

**Colorado
Consolidated Pilot Project
Child Care Licensing**

Evaluation Report

**Year One
2002 – 2003**

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Sponsored by the Colorado Departments of Education and Human Services

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Year One Evaluation Findings

Child Care Licensing Models:

- Denver/Triad
- El Paso
- Larimer

Designed to create a user-friendly licensing system that supports, monitors, and enhances early care and education for children in Colorado, birth to twelve years old.

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Background

The Child Care Licensing Models were created by Colorado Senate Bill 99-226 in 1999. It allowed Consolidated Pilot Project communities to design and implement up to four new licensing models for child care programs. These communities were asked to pilot their ideas for improving current licensing systems and recommend changes based on their trial experiences.

The three models participating in the licensing pilot project include:

1. Larimer County
2. El Paso County
3. Denver/Triad (Denver, Jefferson, Clear Creek, and Gilpin Counties)

Each community approached design and implementation in a manner responsive to individual community needs and resources. Denver/Triad researched the licensing models of several other states as well as the military before designing a model that combines successful aspects of each. El Paso called on members of their local Early Childhood Council to discuss what was working and what was not working with current licensing rules and regulations to enlighten their process. And a committee of interested parties from the child care constituency in Larimer County met with local child care providers and state licensing staff to design their model.

Although each of the models developed its own unique design, all have the same long-term outcome: **A user-friendly licensing system that supports, monitors, and enhances early care and education for children in Colorado, birth to twelve years old.**

All three experimental models were granted federal funding through the Colorado Department of Education to implement and evaluate their models over the anticipated three-year project period. They also received waivers from existing state licensing regulations from the Colorado Department of Human Services.

Local committees began germination of their models in mid 2000 and hired staff to implement and manage the models in early to mid 2001. Actual program implementation officially began in 2002 at slightly different starting points for each of the models.

Child care sites that would ultimately participate in the experimental models were recruited from centers, homes and school-age facilities that were already participating in the larger Consolidated Pilot Project (Senate Bill 97-174). Licensing Models are a subset of the Consolidated Pilot Project.

In an effort to capture and document the ultimate effectiveness of the three models, a professional evaluator was hired to help models design and implement a common evaluation. This report is the result of that collaborative evaluation. It describes each model in detail, charts daily activities of model staff, documents the processes and related outcomes for each, and estimates the costs associated with each model for the first year of implementation.

Methods

Before developing a common evaluation framework, model staff, with input from their local committees, defined the underlying theory of their respective models in the form of a logic model. This conceptualization exercise forced them to clarify, for themselves and others, exactly how they planned to achieve their intended results. A logic model engenders consensus around program design and gets all stakeholders on the same page. It also causes program designers to question whether or not they can reasonably accomplish their goals with the activities they have identified, whether or not the activities are sufficient to cause a change, and if the planned program fits within established funding and timeframe parameters.

Once reasonable outcomes were defined for each of the three projects (see Appendix), a common evaluation plan was developed. During several joint sessions, the evaluator trained model staff in evaluation principles and methods and then guided them through a consensual plan development process. A joint evaluation plan emerged that incorporated the measurement of common indicators for all three models (see Appendix).

The evaluation plan includes seven components. Data collected from all seven components is integrated into this report in a comparison across all three models. The seven components and the indicators they measure are outlined in the chart that follows:

	COMPONENT	INDICATORS
Descriptive Evaluation	1. a. Model documentation b. logic model	<ul style="list-style-type: none"> ▪ Participating sites ▪ Model components ▪ Proposed improvements ▪ Intended outcomes
	2. Violation data	<ul style="list-style-type: none"> ▪ Profile violations of participating sites
Process Evaluation	3. Monthly log of project activity	<ul style="list-style-type: none"> ▪ Activity types ▪ Number of visits and contacts ▪ Direct services ▪ Referrals ▪ Regulatory services
	4. Licensing model staff (MS)* interviews	<ul style="list-style-type: none"> ▪ Model's effect on providers ▪ Collegial relationships developed ▪ Recommended training for MSs ▪ What works; what doesn't

*Licensing Model Staff (MS) are those individuals who staff the model

Outcome Evaluation	5. Provider survey	<ul style="list-style-type: none"> ▪ Professionalism ▪ Competency ▪ Environment
	6. Parent survey	<ul style="list-style-type: none"> ▪ Awareness of licensure ▪ Awareness of quality ▪ Awareness of provider improvement
Cost-Benefit Analysis	7. Cost-benefit study	<ul style="list-style-type: none"> ▪ Annual costs per unit ▪ Outputs/caseload ▪ Model intensity

Each of the evaluation components was designed and installed taking into consideration the developmental stages of the models. For example, staff interviews could not occur until model staff and licensing staff had an adequate chance to implement the model at several provider sites – about six months into the project period. Providers and parents could not complete opinion surveys until there was opportunity for noticeable change to occur. And actual costs were the last to be calculated to give project accountants a chance to realize actual program costs

With the exception of the licensing staff interviews (# 4 above) and program documentation (# 1 above), participating staff from each pilot model collected data from their participating pilot communities using the data collection instruments commonly developed by all three pilots (see Appendix). Program documentation, staff interviews, and all data entry, analysis, and graphing was performed by the evaluator.

Descriptive Evaluation

Prior to starting the evaluation process, the evaluator conducted on-site visits with the models for the purpose of understanding the rationale and intention behind each. Through open-ended questioning, licensing model staff (MS) were asked to describe the deficiencies they identified in the current licensing system and how they planned to rectify them through their new models. The component pieces of each of their visionary models emerged through the dialogue and are documented here.

Also included in this section are descriptions of the pilot child care sites that participate in each of the experimental models and the manner in which they were recruited.

▪ **Deficiencies Identified in Current Licensing System**

Two pilot models, Denver/Triad and El Paso, identified deficiencies in the current licensing rules and regulations. Denver/Triad feels that the current Rules Regulating Child Care Centers (RRCCC), issued by the Division of Child Care are a good set of regulations – especially after reviewing those of other states – but the licensing model work group wanted to make them more user friendly with a better organizational structure and additional resources. They also believe the RRCCC's are difficult to use because of contradictory, difficult to interpret meanings. The in-availability of technical assistance for providers using the rules and regulations only compounds the issue. El Paso finds fault with the fact that the rules and regs address only health and safety issues to the exclusion of emotional, interpersonal, environmental, and learning issues. In addition they believe the current licensing system limits the definition of quality.

Larimer finds inconsistencies among licensing specialists in the current system. Overall, they feel the system is punitive, especially for homes, and not viewed as a positive resource for providers. Another drawback of the current system is its non-recognition of the experience a provider has accrued in another state. They also see a lack of coordination among agencies involved in supporting the child care industry. A particular drawback is the lack of organization by county. Ultimately, Larimer feels these deficiencies result in limited choices for parents.

▪ **Models' Response to Current System Deficiencies**

Denver/Triad:

Consistent with the deficiencies identified by Denver/Triad, they proceeded to revise, reformat, simplify and enhance the current rules and regulations for their new model. Regs that did not affect health and safety were removed from the manual and remaining regs logically categorized and re-written. A user-friendly table of contents was added as well as a resource section with sample forms and essential credentialing information. A revised set of regulations, with a resource section including over 100 forms, was distributed to each participating child care facility.

In the Denver/Triad model, licensing model staff, which are called Licensing Development Specialists (LDS), perform the same functions as current state Licensing Specialists but with

lower caseloads. They provide technical assistance to providers along with the regulatory function. LDSs also meet with directors to determine current levels of provider education and set personal goals with individual providers for professional development. Providers in the Triad component additionally receive mentoring to support their professional development improve program quality. The LDS is therefore an enhanced version of the state Licensing Specialist.

Denver/ Triad plans to add an additional component in the next phase of their model to address negative licensing. They will review current negative licensing procedures in Colorado, compare them to other states and explore the development of a new negative licensing system with clearly established timelines, expectations, corrective action plans, and consequences.

El Paso:

El Paso also re-wrote rules and regulations and promotes professional development among providers. In re-writing rules and regs, they used the Environmental Rating Scale to adjust all comparable regulations to a new minimum rating of '3.' Items not addressed by the Rating Scale were extracted from existing rules and regulations and combined with those adjusted by the Scale. They also simplified wording, added a business practices section and a staff development section to the re-written rules and regs. Designers consult monthly with the State Licensing Specialist to fine-tune the regulations.

Licensing model staff, referred to as an Early Childhood Specialist (ECSs), were hired to augment state Licensing Specialists. ECSs initially conducted an orientation visit with each of the pilot child care facilities to orient them to the new regs. ECSs continue to visit providers monthly. Ongoing monthly visits have a four-fold purpose: (1) to help child care providers develop site-specific improvement goals and plans, (2) to provide information and materials, (3) to facilitate the involvement of parents, and (4) to facilitate peer to peer mentoring among providers.

ECSs meet monthly with local Licensing Specialists to review and address individual provider concerns and issues. The Licensing Specialist continues the same roles and responsibilities held under the old rules and regs but inspection reports are developed jointly with the ECS.

Additionally, El Paso has developed an incentive program to reward providers who demonstrate improved quality of care in their facilities (as measured by the Environmental Rating Scales) and increased educational levels of their directors and providers. Providers use incentive dollars to purchase materials, equipment, and training to improve their child care programs. Also, parents are more able to recognize quality because the quality of all participating child care facilities is designated by the Educare Star Rating System.

Larimer:

Unlike the other two models, the Larimer model did not set out to re-write licensing rules and regulations. Instead their vision was to help child care providers understand and work with the current regulatory system. In addition, their belief that health and safety functions should be separate from education and resource functions caused them to create an Education and Resource

Specialist (ERS) position. The ERS helps child care providers become self-sufficient, develop their own plans, and monitor their own compliance using self-assessment tools that were developed using current licensing tools. ERSs disseminate information to providers, make referrals and visit each provider twice per year.

The Larimer ERS works in parallel with state Licensing Specialists who are still responsible for health and safety functions. The state Licensing Specialist responds to complaints and interprets rules and regs for providers but no longer does routine inspections. In the division of labor established by this model, the Licensing Specialist focuses on the initial licensing inspection and the ERS on routine visits. ERSs are more accessible than Licensing Specialists and have smaller caseloads. Licensing Specialists have smaller caseloads.

Another intent of the Larimer model is to promote a positive image of licensing. They conduct outreach to identify unlicensed care and offer their support in attaining licensure.

The table on the next page summarizes the differences and similarities in the 'prototype' models, that is, the models as ideally anticipated to be configured when fully implemented in any community statewide.

▪ **Child Care Sites Participating in the Models**

All three licensing models recruited participant child care facilities from those already participating in the Colorado Consolidated Child Care Pilot umbrella program. In Denver, participation in the licensing model project was mandated for all sites involved in the Consolidated Pilot; for Triad, participation was voluntary. In El Paso county, sites self-nominated themselves for the model and were then selected by geography and level of diversity. All El Paso sites were awarded a one-time incentive to participate. The process was similar in Larimer county but without incentives. Sites self-selected and were then considered for participation according to their geography, diversity, and ownership.

Licensing models were free to choose the number and mix of child care facilities participating in their experimental models. By January of 2003 Denver/Triad had 34 child care facilities enrolled in their model, El Paso had 24, and Larimer, 42 (total = 100). Additional sites will be added or replaced over the life of the project. For example, Denver/Triad plans to add 20 Family Child Care Homes. Larimer anticipates total participating sites by the end of the pilot to total between 64 and 120.

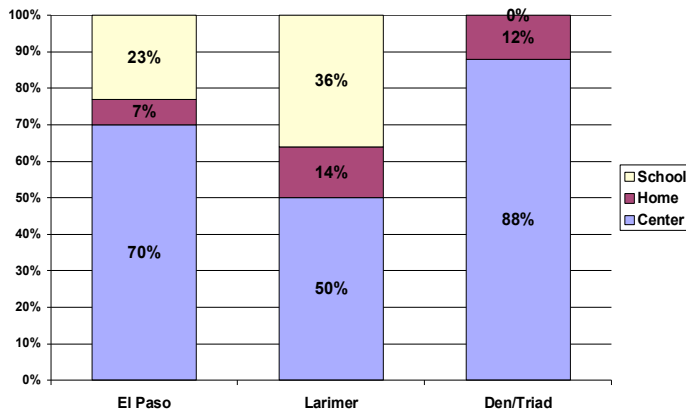
The distribution of centers, homes, and school-age sites varies by model. Based on activity levels during March through May of 2003, the Denver/Triad model is composed of 88 percent centers, 12 percent homes and no school-age sites. El Paso is also comprised primarily of centers (70%), but has 23 percent school-age sites and 7 percent homes. The Larimer model has a more equal distribution of facility types than either of the other two: 50 percent centers, 14 percent homes, and 36 percent school-age sites. See the graph at the top of page 10.

Summary of Prototype* Model Descriptions

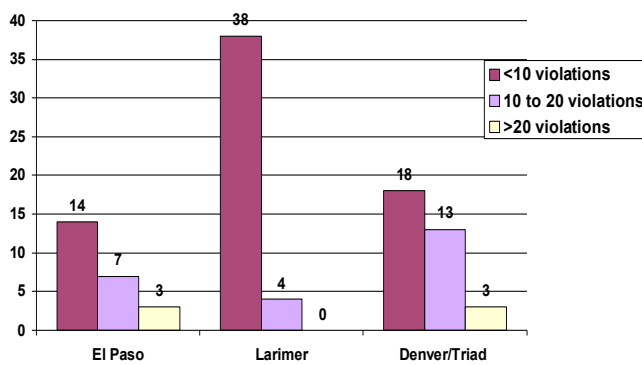
	DENVER/TRIAD	EL PASO	LARIMER
Re-write rules/regs	<ul style="list-style-type: none"> Yes 	<ul style="list-style-type: none"> Yes 	<ul style="list-style-type: none"> No
Licensing model staff (MS) positions	<ul style="list-style-type: none"> Licensing Development Specialist (LDS) 	<ul style="list-style-type: none"> Early Childhood Resource Specialist (ECRS) 	<ul style="list-style-type: none"> Education and Resource Specialist (ERS)
Role of licensing model staff (MS)	<ul style="list-style-type: none"> Serve as enhanced licensing specialists Provide technical assistance to providers as needed 	<ul style="list-style-type: none"> Provide intensive monthly education, referral, consultation and support to providers 	<ul style="list-style-type: none"> Facilitate self-assessment of compliance with existing state regulations
Frequency of model staff visits	<ul style="list-style-type: none"> Once a year or as needed 	<ul style="list-style-type: none"> Monthly 	<ul style="list-style-type: none"> At least two times per year
Role of State Licensing Specialist (LS) in the model	<ul style="list-style-type: none"> Act in the capacity of licensing model staff Joint response with MS to complaints and Stage II investigations Investigate negative licensing 	<ul style="list-style-type: none"> Co-develop inspection reports and intervention plans Respond to complaints and conduct Stage II investigations Investigate negative licensing 	<ul style="list-style-type: none"> Conduct initial inspections Responsible for health and safety compliance Respond to complaints and conduct Stage II investigations Interpret rules and regs Investigate negative licensing
Professional development for providers	<ul style="list-style-type: none"> Mentors assigned to guide providers LDS works with directors and individual providers to increase education levels 	<ul style="list-style-type: none"> Referrals made by ERS to appropriate outside agency 	<ul style="list-style-type: none"> ERS makes referrals to outside agency for training and professional development counseling
Quality incentives	<ul style="list-style-type: none"> No 	<ul style="list-style-type: none"> Yes 	<ul style="list-style-type: none"> No
Promotion of licensed care	<ul style="list-style-type: none"> Among current providers only 	<ul style="list-style-type: none"> Among current providers only 	<ul style="list-style-type: none"> Among current providers Outreach to non-licensed providers
Negative licensing	<ul style="list-style-type: none"> Working under but improving current system 	<ul style="list-style-type: none"> Working with current system 	<ul style="list-style-type: none"> Working with current system

* *Prototype = model as it would ultimately look when fully implemented in any community statewide.*

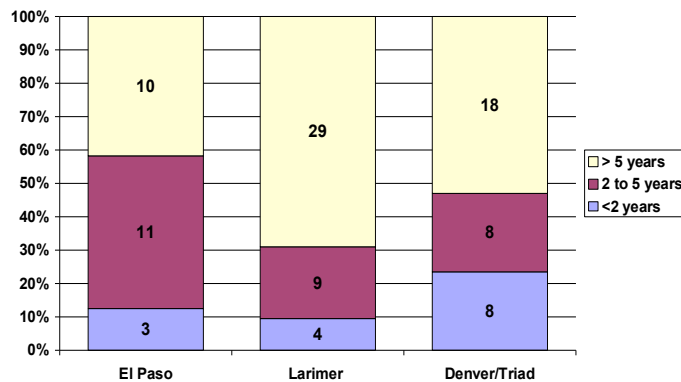
Percent Activity by Facility
Child Care Licensing Pilot Project Mar 2003 - May 2003



Numbers of Facilities With Low, Moderate, and High Numbers of Violations
Child Care Licensing Pilots Baseline Data 2002



Number of Sites Licensed Less Than 2 Years, 2 to 5 Years, and More Than 5 Years
Years Child Care Licensing Pilots Baseline Data 2002



Of the 100 sites enrolled in all three models, approximately 7 percent are located in rural areas – not unusual given the front-range location of all three models.

Facilities range from small to large and from poor to excellent quality. Violation data collected on participating child care facilities demonstrate, on average, a prevalence of facilities with low numbers of violations (less than 10 as of their last visit from State Licensing) in all three models. Of Denver/Triad’s 34 facilities, about half (18) had less than 10 violations, 13 had 10 to 20 and three sites had more than 20 violations. In the El Paso model over half of all participating sites had less than 14 violations on their last visit from State Licensing, seven had 10 to 20 violations and three had more than 20. In Larimer, the vast majority (38) of its 42 sites had less than 10 violations. The remaining 4 had between 10 and 20 violations. Again, pilots were not required to select any specific distribution of quality among sites. Over half of all model sites have been licensed for more than five years, about a third for two to five years and the remaining 15 percent for less than two years. Relative distributions are fairly equal across models with each having a majority of older sites (licensed longer than five years) and a minority of sites licensed less than two years.

Process Evaluation

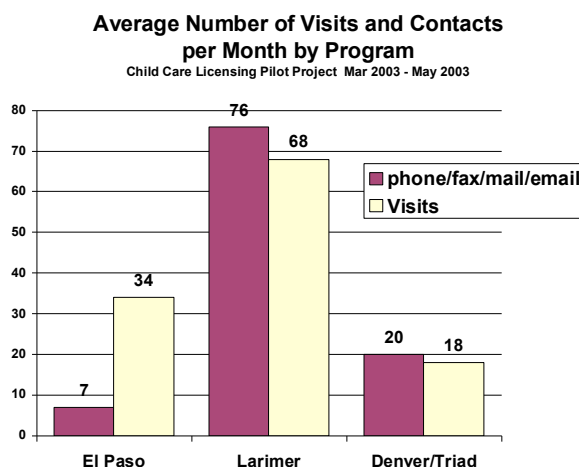
Process evaluation gives us an idea of how things are going while the program is being implemented. It is important to keep an eye on things as the program unfolds to ensure that the intended program is what really gets implemented. Otherwise, when intended outcomes do not occur, it is impossible to understand why. Process evaluation allows program implementers an opportunity to do a reality check and make any needed adjustments early on. Sometimes the best ideas on paper just never leave the ground.

The process evaluation for the Child Care Licensing Project models involved two evaluation components: (1) interviews with state and model licensing staff, and (2) daily activity data captured on monthly logs. The monthly logs documented the day-to-day activities of the licensing model staff as they visited and consulted with participating sites. The interviews allowed those on the front lines to tell us how they thought things were going as the model was rolled out in their community. As data from these components was collected and collated it was shared with the pilots – their own and that of the other two pilots – so they could reflect on it and make adjustments.

Due to the dynamic nature of process evaluation, only the most recent quarter of monthly log data is presented in this report. Previous log data reflects fluctuations as models were forming and fine-tuning their activities and model staff were learning to use the data collection tool in a standardized way. In addition, both Denver/Triad and Larimer pilots underwent significant licensing model staff turnover mid year resulting in data gaps and inconsistencies.

▪ Model Activity

Because the pilots are trying to create supportive, user-friendly licensing systems they spend

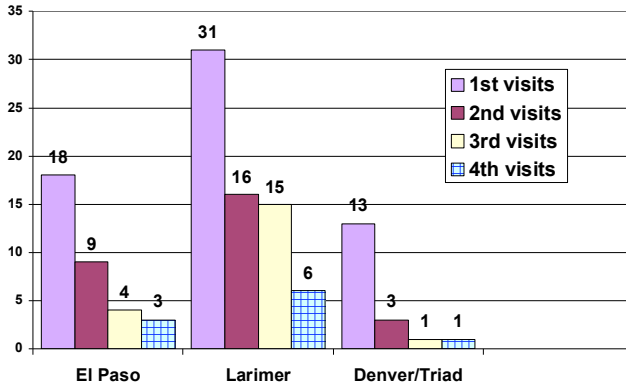


considerable time visiting and contacting their participant facilities. Numbers of visits and contacts are dependent on multiple factors: the number of facilities included in the pilot, the frequency of visits designated by the model, and the intensity of services provided. The data shown here reflects average quantities of visits but not duration or intensity of visits. In the March through May time period, average visits and contacts for

Larimer (68/76) exceed those for El Paso (34/7) and Denver/Triad (18/20). El Paso records fewer but higher intensity visits. Denver/Triad's model does not call for routine monthly visits, therefore logs fewer visits than the other two models.

Average Number of 1st, 2nd, 3rd, 4th and Average Visits per Month by Program

Child Care Licensing Pilot Project Mar 2003 - May 2003

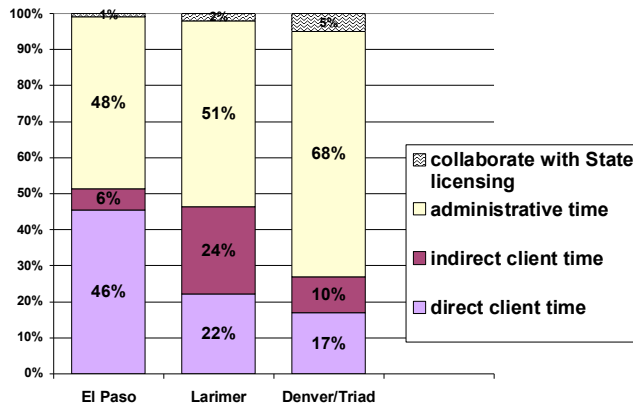


Denver/Triad's were even fewer.

Quantities and frequencies of visits and contacts, however, do not adequately reflect time spent providing direct services to providers. Modelstaff in all three models spend about half of their time in administrative functions such as attending meetings, networking in the community,

Distribution of Time Dedicated to Pilot Project by Program Staff (Resource/Licensing Specialists)

Child Care Licensing Pilot Project Mar 2003 - May 2003



developing handouts/posters/regulations, receiving training, conducting evaluation functions, or researching new information. Denver/Triad model staff, on average, spend 68 percent of their time in administrative functions, El Paso, 48 percent, and Larimer 51 percent. Direct client interaction is the next most common of licensing model staff time. El Paso model staff, on average, spend 46 percent of their time in direct contact with providers, Larimer, 24 percent, and Denver/Triad, 17 percent. Less than a quarter of any model staff time is spent in indirect activities (doing paperwork for a provider, researching a provider question, driving to and from visits, etc.) and less than five percent of the time collaborating with State Licensing.

Direct service time is defined as time spent interacting directly with providers either on-site or by phone, fax, or email. During that time licensing model staff are engaged in any one of several activities. They may be observing, conducting a training, or assisting with an on-site assessment.

Not all child care sites participating in the pilot study need the same intensity of services. Some require one visit or less per month while others benefit from multiple visits, at least initially. During the same March through May time period, Larimer visited, on average, 31 sites once each month, 16 sites twice, 15 sites three times, and 6 sites four times. El Paso numbers were about half those of Larimer's for 1st, 2nd, 3rd, and 4th visits and

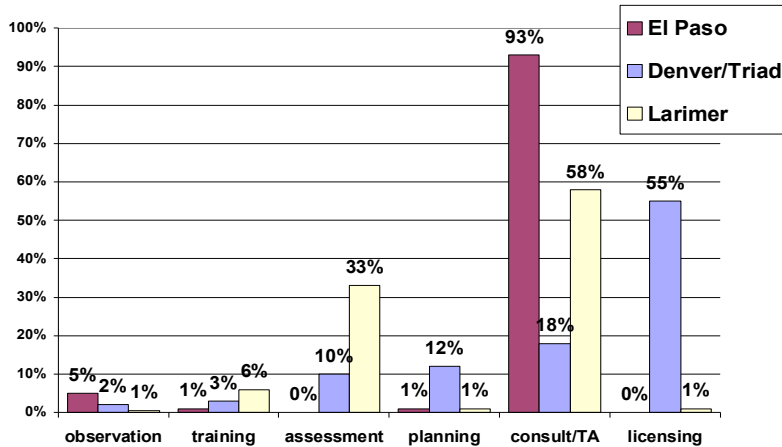
El Paso numbers were about half those of Larimer's for 1st, 2nd, 3rd, and 4th visits and

Otherwise they may be helping providers devise plans or providing consultation or technical assistance on a number of issues.

Denver/Triad model staff spend over half of their direct provider time (55%) engaged in licensing

Distribution of 'Direct Service Time' Among Programs

Child Care Licensing Pilot Project Mar 2003 - May 2003



activities. El Paso staff spend over 90 percent of direct service time in direct consultation with providers. Larimer staff also spend the majority of their direct service time consulting (58%) with providers. They help sites with self-assessments on state licensing compliance and also help them establish timelines and plans to create systems to accomplish

compliance.

With the exception of El Paso, licensing model staff refer providers to other resources for services they are not able or have chosen not to provide. Due to the integration of the El Paso model into an environment where multiple services are available, referrals are non-existent in this model. Larimer staff make numerous referrals for professional development. They also refer providers to the State Licensing Specialists for assistance with licensing questions and clarification, consistent with their dual role model. Denver/Triad staff refer providers to health and safety and 'other' resources. Because the Denver/Triad model is designed to directly assist providers in increasing educational levels, they make fewer referrals for professional development.

▪ **Voices From the Field**

In January and February of 2003, ten State Licensing Specialists (LS) and eight licensing model staff (MS), responded to a list of open-ended interview questions regarding pilot processes. They were asked how the new model affects their duties and current role with child care providers. They were also asked to comment on any collegial relationships they may have developed as a result of the model, to tell how site inspections have changed, and to describe what type of additional training they would suggest for staff of the new model. The final question in the interview prompted them to disclose what they thought was working well in the model and what was not working so well. Highlights from the interviews follow. To ease comprehension, from this point forward in the report, State Licensing Specialists are referred to as 'LS' and licensing model staff from all three models are referred to as 'MS' for model staff.

Model's Effect on Current Duties:

The majority of State Licensing Specialists (LS) interviewed said that the pilot had increased their workload. Comments such as, “*I attend more meetings,*” and “*it's more complicated so I have to shift gears more often,*” were common. A Licensing Supervisor in Larimer estimated that involvement in the pilot adds about 16 extra hours of administrative work per month to her schedule in order to supervise the model's new licensing staff. A LS in El Paso estimated an extra day and a half per month to do the additional bi-annual visits required by the model. Some anticipated that their time commitment would decrease as the pilot becomes fully implemented and planning and strategic meetings decrease. “*I was on the committee to revise rules and regs but eventually I will have no involvement,*” said a Denver/Triad LS. Also: “*I'm drawn into so many more aspects of child care: development or rules and regs, interpreting old rules, working with model staff...*”

Since most of the licensing model staff (MS) were hired explicitly for the new model there was no precedent for comparison to their current duties. Though one Denver/Triad MS said, “*I was hired for the new model but I believe that the model will help streamline visits.*” Another Denver/Triad MS realized that she is “*now involved in training providers on how to get organized for inspection [rather than just doing the inspection].*” In El Paso, where MSs were already engaged in work similar to their current model they claim to be doing, “*a lot more mentoring of providers, working hand-in-hand with licensing, and forming more community relationships.*”

Model's Effect on Relationship With Child Care Providers:

Both State Licensing Specialists and newly hired model staff agreed that the new model helped them to build better relationships with child care providers. A LS in El Paso related a four-fold benefit to the new model: “*It's been great. Providers who are participating in the model are more relaxed, my repeated contact helps them understand what's expected better, they are less threatened by me, and they are more compliant and willing to do what's expected.*” A Denver/Triad LS echoed the sentiment: “*I'm building relationships with providers; directors feel I'm listening which makes them enthusiastic.*” An exception were the LSs in Larimer. All three Larimer LSs claimed that the new model has had no effect on their relationships with providers, most likely reflective of their newly reduced role.

Model staff in all three projects were full of positive remarks about their relationships with child care providers. “*I'm spending more time with providers which helps establish a working relationship; they are more likely to call me with a question and are not as fearful of visits,*” said a Denver/Triad MS. In Larimer: “*Providers see me as someone available to call for help; I'm their liaison with the licensing specialist.*” And in El Paso: “*[The model] provides an opportunity to build one-on-one relationships and address provider concerns for improving their program.*” In general, MSs felt that providers were open to asking more questions and less fearful when the Licensing Specialist walked through the door.

New Collegial Relationships Developed As a Result of the Model:

With the exception of Larimer, licensing specialists found themselves making new collegial relationships as a result of participation in the models in their community. In El Paso, one LS said, *“As a licensing specialist I have a much stronger connection with the local Resource and Referral Agency.”* Another commented that she is, *“starting to work more with [her] on-line staff who are out in the field.”* A Denver/Triad LS said she was experiencing *“more interaction with the community college,”* and *“seeing more interaction within the community.”*

Among model staff, the most beneficial new collegial relationships formed they say they formed were those formed with Licensing Specialists. In Larimer one MS is quoted as saying, *“At first it seemed the licensing specialist didn’t want us moving in on their territory but now we have a team effort and the realization that whatever is done is done for the children...it’s been great.”* Another in Larimer said, *“I see only benefits [of our relationship with LSs]: sharing knowledge, access to more information and supporting people.”* Additional relationships were mentioned by El Paso. They include those with Head Start, the Colorado Pre-School Program, the Health Department, Educare, School Readiness, and the local college: *“Our relationship with the local college has helped make it easier for providers to take classes, get credit, and convert course hours to college credit.”* Also: *“There’s more collaboration and cooperation and less duplication.”*

How Inspections Have Changed Under the New Model:

In Denver/Triad and El Paso, licensing specialists spoke positively about how inspections have changed under the new model. In El Paso: *“Site improvements happen much sooner due to having incentive dollars and ongoing visits that occur every six months,”* and *“more frequent visits help keep things from falling through the cracks.”* Denver licensing specialists like the *“coordinated effort between the model staff and licensing in addressing complaints.”* In contrast, licensing specialists in Larimer criticized the new model for the adversarial situation it engenders: *“We don’t do supervisory visits any more. We only go out on complaints. The problem is it sets up a ‘good cop/bad cop’ mentality.”*

Licensing model staff in Larimer, however, see the other side: *“providers are more at ease and really seem to mean it when they say ‘drop in anytime.’”* They also say *“providers are receptive and appreciative of the self-assessment process,”* which they help providers with during bi-annual visits. Model staff in Denver/Triad and El Paso concur: *“[Inspections have] a much more comfortable and cordial atmosphere. They are proactive rather than reactive. Providers feel support through training rather than punitive action.”* Denver/Triad also felt it was *“beneficial to have both licensing and support staff in one person,”* as their model portrays.

Training Necessary to be a State Licensing Specialist or Licensing Model Staff:

With the exception of one licensing specialist in El Paso, LSs generally do not see the benefit of a background in early childhood education (ECE) for someone in their position. Instead, on-the-job-training, management training, a human service background, the ability to interpret data, and people skills, they say, come in handy. One El Paso specialist contradicted the others: *“Now that*

I'm out in the field, rather than administering the rules and regs from my office, I understand how much there is to child development."

In contrast, licensing model staff in all three locations felt it was essential to have a background in ECE if not a credential or degree. Several also suggested training in the Environmental Rating Scales. Other suggestions included time management skills, familiarity with community resources, training in methodical observation, and learning how to be flexible but organized.

What Works Well in Current Models and What Does Not Work So Well:

To allow ease of comparison across models and between licensing staff types, the numerous responses to ‘What works well in the models?’ and What does not work so well?’ are organized into the following two tables:

What Works Well in Current Models:

	State Licensing Specialists	Licensing Model Staff
Denver/Triad	<ul style="list-style-type: none"> <i>The new rules work very well due to the intuitive groupings</i> <i>Regulations are more readable.</i> 	<ul style="list-style-type: none"> <i>It helps to organize providers with all the paperwork they need for inspection.</i> <i>The manual’s resource section works great.</i> <i>The new model allows for needed training, TA, consultation, and follow-up.</i> <i>The collaboration and openness of the model leads us in the right direction.</i>
El Paso	<ul style="list-style-type: none"> <i>Providers are much more aware of what they need to be doing.</i> <i>Providers are more aware of available resources through the [licensing model staff.]</i> <i>Provider support and enforcement are separate.</i> <i>Increased teamwork exists among players.</i> 	<ul style="list-style-type: none"> <i>Collaboration and relationship building are so cool to watch.</i> <i>Child care sites are experiencing improvement.</i> <i>Providers are learning to translate the rules and regs.</i>
Larimer	<ul style="list-style-type: none"> <i>There’s improved networking, relationships and mutual support.</i> 	<ul style="list-style-type: none"> <i>[Licensing model staff] provide insight to licensing specialists</i> <i>[Licensing model staff] help speed up the licensing process.</i> <i>New collegial relationships have helped get everyone on the same page in helping providers.</i>

What Does Not Work So Well in Current Models:

	State Licensing Specialists	Licensing Model Staff
Denver Triad	<ul style="list-style-type: none"> We need to involve more centers that really need help in the pilot rather than those already in pretty good shape. 	<ul style="list-style-type: none"> It's difficult for providers to make changes without the money to purchase equipment, etc. It's sometimes difficult for multiple personality types to work together.
El Paso	<ul style="list-style-type: none"> The revised rules and regs may need improvement; sometimes they are too strict, other times too ambiguous Technical assistance is not an easy sell; it requires consistent promotion and support 	<ul style="list-style-type: none"> We need more visits to solidify relationships with providers
Larimer	<ul style="list-style-type: none"> I don't like being the 'bad cop.' I don't know if this model would work in a community that was not as well organized or resource rich. Everything was already working well – we don't need the pilot. 	<ul style="list-style-type: none"> I wonder how reasonable it will be for the State to pay for our added position. It would help if large centers could arrange staff meetings where we could present all of our information at once.

Outcome Evaluation

The intended long-term outcome of the licensing model pilots is to achieve a ***user-friendly licensing system that supports, monitors, and enhances early care and education for children in Colorado, birth to twelve years old.*** It is assumed that, if this long-term outcome is achieved, the ultimate result will be an improvement in the quality of child care.

It is therefore beyond the scope and intent of this evaluation to measure quality of care outcomes directly but instead to measure several indicators that serve as precursors to quality. For example, it is assumed that if providers understand and abide by licensing rules and regulations, quality will improve. Or, when providers are well-educated and feel more competent and professional, quality will improve. When parents have awareness of licensing regulations they are able to discern and select facilities with professional and competent providers.

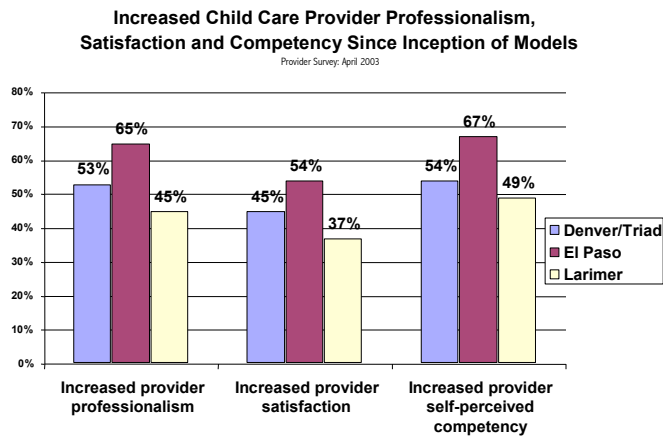
Results of surveys conducted with child care providers participating in the pilot models as well as surveys conducted with parents of children who attend participant model sites, give us some indication of the impact the models are having on precursor outcomes. Some anecdotal outcomes shared by licensing specialists and model staff during the open-ended interviews detailed previously are also included in this discussion. Findings are organized according to the sub-components of the project's long-term outcome: user-friendly, supportive, monitoring, and enhancing.

- **A Licensing System That is User-friendly**

Licensing Specialists and licensing model staff in Denver/Triad, El Paso, and Larimer alike shared anecdotal stories about increases in user-friendliness of their new systems. Licensing model staff from Denver/Triad reported that, *“providers love the new regulations”* and *“are more accepting of regulations because it’s easier to find things and get answers.”* In El Paso, a licensing specialist said, *“I get a more positive response when I go out. I don’t feel so much like the dentist.”* In Larimer they said, *“We’ve been well received by providers; we recently received hugs of appreciation”* and *“I hesitantly contacted two providers who were known for being non-responsive but they were both pleasant and open to having me come out.”*

- **A Licensing System That Supports Early Care and Education**

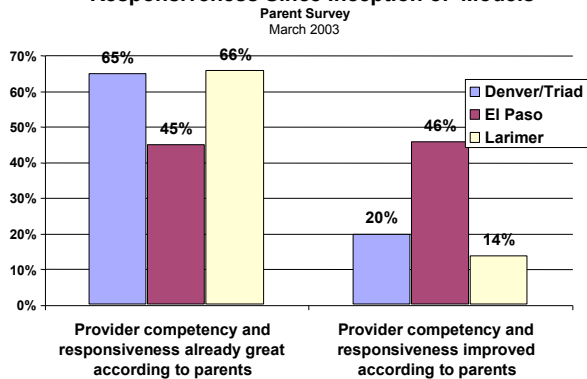
When providers are appreciated and recognized they can more easily support the early care and education of the children they care for. When they feel professional and competent quality care becomes their mantra. A licensing specialist from El Paso commented, *“Providers are very proud now. There’s a transition to professionalism happening. The rewards they get from parents or through the kids makes a big difference in how they feel about the importance of their role.”* Larimer reported that a local newspaper printed a thank you with a listing of all the pilot sites in their model. Denver/Triad model staff were *“surprised at the eagerness of providers to understand what we look for in an inspection and why our work-group keeps thanking us for involving them in the project.”*



Provider professionalism, satisfaction, and self-perceived competency improved among providers in all three projects during the first year of implementation. Highest increases occurred among El Paso providers. Sixty-five percent of El Paso providers said they felt more professional since participating in the model – 53 percent in Denver/Triad and 45 percent in Larimer. Fifty-four percent of El Paso providers realized increased job satisfaction – 45 percent in Denver/Triad and 37 percent in

Larimer. When asked if they felt more competent, 67 percent of El Paso providers reported increased competency as compared to 54 percent of Denver/Triad providers and 49 percent of Larimer providers.

Parent Attitudes Regarding Provider Competency and Responsiveness Since Inception of Models

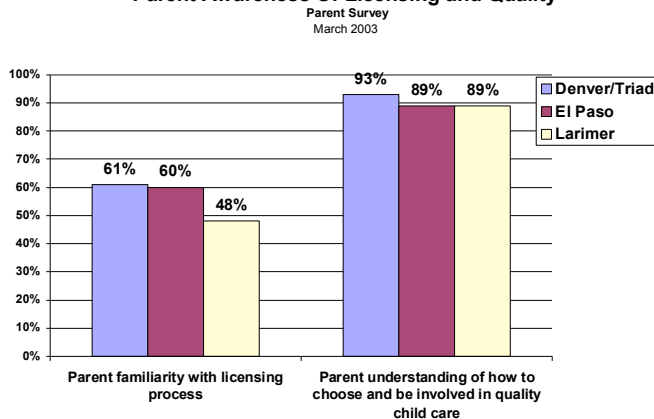


Parents also noticed an increased competency among providers in the participating model sites. Forty-six percent of parents in El Paso who answered the survey said they noticed an increased competency among providers. Only 20 percent of Denver/Triad parents and 14 percent of Larimer parents noticed an increase in competency but 65 percent and 66 percent of parents respectively in these groups said that competency was already high when the pilot began at their child’s facility. When

competency is already high it leaves less room for improvement.

▪ **A Licensing System That Monitors Early Care & Education**

Parent Awareness Of Licensing and Quality

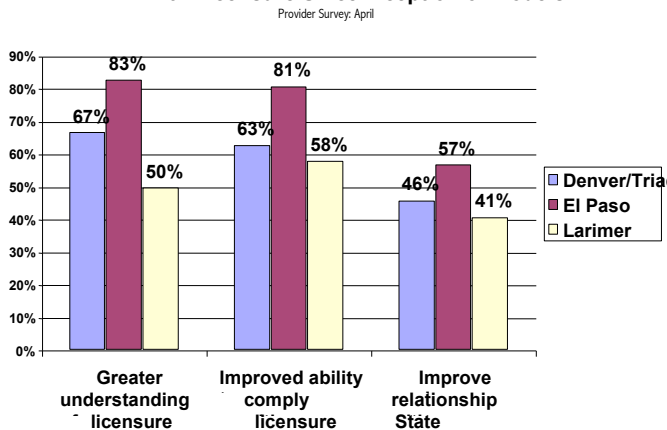


When providers understand licensing they are more likely to comply with it. When parents understand licensing they are more likely to choose quality facilities that easily maintain compliance.

Parent familiarity with the licensing process is 60 percent or higher in the Denver/Triad and El Paso child care facilities and 48 percent in the Larimer facilities. Parent understanding of how to choose and

be involved in quality child care was 89 percent or higher in facilities in all three models – a good indicator of the monitoring capabilities of parents.

Increased Provider Understanding of and Compliance with Licensure Since Inception of Models



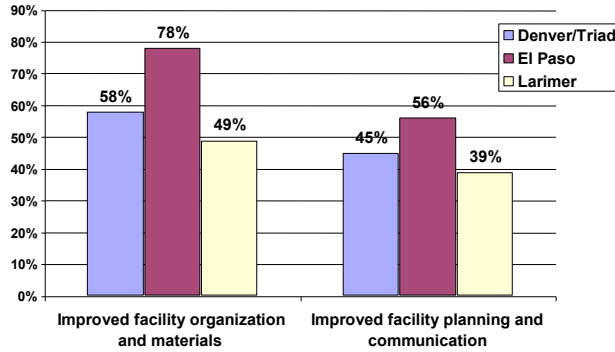
Provider understanding of licensure is particularly high among El Paso providers at 83 percent. Sixty-seven percent of providers in Denver/Triad facilities have a greater understanding of licensure and 50 percent of Larimer providers. Eighty-one percent of El Paso providers report an improved ability to comply with licensure as compared to 63 percent in Denver/Triad facilities and 58 percent in Larimer facilities.

Approximately 50 percent of providers in all three models reported improved relationships with State Licensing agents: 57 percent in El Paso, 46 percent in Denver/Triad, and 41% in Larimer.

▪ **A System That Enhances Early Care and Education**

Many child care facilities operate with the basics. There is often no time for planning or effective communication among staff or between parents and staff. Neither are there resources to purchase improved educational materials and play things. Since the inception of the pilots, child care facilities within all three models have experienced improved facility organization and/or materials and improved planning and communication. El Paso facilities, once again, demonstrated the highest gains. Seventy-eight percent of El Paso providers who responded to the survey claimed improved facility organization and materials for the children they serve. Fifty-eight percent of Denver/Triad providers and 49 percent of Larimer providers made the same claim. With regard to internal planning and communication within facilities, 56 percent of El Paso providers cited improvement, 45 percent of Denver/Triad providers and 39 percent of Larimer providers. Licensing model staff in El Paso county also shared anecdotal stories about enhancements they witnessed among their provider sites: *“One of our center teachers is opening up to embracing diversity and even brought in some multi-cultural teaching materials,”* and *“a rural site that has been content with status quo has opened up to new resources and training options.”*

**Improvement in Child Care Environments
Since Inception of Models
Provider Survey 2003**



Seventy-eight percent of El Paso providers who responded to the survey claimed improved facility organization and materials for the children they serve. Fifty-eight percent of Denver/Triad providers and 49 percent of Larimer providers made the same claim. With regard to internal planning and communication within facilities, 56 percent of El Paso providers cited improvement, 45 percent of Denver/Triad providers and 39 percent of Larimer providers. Licensing model staff in El Paso county also shared anecdotal stories about enhancements they witnessed among their provider sites: *“One of our center teachers is opening up to embracing diversity and even brought in some multi-cultural teaching materials,”* and *“a rural site that has been content with status quo has opened up to new resources and training options.”*

Cost Benefit Analysis

The table on the next page summarizes the estimated costs and production benefits of the three models. Denver/Triad and El Paso pilots feel their costs represent an average for rural and urban areas across the state. People in Larimer, however, believe the costs they have estimated could potentially increase when their model is applied in rural areas for four reasons: (1) mileage costs would increase; (2) caseloads would need to be reduced to account for increased travel time; (3) communication would be more challenging due to the geographic spread; and (4) licensing model staff would need to develop and provide more resources.

The complement of licensing model staff (MS) and State Licensing Specialists (LS) required for each of the new models is denoted on lines 1 and 2 of the table on the next page. Because State Licensing Specialists would actually become the equivalent of licensing model staff in the Denver/Triad model, no LSs are required. El Paso and Larimer model designers estimate that, in their models, the number of existing State Licensing Specialists would decrease by about 50 percent from the current number but the number of new licensing model staff required would be two MS for every one LS.

Lines 3 and 4 show the annual budgets estimated by each model to implement their full component. Included in budget costs are salaries and benefits for licensing model staff, support staff, and administrative staff. Also included are operational costs including consumables (paper, stamps, copying, etc.), communication costs (phone, fax, email), equipment maintenance costs, office space rental and meeting room rental. Additionally, professional development costs for licensing model staff, travel costs, incentive costs and rating scale fees are also included. Up-front research and design costs and one-time equipment purchases are excluded. Line 3 is an estimate of the State dollars that currently support Licensing Specialists working collaboratively with new licensing staff (MS) in the model. Line 4 shows the additional dollars required for the new components of the model. The exception here is Denver/Triad. Line 3 represents future State funds needed to implement their model when they convert all State personnel into their new prototype.

Line 5 denotes the number of 'Units' each model estimates they can serve with the budget presented in lines 3 and 4. A child care home equals 1 unit; a center, 2.5 units; and a school-age facility, 2.0 units.

The figures in line 6 are estimates of the additional State funding per unit required over and above current State funding to fully implement the models once pilot funds are gone. To estimate the additional cost of fully implementing any model in any region, simply multiply the number of units in that region times the cost per unit noted on line 6 and add that figure to the current State Licensing budget for that area.

Lines 7, 8, and 9 list the number of hours each center, home or school can expect to receive under each of the models.

Lines 10 and 11 estimate the caseloads that State Licensing Specialists and licensing model staff would carry under the new model.

Estimated Costs and Benefits Child Care Licensing Models 2002-03

		Denver/Triad	El Paso	Larimer
1	Number of FTE Licensing Model Staff (MS) in model	1.5	2.0	1.0
2	Number of FTE Licensing Specialists (LS) in model	n/a	1.0	0.5

COSTS:

3	Portion of model budget supported by State funding, i.e. LS costs	\$86,035	\$23,679	\$13,601
4	Additional pilot funds required to implement model	\$29,503	\$195,312	\$55,613

TOTAL ANNUAL BUDGET \$115,538 \$218,991 \$69,214

5	Total units served with model	300*	70	254*
(A child care home equals 1 unit; a center, 2.5 units; and a school-age facility, 2.0 units.)				
	Annual cost per unit	\$385	\$3,128	\$272

6	Additional State funding required to fully implement model per 'Unit' once pilot funding is gone	\$98**	\$1,490**	\$99**
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BENEFITS:

7	# of hours/year/home (MS + LS)	10	78	18
8	# of hours/year/center (MS + LS)	26	156	27
9	# of hours/year/school (MS + LS)	21	78	24

10	Ideal caseload/one FTE MS	200 units	35 units	254 units
11	Ideal caseload/one FTE LS	n/a	350 units	504 units

*Units anticipated to be served with the model but not yet demonstrated

**Assumes cost per 1 FTE State licensing personnel at \$57,356 annually

<p>● = Great ◎ = Good ⊙ = Fair ○ = Not as good</p>		<p>2002-2003 Comparative Analysis Child Care Licensing Models</p>			Denver Triad	El Paso	Larimer
Facility Mix	Distribution of centers, homes, and school-age sites in model	○	⊙	●			
	Distribution of pilot facilities with low, moderate, & high violations	◎	◎	○			
	Distribution of pilot facilities licensed 2, 2 to 5, and more than 5 years	◎	⊙	⊙			
Model Staff Time Allocation	Average number of total visits and contacts per month	○	⊙	●			
	Percent of total staff time spent in direct contact with provider	○	●	⊙			
	Percent of time spent in administrative duties	⊙	◎	◎			
	Percent of time spent training providers	○	○	⊙			
	Percent of time spent helping providers plan	⊙	○	○			
	Percent time spent consulting with providers	⊙	●	◎			
Model Processes	Model's impact on current duties of State Licensing Specialists	○	○	○			
	Model's effect on relationship between LSs and child care providers	◎	●	○			
	Model's effect on relationship between MSs and child care providers	●	●	●			
	Model's effect on collegial relationships for LSs	◎	●	○			
	Model's effect on collegial relationships for MSs	●	●	●			
	Model's effect on inspections from the LS point of view	◎	◎	○			
	Model's effect on inspections from the MS point of view	●	●	●			
	Benefit of new rules and regs over old rules and regs	●	⊙	n/a			
	Collaboration and networking within the local community	◎	●	●			
Model Outcomes	System developed by new model is user-friendly	●	●	●			
	Model increases provider professionalism	◎	●	⊙			
	Model increases provider satisfaction	⊙	⊙	○			
	Model increases provider competency (self-perceived)	◎	●	⊙			
	Model increases provider understanding of licensure	◎	●	⊙			
	Model improves ability of providers to comply with licensure	◎	●	◎			
	Model improves provider relationship with State licensure	⊙	◎	⊙			
	Model improves parent familiarity with licensing	◎	◎	⊙			
	Parents perceive providers as being more competent	◎	◎	◎			
Cost Benefit	Annual cost per unit	●	○	●			
	Additional State funds required to fully implement model	●	○	●			
	Total units served with model	●	○	●			
	Hours per year licensing staff (LS & MS) spend in facilities	⊙	●	◎			

Summary Comments

This report presents large amounts of information on the three experimental licensing models. Because each model is unique and non-standardized, the interpretation of this data is complex and non-linear. Attempting to measure the effectiveness of each model against a common set of indicators invariably leaves out some impacts that would have been detected by a customized measurement system and forces the measurement of some variables that are less relevant to one model over the others.

Having recognized the deficiencies of this imperfect but valuable project and the inadequacy of its measurement system, it is also important to recognize the necessity of, in some way, documenting the successes and failures of each model. Some information, though less than perfect, is better than no information. Data reduces uncertainty and offers a premise on which to improve designs and inform legislators and funders of progress. The data in this report, at a minimum, is sufficient for both.

None of the models has it all right or all wrong. The Denver/Triad model offers a lean budget with good outcomes but we don't know if it will work in homes and schools as well as it does in centers. El Paso's model generates great outcomes but the price tag is big. And in the Larimer licensing model, staff have developed wonderful relationships with their providers but their counterparts in State Licensing feel like they now have to act as the 'bad cop.' All have their assets and all have drawbacks.

The Comparative Analysis on the previous page was designed to allow consideration of all assets and drawbacks simultaneously. Model designers and decision-makers are encouraged to critically look at the components of each model using this comparative chart. The chart is patterned after the Consumer Report rating system and is intended to be used in much the same manner with one exception. When we consult Consumer Reports we are trying to select a Honda or a Toyota. In this situation we are not trying to select one model but the most salient components of each to construct a hybrid model. We can have an El Paso engine, a Denver/Triad body, and Larimer wheels.

In using the chart, it is important to first decide which variables are most important in meeting the goal of the project and then to use those priorities to guide decision-making and design change. For example, how important is 'parent familiarity with licensing' in creating a **user-friendly licensing system that supports, monitors, and enhances early care and education for children** in comparison to the 'relationship between child care providers and licensing personnel.' And what exactly is your budget?

Finally, it is important to remember that all three models are still in the early stages of development. They have worked out some of the kinks but any new model needs at least two years of trial before it can be reasonably assessed and compared to its competitors. It may be wise to wait and consult next year's report before designing the perfect hybrid model.