- **Formed partnerships with child care providers that they had relationships with**
- **Conducted in-person, one-on-one meetings with child care providers to**
 - Describe opportunities and expectations of the partnerships,
 - Address providers' concerns, and
 - Discuss providers' capacity to meet the requirements

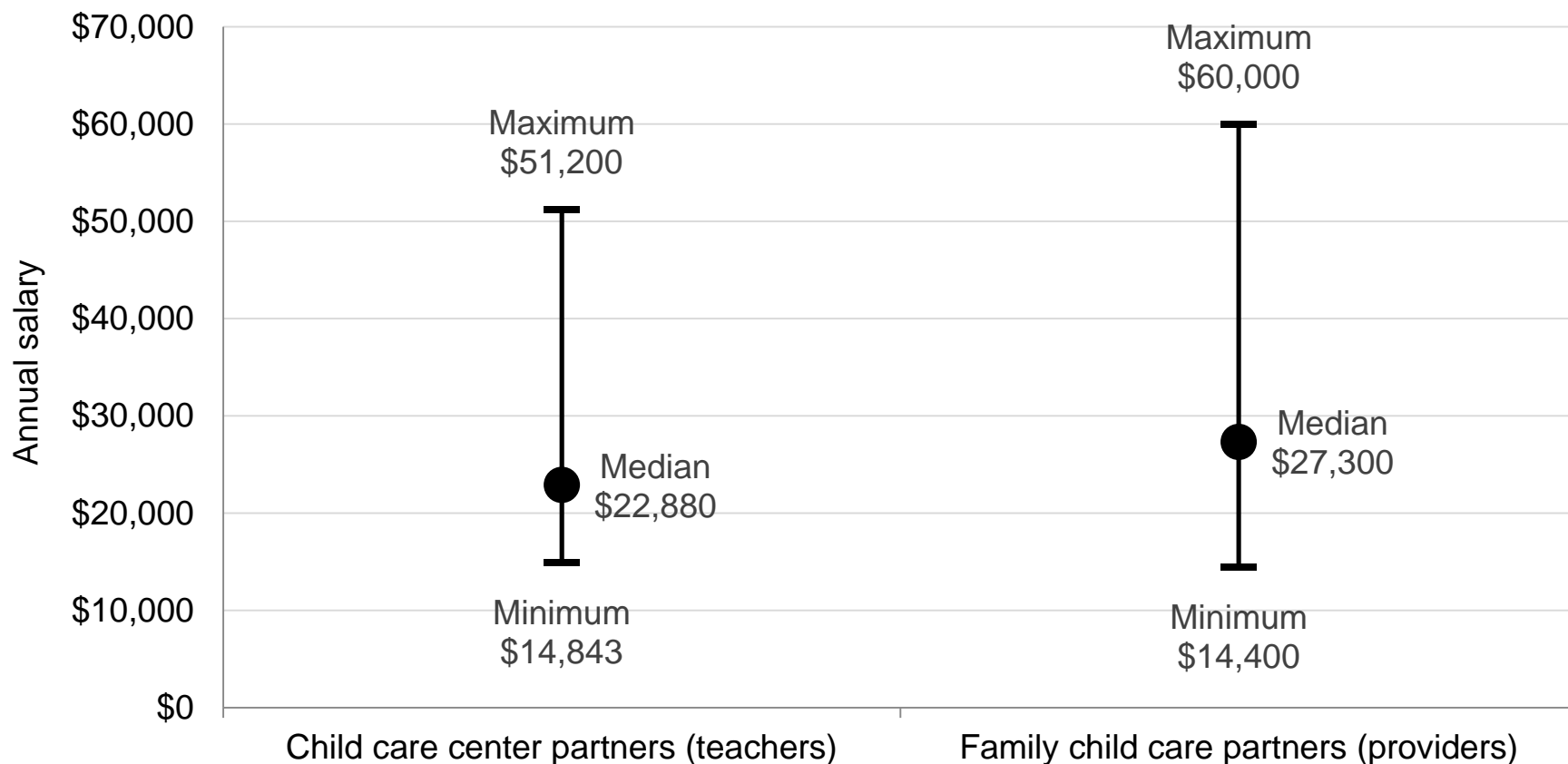
Most child care partner staff had a CDA or higher certification, or were in training



Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

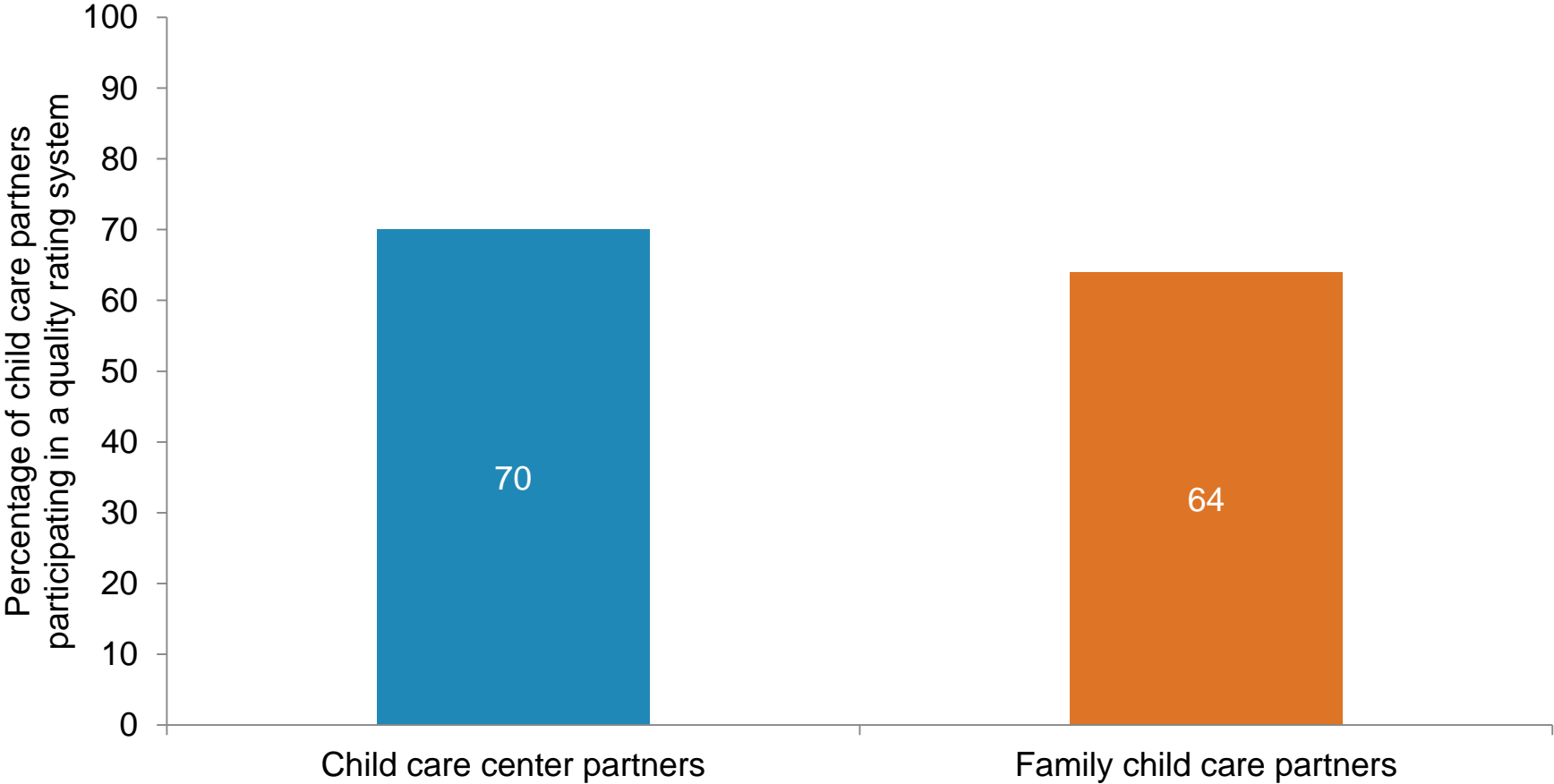
The median staff salary was about \$24,000 per year



Source: EHS-CC Partnership Child Care Partner Survey

Note: N = 386.

Most child care partners participated in a quality rating system



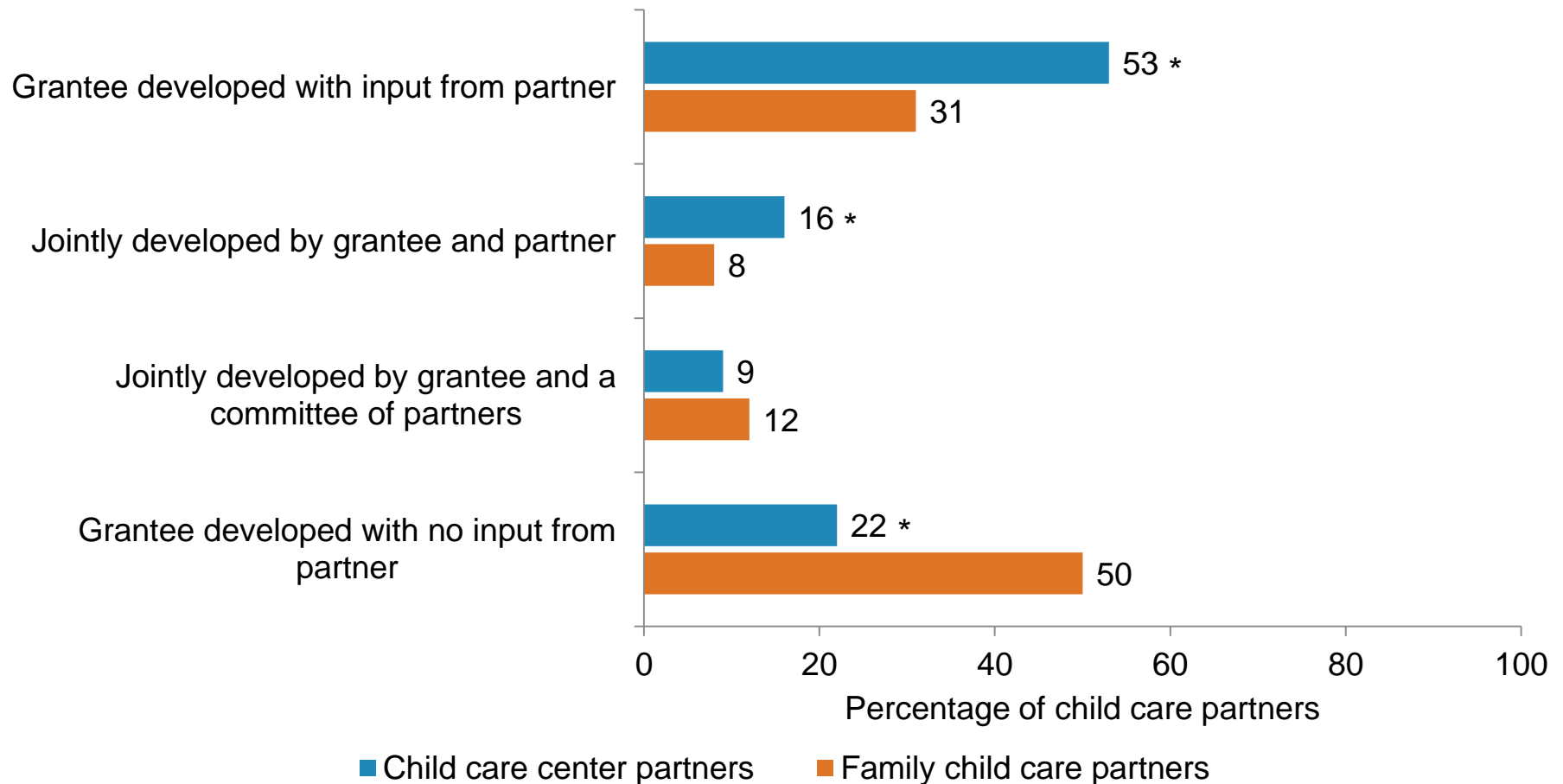
Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

A photograph of a woman with long brown hair, wearing a white and blue striped short-sleeved shirt, smiling warmly. She is holding a young child with dark hair, wearing a pink floral dress, who is looking directly at the camera. The background is a plain, light color.

Activities to develop and maintain partnerships

Grantees often developed partnership agreements with input from child care center partners



Source: EHS-CC Partnership Grantee and Delegate Agency Director Survey

Note: N = 470.

* Percentages differ significantly between child care center partners and family child care partners at the 0.05 level, two-tailed test.

Lessons from the case studies

- Involving child care partners in the process of developing partnership agreements facilitated buy-in among partners



Nearly all grantees reported holding regular meetings with lead child care partner staff

Process to support quality relationships	Percentage of grantees
Held regular meetings with lead staff	98%
Participated in discussions with frontline staff	84%
Reviewed the partnership agreement	73%
Conducted staff surveys	28%
Other	19%
Had no processes in place	1%

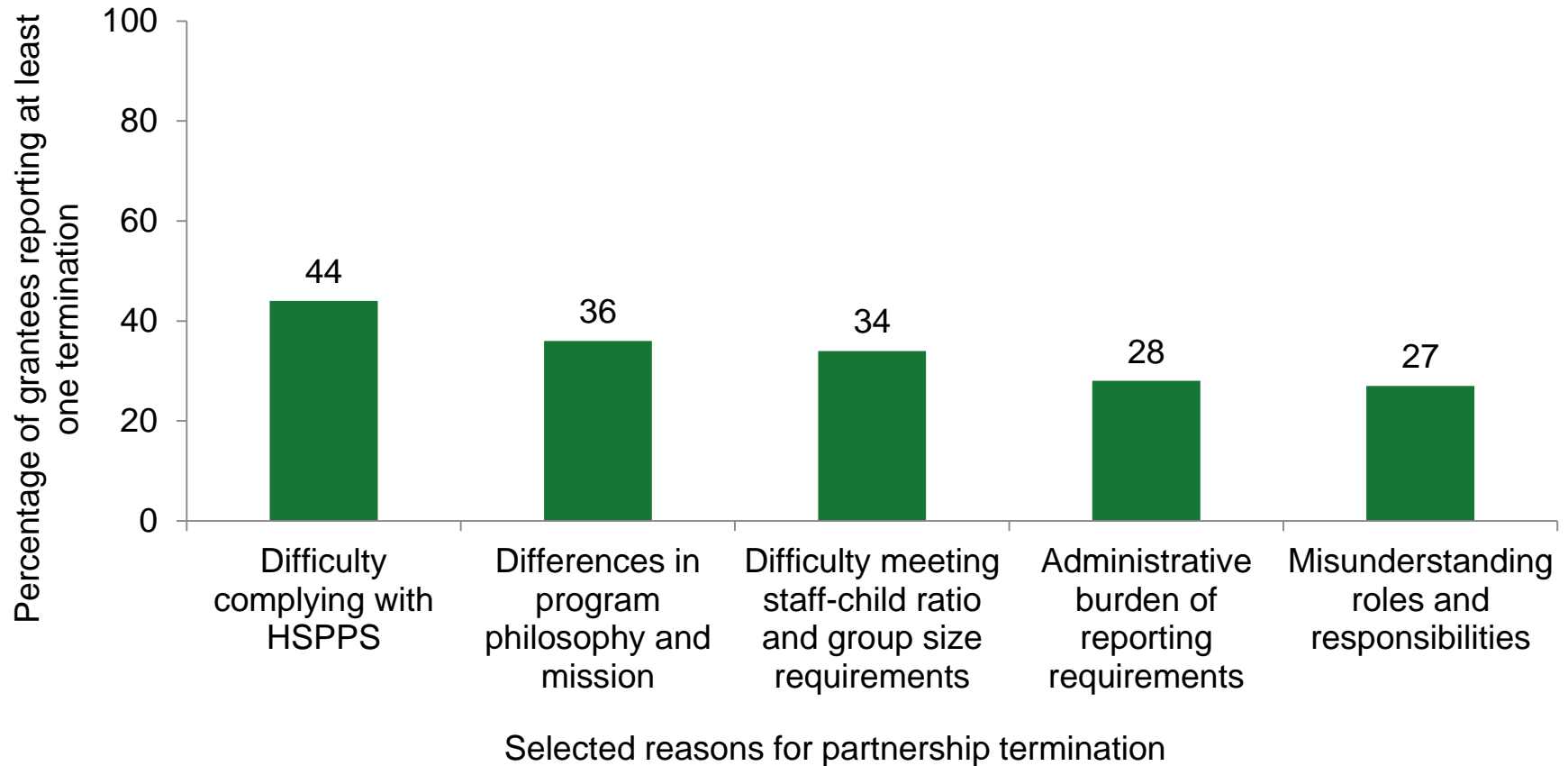
Source: EHS-CC Partnership Grantee and Delegate Agency Director Survey.

Note: N = 220.

Lessons from the case studies: Communication

- **To address communication challenges, grantees and child care partners**
 - Held regularly scheduled meetings
 - Established communication protocols
 - Engaged in frequent informal communication
- **Making program decisions in collaboration with child care partners, rather than unilaterally, led to smoother partnerships**
- **Setting clear and realistic expectations about partnership program requirements and benefits facilitated more positive relationships**

One-third of grantees had terminated at least one partnership; they reported a range of reasons



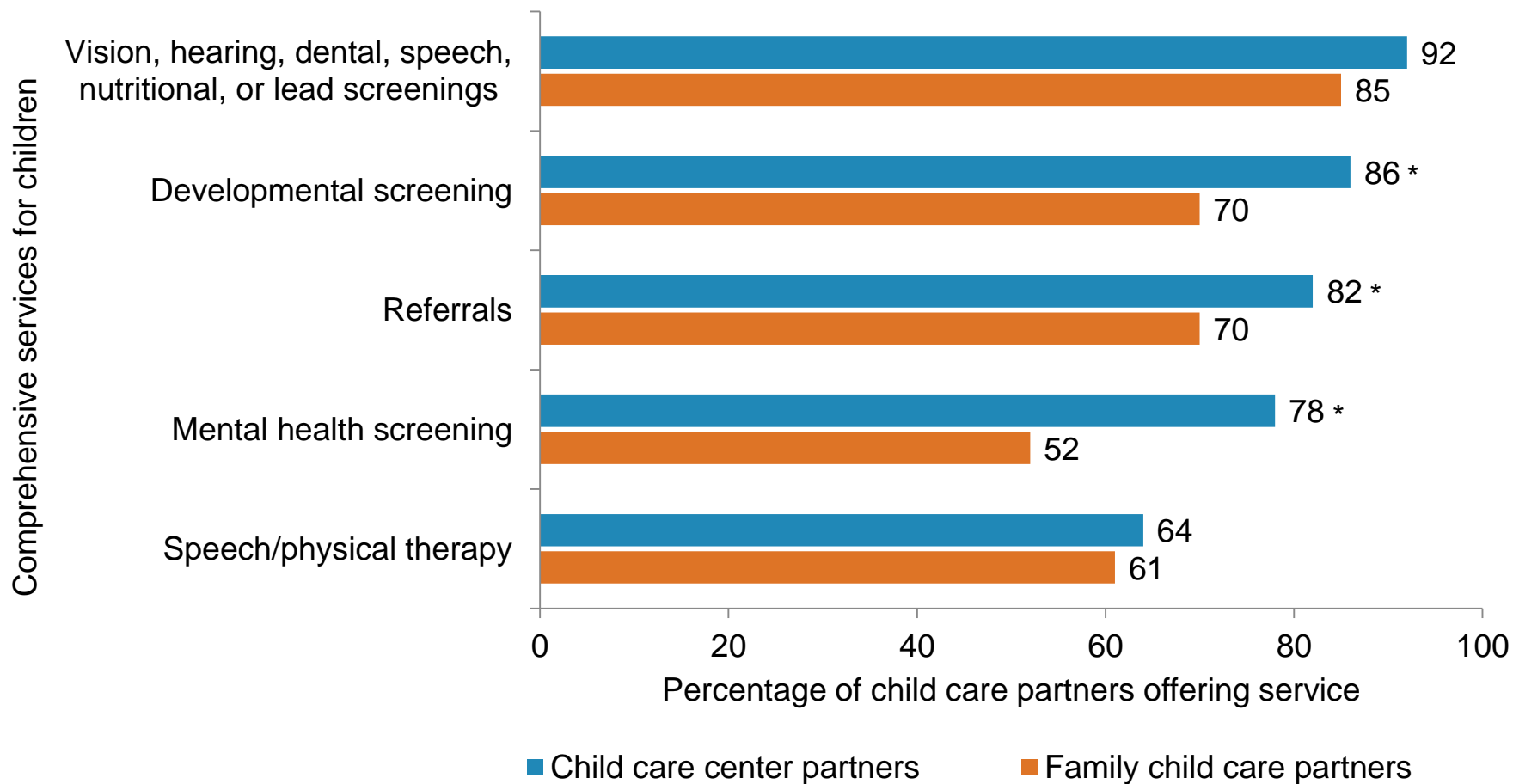
Source: EHS-CC Partnership Grantee and Delegate Agency Director Survey.

Note: N = 220. Percentages are expressed as the share of the 70 grantees that reported terminating partnerships.



Offering comprehensive services

Child care partners provided a wide array of services to children in partnership slots

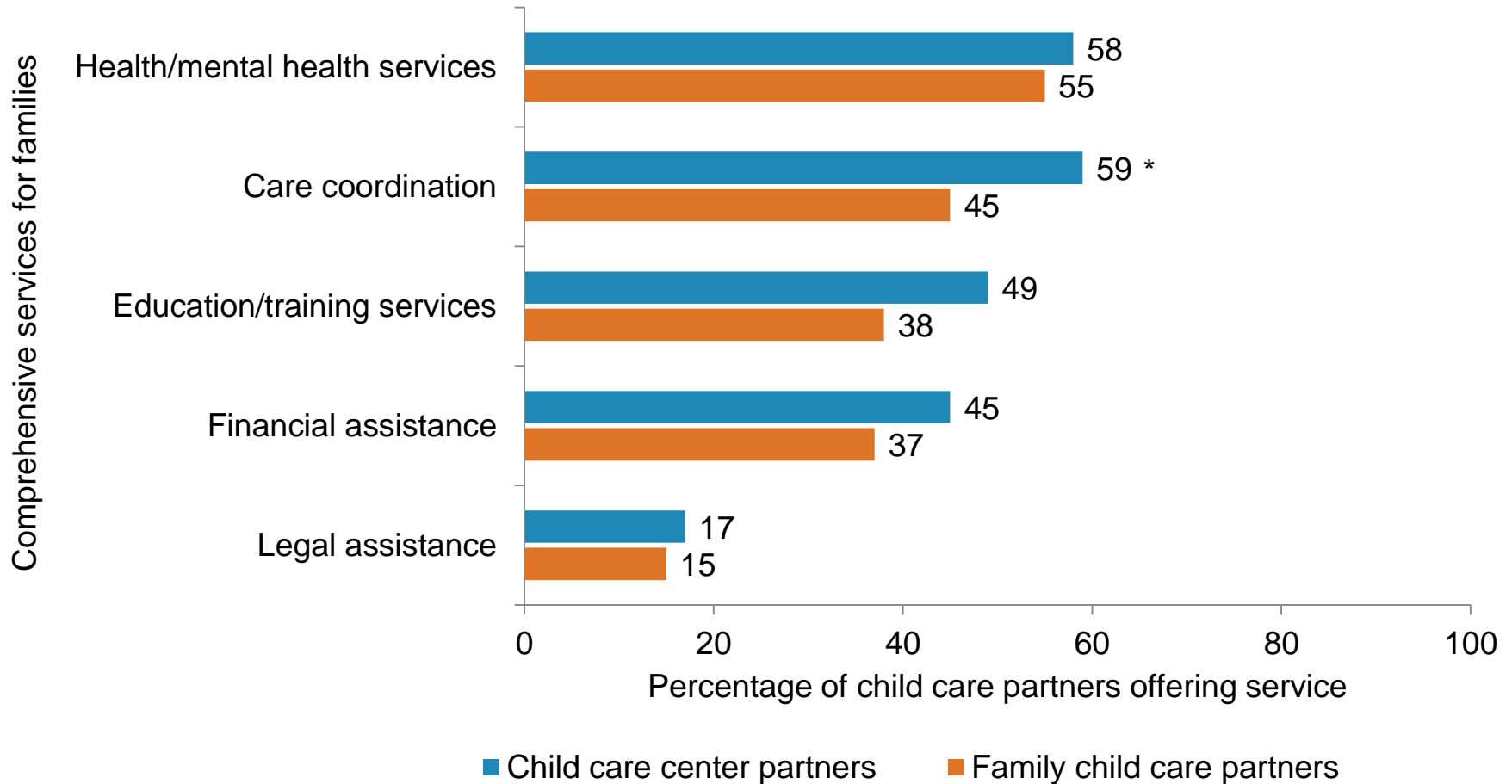


Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

* Percentages differ significantly between child care center partners and family child care partners at the 0.05 level, two-tailed test.

Child care partners provided a range of services to families of children in partnership slots



Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

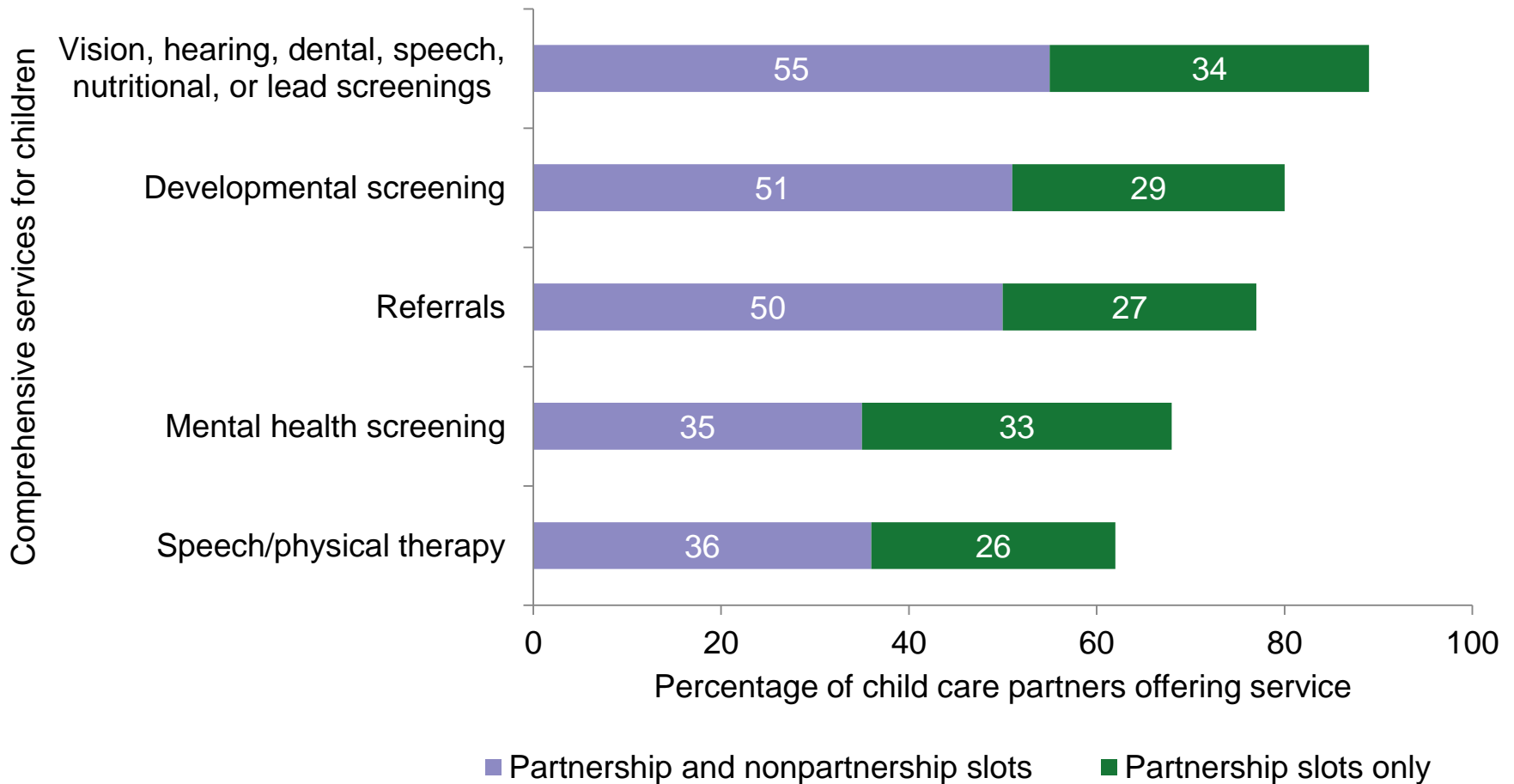
* Percentages differ significantly between child care center partners and family child care partners at the 0.05 level, two-tailed test.

Partnership and nonpartnership slots

“Partnership slot” = Enrollment slot funded by EHS-CC Partnership grant funds

“Nonpartnership slot” = Enrollment slot funded by a source other than EHS-CC Partnership grant funds

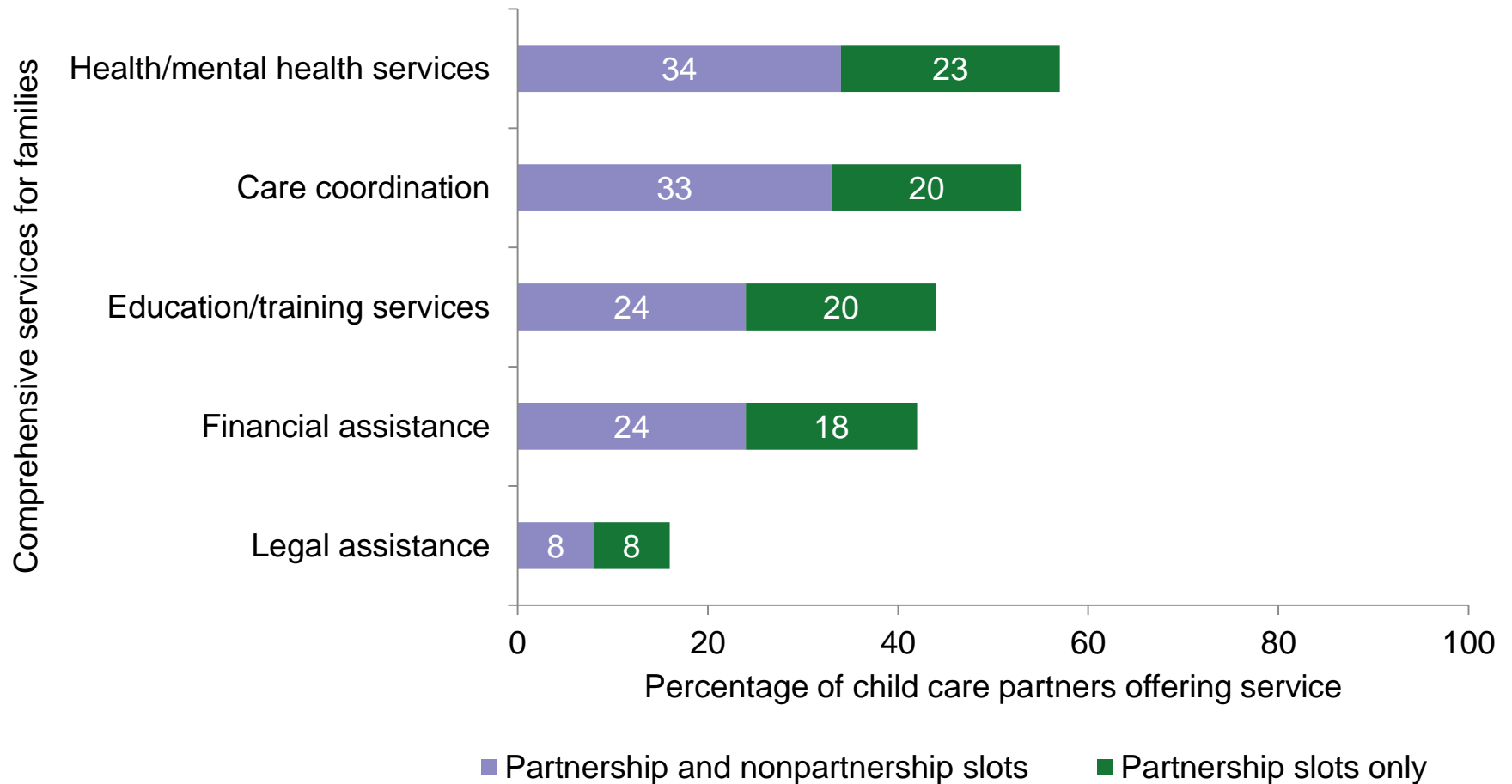
Many child care partners provided services to children in partnership and nonpartnership slots



Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

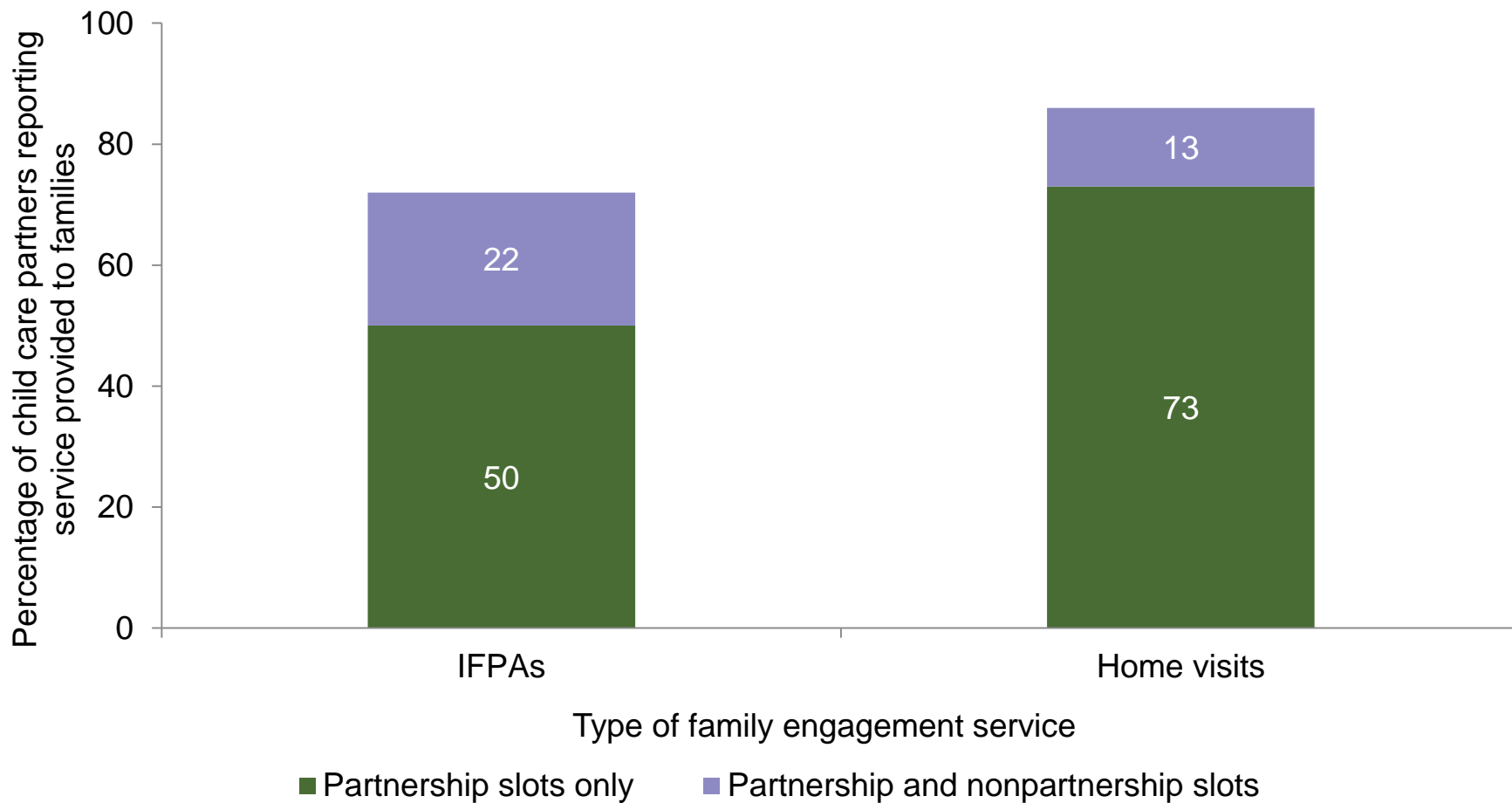
Many child care partners provided services to families of children in nonpartnership slots



Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

Most child care partners provided IFPAs and home visits to families in partnership slots



Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

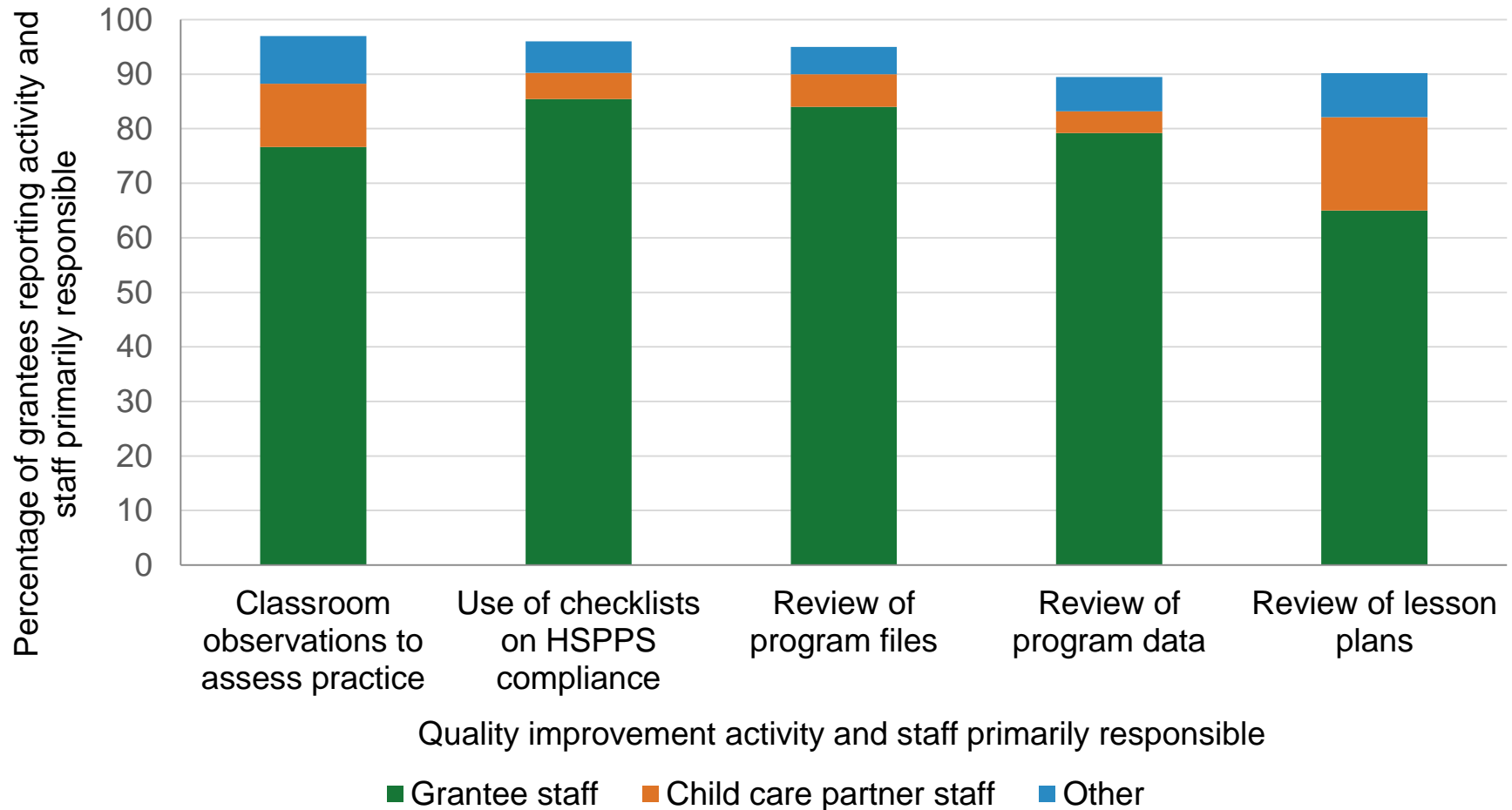


Offering quality child development services

Lessons from the case studies: Most challenging aspects of meeting the HSPPS

- **Grantees and child care partners identified these HSPPS as the most challenging to meet**
 - **Staff-child ratio requirements**
 - **Health and safety requirements**
- **Child care partner staff found it challenging to make time for the paperwork and documentation required for the partnership**

Nearly all grantees conducted QI activities with partners; grantee staff were primarily responsible



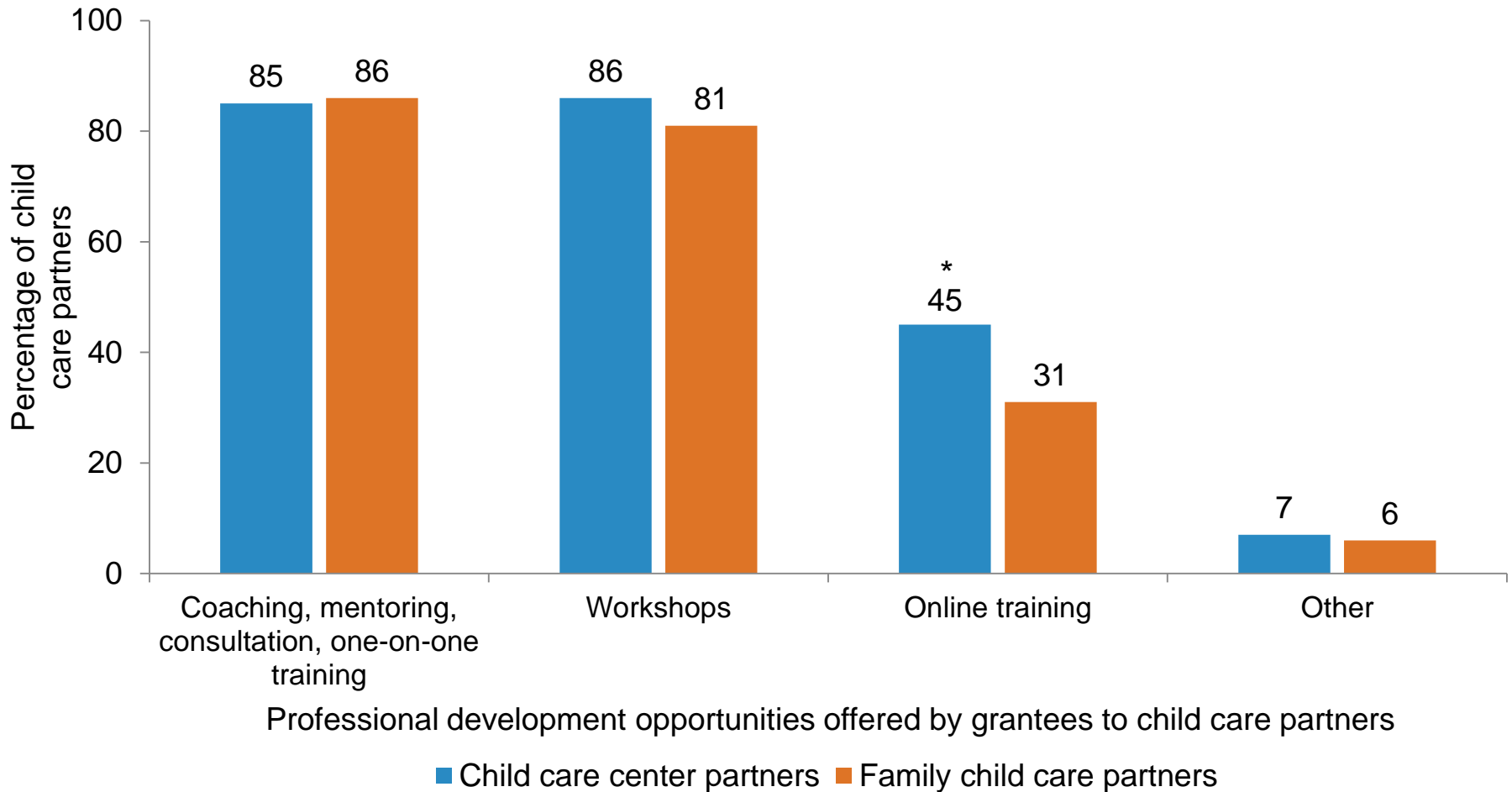
Source: EHS-CC Partnership Grantee and Delegate Agency Director Survey.

Note: N = 220.

Lessons from the case studies: Identifying and addressing quality improvement needs

- **Getting buy-in from and building a relationship with child care partners made it easier for grantees to give feedback about changes that partners had to make to meet the HSPPS**
- **Actively involving the child care partners in the assessment or monitoring process helped grantees ensure that plans were tailored appropriately to the specific circumstances and needs of each partner**

Most child care partners received coaching and attended workshops offered by grantees



Source: EHS-CC Partnership Child Care Partner Survey.

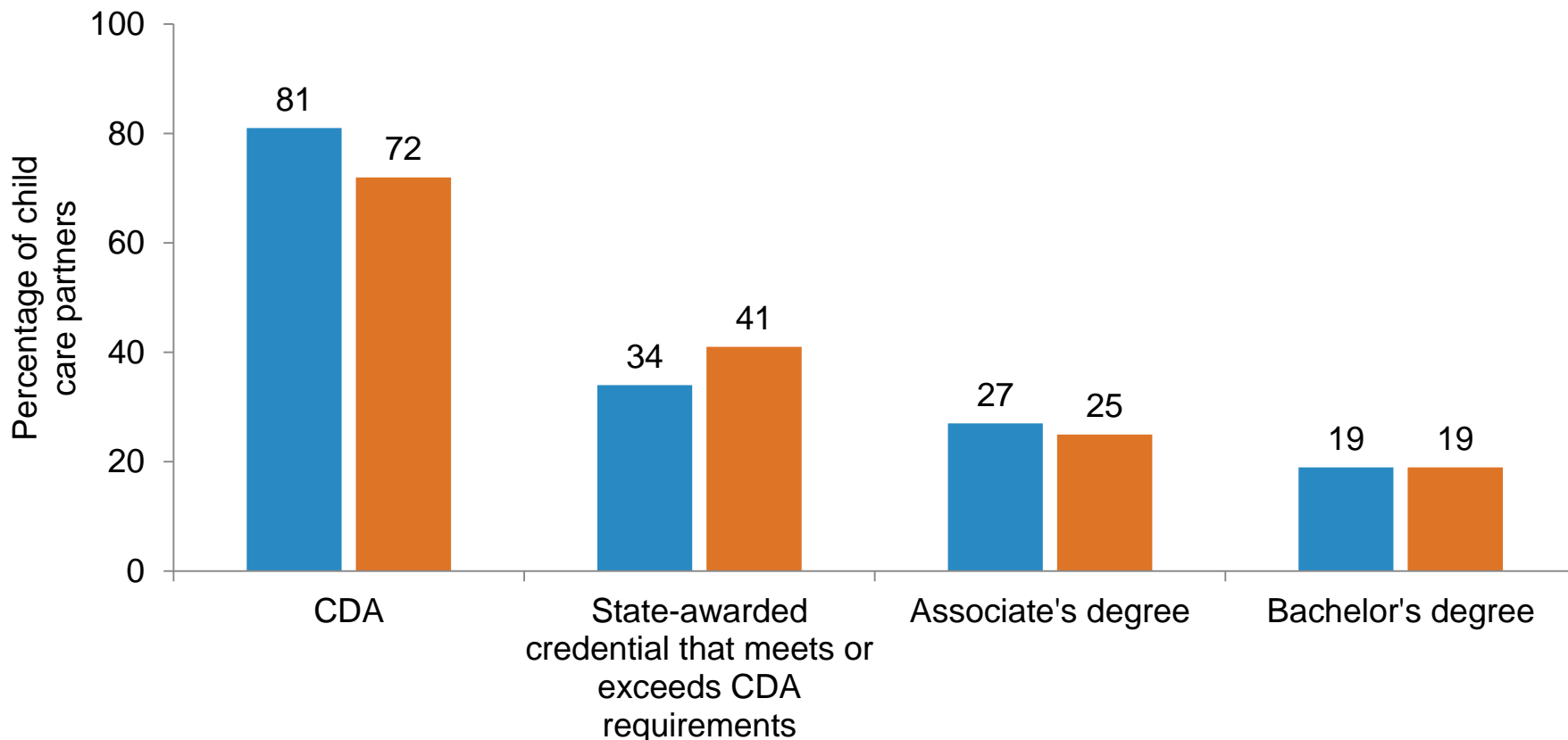
Note: N = 386.

* Percentages differ significantly between child care center partners and family child care partners at the 0.05 level, two-tailed test.

Lessons from the case studies: Barriers to meeting training needs of child care partners

- **Grantee and child care partner staff reported many barriers to providing or attending training**
 - **Timing, language, and lack of existing trainings and trainers or funding for training**
- **Grantees used several strategies to overcome these barriers**
 - **Offer trainings at night or on weekends; provide food, child care, or pay; provide training when the child care provider is closed to families; use technology when appropriate; hire bilingual trainers; connect with other agencies or organizations**
- **Child care partner staff wanted the opportunity for more interaction with staff from other child care centers or family child care partners**

Child care partners had opportunities to obtain credentials and degrees



Credential and degree opportunities offered by grantees to child care partners

■ Child care center partners ■ Family child care partners

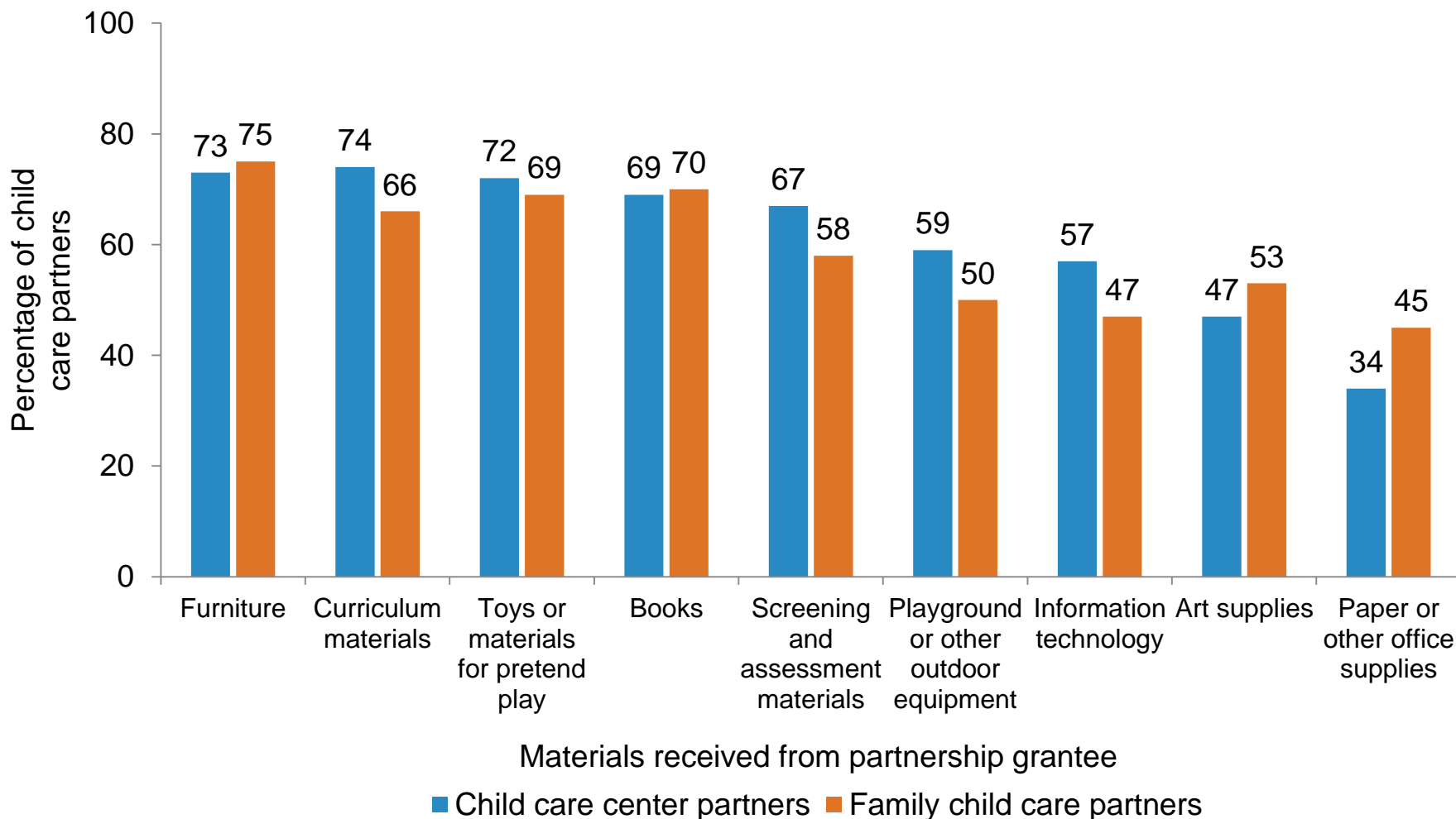
Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.

Lessons from the case studies: Meeting the PD needs of child care partner staff

- **Obtaining CDA credentials was time-consuming for child care partner staff, but the availability of online courses eased the burden in some cases**
- **Investments in training and CDA credentials were lost when teachers left the child care partners and new staff had to be trained or take coursework**
- **One grantee worked with a community college in the area that has an early childhood program to recruit qualified teaching staff**

Child care partners received a variety of materials and supplies from grantees



Source: EHS-CC Partnership Child Care Partner Survey.

Note: N = 386.



Questions?

For more information

- **Patricia Del Grosso, Mathematica**
 - PDelGrosso@mathematica-mpr.com
- **Jaime Thomas, Mathematica**
 - JThomas@mathematica-mpr.com
- **Christine Fortunato, OPRE**
 - Christine.Fortunato@acf.hhs.gov