



# Final Evaluation Report: Lessons Learned from the MELF Community Grants

December 2009



Center for Early Education and Development

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Submitted to the Minnesota Early Learning Foundation (MELF) by the CEED Evaluation Team

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# Executive Summary

## Program Overview

The Minnesota Early Learning Foundation (MELF) set out in 2007 to increase the evidence base on which early care and education practices effectively promote the school readiness of children from low income or otherwise at-risk families. Strategically funding the implementation and evaluation of multiple projects, the Foundation aims to use results to develop a clear set of recommendations contributing to the development of a seamless, comprehensive, and cost-effective early care and education system in Minnesota.

One of the strategies for accomplishing these goals was the funding of eleven community-based programs that were tackling key challenges in the field. Through a competitive request for proposal process (RFP), MELF funded the community grants based on their innovative approaches and ability, collectively, to highlight key challenges facing the early care and education field. The grants varied widely to best capture examples of service models, methods, and systems important to the development of a seamless and comprehensive system of care and education for the state of Minnesota. Some programs explored strategies to improve the infrastructure supporting early care and education services, while others explored program implementation strategies directly affecting families and children. All were intended to improve the understanding of what is necessary to improve school readiness outcomes in children at risk.

Together the grantees represent a continuum of services and infrastructures designed to meet the often intense needs of low-income children, families, and communities. The evaluations of these efforts offer rich examples of the contexts surrounding grantees as they grapple with multiple issues affecting their program's implementation and evaluation.

## Report Purpose

The purpose of this report is to describe and report evaluation results for the MELF-funded community grants, including insights and experiences learned from children, families and programs and offer recommendations to assist MELF in framing a systems view of the early learning supports available and necessary for low-income families and families facing other challenges.

## Evaluation Results

Evaluations of the MELF community grants benefited from multiple methods, with instruments designed and shared across all MELF-funded evaluations, including the Saint Paul Early Childhood Scholarship Evaluation and the Parent Aware Pilot Evaluation. Methods included several standardized and non-standardized measures of children used to capture broad dimensions of school readiness, as well as interviews with parents and program staff, surveys completed by providers, home visitors, directors, and members of early childhood partnerships, and ratings of program quality.

Evaluations of the MELF community grants demonstrated that during their funding cycle, grantees worked to accomplish MELF's purpose for innovation in early care and education. Grantees provided services to at-risk families with young children who a) value quality in early care and education and b) significantly rely on, oftentimes multiple, early care and education settings. The children receiving early care and education services were reported to be healthy and to have some rudimentary school readiness skills, but were also at-risk for not scoring well on several school readiness indicators, notably vocabulary, a key indicator of later school success.

Grantees addressed multiple challenges in providing high quality early care and education to these at-risk families, and include extending services to hard-to-reach families, working collaboratively to provide a range of services or to connect fami-



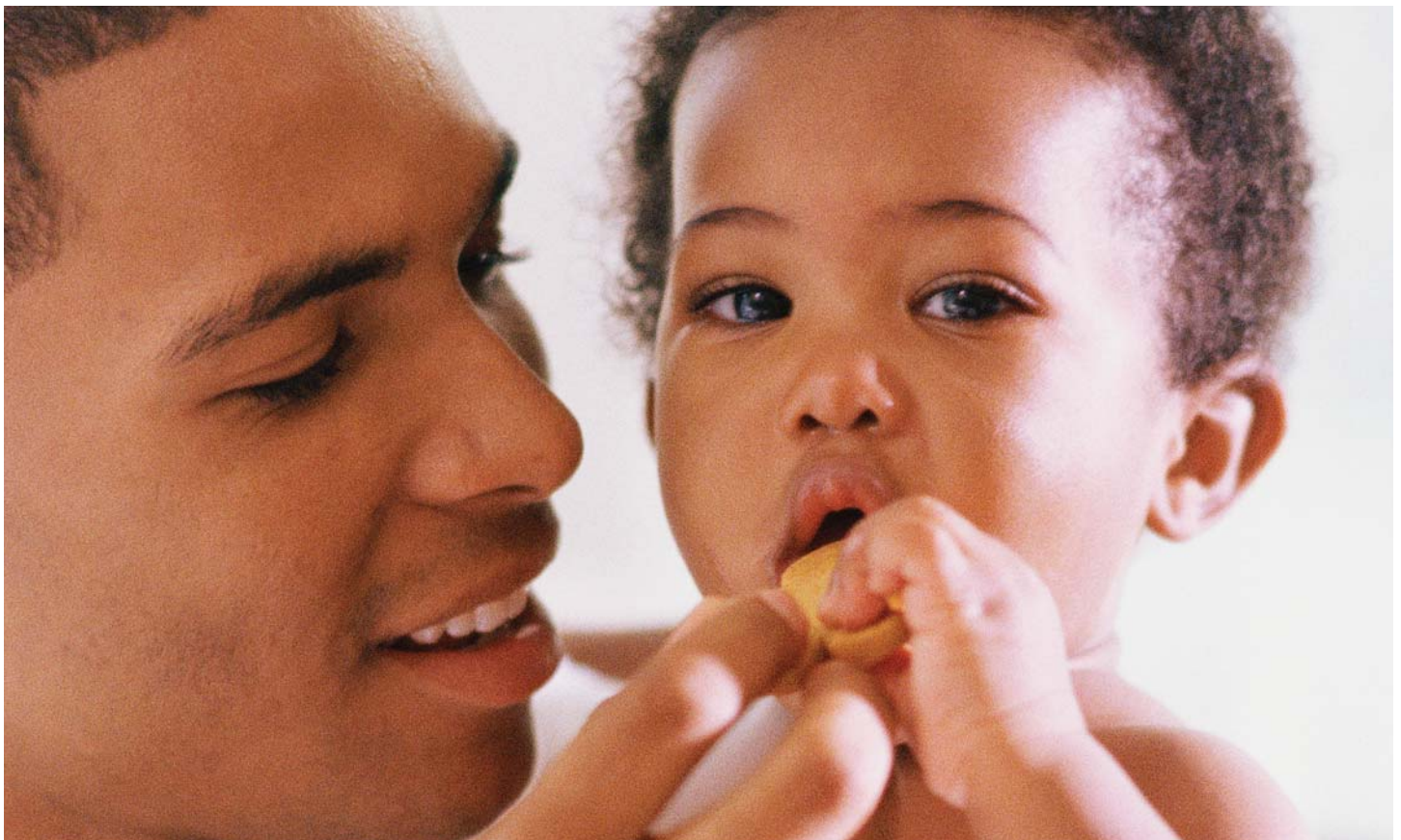
lies with needed services, and adapting services as needed to better meet family needs and preferences. Evaluations captured successes and challenges; they also indicated that the extent and severity of challenges facing those families most at risk often surpass most programs' capacity to provide the intensity of services needed to produce the desired effects.

High quality programs provide the cornerstone of a solid early care and education system – whether quality is driven by program requirements or market-place variables. For early childhood programs to achieve positive outcomes, address local needs, and ensure children are ready for school, research shows quality matters. MELF funding decisions clearly reflect this priority, and several lessons learned via community grant evaluations highlight salient features of high quality programs across the following indicators and are described in this report:

- quality program staff;
- curriculum use;
- professional development;
- consistent, multi-tiered assessment practices;
- evaluation challenges;
- stable funding; and
- early childhood partnerships.

## Recommendations

Before MELF is scheduled to sunset in 2012, it aims to offer the field a set of recommendations, based on rigorous evaluation results, to inform key systems improving both the quality and access to early care and education opportunities. Lessons learned from the community grants will help MELF shape their recommendations to influence future policies and practices in several priority areas. Strategies for promoting a) school readiness, b) family access, c) quality, d) evaluation and reporting, and e) systems coordination conclude this report.



# Final Evaluation Report: Introduction

## Report Purpose

The Minnesota Early Learning Foundation (MELF) set out in 2007 to increase the evidence-base on which early care and education practices effectively promote the school readiness of children from low income or otherwise at-risk families. Strategically funding the implementation and evaluation of multiple projects, the Foundation aims to use results to develop a clear set of recommendations contributing to a seamless, comprehensive, and cost-effective early care and education system in Minnesota. One of the strategies for accomplishing these goals was the funding of community-based programs that were tackling key challenges in the field. The grants represented a continuum of systems and services necessary to meet the diverse needs of families and programs caring for children birth through five years of age.

The purpose of this report is to describe and report evaluation results for the MELF-funded community grants, a set of small to medium-sized community-based programs and initiatives, which collectively address an array of issues important to an emerging system of early care and education in Minnesota. This evaluation effort was designed to assist MELF in framing a systems view of the early learning supports available and necessary for low-income families and families facing other challenges. Based on the collective evaluations of the community grantees, this report:

- presents themes and lessons learned across the implementation of the community grants;
- highlights innovative strategies across a continuum of ages birth to five, in conjunction with the successes and challenges encountered when implementing those strategies; and
- offers lessons learned and recommendations for MELF to consider as it develops strategies for the creation of a system better able to ensure children experiencing a variety of risk factors are on track or ready for kindergarten.

## Evaluation Context

MELF contracted with the Center for Early Education and Development (CEED) at the University of Minnesota to provide intellectual and practical guidance for the multiple MELF-funded initiatives. Starting in 2007, evaluation services developed by CEED as part of this process included:

- the creation of a conceptual framework and logic model designed to a) reflect MELF's goals and theory of change, and b) guide all MELF evaluation activities;
- the development of a set of overarching research questions for all evaluations – those reported here, as well as separate evaluations of Parent Aware and the Saint Paul Early Childhood Scholarship Program; and
- a research-based taxonomy of effective practices in early care and education programs so MELF could examine the extent to which the programs funded matched known best practice and research findings (see Appendices A-C).

MELF also charged CEED with coordinating the shared efforts of the MELF Research Consortium (comprised of CEED, Child Trends and its evaluation of Parent Aware, SRI International and its evaluation of the Saint Paul Scholarship Pilot, and Wilder Research and its work on the baseline study of MELF communities) to maximize resource sharing and the degree to which data could be used and reported across all MELF-funded evaluations. A key result of the Research Consortium was the creation of a shared measurement model, which included several standardized and non-standardized measures of children used to capture broad dimensions of school readiness, as well as interviews with parents and program staff, surveys completed by providers, home visitors, directors, and members of early childhood partnerships, and ratings of program quality. (see Appendix D).



# Community Grant Evaluation Background

MELF engaged in a competitive Request for Proposal (RFP) process and selected eleven community-based programs it believed were best positioned to accomplish MELF goals. Grantees varied widely in funding amount (\$30K - \$350K/year), specific purpose and scope of activities funded, number of families served, child target age (e.g., infants and toddlers versus preschoolers), and type of program (e.g., home visiting, preschool/early education, professional development, and community/systems initiatives); as a result, evaluation questions and procedures varied across grantees as well. Some programs explored strategies to improve the infrastructure supporting early care and education services, while others explored program implementation strategies directly affecting families and children. All were intended to improve the understanding of what is necessary to improve school readiness outcomes in children at risk. The programs and the amount allocated toward their implementation and evaluation, totaling over \$3 million, are briefly described in Table 1. Summary fact sheets for each of the initiative evaluations are also provided in Appendix E. The evaluations were led by CEED, with the exception of Saint Paul's PEK Program and the Wilder Family Literacy Study, both conducted by Wilder Research.

MELF charged community grantees with implementing their innovative practices and participating in program evaluations conducted or managed by CEED. To address the unique features of each effort, CEED's evaluation team assigned staff members to each community grantee, built and maintained relationships with program staff, and conducted evaluations during the period of program implementation. Evaluation questions were developed based on MELF's interest in understanding the extent to which these programs were able to bring about changes in practice, parent knowledge and engagement, and children's development, and were tailored to the individual program.

In addition to the evaluation challenges reflected in the sheer diversity of projects funded, other changes in evaluation designs were also required over the course of the evaluations. The simultaneous funding of program implementation and program evaluation proved particularly challenging for the duration of the evaluations. For example, the need to establish

baselines without having measures determined and approved resulted in the loss of pre-program data for many children and families; in practical terms, this meant that it was often difficult or impossible to compare program performance during MELF funding with conditions or outcomes that existed prior to receipt of the grant. Significant funding challenges also precluded MELF's ability to fund the programs for the entire grant period, resulting in the closing or reduction of services offered across grantees – in several instances, before these reductions were planned initially. As a result, CEED altered initial evaluation plans for the community programs, scaling back and collecting data from programs, families and children at one point in time rather than at multiple times. In several instances, we were able to gather other information within and across programs that helped us to better understand information collected during MELF evaluations. Findings described throughout the report are therefore primarily descriptive of the families, children and programs, and represent a snapshot in time of program implementation, successes, and challenges.

Despite these issues, important lessons gleaned from the grantee efforts to implement innovative and best practices can be used by MELF in the process of identifying system components, strengths, and barriers to developing a comprehensive, seamless service delivery system for vulnerable children and families in the state. This report presents the insights and experiences learned from children, families, programs, and systems as a result of the MELF community grants, and ends with recommendations based on the evaluation results. In particular, we believe this evaluation produced findings in four broad areas that will prove valuable to MELF as it attempts to redefine learning supports for low income families and their children in Minnesota. These four areas include:

- strategies for reaching underserved families;
- priorities related to professional development;
- understanding program and staff strengths and constraints; and
- raising awareness of issues related to the measurement and understanding of school readiness as a trajectory birth through age five.





**Table 1. MELF Community Grant Descriptions and Funding**

GRANTEE	MELF EVALUATION PRIORITIES	TOTAL MELF \$*
<b>Preschool/Early Education</b>		
Bloomington	The Bloomington MELF preschool served low-income and ELL children in two half-day sections to focus on issues related to dosage (i.e., one versus two years in half-day programming), school readiness outcomes, and types and quality indicators of programs that are effective in preparing ELL children for school.	\$425,068
Joyce Preschool	Joyce Preschool was granted MELF funds to hone and share their unique dual immersion model for serving ELL families. Evaluation efforts focused on the process of identifying and implementing best practices, and honing and disseminating the resulting model with other interested programs.	\$80,000
Saint Paul Schools Project Early Kindergarten (PEK)	PEK is a program designed to help ELL and low income families in Saint Paul prepare their children for school. MELF funds were used to expand professional development and consultation based on the Saint Paul Public School’s curriculum to community-based child care and family child care providers in areas surrounding Saint Paul schools, to better align services in these programs and improve kindergarten readiness.	\$257,592
Wilder Family Literacy Study	Wilder Research conducted a two-year evaluation to better understand the level of participation or “dosage” needed in Family Literacy programs for at-risk children to be adequately prepared for kindergarten. The study helped determine the most cost-effective level of Family Literacy services for low-income and non-native English-speaking children in the state.	\$92,350
<b>Home Visiting</b>		
Autism Society of Minnesota	The Autism Society of Minnesota was funded to implement an intervention, the Play and Language for Autistic Youngsters (PLAY) Project, for families of young children with autism spectrum disorders (ASD). The PLAY Project taught parents strategies and techniques for interacting with their children. Goals for parents were to increase their competence and satisfaction with regard to parenting children with special needs. Goals for children were to enhance social, cognitive, and behavioral outcomes.	\$100,000
Parents as Teachers	Three ECFE sites (Waseca, Saint Paul, Anoka-Hennepin) sought to identify new ways of successfully engaging hard-to-reach families. Each site aimed to recruit families not currently reached by early childhood services by implementing the Born to Learn Plus Program (a combination of home visiting and peer-led parent education).	\$356,850
<b>Professional Development</b>		
Head Start Data Aggregation Project	The Head Start Association was funded to implement a computer-based assessment system that will aggregate child data across the state of Minnesota and support the interpretation and use of child assessment data. Challenges to the implementation process in different settings, the quality of data collected, and the effectiveness of professional development on assessment were evaluated.	\$189,106

\* Funds listed here cover program implementation and do not include evaluation costs, with the exception of the Wilder Family Literacy Study.

Table continues...



<b>Community/Systems</b>		
Anoka Healthy Start	Anoka Healthy Start is a network of community partners working to connect families with young children to information, education and early childhood resources in ways that meet family needs and avoid service duplication. The initiative used MELF funds to support “re-tooling” efforts to reevaluate community needs, shift emphasis towards school readiness, and strengthen internal operations to reflect the new priorities. Evaluation activities focused on the creation and use of objective measures for home visitors, assessments of various service components, monitoring of partnerships, and an understanding of systems change as a result of the new focus on school readiness.	\$420,000
Caring for Kids (CfKI)	The Caring for Kids Initiative is an effort of the Interfaith Outreach and Community Partners in Wayzata, MN to provide scholarships for low-income children to attend a quality early care and education program. CfKI formed partnerships with public and private early care and education providers, developed a model of blending funding, provided initial home visiting/parent education, and promoted a network of early care and education providers. Evaluation activities focused on the role of the partnership in forming and sustaining CfKI.	\$250,000
Five Hundred Under Five (500u5)	Five Hundred Under 5 is a collaborative initiative designed to improve school readiness in two neighborhoods of North Minneapolis. The initiative focuses on community engagement, service enhancement and expansion, and information-gathering and research. MELF funds were used for core outreach staff, creation and operation of a parent education program, and development of “bridge scholarships” to help children remain in high-quality early care and education programs.	\$712,500
Suburban Ramsey Family Collaborative	The SFRC grant is a collaboration of four school districts (Moundview, North Saint Paul, Roseville, and White Bear Lake) that was funded to improve literacy for the increasing population of language and culturally isolated families and other isolated families in their communities. Priorities for the grant included building cross-sector partnerships, improving strategies to identify and serve isolated families in their communities, and increasing formal and informal connections between ELL/Immigrant families and the business sector.	\$140,000
Total Community Grant Funding (2007-2009)		\$3,023,466



# Measurement of Families and Children in the Community Grant Evaluations

While the diversity of project focus and scope addressed strategic priorities for MELF, these program variations also presented somewhat of a challenge for the design and implementation of an overarching evaluation framework. On the one hand, MELF staff and evaluators wanted focused evaluations of the implementation and outcomes for each individual community grant; on the other hand, MELF staff and evaluators wanted to describe ways in which the **set** of community grantees advanced MELF's overall and more comprehensive mission. After consultation with MELF staff and board members and other research and evaluation colleagues, CEED evaluators elected to design an evaluation plan that encompassed both project-specific evaluation questions and measurement protocols and cross-project questions, assessments, and evaluation activities. To accommodate this "both/and" approach, CEED evaluators developed a series of measurement protocols to provide information needed at each level of this evaluation. This section of the report outlines the measures

used to gather evaluation data about the families and children. It also describes across the grantees key aspects of families and children relevant to their participation in the early care and education system, namely the:

- challenges and risks facing MELF families and children, including the child's current developmental status;
- families' use of the early care and education system; and
- needs of families and children as reported by parents and programs.

## MELF Measures<sup>1</sup>

### Parent Interview

In collaboration with members of the MELF Research Consortium, CEED designed an interview to be completed by parents of children enrolled in MELF-funded activities. The approximately 45-minute interview covered home and family activities, parent support and health, child health and development, parent involvement, services received, early care and education decisions, and key demographic risk factors known to affect children's school readiness (e.g., poverty, family composition, maternal education, birth weight, and immigration status).

In the fall of 2008, parents were invited to participate in the MELF parent interview if they or their children received services that were funded, at least in part, by MELF. All interviews were administered by telephone. The 278 families participating in the parent interview (representing only 55% of those enrolled in the evaluation due to recruitment and language barriers) were served by eight of the nine grantees that provided service to families as part of their grant (Bloomington, 500U 5, Anoka, Parents as Teachers, Joyce, PEK, Family literacy, CfKI).

<sup>1</sup> Use of these measures, as well as all other recruitment and evaluation activities, were reviewed in advance by the Committee for Protection of Human Subjects at the University of Minnesota, and all data gathering activities were conducted in compliance with this review.



Thirty-eight percent of the interviews were conducted in a language other than English. The most common other languages were Spanish (26% of all interviews), Karen (4%), and Somali (4%). Ninety percent of respondents were mothers and 9% were fathers.

## Child Measurement Model

Although many definitions of school readiness exist in the field, almost all experts agree that school readiness encompasses multiple domains of development. Therefore, as part of the MELF measurement model, a battery of assessments was chosen to capture multiple domains of development, using multiple sources of information. Care was taken to select measures that were well-regarded in the field, which would allow for comparability with other national studies, capture the relevant constructs most efficiently across the age range targeted by MELF, and create the least amount of burden on the children.<sup>2</sup>

While the MELF measurement model was developed to improve the consistency of information gathered across all MELF evaluations, the community grants varied considerably in the extent to which the purpose for their funding - and therefore the ensuing evaluation plans - focused on child outcomes. Several evaluation plans were already in place (e.g., Family Literacy, PEK) prior to MELF funding using alternative tools and timing of data collection. Thus, the extent to which the MELF measurement model could be fully implemented within the community grants was lower than across the other MELF funded initiatives (i.e., the Parent Aware evaluation and Saint Paul Scholarship evaluation). When possible and appropriate based on the goals of the grant, data were collected on children across as many of the domains as possible using multiple sources, including parents, teachers and direct assessment of children by specially trained assessors. Table 2 outlines the measures used to capture development across multiple domains during the 2008-2009 school year, and the number of children assessed with each measure (or N) in Fall 2008. In some cases, program implementation challenges (e.g., difficulty hiring staff and finding families, evaluation timing and recruitment) prohibited the collection of child data.

<sup>2</sup> The definition of school readiness used here, and technical analysis of two statistical models for assessing school readiness, are addressed in a separate white paper being produced by CEED.

## Other Measures

Staff surveys and interviews (described in further detail in Appendix D) further capture information on the needs of children and families served across studies.

## Results for MELF Families and Children

### Indicators of Family Risk

Along with the need for high quality early care and education programs for children and families, MELF also emphasized the important role of families in supporting their children's school readiness. Research clearly demonstrates that families exert a consistent and powerful impact on children's outcomes, even when they participate in early care and education programs (NICHD Early Child Care Research Network, 2001). In keeping with those findings, MELF evaluators identified a number of key demographic risk factors known to affect children's school readiness: poverty, family composition, maternal education, birth weight, immigration status, and maternal depression. Parents responded to questions asking about the presence of these demographic risk factors in their lives in the parent interview. Table 3 provides a synthesis of their responses. For comparison's sake, and where appropriate, averages for Minnesota families for each risk factor are also provided.

The 278 families in this evaluation sample demonstrated higher rates of risk on all measures collected, with the exception of items screening for maternal depression. This is consistent with MELF's efforts to fund programs that serve high-risk children and their families; however, we are unsure at this point why this more at-risk sample reported lower benefit use than state averages would predict (i.e., lower CCAP and welfare rates).



**Table 2. MELF Child Measurement Model: Description of Domain of School Readiness, Standardized Measure(s), and Sample Sizes**

Domain	Measure	Scale	Measure Description	Fall 08 N
Early Math	Woodcock-Johnson III (WJ-III)	Math Reasoning	The Woodcock Johnson (3 <sup>rd</sup> Ed) is a widely used collection of tests measuring achievement in reading, mathematics, written language and general knowledge. Two subtests, Quantitative Concepts and Applied Problems, are included in the MELF measurement model and are combined to create a measure of mathematical reasoning and skills. It is a direct standardized assessment collected by a trained assessor in 10 minutes. A score of 100 is an average score, with a standard deviation of 15.	89
Language	Peabody Picture Vocabulary Test IV (PPVT-IV)	Receptive Language	The Peabody Picture Vocabulary Test (PPVT) is a quick method of assessing receptive language for children over two years and six months. It is a direct standardized assessment collected by a trained assessor. A score of 100 is an average score, with a standard deviation of 15.	156
	Individual Growth & Development Indicator (IGDI)	Picture Naming (Expressive Language)	The Individual Growth and Development Indicators' (IGDIs) subtest Picture Naming is a general outcome measure of children's expressive language that can be used with children between the ages of 3 and 5. Administration takes one minute and can be used to monitor child progress over time. Scores are compared to those of a large national sample.	128
Early Literacy	Test of Preschool Emergent Literacy (TOPEL)	Print Concepts, Expressive Vocabulary, Phonological Awareness	The Test of Preschool Early Literacy (TOPEL) is an assessment of early literacy skills for children between the ages of 3 and 5. Three areas of emergent literacy are covered: Print Concepts, Definitional Vocabulary, and Phonological Awareness. It is a direct standardized assessment collected by a trained assessor in approximately 25-30 minutes. A score of 100 is an average score, with a standard deviation of 15.	96
Social-Emotional	Social Competence & Behavior Evaluation (SCBE-30)	Social Competence, Affective Expression, Adjustment	The Social Competence and Behavior Evaluation (SCBE) is a teacher-completed rating scale measuring the three dimensions of social competence, anxiety-withdrawal, and anger-aggression in children ages two and half to six. It takes approximately 15 minutes to complete the items pulled from the longer version of the SCBE-80. This is not a standardized tool; scores are calculated by adding up the points for each individual item in a given dimension with a total possible low score of 10 and a high score of 60.	118
Health	Parent Survey	Includes social determinants of health (medical home, risk, insurance)		278



**Table 3. Indicators of Risk**

Indicators of Risk	Average MN % Risk (Source)	Community Grant Family % Risk
<b>Poverty</b>		
Families below poverty level (based on family-size)	6.5% (U.S. Census Bureau, 2007a)	40%
Families below 200% of the poverty level	16.6% (U.S. Census Bureau, 2007)	74%
Families receiving welfare	36% (U.S. Department of Health and Human Services, 2008)	13%
Low income families in MN receiving CCAP	19% (Chase, Arnold, Schauben, & Shardlow, 2004)	16%
<b>Employment Status</b>	95.4% Employed (Minnesota Department of Employment and Economic Development, 2008)	62% Employed 21% Staying at Home 9% Going to School 6% Other 3% Looking for Job
<b>Family Composition</b> – Single-parent-headed families	20.6% (U.S. Census Bureau, 2007)	24%
<b>Maternal Education</b> - Percent of mothers who completed high school	92% (Lumina Foundation for Education, 2009)	72%
<b>Low Birth Weight</b>	6.1% (Centers for Disease Control and Prevention, 2006)	11%
<b>Child Race</b>	Black/African American: 4.5% Asian: 3.5% Hispanic/Latino: 4% White/non-Hispanic 85.7% Other (includes bi/multi-racial): 2.3%	Black/African American: 36% Asian: 5% Hispanic/Latino: 34% White/non-Hispanic: 19% Other (includes bi/multi-racial): 6%
<b>Immigration Status</b>	5.3% foreign born (U.S. Census Bureau, 2000)	30% immigrant/refugee
<b>Symptoms of Maternal Depression</b>	17% according to national depression averages (Horwitz, Briggs-Gowan, Storfer-Isser & Carter, 2009)	17% reported clinically significant symptoms of depression in the last year

## Indicators of Children’s Developmental Risk

An important risk factor to consider is the current developmental status of the children targeted by these

programs. Are these at-risk children ready or on track to being ready for kindergarten? Or are they already falling behind their same-aged peers with fewer risk factors? Knowing children’s initial developmental status is necessary to understand the range of development and risk, adapt program activities accordingly, and gauge progress.



What follows is a description of preschool-aged children served by MELF-funded programs at a single point in time. Data reported here were collected in the Fall of 2008; in most cases, children and families assessed were just beginning to participate in MELF-funded programs. As a result, these data offer a snapshot of how children were developing and progressing towards school readiness close to the time they arrived in a program. Information in this section is based on input from parents completing the MELF parent interview, as well as child measures collected by the MELF assessment team for several programs (i.e., Bloomington, Caring for Kids Initiative, Saint Paul Schools PEK Program, and Wilder Family Literacy). First, children's current health status and knowledge of letters and numbers as reported by parents are described. This is followed by assessments of children's readiness in the domains of language, early literacy, early mathematics and social-emotional development collected via teacher reports or direct assessments collected by specially trained assessors.

## Health Status

Parents (N=278) completing the MELF parent interview report their belief that their children are on track with their health and development. Over 91% of parents indicate that their children:

- have health insurance (with 31% reporting public insurance);
- have a doctor or health care provider used regularly for the child's health care needs; and
- are considered in good health.

This is a positive finding, particularly in light of the findings presented earlier on the increased likelihood of low birth weight and decreased benefit use. Health status was a strength for MELF children in the evaluation sample.

## Parent Report of Children's Basic Knowledge

A majority of parents, just under 75% of parents of 3-5 year olds in this sample, reported that their child knew most or all of the letters of the alphabet. Even more parents (97%) reported that their child could count up to at least 10. At least 80% of parents reported that their child did the following most or almost all of the time:

- used words to communicate what he or she needs, wants or is thinking about;



- was curious and enthusiastic about learning new things;
- took turns, shares, and gets along well with other children; and
- asked an adult for help when he or she needs help or has a problem with something.

Over 75% of parents of infants and toddlers and 85% of parents of preschoolers reported reading to their child often or every day. These rates are higher than results from a MELF community baseline study conducted by Wilder (2007) where two-thirds of families read to their children daily or most days, as well as a 2006 National Household Education Survey indicating that only 50% of parents with children 3 to 5 years of age read to their children every day. These higher percentages are a hopeful sign that parents are both engaged in and knowledgeable about their young children's learning, and may reflect the initiative of parents whose children were participating in MELF-funded programs. The degree to which this can be attributed to the programs or to eager parents with high hopes for their children's accomplishments remains unknown. It may provide an indication of parent engagement in high quality programs.





## Teacher Reports and Direct Assessments of Children's School Readiness in Fall 2008

Three of the five measures of child development, the PPVT-IV, TOPEL, and WJ-III, were gathered using norm-referenced tests and are reported in "standard score" units. Norm-referenced tests are those that compare the performance of an individual child to the performance of other children the same age – the "norm sample." Individual child scores, and the group averages reported here, describe how close to (or far away from) the normative average an individual or group scores. Standard scores can be used to compare individuals from different grades or age groups because all scores are converted to the same numerical scale.

Two additional non-standardized measures were also collected as part of the MELF child assessment battery: the IGDl Picture Naming Scale and the SCBE-30. For the IGDl Picture Naming scale, means and percentiles have been calculated from the administration of the tool to a large, national sample. The scores are not standardized, but the 25<sup>th</sup> percentile has been identified as a cut off for identifying children who may be at risk for language delays.

While the SCBE-30 is also not a standardized mea-

sure, the author of the tool does provide means and standard deviations broken down by age and gender from a large, nationally representative sample (LaFreniere & Dumas, 1996). This is the only assessment tool for which scores are broken down by gender as the authors of the tool identified persistent gender differences across ages in two of the three scales: social competence and anger-aggression, with girls typically scoring higher on social competence and lower on anger-aggression than same-aged boys. The percentage of MELF children falling 1 and 2 SDs below the mean for Social Competence are compared to the means and standard deviations from this national sample.

Issues related to measuring school readiness of non-English or limited-English speaking children in the MELF community sample surfaced quickly across the MELF evaluations, and deserve attention before turning to the results. Based on MELF's funding priorities, a large number of children whose first language is not English were assessed as part of the programs being evaluated. Nonetheless, after consultation with MELF staff and other early childhood researchers, MELF Research Consortium members elected to adopt a definition of school readiness that emphasizes oral language and literacy proficiency in English. We acknowledge that this definition is less than perfect and may under-represent the competence of some children with limited English proficiency. However, we





also concluded that MELF’s criterion for success – preparation for academic and behavioral competence in an English-based educational system – currently rests on English-language proficiency. Though understandable, it is with some regret and caveats that we relied solely on assessments in, and about, English.

Measuring school readiness in children who are English language learners (ELL) is a difficult task with a multitude of factors requiring consideration that are both practical and philosophical in nature. Children without a certain amount of proficiency in English cannot be expected to complete a battery of assessment tools administered to them in English. Therefore, the MELF evaluators, in consultation with national experts, established that children who fell below 2 standard deviations on the PPVT-IV, the first measure administered and a normed measure of

English vocabulary, would only complete the IGDIs to provide further evidence of their language development in English (i.e., the remaining tools that required direct assessment of children were not administered to these children). Teachers completed indirect measures on all children, regardless of English language status. It is important to note that many children who are also English Learners did indeed perform well enough on the PPVT-IV to complete the remaining battery. Results are therefore separated into two very rough categories: an English proficient group (i.e., able to complete the full assessment battery) and a not English proficient group (i.e., scored below 2 SD on the PPVT-IV and only completed the IGDIs).

Table 4 summarizes scale score means and standard deviations found on measures of language, literacy, early mathematics, and social-emotional develop-

**Table 4. Children’s Baseline School Readiness Fall 2008**

	M	SD	% below 1SD*	% below 2SD*
<b>Language</b>				
PPVT-IV (n = 156)	76.7	16.9	69%	39%
<b>IGDI Picture Naming:</b>				
Entering K in 2010 (M age = 48 months, n = 28)	13.1	6.7	54% fall below the 25 <sup>th</sup> percentile	
Entering K in 2009 (M age = 58 months, n = 100)	16.2	7.2	46 % fall below the 25 <sup>th</sup> percentile	
<b>Early Literacy</b>				
TOPEL Print Knowledge (n = 96)*	96.5	14.9	32%	0%
TOPEL Phonological Awareness (n = 87)*	94.6	13.7	31%	3%
TOPEL Definitional Vocabulary (n = 89)*	90.7	16.7	39%	15%
<b>Early Mathematics</b>				
WJ III Math Reasoning (n = 89)*	93.3	13.7	24%	6%
<b>Social-Emotional Development</b>				
SCBE Social Competence (n = 117)**				
Boys Entering K in 2010 (n = 16)	33.6	11.3	38%	6%
Girls Entering K in 2010 (n = 16)	40.7	8.3	6%	6%
Boys Entering K in 2009 (n = 44)	38.7	10.7	18%	7%
Girls Entering K in 2009 (n = 41)	40.1	9.4	22%	5%

\*Sample sizes vary in large part due to differences in the Wilder project and MELF measurement models, and the inclusion of English Language Learner scores for the PPVT.

\* NOTE: In a population sample, one would expect approximately 16% of participants to score more than 1 SD below the mean, and approximately 2.5% to score more than 2 SDs below the mean



ment for MELF community grant children. For the standardized measures (i.e., PPV-IV, TOPEL, WJ III), if the MELF sample was similar to a population of other children of similar ages, MELF averages would be between 85 and 115, only 16% of the sample should fall below 1 Standard Deviation (SD), and 2.5% of the sample should fall below 2 SDs. As can be seen in Table 4, a greater percentage of MELF community grant children scored 1 SD below the norm on the PPVT-IV, the TOPEL, and the WJ III than expected based on the norming sample. This indicates that a greater percentage of this MELF sample is performing below typical expectations. Additionally, a greater percentage of these children scored 2 SDs below the norm on the PPVT-IV and the Definitional Vocabulary scale of the TOPEL.

Results from the IGDIs report the percentage of children, based on age and English proficiency, who scored below the 25<sup>th</sup> percentile for that age as compared to the national sample. Approximately half of the children fall below the 25<sup>th</sup> percentile, indicating that they are behind their same-aged peers in the rest of the country.

Children’s social emotional development for this sample looks similar to the national sample. With only one exception, the percentage of MELF community children who fall 1 and 2 SDs below the mean established by the national sample on the social competence scale of the SCBE-30 does not appear to differ significantly from expected (i.e. 16% for 1 SD and 2.5% for 2 SDs). The one exception are the boys in the kindergarten class of 2010, where nearly 40% of the sample is more than 1 SD below the mean from the national sample, though caution should be used when interpreting this finding as there are data from only 16 boys in the kindergarten class of 2010.

Not surprisingly given the way in which ELL status is

defined in this project, non-English proficient children received lower scores on both measures of language development, the PPVT-IV and the Picture Naming scale of the IGDIs (see Table 5). Based on teacher report of social-emotional development using the SCBE-30, children without English language proficiency did not differ significantly from children with English language proficiency (not shown in table).

## Indicators of School Readiness Growth over Program Participation

Three MELF-funded programs, Saint Paul Public School’s PEK program, Wilder Family Literacy, and Bloomington’s MELF/KinderPrep Preschool, studied children’s school readiness over the course of the program, either by using a comparison group or by measuring the same children both earlier and later in their program participation.

PPVT findings from the evaluations of both Saint Paul School’s PEK Program and Family Literacy sites indicate that children participating in programming do have some advantage over comparison classmates without prior preschool or child care experiences. Children in both programs evidence higher academic competence over their classmates in Kindergarten. While findings are inconclusive at this point for children in PEK child care settings (those funded by MELF), children in the school-based version of PEK and non-Hispanic children in Family Literacy did outperform their peers on the PPVT.

In Bloomington, the initial intent of the community grant was to examine the issue of how dosage (i.e., number of hours served in programming) affected child outcomes. MELF funded a half-day “MELF preschool program” to serve as a comparison group to a full-day preschool which the district expected to be able to continue via Early Reading First (ERF) funding

**Table 5. School Readiness by English Language Proficiency**

	English Proficient		Not English Proficient	
	M (SD)	N	M (SD)	N
PPVT-IV	87.0 (12.0)	97	59.7 (6.9)	58
IGDI Picture Naming:				
Entering K in 2010	14.1 (7.3)	18	10.9 (5.4)	9
Entering K in 2009	18.8 (6.4)	68	10.2 (5.2)	31



**Table 6. Bloomington School Readiness**

Means (and SDs), School Readiness, MELF vs. KP	MELF	KP
Language		
PPVT-IV	80.2 (14.4)	84.6 (15.4)
Early Literacy		
TOPEL Print Knowledge	101.0 (14.1)	101.6 (13.7)
TOPEL Phonological Awareness	92.7 (15.9)	88.8 (15.7)
Early Mathematics		
WJ III Math Reasoning	91.4 (14.0)	90.8 (15.5)

in place in the district the previous year. In October 2007, one month after children were recruited and enrolled in the half-day MELF preschool, ERF notified the district that they did not receive funding for the current school year. Quickly, the district acted to provide a comparison group for the MELF preschool as stated in their contract, but they were not able to fund a full-day program. Working with Bloomington personnel, MELF evaluators identified two approaches to approximating the original intent of evaluating differences in dosage. First, given that curriculum, arrangements, staffing, and other program elements were virtually identical from ERF to MELF Preschool models, CEED developed a data sharing agreement with the entity that originally completed the ERF evaluation. With this data sharing agreement in place, we are now conducting a comparison of non-simultaneous cohorts of children served in full-day, full-year programs and those served in half-day, partial-year programs. Results of this comparison, somewhat beyond the MELF evaluation per se, will be forthcoming in early 2010.

A second program variation allowed comparison of a smaller difference in dosage of early care and education programming, based on the number of weeks children were served in half-day classrooms. For this comparison, MELF Preschool students were compared to children enrolled in KinderPrep (KP), another Bloomington Public Schools pre-k program. Programs mirrored each other in terms of curriculum, assessment and participants, but differed primarily in the total number of hours served over the course of the school year:

- The MELF Preschool served children for 3.25 hours per day, 44 weeks per year, for a total of 178 days.
- KinderPrep served children 3.25 hours per day for

38 weeks per year, for a total of 122 days.

As a result, a tentative comparison of “dosage” is possible here – that due to relatively small differences in the number of weeks of service. Comparing children enrolled in MELF Preschool and KP, no differences were found on measures of language, early literacy, or mathematics. Given Reynolds and Neumann’s recommendation (from 10 essential features of early care and education, presented at the 2007 Minnesota Governor’s Summit on Early Childhood) for full-day, full-year programming for high-risk children, these findings may not be surprising. Half-day services, whether for 122 or 178 days, may be insufficient to produce robust differences in children’s school readiness. As Table 6 shows, children in both programs obtained scores in Spring before Kindergarten in the low to low-average range on language, literacy, and mathematical reasoning measures.

In summary, MELF families and children receiving services via MELF community grants, as compared to Minnesota families, do fit a demographic profile of high-risk families based on their responses during the parent interview. In particular, MELF families were considerably more likely to be poor, be immigrants or refugees, have lower levels of education, and have children who were low birth weight. While the children do show beginning awareness of letters and letter-sound correspondence, a point corroborated by parent reports, they demonstrate especially low functioning on the PPVT-IV, a measure of vocabulary, which is a strong indicator of children’s future success in school. However, some evidence suggests children who participated in MELF-funded programs tended to have advantages over comparison peers lacking preschool experiences when they started school.



A critical question – and one that cannot be answered by the design of evaluations reported here – is whether MELF-funded programs succeeded at promoting children’s language development. While the lack of baseline or comparison group measures makes this question unapproachable in the analyses reported here, future evaluation reports from the MELF Research Consortium focused on effects of quality features on children’s development and related evaluations (of PEK in Saint Paul and other classroom-based innovations in place in Minnesota) will offer important information on this topic in the months ahead.

## The Role of Early Care and Education for MELF Community Families

The early care and education system is viewed as a leverage point from which to support families with

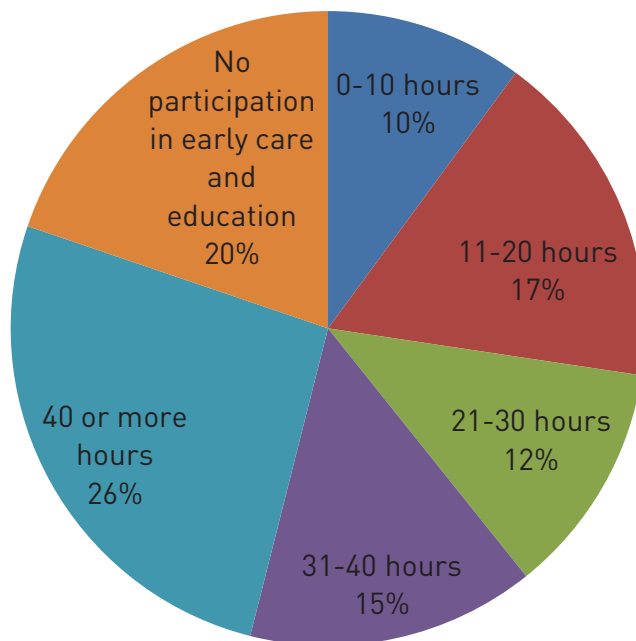
young children. MELF families demonstrate significant involvement in the early care and education programs, although there are important variations in patterns. The following section describes MELF families’ use of the early care and education, including the amount of time children spend in settings, the number and type of settings used, parents’ primary reasons for choosing their care settings, and their levels of parent involvement in those settings.

### Hours/Week

Early care and education use varied widely among MELF families, from parents reporting that their children spent either no time in care or less than 10 hours per week in some form of care (29.9%), to children spending more than 40 hours per week in some type of early care and education program (26.3%). As can be seen in Figure 1, the majority of families used some sort of early care and education for 11 or more hours per week (70.1%), in part reflecting MELF’s focus

on early care and education, but also confirming that these early care and education settings are an important context through which to reach low-income, at-risk families and children.

**Figure 1: Parent report of the number of hours of child care use (N=278)**

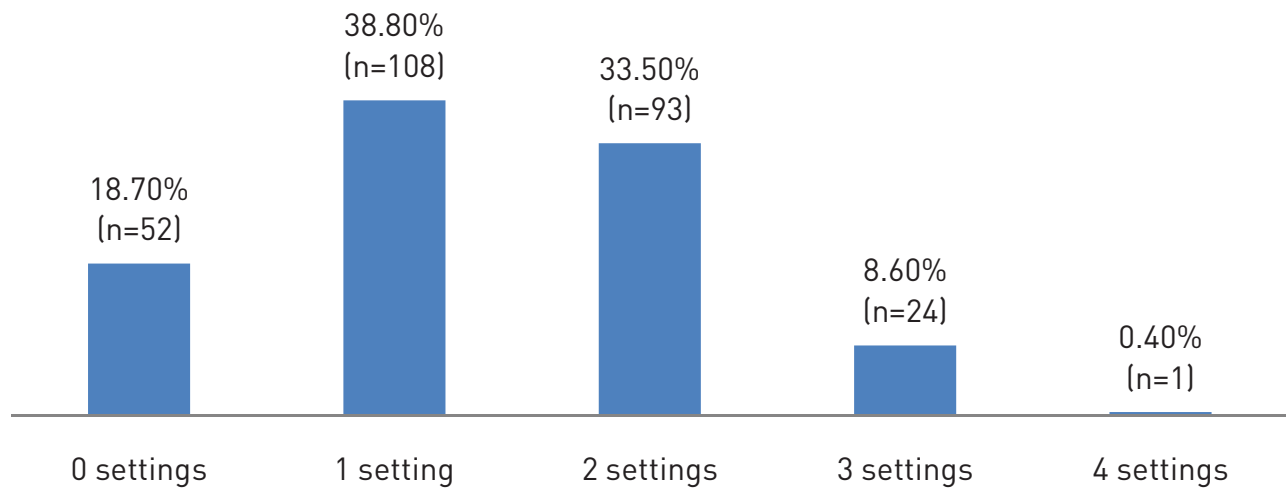


### Number of Early Care & Education Settings

Of the parents reporting early care and education use, parents most frequently reported enrolling their child in only one setting (38.8%). Yet, combining categories reveals that 42.5% of parents relied on multiple arrangements, using two, and even up to four, settings for their children’s care (see Figure 2).



**Figure 2: Parent report of the number of child care settings used in an average week (N=278)**



### Type of Early Care and Education Setting

Significant amounts of missing data hinder conclusions that can be drawn, particularly when describing the care of 5 year olds, but the following general trends are noted with this sample. When away from their parents, children younger than three are most likely to be with family, friends and/or neighbors (referred to as FFN care). Not surprisingly, given the type of programs funded, most MELF children overall spend time in child care centers and preschools (36.5%). However, a significant number of children

also spent time in licensed family care (11.3%) and FFN (20.4%) settings (see Table 7).

### Parent Involvement in Early Care and Education Programs

Consistent with the broader literature on parent involvement, parents were much more likely to talk with teachers and providers about their children's accomplishments or things to practice at home than to spend time volunteering in the classroom or participate in planning classroom activities (see Table 8).

**Table 7. Most Frequently Used Early Care and Education Settings**

Type of early care and education setting used most often based on parent report of hours spent in all types of non-parental care (N = 274)	Younger than 3 (N = 47)	3 year olds (N = 79)	4 year olds (N = 130)	5 year olds (N = 18)	TOTAL N =274 birth through 5 years of age
Head Start	0% (0)	3.8% (3)	10% (13)	5.6% (1)	6.2% (17)
Child care center/Preschool	14.9% (7)	43.0% (34)	43.1% (56)	16.7% (3)	36.5% (100)
Licensed family child care	12.8% (6)	15.2% (12)	10% (13)	0% (0)	11.3% (31)
Family, friend, neighbor care	42.6% (20)	16.5% (13)	15.4% (20)	16.7% (3)	20.4% (56)
Two settings used equally	0% (0)	3.8% (3)	4.6% (6)	0% (0)	3.3% (9)
Missing	29.8% (14)	17.7% (14)	16.9% (22)	61.1% (11)	22.3% (61)

\*Information on four children is not included in the table above because they were older than 5 years of age.



## Table 8. Parent Involvement

Parents reported varying levels of involvement with their child's care provider (N=204)

How often would you say that you:	Always or Often % (N)	Sometimes % (N)	Never % (N)
volunteer in your child's classroom?	11.7% (24)	30.9% (63)	57.4% (117)
participate in planning classroom activities?	10.3% (21)	19.1% (39)	70.6% (144)
talk with your child's teacher/childcare provider about your child's accomplishments?	61.7% (126)	34.3% (70)	3.9% (8)
talk with your child's teacher/child care provider about program or school activities to practice at home?	47.2% (85)	42.2% (76)	10.6% (19)

In summary, MELF parents report patterns of early care and education use that appear comparable to studies involving other low income families; the majority of families use multiple early care and education settings (42%), the majority of the families use these settings for at least 11 hours per week (70.2%), and the two most common types of settings utilized by families were preschool or child care centers (36.5%) and FFN care (20.4%). Additionally, MELF parents report greater participation in their child's early care and education setting at the level of talking to teachers rather than volunteering or participating in the program.

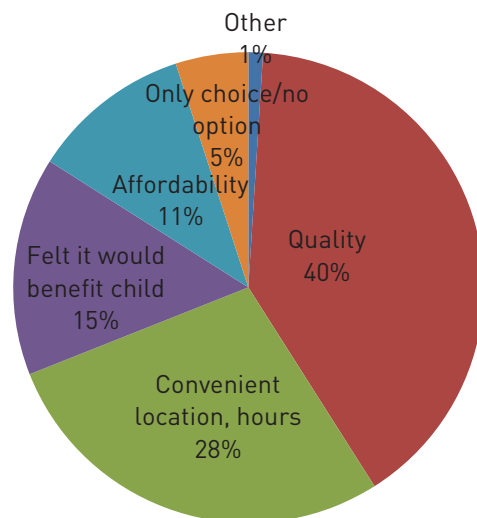
## Family Identified Needs

### Main Reason Parents Chose Early Care and Education Setting

Results presented in Figure 3 provide a preliminary analysis of factors influencing parent choice of early care and education settings. This topic will be covered in greater depth for MELF in future evaluation reports. Themes analyzed from MELF community parents' open-ended responses during the parent interview

highlight their primary reason for choosing their child's current, primary care setting. Most indicated factors related to the quality of the setting (40%). What constituted "quality" covered a wide range of responses from parents, including comments regarding the care and activities provided by teachers, as well as parent's own assessment that the setting was high quality or

**Figure 3: The number one reason parents chose their child's current early care and education setting (N = 187)**



opinions of others that the setting was of high quality. Close to one-third of parent comments (28%) revealed factors related to the convenience of the location and/or hours provided. Fifteen percent of parents reported that they chose the setting because they felt it would benefit their child. Comments in this category included helping children learn to share, speak English, or get along in a group.

## Parent Descriptions of Important Factors in Early Care and Education

Preliminary analyses of parent response to the question “What are the three most important things a child care provider or early care and education program can do for your child’s learning and development” revealed two broad themes:

- Characteristics of the Environment, including safety, basic needs, stability, routines, and warm, individualized attention; and
- Skill Development, including separation and trust in other adults, general and specific learning (e.g., math, reading), English language support, social skills with adults and children, behavior, and enthusiasm for learning.

MELF parents, like most other parents, desire early care and education settings to keep their children safe and to provide structured, stable, and warm learning environments with high quality care providers so their children can develop the skills they need to be ready for school, including social skills, language development, appropriate classroom behavior and a curiosity about and love of learning.

## Community Support

In general, parents reported feeling supported by their communities and feeling hopeful about their children’s future. However, parents appeared more dissatisfied with the amount of resources in their neighborhood for families with children.

One factor that parents in MELF-funded programs repeatedly identified as necessary to support their children’s development is access to high quality early care and education settings. Additionally, many parents reported wanting more resources in their neighborhoods for families with young children, despite the majority reporting that they believe their community is a great place for children to grow up and thrive always or often (68%; see Table 9).

## Program-Identified Needs of Families

Program staff (i.e., teachers, family child care providers, directors, home visitors) also provided important context in highlighting the needs of families they serve. Programs struggle to meet the multiple, intense needs of families most at-risk. Myriad situational, economic, health, mental health, and geographic factors all present significant barriers to establishing family access and engagement in services. Lessons learned from the grantees speak to the creativity and persistence needed to ensure services are coordinated, reliable and trusted, and engaging to meet the needs of families in crisis or at-risk.

**Table 9. Community Support Items**

How often do you feel: N=278	Always % (N)	Often % (N)	Sometimes % (N)	Never % (N)
that you belong and are accepted by others in your community?	47.5% (132)	28.1% (78)	18.3% (51)	4.3% (12)
hopeful about your children’s future?	67.3% (187)	20.9% (58)	8.6% (24)	2.5% (7)
there are enough resources in your neighborhood for families with children?	37.4% (104)	27.7% (77)	26.6% (74)	6.8% (19)
your neighborhood is a great place for young children to grow up and thrive?	45.3% (126)	22.7% (63)	22.7% (63)	6.8% (19)





that not only affect individual families, but also the willingness of other agencies to partner with a program. Several grantees, notably Parents as Teachers and Autism Society of Minnesota which served families via home visits, struggled with the timing of the grant funding and the time needed to hire and train staff, and identify and serve families. Programs, particularly new agencies or programming, require time and space to find and build relationships with the neediest families and this must be well outlined in funding plans. In some cases, community partners were hesitant to refer families to a program that was based on time-limited or otherwise unstable funding sources.

Program reliability and stability at the family level is equally important and shows that building relationships with families takes time, commitment, and trust. The grantees unanimously emphasized two essential strategies for reaching out and building relationships with disconnected or otherwise at-risk families to counteract barriers such as distrust, mobility, and family crises: 1) the need to find and build trust with families in their homes and neighborhoods, and 2) the role of a trusted, persistent messenger. Knock-

## Coordinated Services Matter

Few organizations or programs alone are able to meet all of the presenting needs of the families they serve. Program representatives interviewed across MELF community evaluations view coordination and communication across systems and organizations as essential in keeping programs linked and families connected to necessary resources, providers, and services. Sharing information, resources, and referrals with other agencies not only allows programs to find and enroll families, but also expands services that can be provided as a result of creative collaboration and program development shared by multiple agencies. Families who are disconnected also often need help accessing and moving between programs and service systems. Strong networks and coordination among related service agency partners increases the likelihood that families will receive the support they need.

## Reliability and Trust Matter

Experiences of the grantees highlight the role of reliability and trust in identifying and serving families struggling with multiple risk factors. Programs that are well-connected, well-known in the community, and have a proven track record are more likely to find families or have families referred to them. At the program level this speaks not only to the need to strategically market services and program offerings, but also the role of stable funding to make sure families are served well. Program staff provided examples of waiting lists, delays in services, and slow start-ups

### Examples of Agency Coordination

- Seventy-six percent of partners involved with the Anoka Healthy Start (AHS) network of home visiting agencies indicate they are able to provide families with more organized, connected, accessible, and in-depth programming as a result of AHS communication and activities. Partners credit AHS not only with helping their agency access more families, but also reaching families who would have otherwise remained unserved. For instance, several partners collaborated to provide transportation and programming for teenage mothers and their children who otherwise would not have received services during the summer months.
- The Caring for Kids Initiative (CfKI), embedded within the Interfaith Outreach and Community Partners (IOCP), enhanced the ability of IOCP to offer a full range of support services to low income families to meet their needs for housing, transportation, employment and child care. The assurance of choice of a quality program is cited as an additional benefit of the initiative.





The Saint Paul site of Parents as Teachers managed to successfully recruit and retain primarily new immigrant, Karen-speaking, families over the course of the grant. The program attributes greater levels of family trust to:

- the availability of Karen-speaking service providers;
- strong connections and communication networks in the new immigrant community to learn about available services;
- more optimistic, less jaded parents who were willing to engage a system; and
- parents' strong desire to participate in educational programs to benefit their children and enhance their chance of success in their new country.

ing on doors in low-income apartment complexes, offering on-site family activities, and distributing literacy kits and community resources are a few examples of strategies grantees employed to find families. In an effort to promote trust by improving cultural/linguistic competence or representation, several grantees (e.g., Autism Society of MN, Joyce Preschool, Parents as Teachers, Five Hundred Under 5) hired staff members from the community to recruit and serve families in their home languages of Karen, Somali, and Spanish.

## Engaging, Family Driven Services Matter

Programs claimed greater success in finding, serving, and keeping families when services were flexibly tailored to family situations and input to the greatest degree possible. According to MELF community staff, parents who view programming as useful, responsive, feasible, and sensitive to family needs are more likely to participate in services offered. Community grantees serving families provided rich examples of strategies they employ to reach out to families who are typically more difficult to engage. A few general examples of the purposeful outreach methods MELF grantees employed over the course of MELF funding included responding to cultural and linguistic preferences

Program staff identified the following barriers limiting family engagement in services and reducing successful outcomes: basic needs, transportation, parenting support, independent access to and utilization of resources, child care assistance, language barriers, and affordable housing.

When asked "Which of these services are available at your program," parents participating in the MELF parent interview indicated their early care and education program provides the following services:

100%	Developmental screening/assessments
88.9%	Full time care
	Meals for children (not just snacks)
77.8%	Health screenings
55.6%	Before and/or after school care for school-age children
44.4%	Part-time care
11.1%	Drop in care
	Transportation services between home/center
	Transportation services between school and center for school-age children
0%	Sick child care

in terms of topics addressed, creatively addressing transportation barriers (particularly in rural and suburban areas), simplifying, facilitating, and translating enrollment forms and procedures as necessary, and providing incentives for participation in programming are a few of the strategies MELF grantees employed to reach families who are typically more difficult to engage. Connecting families to additional resources beyond the scope of the individual program highlights the holistic view programs hold of children and families. For instance, eighty-three percent of families served by Parents as Teachers were referred to additional early childhood services by their home visitor; sixty percent who participated in the parent interview said the program had made them aware of or connected them to other resources for their child.

Family Literacy programs funded by MELF and evaluated by Wilder Research provided families with the most comprehensive, integrated set of services across the grantees, including adult education, parent education, child programming, and interactive parent-child literacy activities for a highly diverse set of families (e.g., 96% below 185% of the federal poverty level,



85% parents English Language Learners, 28% hold high school diploma or GED, 63% not or minimally employed). Findings show that parents with 80-100% attendance made greater gains in parental support for literacy and learning. The majority of parents (94-100%) attributed greater confidence, enjoyment, skills, support, and reading with their children to participation in the programs.

Grantees also used MELF funds and priorities to expand their focus on school readiness as a key to engaging less connected families. Programs attempted to link families to school district related programming (e.g., early childhood screening, kindergarten assessments, parent education) and also offered workshops and support to enhance parent knowledge of, and comfort with, the K-12 system (e.g., understanding school choice, what to expect in kindergarten). Efforts to use and explain early childhood assessment data with parents, explore data connections to local school districts, and translate school readiness related materials were all undertaken over the course of these grants to strengthen family connections to school districts and parent awareness of the importance of early learning opportunities for children and families to promote kindergarten readiness.

## Section Summary

From the standpoint of the families and children, evaluations of the MELF community grants demonstrated that during their funding cycle, the community grants worked to accomplish MELF's purpose for innovation in early care and education. Grantees provided services to at-risk families with young children who a) value quality in early care and education and b) significantly rely on, oftentimes multiple, early care and education settings. The children receiving early care and education services were reported to be healthy and to have some rudimentary school readiness knowledge, but were also at-risk for not scoring well on several school readiness indicators, notably vocabulary, a key indicator of later school success. The community grants addressed multiple challenges in providing high quality early care and education to these at-risk families, including extending services to hard-to-reach families, working collaboratively to provide a range of services or to connect families with needed services, and adapting services as needed to better meet family needs and preferences.



# Lessons Learned from the MELF Community Grant Evaluations

High quality programs provide the cornerstone of a solid early care and education system, whether quality is driven by program requirements or market-place variables. For early childhood programs to achieve positive outcomes, address local needs, and ensure children are ready for school, research suggests quality matters (Kagan & Scott-Little, 2004; Burchinal, Kainz, Cai, Tout, Martinez-Beck, & Rathgeb, 2009). MELF funding decisions clearly reflect this priority, and several lessons learned via community grant staff surveys and interviews highlight salient features of high quality programs. Flowing from classroom, to program, and system-level variables, the following sections provide important insights on quality indicators reflected in the practices of the MELF-funded community grants and address the role of:

- quality program staff;
- curriculum use;
- professional development;
- consistent, multi-tiered assessment practices;
- evaluation challenges;
- stable funding; and
- early childhood partnerships.

## Quality Program Staff

A key element of quality programs is the staff employed by early care and education settings, including center-based teachers, family childcare providers, home visitors, and center directors. As can be seen in Table 10, outlining the demographic factors and education levels of the MELF grantee providers, staff across the grantees are primarily female and white. Contrasting the provider demographics with diversity of families and children served in MELF-funded programs reveals a significant discrepancy in the demographics of those providing services and those served.

While the majority of programs experienced considerable staff hiring difficulties and/or turnover, affecting the implementation and outcomes of their projects, this was particularly true for projects seeking to hire non-English speaking staff or providers of diverse ethnic and linguistic backgrounds (e.g., Parents as Teachers, Autism Society of Minnesota, Bloomington). Some sites reported a paucity of interested candidates, which in turn reduced the evaluators' ability to establish exactly what role having community-based



**Table 10. Staff Demographics and Experience**

	Center Early Care and Education Teachers (n=25)	Family Child Care Providers (n=17)	Home Visitors (n=35)	Directors (n=9)
Total years in current position	Avg. 4.7 years	Avg. 9.68 years	Avg. 8.4 years	Avg. 4.4 years
Total years in ECE	Avg. 9.32 years	Avg. 13.125 years	Avg. 9.97 years	Avg. 20.9 years
Gender	96% female	100% female	93.1% female	--
Race/Ethnicity:				--
<ul style="list-style-type: none"> <li>• White/Caucasian</li> <li>• Black/African-American</li> <li>• Hispanic/Latino</li> <li>• Asian</li> <li>• Multiple ethnicities</li> </ul>	<ul style="list-style-type: none"> <li>• 72% White/Caucasian</li> <li>• 28% Black/African-American</li> </ul>	<ul style="list-style-type: none"> <li>• 41.2% White/Caucasian</li> <li>• 35.3% Black/African-American</li> <li>• 11.8% Hispanic/Latino</li> <li>• 11.8% Multiple ethnicities</li> </ul>	<ul style="list-style-type: none"> <li>• 96.6% White/Caucasian</li> <li>• 3.4% Asian</li> </ul>	
Education & Training:				
40+ hours of in-service training in the past 4 years	44%	47.1%	11.4%	12.5%
CDA credential	8%	6%	6%	13%
Montessori certificate	4%	6%	--	0%
Two year college degree (associate degree) – child-related field or not	0%	24%	3%	38%
BA/BS degree	28%	0%	60%	0%
BA/BS degree in a child-related field	36%	6%	0%	50%
Graduate degree (masters or above)	25%	0%	14%	0%

staff played in finding and serving culturally and linguistically diverse families. Yet the difference in demographic characteristics remains striking.

Another pattern emerging from analysis of data provided by the MELF providers is the amount of education and training across the grantee staff. Directors (50%) and center-based early care and education teachers (36%) were more likely than other providers to hold a BS/BA degree in a child-related field, yet this was still not common. This offers a striking difference

from the K-12 educational system, where increased pressures for highly qualified teachers weigh heavily in quality assessments. Tensions clearly exist between the desire to hire representative staff from the community, and heightened expectations for hiring staff with education and training in child development.

Community grantees cited salaries, benefits, work environments, and training as barriers facing the hiring and retention of a well-equipped and culturally representative early childhood workforce. Once trained and



**Table 11. Staff Benefits Provided**

Benefits provided or available to full-time teachers	% indicating yes—MELF Grantees	% indicating yes—MN as a whole*
Paid vacations, sick, or personal leave	89%	N/A
Health insurance for employees	79%	24% fully paid; 16% partially paid
Health insurance for employees and family members	67%	7% fully paid; 14% partially paid
Retirement benefits	79%	N/A
Maternity leave—paid	33%	N/A
Disability insurance	79%	24% short-term; 20% long-term

Chase, Moore, Pierce & Arnold (2007)

hired, program success in retaining qualified personnel proved equally challenging, yet sites are committed to the notion that it is a key component to success in finding and serving linguistically and culturally diverse families. Establishing which factors both attract and retain culturally and linguistically diverse staff is necessary to better understand outcomes associated with this strategy.

The need to attract qualified, diverse staff to the field is complicated additionally by the benefits provided by many early care and education centers and family child care providers. The typical salary for the providers in the MELF grantees equaled roughly \$15/hour, which is higher than the average salary of \$10-\$15/hour for many early childhood teachers in Minnesota (Chase, Moore, Pierce & Arnold, 2007). While grantees did comment on the difficulty in providing quality benefits that keep staff in their current jobs and in the field overall, MELF grantees significantly exceeded state averages in their ability to provide additional staff benefits, including paid sick and vacation time, health insurance, and retirement benefits (see Table 11). Despite these generally stronger benefits, several programs, including Saint Paul's PEK program, struggled with teacher and provider retention.

## Curriculum Use

Research suggests that using a formal, structured curriculum in early childhood programs is important to program quality (Roskos & Vukelich, 2006). In line with MELF goals, findings from the MELF community evaluations suggest an emphasis on formal curricula, with a majority of early care and education teachers

and even family child care providers indicating that they used a formal curriculum specifying learning goals, teaching strategies and materials, activities for children, and parent involvement activities (see Table 12). Examples of the curricula used by MELF community grantees include the Creative Curriculum, Doors to Discovery, and Opening the World of Learning. The extent to which a curriculum was implemented with fidelity in the classroom was captured in the evaluation of Saint Paul's PEK program, where mentoring directly tied to classroom activities did promote adherence to curriculum activities and goals. The field of



**Table 12. Curriculum Use**

	Early Care and Education Teachers (n=25)	Family Child Care Providers (PEK; n=17)	Home Visitors (n=35)	Directors (n=9)
Percent providers agreeing to the following questions:				
Use formal, written curriculum	88%	100%	43%	100%
Routinely and formally track the development or progress of the children in their care/classrooms	92%	81%	64%	89%
Of those providers using a curriculum, percent providers agreeing the curriculum specifies the following:				
Goals for children’s learning and development	96%	100%	80%	
Specific activities for children	96%	94%	73%	
Suggested teaching strategies	96%	100%	73%	
Suggested teaching materials	100%	100%	80%	
Ways to involve parents in their child’s learning activities	100%	100%	73%	
School readiness	92%	--	60%	
Goals for parents’ learning and development	--	--	87%	

home visiting is debating the role of curricula and assessments; home visitors in the evaluation were less likely to use a curriculum than were early care and education teachers and family child care providers. It should be noted that while the MELF grantees as a whole reported using a formal curriculum, this is not necessarily characteristic of the field. In particular, family child care providers tend to be less likely to use a formal curriculum, and it is likely the MELF sample reflects the concerted effort of the grantees to encourage the use of a curriculum and the growing role of Parent Aware (which requires implementation of a research-based curriculum to achieve highest quality ratings) in MELF-funded programs.

## Role of Professional Development

One word summarizes grantee reflections on the role of training and professional development: intentionality. Professional development across the community grantees ranged from one-time events to weekly staff

development meetings, professional learning communities, college coursework, and regular ongoing, personal instruction and mentoring linked to classroom activities and broader professional development goals. Grantees provided multiple examples of efforts to build continuous, grounded, and rich learning experience for staff, and a movement away from one-time sessions presented in isolation from broader curricular and programmatic goals. Program staff spoke to the need for sufficient time, funding, and administrative support to a) offer professional development opportunities that are intentionally linked to programmatic goals or pressing issues in the field, and b) implement and refine new strategies and practices. Two examples highlighted below capture the innovative and intentional focus on staff development, learning, and application to improve outcomes:

Multi-tiered strategies implemented by Saint Paul’s PEK program provide a system-wide example of reinforcing program quality and implementation fidelity. The model involves ongoing support provided by professional development coaches in an effort to:



- create more explicit linkages between assessment results and community early care and education strategies;
- ensure all levels of staff benefit from training and support, from classroom aides to teachers to directors (i.e., the notion of principal/director as “instructional leader” is emphasized in PEK trainings geared towards preparing early care and education directors 6 months prior to classroom implementation; regular “progress monitoring” walks for directors and coaches are routinely undertaken to check program fidelity); and
- align and create strong connections among professional development opportunities and resources to promote cohesion, congruence, and deeper, shared staff meaning.

“Nearly every participant, when asked ‘what makes the biggest difference?’ responded with a comment about their relationship with the PEK coach” (Hawley, 2009).

Similarly, Joyce Preschool was able to enhance their professional development activities, and staff indicated they found value in the changes. Professional development for teachers and staff at Joyce began as simple attendance at workshops and conferences, and ended with more on-site and continuous staff training on honing and developing best practices in dual immersion. Professional development included:

- Weekly meetings about what is happening in the classroom. These meetings provided staff time to document activities more explicitly and illuminate the rationale and objectives behind the activities. A staff member described these staff meetings:



**“We realized that for changes to happen there had to be time for staff to get together for planning on a weekly basis. We had had staff meetings with lead teachers before. We continue to have a short one, but now we have dedicated time for both teams to have a staff meeting—where are we with the theme, where are the kids, what’s next and review what just happened”**

- Intentional in-service days at Joyce that focused on a topic linked explicitly to the goals of Joyce Preschool. Experts from higher education came on site to do professional development trainings and workshops. According to a Joyce staff member, consultants also periodically joined weekly staff meetings to **“work extensively with the teachers on documenting the curriculum and giving them feedback and pushing them to incorporate best early education practices and immersion practices.”**
- Intensive 2-3 day workshops for teachers in the summer on topics such as observational assessment methods to monitor student progress, project-based curriculum, and behavior management.

MELF directors reported on average requiring at least 35 hours of staff development activities per year. As seen in Table 13, director reports of the professional development activities provided for teachers also likely exceed state averages due to the priorities tied to MELF funding.

## Consistent, Multi-Tiered Assessment and Evaluation Practices

Many lessons learned from the community grants revolve around data use and the need for evaluation support and evaluation capacity building for staff, administrators, and funders to ensure use of evaluation results is maximized. While the notion of building data capacity for program evaluation and developing systems to link data sources was not an explicit goal of MELF, the evaluation of the community grantees highlighted the need to support programs to this end to have a well-functioning and high quality system, where assessments are linked from the classroom/provider level (to inform practices), to the program level (to inform program outcomes and improvement),



**Table 13. Director Report of Staff Professional Development**

Which of the following professional development activities do you or your program provide for teachers?	% indicating yes:
Regular meetings with teachers to talk with them about their work and progress	100%
Paid preparation/planning time	
Training after work or on the weekend	89%
Training during the work day	79%
Attendance at regional, state, or national early childhood conferences	56%
Formal recognition for excellence (awards nights, etc.)	
Participation in mentor program	33%
Unpaid training during the work day or on weekends	11%

to the systems level (to inform progress of the field as a whole). These levels are described along with case examples below.

### Assessing Children’s Development

Assessment issues in early childhood are particularly complex due to the diverse purposes of assessment, the difficulty of accurately assessing the changeable nature of young children, and the developmental appropriateness of various assessments. There is considerable debate within the early childhood field about which assessments to use and how different assessments are to be used (Bordignon & Lam, 2004; Snow & Van Hemel, 2008). Like most in the early childhood field, MELF community grantees struggled in choosing assessments, implementing their use systematically to inform instruction, particularly for English Language Learner students, sharing results with families, and meeting multiple assessment requirements placed on staff by multiple funders with separate evaluation requirements. Examples from the community grant assessment efforts include:

- Bloomington MELF and Kinderprep preschools used Individual Growth and Development Indicators (IGDIs) in a systematic way. In conjunction with volunteers from the Reading Corps and with ongoing training and support, teachers applied information learned from the IGDIs to drive instructional practices and identify students most in need of additional classroom interventions.
- Five Hundred Under Five implemented an annual assessment of language, literacy, and social-emotional development for all participating chil-

dren. Assessments were conducted in families’ homes or community locations, and when necessary were conducted in a family’s home language. Assessment tools included IGDIs (for language and literacy development of 3-5 year old children) and parent-completed measures of language (for infants and toddlers) and social-emotional status. Measures were selected that produced information likely to be considered meaningful by parents, and the assessment protocol was designed to provide immediate access to results and their meaning for parents. When appropriate (or when parents requested) specific follow-up evaluations and/or referrals were arranged with parents, assessors, and Family Support Advocates. In interviews with Five Hundred under 5 parents, these annual assessments were judged to be clear, helpful, and valued by families.

### Program Assessments

#### Structured Observations of Quality

Evaluations of the Caring for Kids Initiative, Joyce Preschool, Saint Paul Schools’ PEK, and Bloomington MELF Preschool included structured observations designed to assess the quality of the early care and education settings. For the purposes of these evaluations, most programs used the measures in the MELF-funded Parent Aware quality rating system evaluation (i.e., the Early Childhood Environment Rating Scales Revised-- ECERS -R - and the Classroom Assessment Scoring System – CLASS). PEK, which has a focus on language and literacy development, already used a tool designed to capture language and literacy supports in early care and education and family child







care homes (i.e., the Early Language and Literacy Classroom Observation - ELLCO - and the Child/Home Early Language and Literacy Observation - CHELLO).

These observational assessment tools serve multiple purposes: they are used not only to describe the quality in a setting, but also to provide suggestions for quality improvement and professional development. They can also be used to monitor quality over time.

Based on the evaluation of PEK completed by Wilder Research (Schultz, Gozali-Lee, & Mueller, 2009), results from repeated observations of family child care homes and classrooms using the ELLCO/CHELLO indicated growth across all areas measured in both the classrooms and family child care homes, from the availability of materials, books, and activities to promote reading, to the intentional use of routines and assessment to guide instruction.

The other programs using the ECERS-R and the CLASS obtained measures at one point in time; these results describe the strengths and areas in need of improvement. Across the nine programs that participated in CfKI, programs demonstrated strengths in teacher-student interaction, language-reasoning, activities and program structure, and classroom organization and productivity. The scores in these areas indicate better than minimal to moderate quality. Areas in need of improvement, where scores were lower

than the overall average score for the sites, included personal care routines, space and furnishings, and instructional support.

Across the five Bloomington classrooms, teacher-student interaction, language-reasoning, and program structure were also strengths, with scores also indicating better than minimal to moderate quality. Areas in need of improvement, where scores were lower than the overall average score for the five classrooms, were personal care routines, space and furnishings, and activities.

Two Joyce preschool classrooms were assessed using the ECERS in the spring of 2008. These classes exhibited relative strengths in teacher-student interaction, language reasoning, and activities. Areas in need of improvement, where scores were lower than the overall score, were personal care routines, structure, and space.

Across the 16 CfKI, Joyce and Bloomington classrooms, consistent strengths were seen in teacher-student interaction and language/reasoning. All three programs also demonstrated some common areas in need of improvement, including personal care routines and space/furnishings, as well as some unique areas related to each program. These findings are similar to other state and national studies examining early care and education quality. MELF community programs thus highlight both strengths and challenges common to early care and education programs across the nation. With common aspects of quality to target for improvement, one potential strategy for improving quality is to better align professional development efforts with these kinds of data.

## Program Interviews

Qualitative feedback from interviews with program staff capture programs' desire more generally to use assessment information to inform program improvement and implement best practices, but also the difficulty in sustaining quality and aligning with programmatic and/or state goals without additional supports and incentives. Two examples from Joyce Preschool and Anoka Healthy Start highlight program steps to improve assessment practices and quality:

- Joyce Preschool worked with experts in higher education to combine practices from both K-12 dual immersion and early childhood to develop a





preschool dual-immersion model based on current research and staff expertise. While the program initially received the environmental rating results with wariness, they hired a consultant to help them review the results and improve their scores. The program is also pursuing NAEYC accreditation for the first time. Staff later noted that the observation and subsequent process were valuable to them:

**“We were unpleasantly surprised by the low marks that we received. Some of the scoring has to do with wheel chair accessibility, in which Joyce Preschool will never score high because we are in the lower level of an old building with no elevator. Other areas, however, were areas that we realized that we wanted to focus on and make improvements... We started with this as a high quality program, we needed to give ourselves permission to say we are a strong program, but we could be stronger.”**

- The network of Anoka Healthy Start (AHS) home visiting partners significantly and collaboratively

revised a shared progress monitoring report form for use across home visiting agencies. The form represents the partnership’s general shift toward improving shared ways of measuring child and family outcomes across partners, and will allow for a more systematic collection of home visiting goals, family access, and indicators of child progress and development with an explicit focus on school readiness domains. Coming to agreement on measures and procedures, and grappling with initiative, program, and family benefits for the collection of the data was a complicated process. But in the end, it generally met with approval given its potential in sharing progress information with multiple stakeholders ranging from individual families to funders and policy makers.

### Infrastructure

The Head Start Data Aggregation project stands out as a promising example of promoting and strengthening not only data use, but the quality of assessment data collected on children across sites. The MELF evaluation team, in conjunction with the Head Start Assessment User Group, created a tool to assess the fidelity of the assessment process and the quality of observational assessment data collected in an online system. Education coordinators found that the data quality review instrument had high utility, assisted them in monitoring the quality of data collected, and also helped them identify areas of continued professional development. Lessons learned from the Head Start development process include:

1. Ongoing monitoring and quality assurance are essential elements of a statewide assessment system. Clarity regarding the goals, purpose and procedures is necessary, as is validating tools to be used in the process.
2. Assessing the quality of teachers’ assessment data is not always a straightforward process, but is especially critical as the system of early care and education further relies on teachers’ reports of children’s development and growth.
3. The data review process and professional development strategies for teachers should mutually inform each other. Improving the quality of observational assessment data collected by teachers about children is necessary and should be guided by the specific findings of the data review process.



4. The data review process requires tools for assessing data quality, such as the one created for this project, with high utility for the early childhood professionals using it, rather than creating an additional, unnecessary burden.

From a systemic perspective, extreme caution is needed before making high stakes decisions until more is understood about the quality of the data being used to hold programs accountable and the quality of the data are high.

MELF community grantees learned important lessons when implementing assessment practices, namely the role and quality of assessment data, program capacity to collect and use assessment data to guide instruction and improve program practices, and training needs on an ongoing basis. Collectively, these comments raise issues of practicality, relevance, validity, and reliability of the tools and their implementation. The degree to which current measurement systems accurately and adequately capture the growth and development of a rising English Language Learner population is also increasingly scrutinized.

## Challenges to Evaluation

While innovation grantees acknowledged the diverse roles evaluation plays in their programs, a number of challenges and barriers emerged that are indicative of evaluation challenges across the early childhood field. These challenges, outlined below, relate to the timing, resources, methods, and linkages requiring consideration and attention when building a system conducive to continuous program improvement.

### Challenge: Evaluation Occurs After Implementation Begins

Evaluation activities reported here often began at the same time as, or after, a grantee's program had begun. This led to two problems: As evaluation began at the same time as program services, intervention programs were not fully developed or implemented. Second, it was difficult to describe program features or effects prior to that implementation. Lessons learned from the implementation and evaluation of the community grants highlight the need to integrate sufficient time to plan and launch activities and obtain necessary approval (e.g., from human subjects' pro-

tection boards) into funding agreements.

### Challenge: Resources and Capacity for Quality Evaluation Activities Are Lacking

Evaluation requires additional resources above and beyond resources earmarked for services. Internal organizational capacity challenges to conduct ongoing evaluations were evident even when additional evaluation funds were provided by an external source such as MELF. Lessons learned from the MELF community grants include support to improve program capacities for a) understanding the logic underlying program practices (e.g., how the program will reach its goals), b) building clear, feasible, data systems for tracking participant and program variables, and c) developing more comprehensive and objective program and child assessment plans to better assess outcomes and determine areas of effectiveness and areas of improvement.

### Challenge: Measurement Tools and Methods Lack Meaning for Stakeholders

Although grantees expressed a desire to understand the outcomes of their programs, some also voiced concerns about how evaluation results will be used. Many community evaluations encountered poor response rates from participants, decreasing the utility of evaluation data. Methods for obtaining meaningful input from the most vulnerable families need to be developed and implemented (e.g., translating the parent survey into multiple languages still resulted in lower response rates), with evidence of staff commitment to and understanding of the evaluation purpose and benefit. Lessons learned reveal the benefit to both programs and systems when evaluation is viewed as a process of continuous improvement and where data collected throughout the process are as useful as possible to both program staff and funders.

### Challenge: Strengthening Data Linkages

One of the greatest challenges limiting the early childhood system's ability to describe how early services promote later child outcomes centers on the difficulty programs face in linking data from multiple sources. A standardized system for linking children and families to services and systems does not currently exist. A common theme across grantees pertained to





the underutilized potential and access to information available via the Minnesota Department of Education state assigned student identification number (i.e., MARSS number), assigned to children at early childhood screening or upon school entry. Privacy issues weighed heavily in all attempts to link information across settings and sources. Joyce Preschool, Suburban Ramsey Family Collaborative, Five Hundred under 5, and the Caring for Kids Initiative all actively explored opportunities for a) developing a system allowing them to track K-12 outcomes for the purpose of improving their early childhood services, and b) strengthening connections to the K-12 system to ensure a continuity of supports and services for families as they transition from early childhood settings into kindergarten. While foundations were laid based on personal relationships and district connections, a lack of resources remains a challenge. Linking data not only proves useful for service and coordination purposes, but also, importantly, can strengthen communication and reporting necessary to stabilize and enhance essential reporting, fundraising, and public relations efforts.

Collectively, these experiences prioritize the need to build the evaluation capacity of early childhood programs and stakeholders to not only measure, but also use results to inform program development and implementation in ways that will benefit children, families, programs, and the broader early care and education system. Lessons learned lead to the following recommendations:

- **Involve evaluators continuously in programs**, from inception throughout implementation to outcomes.
- **Allocate sufficient funding and resources for both internal and external evaluations**, above and beyond funding for services. The suggested funding amount for external evaluations is between 7-10% of the program or intervention budget. Programs must also incorporate ongoing data collection and use into their program budgets and operations.
- **Develop data management procedures.** Program staff requires an understanding of the most appropriate type of information to collect, how to best to collect that information, how to systematically and accurately manage the data collected, and then capacities for reporting on those data.
- **Establish a common measurement model** to guide both implementation processes and outcomes with measures that are useful to all stakeholders and pay attention to burden placed on staff.
- **Pave procedures to better link child and program data** from early childhood programs to the K-12 system. This will allow early childhood programs to develop a better understanding of long-term outcomes of their participants.

## Stable Funding

Grantees unanimously spoke to the difficulty of staying on course, and maintaining high quality services informed by best practices, when activities are based on multiple, often unstable, and continuously evolving funding streams. The deteriorating economic conditions beginning in 2008, and worsened in many cases by the unexpected loss of MELF funds, revealed program strains and proved particularly challenging for many grantees. Most are funded by a variety of sources, including county, state, federal, and foundation dollars.

While the grantees maintain clear motivation to remain in tune with funding opportunities and use more rigorous, high quality data to convey the effect of their efforts while staying true to their mission, soft funding streams often bring with them separate evaluation and/or programmatic requirements. This stretches program capacity to serve families by decreasing attention paid to implementation or result in changes in implementation affecting the reliability and consistency of programming as staff learn new requirements. Partnership coordination is even more difficult to fund than direct service provision.



In the worst case, unstable programming or a reduction in the number of families who can be served results in provider and family distrust. Effective programming takes time to establish. Stable funding allows programs to focus strategically on program improvement and development rather than a program struggling to fit available funding streams. This is illustrated in a quote shared by a Parents as Teachers staff member:

**“You don’t want to start serving a family and work so hard to build trust with them, just to have to discontinue service, especially with families who are already distrustful of the system. They need to know that we’re going to be there.... It took us a lot of time to establish relationships with the local service providers. When we would meet with them, they would ask how long is your grant, how long are you going to be able to serve these families. And if had to tell them that we were only going to be around for a year, they wouldn’t have wanted to refer families to us.”**

## Role of Early Childhood Community Partnerships

MELF funded several programs focused on developing community capacity and engagement in early childhood support and leadership with the goal of improving access and quality in early childhood programs and services. An important component of Five Hundred Under Five, Caring for Kids Initiative,

Anoka Healthy Start, and Suburban Ramsey Family Collaborative was the role of community infrastructures and partnerships to support broader community efforts. Partners and leaders from these four community grantees completed a survey and/or focus group designed to better understand the value and work of partnerships for early childhood collaboratives and systems change.

Results from the survey and focus groups indicate strong support for the existence and value of the partnerships. Despite some differences in the structure, history, and reasons for partnering across the four communities, themes were remarkably similar. Reasons for participating in the partnership were consistent across the four communities, and focused on serving families in new ways, improving the quality of services for families, and enhancing the school readiness of children. Findings further reinforce the importance of participation in broader professional development networks to encourage the sharing of information, ideas, and resources in a cost-effective manner. Table 14 shows a sampling of perceived partnership outcomes across the four communities.

Sharing resources among partners and being more aware of community resources emerged as one of the most significant benefits of partnerships. Across the communities, partners indicated that participation in the partnership increased their organization’s awareness of resources available in the community. Not only do organizations hold a clearer idea of available resources for families, they also know how to access those resources efficiently through the network of

**Table 14. Partnership Outcomes**

Sample Partnership Outcomes	Percentage of partners perceiving outcomes “increased” due to partnership			
	SRFC (n=36)	AHS (n=55)	FHu5 (n=10)	CfKI (n=12)
Number of people who can access services	88%	70%	57%	100%
Participants receive higher quality services	72%	58%	77%	100%
Participants receive more coordinated and comprehensive services	75%	70%	64%	100%
Benefits to staff (professional development, knowledge, etc.)	66%	79%	57%	71%
Information available and accessible to families about quality programs	85%	81%	71%	100%
New strategies for serving families	88%	65%	64%	93%



partners. The partnerships allowed representatives across multiple service sectors to develop relationships. This in turn increased trust among partners and opportunities for more efficient resource, referral, and information gathering as reflected in the following quote:

**“The efficiency that happens when people are together. That whole piece of relationships and knowing people and what role they have so you know where to go to get something done.” - AHS**

Training and support offered to home visitors through Anoka Healthy Start’s “Champions” committee provides a strong example of partnerships as an effective mechanism for cross-agency professional development and support network. One of the most compelling findings for the partnership is the fact that a full 75% of home visitors reported AHS as the “most important person/group especially encouraging their development as a home visitor.” AHS was endorsed more frequently than co-workers, supervisors, or other provider support network.

**“I’m new to working in Anoka County and that’s another world and it’s hard in terms of what to provide to families. Healthy Start has been my entry to the human services system. I’m just learning about all the resources that are available.”**

**“Staff turnover—in three years there have been 4 different home visitors. Training those home visitors is a challenge, but Champions meetings have really helped for training and support.”**

Findings indicate that sharing resources among partners increased the information available and accessible to families on quality resources. Partners strive to work together to ensure services are more comprehensive and seamlessly linked across the communities. Partnerships also help to create a common vision among organizations that reach families in different ways for a more holistic and comprehensive network which extends beyond the capacities of individual agencies.

**“Schools think of kids as students, social services think of them as children, mental health thinks of them as clients, everyone has a different way of thinking. What we are saying is that this is a whole child approach and we need each other to attend to the issues.” - SRFC**



Partnerships benefit programs as well. For example, the Caring for Kids Initiative established a Quality Program Network (QPN) for program directors to foster stronger connections between participating programs and promote collaborative professional development. As a result of their participation in the QPN, directors reported greater knowledge of resources for families in the community, and relationships and expanded opportunities for interactions between centers. Directors voiced enthusiasm for CfKI and plan to continue their participation in the QPN.

Partners across the four communities also noted the importance of partnerships as a catalyst for innovation and pooling of ideas:

**“Incubation as a new way of doing things, new ideas, everyone puts their heads together to brainstorm what do we need to do better to serve families? You can try things out and see if they work. Your partners might then take it to scale—a mini innovation place.” - AHS**

As can be seen in Table 15, lessons learned highlight both strengths and challenges to partnerships in early care and education. Results based on the perceptions and experiences of partners provide significant support for the partnerships, with partners identifying a number of outcomes attributed to the partnership: serving families in new and more effective ways, sharing resources and professional development, creating a more cohesive system of services for families, and providing services to more families and children in



**Table 15. Partnership Assets and Barriers**

Factors Promoting Strong Partnerships
<p><b>1. A structure that focuses partners on specific, shared outcomes and allows for clear communication between members of the community and partnership members.</b> This allows for the partnership to be constantly aware of changing community needs. A system for carrying “on the ground” issues to the partnership leadership level allows partners to respond more quickly and efficiently to changing community needs.</p> <p><b>2. Leadership that knows the community and the range of services provided in the early care and education system in the community.</b> Such leadership is able to make decisions, is willing to take risks, and is able to facilitate communication and conflict resolution among partners. Effective leadership also is able to network and provide a clear direction for the partnership while fostering trust among the partners.</p> <p><b>3. A shared vision and goal that supersedes the goals of the individual organizations.</b> Having a clear commitment to children and families as the priority of the partnership helps to ensure goals of individual organizations don’t compete. It is also important to continually reevaluate and revisit the goals and priorities of the partnership.</p> <p><b>4. Resiliency and adaptability,</b> or the ability to maintain the focus and goals of the partnership while also maintaining enough flexibility to quickly respond to changing community needs.</p> <p><b>5. Ensuring the right partners are included in the partnership, and that every partner contributes something of value to the partnership while also receiving mutual benefits.</b> This also helps to foster trust among the partners.</p>
Challenges to Partnerships
<p><b>1. Funding, particularly for structural elements such as leadership and time for the partners to convene.</b> Also challenging is trying to maintain priorities in a shifting and unstable landscape of funding.</p> <p><b>2. Maintaining clear goals and a clarity of outcomes for all involved in the partnership.</b> Partnerships often include partners who are involved at different levels, and ensuring all partners have the same vision and goal for the partnership, particularly for those who are not as active in the leadership committee, is challenging.</p> <p><b>3. Identifying and demonstrating outcomes of the partnership, particularly attributing change in families, children, and communities to the partnership activities.</b> Knowing what types of data to collect and having the capacity to collect the data is essential for demonstrating outcomes, yet many partnerships need assistance to develop logic models, evaluation plans, data collection techniques, and databases.</p> <p><b>4. Clarifying the roles and responsibilities of the partners, and ensuring all partners feel engaged in the partnership and that they have an important role.</b> Duplicating services is a continual challenge, and clear communication between partners to ensure there are clear roles for each partner is critical.</p> <p><b>5. Bridging silos between partners and organizations.</b> This is particularly difficult in an environment where funding is a challenge. Lower funds often mean organizations engage in retrenchment and protective behaviors and are less willing to collaborate with others who may be competing for similar funding streams.</p>

the community. These preliminary findings indicate that partnerships do play an important role creating a strong local infrastructure in an overall early care and education system.

At the same time, outcomes directly tied to the efforts and networks of partners are more difficult to capture. Other barriers, including paid leadership, shared commitment to the partnership as well as the home agency, essential and stable communication and administrative structures all require attention and

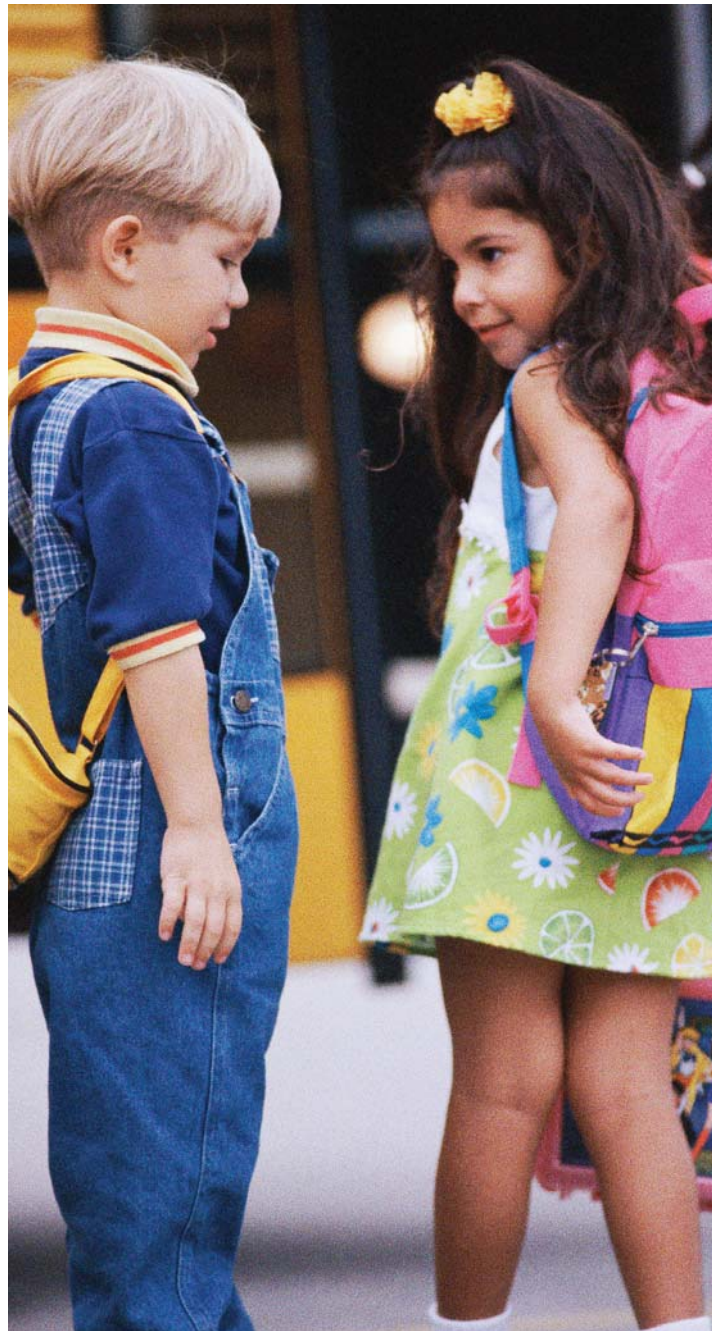
can prove challenging to manage and sustain. Moving forward, two recommendations for understanding contribution of partnerships to service access, capacity, and quality, and developing partnership capacity within a larger early childhood system include:

1. Funding leadership and partnership structure above and beyond programmatic activities to ensure partnerships are effective.
2. Developing a statewide system to build evaluation capacity and assist partnerships in collecting evidence to demonstrate outcomes.



## Section Summary

Important lessons learned from the MELF community grantees have implications for program improvement and system coherence in the future. Clearly, attention needs to be paid to the early care and education workforce on a number of fronts: to insure high quality, cutting-edge educational opportunities are available to students at the pre-service and professional levels; to insure that these opportunities are accessible and appropriate for a range of ethnic and cultural communities; and to insure that there are high standards and a career ladder for early care and education professionals as there are for K-12 and higher education professionals. Second, professional practice in early care and education needs to include an intentional focus on curriculum and content in conjunction with implementation and instructional skill. In contrast to the status quo, where professional development is often disconnected from content and actual classroom practice, models such as PEK offer strong evidence that building in ongoing professional development with curriculum planning and implementation can improve classroom quality and teacher skill. Third, high quality early care and education programs and an effective early care and education system rely upon strong local infrastructures. Partnerships are an essential piece, as they provide enhanced resources and access to resources, but they do require ongoing funding and time and attention to process and collaboration. Fourth, instilling a culture of evaluation at all levels—from the child and family to the program to the system—is critical to improve and monitor ongoing activities and results. This is perhaps the area to which the least amount of attention has been paid by the field and by policymakers, and yet as we move closer to the realities of having a greater systemic approach, these gaps become more evident.





# Conclusion

MELF funded the community grants based on their innovative approaches and ability, collectively, to highlight key challenges facing the early care and education field. The grants varied widely to best capture examples of service models, methods, and systems important to the development of a seamless and comprehensive system of care and education for the state of Minnesota. As such, grantees represent a continuum of services and infrastructures needed to meet the often intense needs of low-income children, families, and communities. The evaluations offer rich examples of the contexts surrounding grantees as they grapple with multiple issues affecting their implementation and evaluation. Together, grantees also reinforce a commitment to focusing on school readiness, and remind the field of the unquestioning need for a holistic view of young children's growth and development as nested within families, programs, and communities.

Across the set of community grants, MELF reached intended families – those at risk for a variety of challenges - and MELF funded services to target identified needs through a variety of service mechanisms. Evaluations captured successes and challenges of the community grants; they also indicated that the extent and severity of challenges facing those families most at risk often surpass most programs' capacity to provide the intensity of services needed to produce the desired effects.

The sheer scale and complexity of this evaluation simultaneously limits and strengthens conclusions that can be drawn across the community evaluations.

Two primary limitations include the timing and selection of the grantees:

- Timing. In almost all instances described here, implementation of a significant innovation and evaluation of the effects of that innovation occurred either simultaneously, or with the evaluation following implementation of the innovation. This is a challenge for any individual program

evaluation, and proved even more challenging as evaluators from the MELF Research Consortium worked rapidly to both create and adhere to evaluation frameworks, questions, and measures that met the needs of all MELF evaluations. Delays in instrument development more seriously affected the community grant evaluation and were exacerbated by the fact that community program implementation began at the time of evaluation funding, thereby resulting in the loss of several key baseline data collection opportunities. Based in a desire to fund innovative practices, the start up of several new initiatives in the community grants also took longer than expected to “mature” to the point of becoming fully developed interventions ready for evaluation within the time frame offered by MELF. The net effect: In some instances, implementation began before evaluation procedures could adequately describe “baseline” conditions, and in other instances a focus on program impacts probably occurred prematurely.

- Grant selection. Although MELF's selection of the community programs was purposeful, variations in size, scope, and funding, and the absence of comparison groups proved challenging for this evaluation. While every effort was made to extract common or coherent lessons from these projects individually and collectively, an even more focused and strategic funding portfolio might have produced more robust, and less nuanced, results. Because of this variation, members of the CEED evaluation team have been expanding the “taxonomy” of evidence-based practices in early care and education that can be used to identify similarities (and differences) across programs.

At the same time, several strengths from the evaluations are noted which benefit MELF and its goals:

- A comprehensive perspective. The range and variation of programs simultaneously allowed the evaluations to touch on different types of service models needed to meet the multidimensional needs of families with infants, toddlers, and pre-





schoolers, and contribute to MELF goals related to understanding how to improve family access, information and resources. The grantees offer MELF the perspectives of many stakeholder groups whose experiences and input are important to consider in the development of an emerging system of early care and education.

- Evaluation commitment. MELF's commitment to research and evaluation is evident. Despite significant, unanticipated fundraising challenges, MELF maintained evaluation funding according to their goal of improving the knowledge base and research-based evidence available to improve the early care and education system in ways that effectively improve school readiness for more children. While reductions to grantees certainly resulted in challenges and decreases for their evaluations as well, the fact that the Foundation continued funding evaluation activities to the extent possible serves as an example to the field on the priority of measurement and evaluation.

Before MELF is scheduled to sunset in 2012, it aims to offer the field a set of recommendations, based on rigorous evaluation results, to inform key systems improving both the quality and access to early care and education opportunities. The following priorities, based on lessons learned across the community grants, will help MELF shape these recommendations to influence future policies and practices.

### **Priority: Promoting School Readiness**

- A deeper consideration of assessing school readiness and following children into elementary school would strengthen current practices and policy interests in the state. Creating a common definition of school readiness and consistent ways to measure it appropriate to the purpose and goals of a program and system should be discussed given the direct bearing on state-level efforts to assess school readiness at kindergarten entry. Part of this should include the formation of a working group to examine and fund best practices in the assessment and instruction of an increasingly linguistically diverse population.
- Available results across the largest number of children receiving services from the community grants demonstrated that of the language and literacy skills measured, children's vocabulary knowledge was notably weak or vocabulary outcomes were modest. Given the fact that the performance gap between higher and lower performing students continues to widen once children enter the K-12 system, realized gains may not be sufficient to produce expected outcomes in this important area and deserve closer consideration by early childhood leaders in Minnesota. To fully document effects of MELF's community grants, the State and foundations should consider a long-term follow-up study analyzing the effects of early care interventions and later school outcomes.



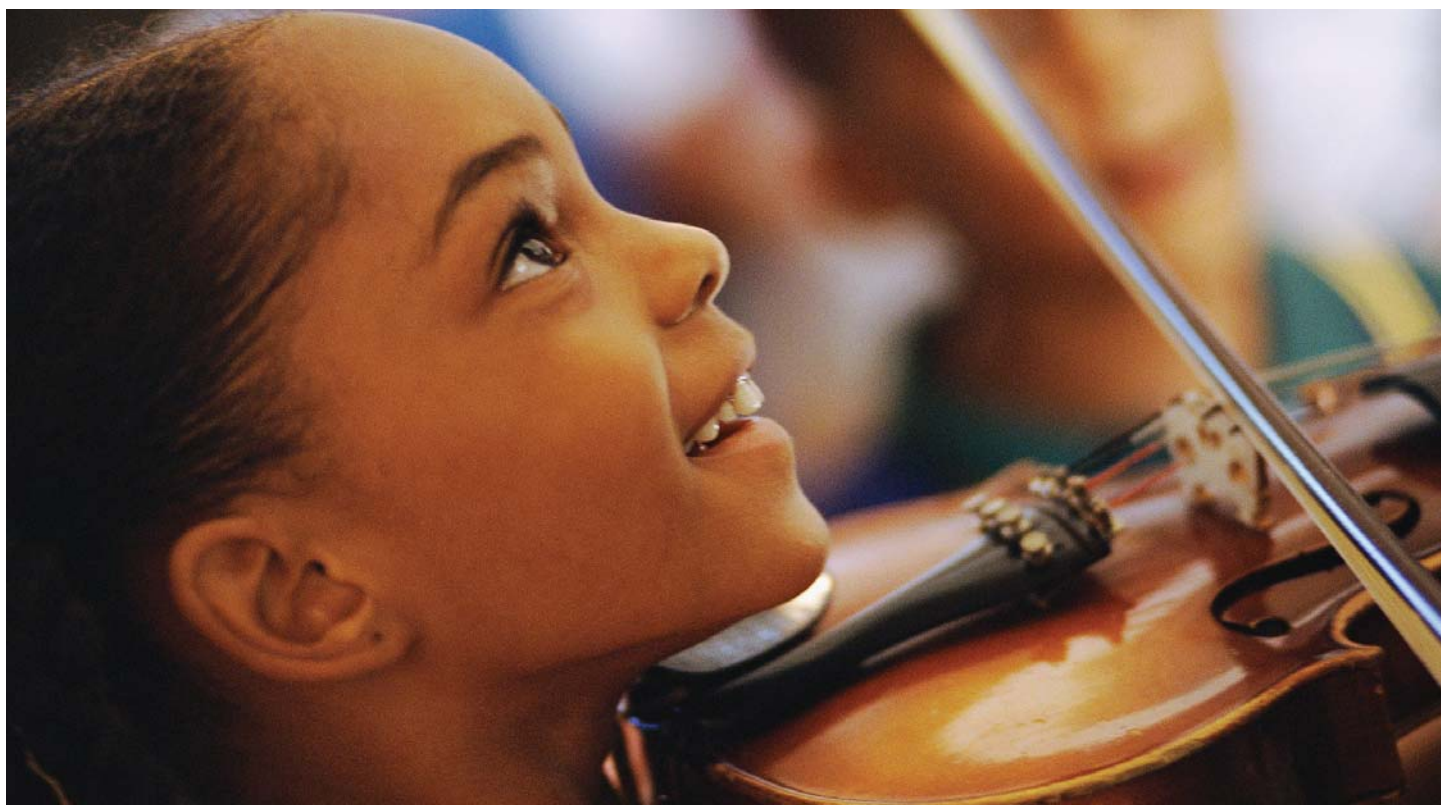
## Priority: Promoting Family Access

- Early care and education plays a significant role in the lives of the families participating in MELF community grants. Close to 1/3 of parents ranked convenience as a primary factor in their choice of care – suggesting that access is a key issue, particularly in low income neighborhoods where choices are slim to non-existent. Access to high quality programs, which can be achieved via multiple strategies, must be an essential feature of an effective early care and education program. The role of Family, Friend, and Neighbor (FFN) care, while not a priority for MELF-funded activities, was still important to families and deserves careful attention in any emerging early care and education system.
- While more information about how culture, language and quality intersect is needed, a system that promotes quality programs that are relevant and meaningful to families and effectively target their needs will more likely lead to greater stability in family participation and better outcomes. Meeting consumers' needs and desire for quality early care and education must be in the forefront of thinking about the development of an effective early care and education system.

- Some evidence suggested that these program efforts to promote parent engagement via an emphasis on personal connections and meaningful activities led to greater participation and attendance, and perhaps greater intensity of services. This is a particularly important point, as family factors have a strong impact on children's school readiness. For these reasons, careful attention to instances and procedures for purposeful family engagement seems particularly important.

## Priority: Promoting Quality

- To improve the quality of the early care and education workforce, the system needs to ensure that high quality, cutting-edge training and educational opportunities are available to students at the pre-service and professional levels at universities and training institutions; that these opportunities are accessible and appropriate for a range of ethnic and cultural communities; and that there are high standards for early care and education professionals. More work is needed to understand what other features of the work setting affect recruitment, turnover, and a viable career ladder for early childhood professionals.





- Education for early care and education professionals about early childhood assessment and program assessment, how to conduct them, and how to use those results is strongly recommended. Continuing attention to the integration of assessment (and, as a result, intervention) across currently distinct service delivery systems – for instance, child care, Head Start, and Early Childhood Special Education programs - is increasingly important to identify and serve children requiring varying intensities of early care and education.
- Professional practice in early care and education needs to include an intentional focus on curriculum and content **in conjunction with** implementation and instructional skill. In contrast to the status quo, where professional development is often disconnected from content and actual classroom practice, grantees offer evidence that building in ongoing professional development with assessment, curriculum planning and implementation can improve classroom quality and teacher skill. This will support the going refinement of future Parent Aware, professional development, and quality enhancement activities within the state.
- Assessment and curriculum are intimately linked to each other, as both are needed to promote

continual quality improvement at the setting and program levels. Maintaining a focus on quality will require a firm commitment towards funding quality improvement activities at all level of the system and instilling program requirements that programs are able to perform.

### **Priority: Promoting Evaluation and Reporting**

- Increasing the extent to which evaluation activities are part of program and system implementation is evident. To support the maturation of a more systematic approach to evaluation, the State and NGOs will need to develop both measures and evaluation perspectives that work from individual children to classrooms to programs to the larger system. These measures and procedures need to be dynamic, linked, and sustainable.
- To maximize the value of evaluations, programs, funders, and evaluators must be clear about the purpose of evaluation, sensitive to burden on staff, parents and children, and ensure appropriate sharing of results in ways that are meaningful to multiple stakeholders. This developing evaluation system must focus not only on summative evalu-



ation of programs' success at producing desired results, but also on formative evaluation practices that assist programs and parents in marking progress toward these long-term outcomes and provide the means and needed information for monitoring and improving program effectiveness.

- Evaluation requires support and resources. Different data systems, outdated or non-existent databases, and privacy issues make it difficult to link data systems and create an efficient way to monitor and evaluate programs. These system issues must be addressed before programs can be expected to evaluate and report results. The State should be encouraged to continue implementation of individual identification for long-term monitoring of individual children, as well as a coordinated and efficient data system for collecting, managing, and reporting child, program, and state outcomes. As Minnesota continues to develop local and statewide capacity for formative and summative evaluation of early care and education services and outcomes, it will become increasingly important to tie local results to state and national indicators.

## Priority: Promoting a Coordinated System

- This work makes clear the importance of continuing efforts to link all aspects of the early care and education system, and in turn to link these services to K-12 education, such that any investments that produce gains in school readiness are leveraged for continued gain as children move through the K-12 system. Early care and education programs have unique strengths--their strong, responsive relationships with children, families, and communities produce both socially meaningful programs, and programs that parents and communities believe are meeting their various needs. These particular strengths must be preserved – if not extended to other programs that serve older children and their families.
- Program and service coordination is essential. Several programs discovered that effective programs have to extend beyond “traditional” enrollment and intervention services in early care and education. At the same time, a broader and more comprehensive focus sometimes stretched program resources too thin. Complex issues related to

resource and sharing need to be addressed in the development of a seamless system.

- State leadership and coordination is important. Programs suffer (and therefore diminish their services to or effects for families and children) when different requirements, messages, and priorities of state lead agencies are placed on programs. There is a pressing need for consistent and coordinated messages, resources, and supports rather than the rather disjointed silos of services, streams, and supports now in place.
- As an emerging system dependent on public and private support, early care and education has been buffeted by changes in funding. Inconsistencies in funding wreak havoc on fundamental aspects of early care and education – not only are programs disrupted, but critical intervention services for individual children can be reduced in scope and intensity, and parents' trust is challenged or reduced. While stable funding and operation may be desirable for other reasons too, it may be that increased stability will yield a stronger, more consistent and trustworthy system no matter what its size.
- High quality early care and education programs and an effective early care and education system rely upon strong local infrastructures. Partnerships are an essential piece, as they provide enhanced resources and access to resources, but they do require ongoing funding and time and attention to process and collaboration. Partnerships and networks are important and cost-effective for professional development purposes and resource sharing to promote information, access, and referrals between and across complementary programs. Partnerships, when done well, play a significant role in an emerging early care system.



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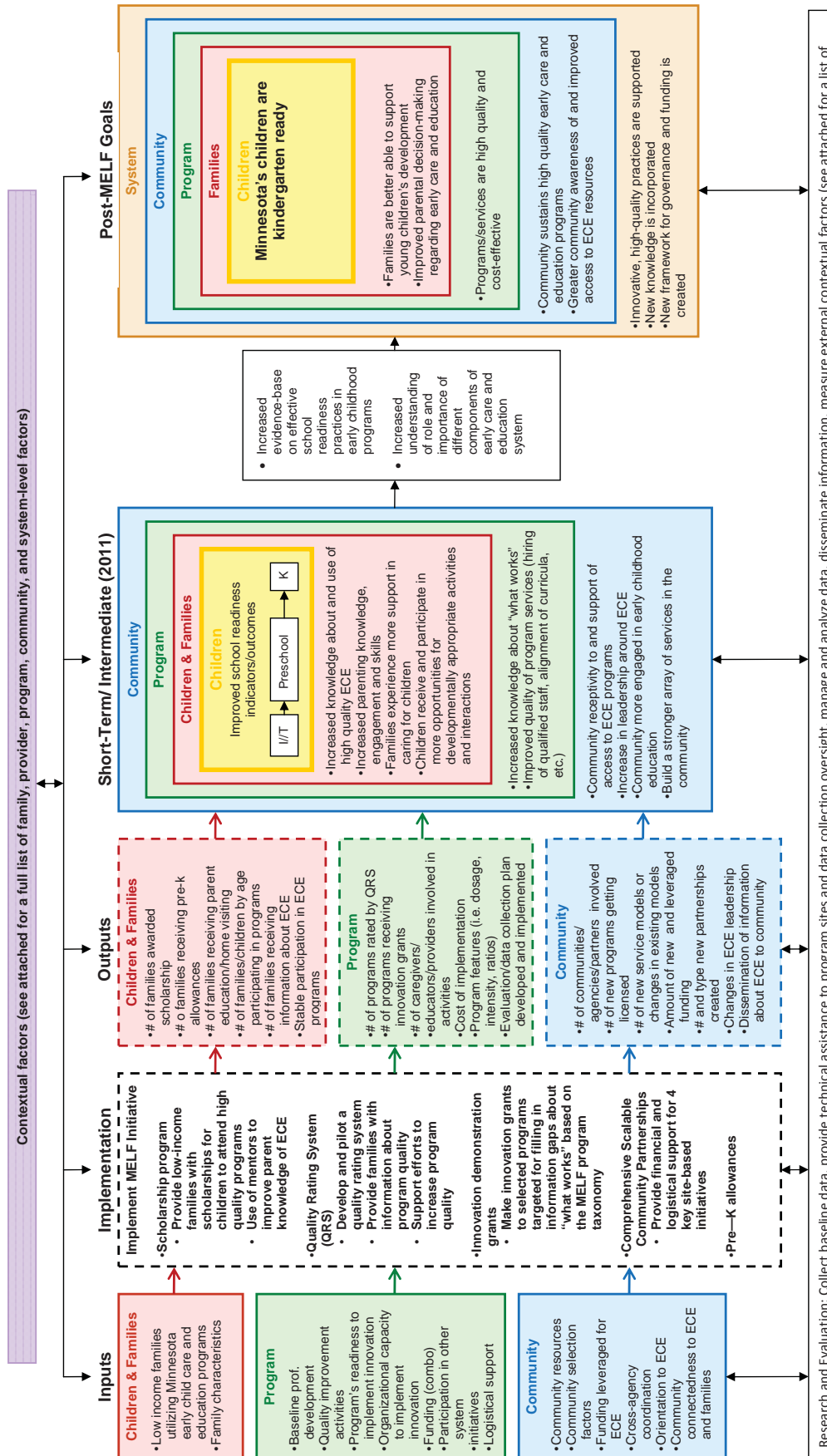
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# Appendix A: MELF Conceptual Framework





# Appendix B: Overarching MELF Research and Evaluation Questions

## Results for Children and Families

1. At the end of the MELF's funded programs, initiatives, strategies and approaches, to what extent are low-income children in MELF-funded projects on a developmental trajectory towards school readiness or ready for school as measured by a range of child assessment tools?
  - a. Cognitive development
  - b. Social-emotional development
  - c. Language development
  - d. Literacy development
2. To what extent do low-income families served by MELF-funded programs and initiatives have access to and make use of the resources available to them to help their children be ready for school?
  - a. To what extent are families receiving information about the resources available to them regarding the early care and education system?
  - b. To what extent do families demonstrate knowledge of parenting strategies associated with school readiness?
  - c. To what extent do families demonstrate knowledge of children's early indicators of school readiness and child development?
  - d. To what extent are parents using resources/knowledge to improve parenting engagement in children's learning?
3. To what extent do low-income families served by MELF-funded programs and initiatives have access to and make use of the information available to them regarding the quality of early care and education programs?
  - a. To what extent are families receiving information about the quality of early care and education programs?
  - b. To what extent do parents understand how to evaluate quality in early care and education programs?
  - c. To what extent are parents choosing higher quality early care and education programs for their children?
  - d. What are the judgments of parents about the quality of the early care and education services they are receiving?

## Results for Programs

4. To what extent do MELF-funded programs meet criteria for innovative, effective, high-quality programs?
  - a. What strategies detailed in the MELF Program Taxonomy are being used to achieve specific results and how do these strategies add to the existing system of early care and education in Minnesota?
  - b. What factors detailed in the MELF Program Taxonomy relate to variability in the effectiveness of these programs (e.g., dosage, intensity, comprehensiveness, use of curriculum, professional status of providers)?
5. To what extent are MELF-funded strategies more cost-effective than others in achieving similar results?



## Results for Communities

6. How have MELF-funded programs, initiatives, strategies and approaches improved their local communities' abilities to sustain quality early childhood education programs?
  - a. What factors relate to the variability in communities' abilities to sustain quality early care and education programs?
  - b. How have these MELF efforts increased new funding and allocation of funding within the local communities?
  - c. How have these efforts improved community engagement in early care and education?
  
7. How have MELF-funded initiatives contributed to the knowledge of best practices in early childhood education as defined by the MELF Program Taxonomy?
  - a. What is learned about the differential impact of supply-side, demand-side, and blended investments on school readiness, family access, and program quality?
  - b. What knowledge is shared with the state policy makers? What modifications in state administration, policy formulation, and funding result?
  - c. How have MELF activities changed the knowledge-base and the relation between knowledge and practice in Minnesota?
  - d. What barriers exist for the dissemination of knowledge about "what works" in Minnesota's early care and education system?



# Appendix C: CEED Early Childhood Taxonomy Summary

Researchers at the Center for Early Education and Development (CEED) at the University of Minnesota have generated a taxonomy that describe features underlying effective early childhood programs. The elements of the taxonomy were identified through a thorough scan of the early care and education research and best practices literatures, and represent those features believed to be related to high quality early childhood programs.

CEED is interested in further developing and refining this research-based instrument to help early childhood stakeholders **critically plan and evaluate** programs and/or funding priorities. Armed with an understanding of what is known or remains unknown about best practices or serving at-risk populations will allow program planners and funders to strategically target elements of interest in a more systematic manner. The extent to which this taxonomy provides a vehicle for bridging research to practice to support positive change and inform the field is promising, yet remains untested.

## Taxonomy Elements

<b>SERVICE DELIVERY</b> Elements directly influenced by or provided by the program to recipients of the program	Timing	At what age services begin for a child and/or a family
	Duration	Length of services, typically in months, from enrollment to termination or K enrollment
	Intensity	Frequency of services or density within a standard set of time of intentional high quality interactions between providers and the child and/or parent; often measured as hours in day or hours per week; can also be a behavioral measure of rate, frequency, or density of interactions or experiences
	Quality	As tied to Parent Aware or other direct quality improvement effort
	Ratio/Work Load	Ratio of children to direct service providers, or case load for family support workers
	Program Fidelity	Extent to which programs are complying with stated intervention procedures; are the programs doing what they said they will do
	Curriculum/Theoretical Focus	Selection of know-effective curriculum for professional development, parent education, or child services
	Supervision/Leadership	Director as instructional leader; regular team meetings to discuss cases; performance monitoring; annual reviews
	Comprehensive Services	Coordination among different services (e.g. education, child care, family support, economic opportunity) that provide coherent programming
<b>SERVICE MODEL</b> Elements that are part of the theory of change underlying the service delivery of the program	At-Risk Populations	Children with identified and known risks factors (poverty, disability, home language other than English, family factors) larger and more enduring gains for children at risk
	Compensatory	Provision of services focused on particular need, i.e. literacy/cognition, social/emotional development, designed specifically to promote school readiness among at-risk populations
	Cultural Continuity	Provision of services that are supportive of the cultural characteristics of families/participants, i.e. – provision of ELL staff
	Transition Service Coordination	Coordination across time and service delivery boundaries (e.g. pre-school, kindergarten) that provide coherent programming
	Professional Status - Development	This includes quality and pay of staff, retention, professional development



# Appendix D: MELF Measurement Model Overview

## Child Assessment Measures

The child assessment measures include a core battery of tools used by all MELF Research Consortium partners to evaluate children across MELF projects. Actual collection of the measures varies across projects depending on factors such as child age and grant purpose. Additional measures are also collected and tailored to specific grant evaluation needs.

- **DOCS:**

The Developmental Observation Checklist System (DOCS) is a three-part assessment system for children from birth through age 6. The MELF evaluation is using only the Developmental Checklist (DC) portion of the system. The DC is completed across MELF projects by teachers and assesses child functioning in four domains: language, motor, social, and cognitive.

- **SCBE-30:**

The Social Competence and Behavior Evaluation (SCBE) is a teacher-completed rating scale measuring social competence, affective expression, and adjustment in children ages 2 1/2 to 6. It takes approximately 15 minutes to complete 30 items pulled from the longer version of the SCBE-80.

- **PPVT:**

The Peabody Picture Vocabulary Test (PPVT) is a quick method of assessing receptive language for children over 2 years and 6 months. It is a direct assessment that takes approximately 10 to 15 minutes to administer. The PPVT-IV requires no verbal response from the child, making it easy to administer to children with limited expressive language.

- **TOPEL:**

The Test of Preschool Early Literacy (TOPEL) is an assessment of early literacy skills for children between the ages of three and five. Three areas of emergent literacy are covered: print concepts, expressive vocabulary, and phonological awareness. It is a direct assessment that takes approximately 25 to 30 minutes to administer.

- **WJ III:**

The Woodcock Johnson (3<sup>rd</sup> Ed) is a widely used collection of tests measuring achievement in reading, mathematics, written language and general knowledge. Two subtests, Quantitative Concepts and Applied Problems, are included in the MELF measurement model to measure mathematical reasoning and skills. These direct assessments are completed by trained assessors in approximately 10 minutes.

- **IGDIs (Picture Naming):**

The Individual Growth and Development Indicators' (IGDIs) subtest Picture Naming is a general outcome measure of children's expressive language that can be used with children between the ages of 3 and 5. Items include a random sample of 120 picture cards to help ensure that each administration uses an alternate form. Picture Naming takes one minute to administer and can be used to monitor child progress over time.



## Survey & Interview Descriptions

- **Parent Interview:**

Information from parents participating across MELF evaluation projects is collected via telephone interviews. Parents completed the interviews in English, Spanish, Somali, Hmong, or Karen. The ~ 45-minute interview covers home and family activities, parent support and health, child health and development, parent involvement, services received, early care and education decisions, and key demographic risk factors known to affect children's school readiness (e.g., poverty, family composition, maternal education, birth weight, and immigration status).

- **Teacher/Provider survey:**

The teacher and provider survey is an online survey for teachers and other providers. There are three different versions of these surveys that all ask similar questions, but are tailored to different audiences: infant/toddler center-based teachers, preschool center-based teachers, and family childcare providers. Both a short and a long version of the preschool center-based teacher survey are in use across projects. Questions relate to curriculum and instructional practices, assessment use, parent involvement opportunities, and characteristics of classroom and students. Information on teacher characteristics, such as a teacher demographics, home language, and beliefs about teaching and learning, is also gathered. The survey asks questions on teacher training, employment history, and experience, including employment history and salary. It also asks about experiences in Parent Aware, for those involved in QRS.

- **Director Survey:**

The Director survey is a survey for program directors and provides a picture of programs as a whole involved in MELF-funded projects. This survey asks questions about staff numbers, credentials, training, salaries, and hours worked per week. Information is also requested regarding supports offered by the program, such as benefits, professional development, and resources. Other questions address how the program is funded, business practices, and quality improvement efforts. The survey collects information about the children in the program who receive assistance or scholarships, the demographic profile of the children, language spoken, and children with special needs. Similar to the teacher/provider survey, the director survey also asks broad questions about family partnerships and parent involvement, curriculum and instruction, and assessment use. The last portion of the survey asks about the director's training, education, experience, demographics and opinion of Parent Aware, if applicable.

- **Home Visitor Survey:**

Similar to the teacher/provider survey, the home visitor survey is collected online from home visitors across MELF projects. The survey includes questions on home visitor characteristics, demographics, supervision, and beliefs about home visiting and the families they serve. The instrument also addresses family needs, case loads, use of curricula, tracking practices, perceived effectiveness of services, employment history, salary, and training.

- **Partnership Survey:**

The partnership survey is intended to provide a snapshot of the different partnership/collaborative initiatives funded by MELF and to contribute to the community-level analyses. The survey has five different sections, including Background, Structure, Activities, Outcomes, and Strengths/Challenges. The background section asks about the characteristics of the organization and community representation in the partnership. Structure includes questions on the partnership framework and the extent to which the partnership is working. The activities section of the survey is unlike many other surveys in that a Social Network Analysis strategy can be employed to map and describe the flow of information, resources, and activities among the partners involved in the partnership. The final two sections of the survey gather information on perceived outcomes of the partnership and challenges, strengths, and barriers of the partnership.



## Appendix E: Program Evaluation Summary “Fact Sheets”

### Program Evaluation Summary “Fact Sheets”:

- Anoka Healthy Start
- Autism Society of Minnesota
- Bloomington Preschool
- Caring for Kids Initiative
- Five Hundred Under Five
- Head Start Data Aggregation Project
- Joyce Preschool
- Parents as Teachers
- Saint Paul Schools Project Early Kindergarten (PEK)
- Suburban Ramsey (Roseville)
- Wilder Family Literacy Study





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# Anoka Healthy Start Partnership *MELF Evaluation Summary*

## Evaluation of the Anoka Healthy Start Initiative

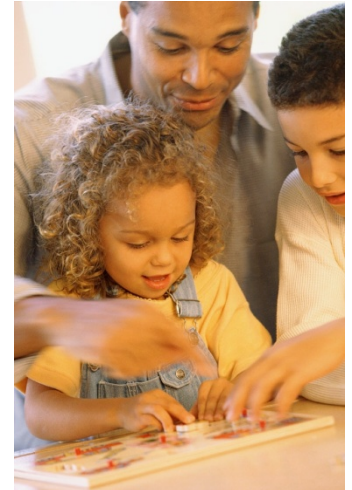
### *Findings and Lessons Learned*

### Program Overview

The Minnesota Early Learning Foundation (MELF) granted the Anoka Healthy Start partnership a three year innovation grant to “retool” the initiative in shifting priorities towards a broader emphasis on school readiness.

### Project Goals:

1. Create and refine data and monitoring systems to better track child and family outcomes and improve connections among data sources and partners;
2. Revise programmatic surveys, mailings, and materials to include more objective feedback and reflections of the initiative’s shift toward school readiness; and
3. Evaluate partnership membership, functioning, and the coordination of activities shared by a large network of partners representing home visiting and family support agencies.



### Evaluation Overview

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

### Evaluation Design

- The evaluation is primarily formative and qualitative in nature, describing partnership activities, outcomes, and lessons learned.
- Data collection methods included surveys of home visitors, parents, and partners, program enrollment and service coordination data, interviews, and focus groups.

### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the AHS grant proposal:

- Comprehensive Services
- At-risk populations
- Transition-Service Coordination



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## Evaluation Results

### ***Lesson Learned: Administrative coordination, leadership and stable funding are essential to support strong partnerships.***

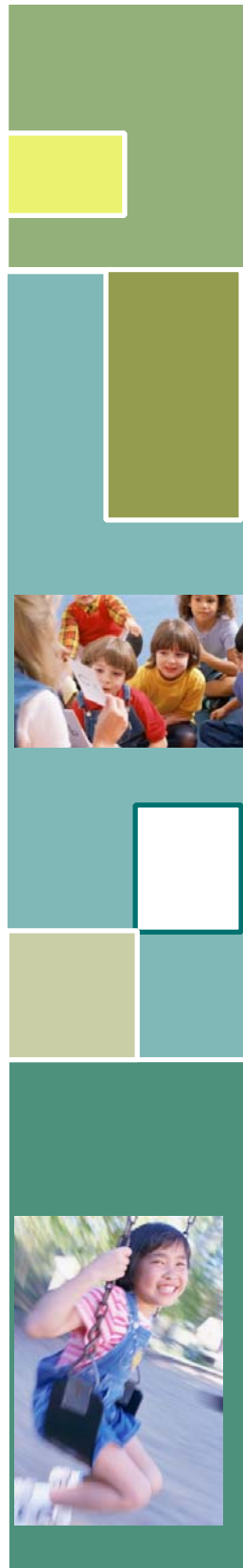
- Partners trust the initiative's administrative leadership. Decision-making structures and processes are well-defined and coordinated, and priorities are based on shared efforts and involvement in decision making. Multiple examples of partners identifying challenging needs, and brainstorming to develop solutions and allocate resources exist.
- The collaborative allows partners to expand services and opportunities beyond individual organizational capacities. Home visitors benefit from the training and professional development opportunities available via the partnership. This is highlighted by the fact that many consider Anoka Healthy Start to be their primary professional support.
- Although partners view the administrative layer as key to the ongoing functioning and sustainability of the initiative, funding this structure is an increasingly difficult challenge.

### ***Lesson Learned: Evaluation and data capacity takes time, resources, and partner commitment.***

- Modified reporting forms, enrollment forms, and questionnaires will allow the initiative to move forward with greater evidence and documentation of outcomes. The next step involves triangulating available data sources (e.g., home visitor progress report and family survey) to allow more powerful questions to be answered or attributed to the partnership.
- Clear data collection and sharing procedures and knowledgeable administrative staff are essential to manage, access, and report partnership data.
- Coordinating the timing of evaluation activities with funding to implement programs is important in assessing programs and outcomes.

### ***Lesson Learned: High response rates are essential to evaluation and successful outreach.***

- Partners are urged to examine strategies for improving response rates to surveys and protocols gathering input from families. Improving these would strengthen the partnerships' ability to better 1) describe outcomes and 2) ensure the experiences of families with multiple needs or who do not speak English are represented when determining partnership priorities.
- Partners should further explore the broader role and purpose of the developmental mailings for the initiative. Improving response rates will allow the initiative to better evaluate parent use of the information and costs and benefits to the partnership.







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# Autism Society of Minnesota MELF Evaluation Summary

## Evaluation of the PLAY Project for Young Children with Autism Spectrum Disorders and Their Families:

### Findings and Lessons Learned

### Program Overview

The Minnesota Early Learning Foundation (MELF) granted the Autism Society of Minnesota (AuSM) a one year innovation grant to provide a home-based, parent education intervention called the PLAY (Play and Language for Autistic Youngsters) Project for young children with Autism Spectrum Disorders (ASD) and their families.



### Project Goals:

1. Deliver and evaluate a research-based parent education intervention for young children with ASD and their families.
2. Test the effectiveness of this method in serving diverse cultural and linguistic population to better reach underserved communities.

Four trained PLAY Project consultants conducted home visits for approximately 4-6 months with a group of 44 children and families served by the Minneapolis Public Schools Early Childhood Special Education (MPS ECSE) Autism Program.

- Family languages: 30 English, 7 Somali, 3 Spanish
- Frequency of visits: weekly, bi-weekly, or monthly
- Service delivery: 2-4 hours of home visits/month for 4-6 months.
- The Somali families were served by a Somali-speaking home visitor. The Spanish –speaking home visitor left the program early in the intervention. An English speaking home visitor then met with Spanish-speaking families with the assistance of an interpreter.

### Evaluation Overview

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the AuSM grant proposal:

- Intensity of services
- At-risk populations
- Compensatory services
- Cultural continuity



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## Evaluation Design

- Significant challenges and delays in obtaining necessary permission from Human Subject Protection committees to recruit families to the study forced the evaluation to rely on information collected and managed by the program.
- CEED recommended randomly assigning families into intervention (PLAY Project) and comparison groups at the start of the project to increase the confidence that it was the intervention, rather than some other factor, that resulted in any potential change.
- The program did not want to deny interested families the services being offered. Instead, matched comparison groups were established to collect the same measures as the PLAY project participants both before and after the intervention phase. Unfortunately, comparison children were only selected at the end of the intervention. This reduces the ability to clearly say it was the intervention that made any difference.

## Evaluation Results

Anecdotal evidence suggests parents feel (a) more knowledgeable and able to use the techniques they learned and (b) generally satisfied with the services. However, parents in the comparison group report similar levels of satisfaction and competence in parenting their children.

Although children showed a modest improvement in their ASD symptoms and ability to form healthy relationships with parents, the results were relatively small and difficult to translate into meaningful changes in everyday life. The results may also be due to general development rather than taken as a sign of the intervention's effectiveness. There were no differences at post-test between intervention and comparison children.

Incomplete data and tracking measures, a shorter treatment window, and a lack of pre-data comparing both intervention and comparison groups significantly hampered the evaluation strength and design. *Results are anecdotal at this point, and best considered pilot data with lessons learned related to the implementation of the project which can be used to inform future efforts.*

## Lessons Learned

- Allow for a significant planning and evaluation coordination period before the launching of a project (i.e., time to obtain necessary approval to gather data from particularly vulnerable populations);
- Strengthen both program implementation and evaluation design by:
  - systematically documenting the intervention using objective measures,
  - identifying a matched comparison group prior to initiating services (ideally including randomized placement into intervention and non-intervention groups if at all possible), and
  - increasing the time frame of services expected to result in changes for children and families.





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# Bloomington MELF Preschool

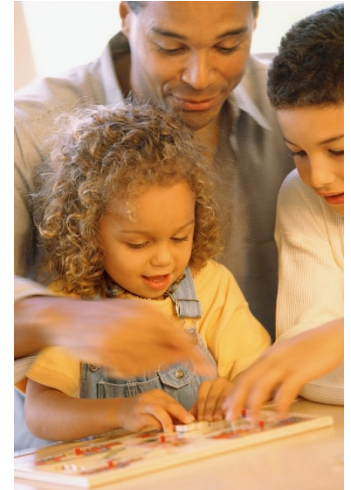
## MELF Evaluation Summary

### Evaluation of Bloomington MELF Preschool: Preliminary Results

#### *Findings and Lessons Learned*

#### **Program Overview**

Bloomington Public Schools received funding from MELF to provide a high-quality, literacy-focused half-day preschool program serving low-income children and English-language learners. MELF funded two classrooms serving 18 children each, with one teacher and two assistants in the classroom. One of the assistants was a fluent Spanish-speaker.



#### **Key elements of the Bloomington MELF Preschool include:**

- Ongoing professional development focused on effective literacy practices for enhancing literacy in children with high risk factors.
- Ongoing assessment to inform instructional practices.
- Doors to Discovery curriculum.

Children were enrolled in the Bloomington MELF preschool based on a variety of risk factors, including income level and English speaking ability. The majority of children enrolled in the program had multiple risk factors and many of them spoke Spanish as their primary language at home.

Bloomington MELF Preschool classrooms served both 3 year olds and 4-year olds. Children could therefore be enrolled for one year or two years prior to kindergarten entry.

#### **Program Goals**

The original goals of this program were to:

1. Investigate the effects of intensity on children’s school readiness outcomes. Bloomington proposed to compare the half-day MELF preschool with a full-day preschool.
2. Investigate the effects of timing on children’s school readiness outcomes. Some children entered the program at age 3, while others entered the program at age 4.

#### **Analysis of MELF Program Features**

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the Bloomington MELF preschool grant proposal:

- Timing
- Duration
- Intensity
- At-risk populations
- Compensatory services



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## Evaluation Design

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

Bloomington was not able to implement a full-day comparison program, but rather developed a half-day program that was less intensive than the MELF preschool. This half-day program, called KinderPrep (KP), was similar to the MELF half-day preschool along most dimensions, including curriculum, professional development, enrollment requirements, and assessment and instructional strategies. The primary difference between MELF and KP was the amount of time children were served, allowing for a small comparison of dosage/intensity.

Additionally, the evaluation team was able to construct a comparison group for the full-day, half-day comparison from a prior program implemented in Bloomington.

## Evaluation Questions

1. To what extent is the amount of time spent in early childhood programs associated with increased school readiness (both in terms of number of days per year and one vs. two years), in particular literacy development, in low-income, ELL children?
2. How do the school readiness outcomes of children in half-day programs compare to the school readiness outcomes of children in full day programs?

## Preliminary Evaluation Results

- Comparing children enrolled in MELF Preschool and KP, no differences were found on measures of language, early literacy, or mathematics. Although children made gains from fall to spring, average scores on the assessments fell in the low to low average range.
- Half-day services, regardless of the number of weeks children are served, may be insufficient to produce robust differences in children's school readiness. This is congruent with findings of other preschool studies that recommend full-day programs for serving children at risk.

The evaluation team is currently in the midst of conducting a comparison of non-simultaneous cohorts of children served in full-day, full-year programs and those served in half-day, partial-year programs. This comparison will also include analysis of differences between children enrolled at age 3 and children enrolled at age 4. Results of this comparison will be forthcoming in early 2010.





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# Caring for Kids Initiative *MELF Evaluation Summary*

## Evaluation of the Caring for Kids Initiative

### *Findings and Lessons Learned*

#### **Program Overview**

CfKI began as a partnership between three key founding partners: Interfaith Outreach and Community Partners (IOCP), Kids' Care Connection (KCC), and the Wayzata Public Schools (WPS). CfKI works within the boundaries of the Wayzata Public Schools (WPS) to provide scholarships for children to attend quality childcare programs, offer parent education opportunities, and connect families to resources.

**CfKI blends** private funds from the community with public funding for programs from the state to offer scholarships to qualifying families to access quality care. Parents with scholarships choose from approved centers in CfKI's Quality Provider Network.

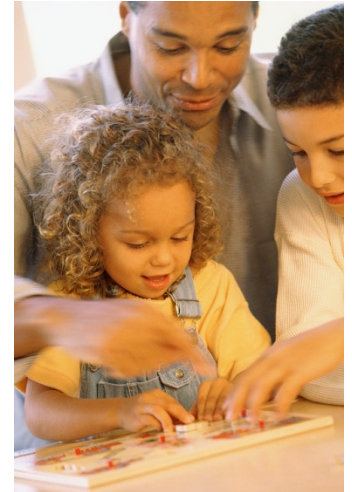
#### **Program Goals**

- Ensure children arrive at kindergarten ready to learn by linking families in need to relevant resources and providing quality, affordable childcare.
- Encourage parents to become involved in their children's learning and to enhance their ability to identify quality early learning providers.
- Develop more efficient and cost-effective means to provide quality early childhood opportunities for low-income families.
- Develop collaborations between community-based organizations and the school district to more effectively serve families.

#### **Evaluation Design**

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded community grant project.

The purpose of the CfKI evaluation was to describe aspects of CfKI implementation and the partnership supporting the development and implementation of CfKI. Information for the evaluation was collected via direct child assessments, parent interviews, surveys of programs and partners, and independent ratings of program quality.



#### **Analysis of MELF Program Features**

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the Caring for Kids Initiative grant proposal:

- At-risk populations
- Compensatory services
- Transition-Service Coordination

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## Evaluation Results

- Although a small number of parents (n=10) completed the parent interview, they were generally positive about their experiences in CfKI. They described multiple benefits for their child and for themselves, with higher quality care that was consistent and opportunities for parent education about child development, school readiness, and community resources.
- Observations of nine CfKI sites demonstrate strengths in quality in many aspects, such as emotional support and teacher-student interaction, language, activities, and classroom organization. They also illustrate certain aspects of quality that can be improved, such as personal care routines, space and furnishings, and instructional support.
- Partners in CfKI generally felt there were a number of benefits to participating in the partnership, including increased collaboration and communication among partners that lead to higher quality and more comprehensive services for families. Partners indicated information available to families about quality programs increased.
- The majority of partners in CfKI believed that gaps in services available to families decreased, while the number of people able to access services increased as a result of the CfKI partnership. Partners reported benefits to staff in the form of increased knowledge and professional development opportunities.
- The blending of public and private funds to create scholarships for families increased families' access to quality child care services, although it is an ongoing challenge to raise the private portion of funds for scholarships.

## Lessons Learned:

- A Quality Provider Network can be an effective venue for continuing to promote quality and provide professional development across early care and education settings. Partners can play a key role in directing and supporting the opportunities the QPN can provide.
- Developing a community partnership takes time and resources, including strong leadership that is knowledgeable and networked in the community. Other important aspects of partnerships include developing a shared vision focused on children and families and a structure allowing for the partnership to easily adapt to changing community needs while staying committed to the overall goals of the partnership.
- A public-private partnership scholarship model is very viable in many communities. To be successful, the community needs to be aware of and dedicated to early childhood issues. They must then take the next steps of attracting volunteers, dedicating resources and fundraising to gain support of philanthropic businesses and individuals in the community.





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December 2009

# Five Hundred under Five (FHu5)

## *MELF Evaluation Summary*

### Evaluation of Five Hundred under Five

#### *Findings and Lessons Learned*

#### **Program Overview**

*Five Hundred under 5* will find 500 children under age five in two north Minneapolis communities, learn about their lives and connect them with needed resources so they arrive at kindergarten ready to succeed. The ultimate goal is to find cost-effective and family-friendly solutions to ensure children enter kindergarten ready to learn.

#### Key Components of FHu5:

- Family-centered, not systems-driven
- Geographic focus and intensity – “mile deep and inch wide”
- Relationship-based ongoing commitment
- Cross-systems approach to leverage, modify and add to existing systems to meet family’s needs
- Built-in evaluation and feedback loop for families

#### Engage parents early and often to build trusting relationships and provide parent education:

- *Family Support Advocates* recruit families and connect them with services and supports.
- *Family Academy* classes and discussion groups introduce families to 500 under 5, to each other and to parenting help.

#### Connect families to high-quality early childhood settings and resources to support their child’s school readiness:

- *Parent Aware child care ratings* help families identify quality settings.
- *Scholarships* and other supports provide financial assistance for quality early childhood opportunities.

#### Gather and share information to help families and improve their access to choices:

- *Information about children’s language, literacy and health development* helps parents understand and support their child’s progress toward being school-ready.
- *Information about family needs and service gaps* helps drive community-based service changes and ensure services are as good as possible for kids and families.

#### Collaborate among and catalyze existing public and non-profit systems to drive changes in how they do business to improve outcomes for kids.



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## Evaluation Results: Lessons we learned from FHu5 Families

***Lesson Learned: Families will actively engage in community-based child assessments in ways that are meaningful for them and that contribute to generalizable knowledge.***

- Families want accurate and actionable information about their children to help them make informed choices. *But* the research process must be respectful, meaningful and timed for families' schedules.
- Child assessments can be successfully administered in community contexts. Families like the convenience of meeting researchers in libraries and community rooms first, prior to inviting researchers into their homes.
- We developed four key strategies for success in community-based child assessments: connect to families through trusted intermediaries, provide transportation, compensate families for their time, and provide assessment results immediately to families in clear and understandable language.
- We must provide parents and caregivers immediate and appropriate help, support and referrals if one or more of our child assessments indicates that their child is not on-track for kindergarten readiness. Without this support we flag issues with no resolution. This damages trust between our community workers, families and the assessment team. We identified a particularly acute lack of resources for social-emotional referrals and support.

***Lessons Learned: Families face many obvious and hidden barriers to accessing EC resources. These barriers are cumulative. Any one alone would not necessarily be an access blocker.***

- Obvious barriers include: different languages for parents and providers, lack of transportation, incomplete or lack of knowledge of services, difficulty in meeting complicated eligibility requirements, and lack of ability to pay for needed services.
- Hidden barriers include: endemic lack of trust of institutions or service providers among some groups in our zone; previous or perceived experience of judgment and lack of respect; unstable, unreliable, changing and intermittent access to appropriate transportation; individual demoralization and belief that "I can't do this;" and more.

***Lesson Learned: Short-term immediate basic needs (i.e. food, eviction, lack of resources for bills, or other critical emergency) block families' ability to focus on early childhood work with their children***

- This does *not* mean that a family does not care about early childhood education and the educational success of their children – rather, that these other issues sometimes take precedence.
- Without judgment, we need accept that many families are forced to make difficult "choices" weighing the balance of meeting immediate needs, handling a crisis and preparing for the future. In this context, sometimes "preparing for the future" is not the most pressing.







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# Minnesota Head Start Association *MELF Evaluation Summary*

## Evaluation of the Minnesota Head Start Child Outcomes Project:

### *Findings and Lessons Learned*

### Program Overview

The Minnesota Head Start Association (MHSA) was funded by the Minnesota Early Learning Foundation (MELF) to create a statewide online child assessment system capable of aggregating data across children in order to support the collection and use of high quality child assessment data.

### Project Goals:

1. to create a statewide online child assessment system capable of aggregating data across children in order to support the collection and use of high quality child assessment data
1. to insure the quality of the data collected is high



### Evaluation Overview

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

### Evaluation Design

The evaluation design is primarily descriptive, focused on the project of the initiative in three main areas:

- The creation of an online child assessment system
- The development of a quality assurance system
- The convening of a Grant Advisory Group to make recommendations regarding the use of the aggregated child assessment data

### Evaluation Participants:

- Eleven education coordinators rated the quality of the assessment data entered into the statewide online assessment system by 88 randomly selected teachers.
- 26 of the selected teachers completed a survey that provided information about their perceived confidence, support and relationship quality with their education coordinator.
- 57% of Head Start grantees across the state (n=18) participated in the initiative.

### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific projects contribute to what is known about effective early care and education programming. The following features of the framework were targeted in the MHSA grant proposal:

- Professional development
- At-risk populations



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## Evaluation Results

- Over half of all Head Start programs in the state participated in aggregating child assessment data on over 5,000 children in the second year.
- Using a data quality review instrument created by the project team, 11 education coordinators rated the quality of data entered by 88 randomly selected teachers.
- Education coordinators conducting the reviews reported high utility of the tool.
- Although the results using the data quality review instrument indicate lower quality data, similar to the perceptions about the quality of the data of the education coordinators who reviewed the data files, further validation of the data quality review instrument is needed.
- Teacher education, years of classroom experience and assessment experience, teachers' perceived confidence, teachers' perceived support, and teachers' perceived relationship quality with the education coordinators did not relate to data quality.
- The Grant Advisory Group met four times over the course of the second year and made recommendations to Minnesota regarding the development and adoption of a statewide child assessment system.
- The programs participating in the initiative have decided to adopt the data quality review instrument created as a part of this project to continue monitoring the quality of the assessment data they collect.

## Lessons Learned

- Ongoing monitoring and quality assurance are essential elements of a statewide child assessment system. Clarity regarding the goals, purpose and procedures is necessary, as is validating tools to be used in the process.
- Assessing the quality of teachers' assessment data is not a straightforward process, but is especially critical as the system of early care and education increasingly relies on teachers' reports of children's development and growth.
- The data review process and professional development strategies for teachers should mutually inform each other. Improving the quality of observational assessment data collected by teachers about children is necessary and should be guided by the specific findings of the data review process.
- The data review process requires tools for assessing data quality, such as the one created for this project, with high utility for the early childhood professionals using it, rather than creating an additional, unnecessary burden.
- From a systemic perspective, high stakes decisions about programs must be made with data from a variety of sources. Because of the significance of these decisions, it is imperative that all data used in decision making be of high quality. Efforts must be made to insure the quality of all used in high-stakes decision making.





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# Joyce Preschool Model Honing and Sharing *MELF Evaluation Summary*

## Evaluation of Joyce Preschool Model Honing and Sharing

### *Findings and Lessons Learned*

#### Program Overview

Joyce Preschool is a dual immersion Spanish-English program for children ages 3-5 located in South Minneapolis. Joyce Preschool (Joyce) is a universal-access preschool, enrolling Spanish, English, and bilingual children from a range of socio-economic backgrounds.



#### Project Goals:

1. Conduct an in-depth analysis of current programmatic elements to describe, refine, and hone Joyce’s approach to working with Latino families to develop a best practices model for serving Spanish-speaking families.
2. Share the model with a wider audience through a variety of activities, including expanded involvement in professional development opportunities, to promote best practices in dual immersion education in early childhood education.

#### Evaluation Overview

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

#### Evaluation Design

- The evaluation was designed to be formative, describing program implementation and lessons learned. Evaluation questions centered around three main areas: Describing central tenets of the Joyce model, honing the Joyce model, and sharing the Joyce model.
- Methods used for data collection included interviews with three key program staff at the end of the project and review of documents, reports, and meeting notes. The evaluation focuses primarily on reflections obtained from staff at the end of the project.

#### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the Joyce Preschool grant proposal:

- Quality
- Ratio/work load
- Program Fidelity
- At-risk populations
- Cultural continuity



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## Evaluation Results

### ***Lesson Learned: Effective dual immersion practices are still emerging.***

- An equal ratio of dominant language speakers, non-dominant language speakers, and bilingual children encourages children to speak both languages.
- Bicultural, bilingual staff are essential for cultural continuity and ensuring the program is culturally relevant for children and parents.
- Single language modeling (i.e., teachers speaking their native language) allows children to practice both languages simultaneously.

### ***Lesson Learned: Honing and sharing a model takes staff time and ongoing professional development opportunities and is valuable process for improving programs.***

- Translating best practices research into practical implementation in the classroom takes time and experimentation. Focused staff time and attention is a valuable tool.
- Professional development that is onsite, intentional, ongoing, and on a specific topic related to classroom practices is helpful for staff to make program improvements.
- Staff need time to process professional development and apply new strategies to their classroom practices. Team meetings around classroom curriculum and implementation are integral to improving and implementing change.
- Sharing information through site visits, technical assistance, professional networks, and conference presentations and trainings takes time and money.
- While initially they expected other programs to benefit from their model, staff discovered that the model honing process helped them improve their program.

### ***Lesson Learned: Evaluating early childhood programs takes time, resources, and partner commitment.***

- Finding a tool to assess children that is valid and reliable for both English speaking children and ELL children is challenging. Few exist.
- Assessing children in early childhood requires both time and resources. Programs with diverse funding streams may have to report to multiple funders and may need to use multiple assessments, which demands time and resources from the program and staff.
- Following program participants into kindergarten is not feasible at this time due to state-wide data privacy issues and school district policies. This limits the ability of early childhood programs to demonstrate long-term outcomes.





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# Parents as Teachers *MELF Evaluation Summary*

## Evaluation of the Implementation of the Parents as Teachers Born to Learn Plus Program with Hard-to-Reach Families

### *Findings and Lessons Learned*

### Program Overview

The Minnesota Early Learning Foundation (MELF) funded PAT, in partnership with three local Early Childhood Family Education sites, a three year innovation grant to provide home visiting and parent education to underserved, hard-to-reach families with infants and toddlers.

### Project Goals:

1. Deliver and evaluate a research-based home visiting, parent education intervention for underserved, hard-to-reach, culturally diverse families.
2. Evaluate the impact of using community-based paraprofessional parent educators to better reach underserved communities.

Ten trained PAT home visitors conducted home visits for approximately 4-19 months with a group of 85 children and families, and provided on average 14 parenting groups.

- Targeted populations: Karen families in St. Paul, low-income, rural families in Waseca, and low-income, diverse, suburban families in Anoka-Hennepin.
- Frequency of visits: weekly, bi-weekly, or monthly
- 46 families consented to participate in the evaluation

### Evaluation Overview

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

### Evaluation Design

- Significant changes in the terms of grant (from three years to a year and a half), as well as several challenges in the implementation of the grant, resulted in an inability to examine the effectiveness of the program in improving children's school readiness.
- The current evaluation design is primarily qualitative and descriptive, focused on the implementation of the PAT Born to Learn Plus program with families that were challenging to find and serve.



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### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific projects contribute to what is known about effective early care and education programming. The following features of the framework were targeted in the PAT grant proposal:

- Intensity of services
- Program fidelity
- At-risk populations
- Cultural continuity

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## Evaluation Results

All three sites faced various challenges implementing the program with their targeted hard-to-reach families.

- One significant challenge was hiring and keeping community-based paraprofessional home visitors, which resulted in an inability to fully examine the role of cultural continuity, a key goal of the project.
- The projects were not able to provide the intended intensity for the intended duration to the number of families proposed for a variety of reasons including:
  - difficulty retaining staff,
  - a slower start than expected with difficulties finding families in the beginning, and
  - termination of the grant earlier than expected.
- Parenting group attendance was low or non-existent across two of the sites.

Two strategies emerged that were successful in attracting families:

- the provision of transportation and/or financial incentives, and
- recruitment of families in the places they live, spend most of their time, or receive necessary services.

The program did appear to successfully connect these previously hard-to-reach, underserved families to resources for their children, including Head Start, ECFE, and early intervention services.

Incomplete data, a shorter treatment window, and a lack of post-data due to the implementation challenges and the loss of funding hampered the evaluation strength and design. *Results are best considered pilot data with lessons learned focused on factors that appeared to impact the ability of the programs to successfully implement the program with hard-to-reach families.*

## Lessons Learned

- Explore cultural and other systemic factors that affect the potential pool of cultural community members attracted to work in the early care and education field, particularly home visiting and parent education.
- Provide stable, unified funding streams rather than relying on multiple, short-term funding streams. Such funding is necessary to provide early childhood care and education programs with the time and credibility necessary to build trust with both the community agencies serving the culturally and linguistically diverse populations in Minnesota and the families themselves.
- Make program participation attractive to underserved, hard-to-reach families by providing incentives, transportation or on-site service, and flexibility in scheduling.
- When evaluating programs that are trying to serve hard-to-reach populations, allow ample time for finding and recruiting families into the program prior to evaluating outcomes for children and parents.





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# St. Paul Schools' Project Early Kindergarten MELF Evaluation Summary

## Evaluation of the St. Paul Schools' Project Early Kindergarten (PEK) Child Care Component

### Findings and Lessons Learned

### Program Overview

The Saint Paul Public Schools' Project Early Kindergarten program aims to improve the school readiness of Saint Paul children. The program offers a rigorous academic approach and targets children who are English Language Learners, come from low-income families, or need Special Education services. Ultimately, the program intends to help close Saint Paul's achievement gap.



PEK aligns pre-kindergarten education with the district's K-12 curriculum model, the Project for Academic Excellence. The model emphasizes standards-based education and extensive professional development. With sensitivity to young children's developmental needs, PEK extends this model to early education, bringing children's preschool experience into alignment with the educational experience they will have in later years

### Project Goals

The Minnesota Early Learning Foundation (MELF) funded PEK, in partnership with the St. Paul Schools, Resources for Child Caring, and Wilder Research, a three year innovation grant to extend the PEK model to community-based family child care providers and center-based child care.

### Evaluation Overview

Wilder Research served as the external evaluator for this MELF-funded innovation project.

### Evaluation Design

- Children are tested over time and in developmentally appropriate ways. Evaluators compare children's academic and social skills in kindergarten and early elementary years to those of peers who did not participate in PEK.

### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the PEK grant proposal:

- Timing
- Duration
- Quality
- Program Fidelity
- Curriculum
- Professional Status/Development
- Transition Service/Coordination



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## Evaluation Results for PEK Community-Based Child Care

As of fall 2009, 10 child care centers, and 13 family child care homes offer pre-kindergarten programs following the PEK approach to 2½- to 4-year-olds.

Having started a year later than PEK's school-based program, PEK's child care component is at an earlier stage. As of fall 2009, data are available for 4-year-olds who participated in the child care component's first and second cohorts. At this point, results are more suggestive than conclusive. On average, 4-year-olds in child care Cohorts 1 and 2 experienced the following changes:

- Upon kindergarten entry, PEK child care Cohort 1 and 2 children appeared to have an advantage over classmates who did not participate in PEK on some academic measures, especially vocabulary.
- However, PEK school-based children appeared to have a slight advantage over PEK child care children on reading and math in kindergarten.
- In the areas of social skills and problem behaviors, child care Cohort 1 and 2 children did not appear to have any advantages compared to kindergarten classmates. Again, results tended to be more positive for PEK school children.
- Overall, child care center directors, center teachers, and family child care home providers gave positive feedback about their experiences with PEK and also offered some suggestions for further program development.

## Lessons Learned

A core component of PEK is the inclusion of an ongoing evaluation that can be used to inform programming. Based on results available to date, following are several issues that can be taken into consideration in future planning for PEK school and child care sites.

A complete list of issues for consideration and "lessons learned" to date from the evaluation are provided in Wilder Research's full report (2009, September), *Project Early Kindergarten Evaluation: Results through 2008-2009 of a Saint Paul Public Schools initiative*.

- Particular attention may need to be paid to the social skills and problem behaviors of children at child care sites. Teachers received training on Positive Behavior Support at the beginning of the 2008-09 school year. PEK staff can consider whether child care teachers could benefit from more training in this area.
- PEK child care results are limited at this point, suggesting some program impact on children but also suggesting room for improvement. We anticipate more reliable results in 2009-10 when the larger third cohort of child care children begin kindergarten. Cohort 3 children are assessed both in the fall of their pre-kindergarten year and fall of their kindergarten year, permitting better analysis of program impact than in the first two cohorts.







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# Roseville Ready Set Read *MELF Evaluation Summary*

## Evaluation of Roseville Ready Set Read

### *Findings and Lessons Learned*

### Program Overview

The Roseville Ready Set Read program was part of a larger grant funded by the Minnesota Early Learning Foundation (MELF) and the Roseville Rotary. The Suburban Ramsey Family Collaborative (SRFC) helped to facilitate the partnership between MELF, the Roseville Rotary, and the Roseville School District School Readiness program (Roseville SR).

### Program Goals:

The overall goal of the grant was to improve literacy for isolated families in the Roseville community to enhance the school readiness of all children in Roseville. To reach this goal, the grant outlined the following objectives:

1. Build cross-sector collaborations to enhance the ability of the Roseville SR to find and serve unconnected and isolated families.
2. Increase access to services and decrease isolation by providing services in accessible places.
3. Increase connections between ELL/Immigrant parents and the business sector.

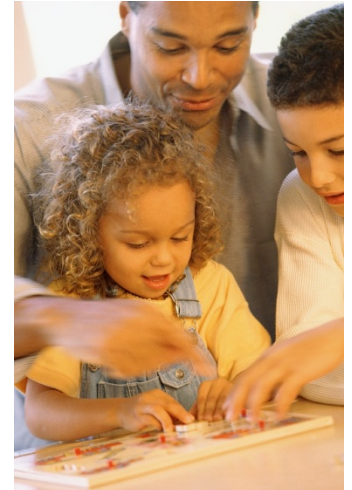
### Evaluation Overview

The Center for Early Education and Development (CEED) at the University of Minnesota served as the external evaluator for this MELF-funded innovation project.

### Evaluation Design

The evaluation was designed to be formative, describing program implementation and lessons learned. Evaluation questions centered around three main areas: partnerships, identifying and serving unconnected families, and evaluation capacity.

Methods used for data collection included interviews with program staff and review of documents, reports, and meeting notes. Roseville also kept records of the number of children and families served and in what ways they were served, as well as how they partnered with different organizations.



### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the Roseville Ready Set Read grant proposal:

- At-risk populations
- Compensatory services
- Transition-Service Coordination

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## Evaluation Results

### *Identifying and Serving Unconnected Families*

The ways in which Roseville identified and served families depended on the needs of the family. Activities included home visiting, family nights held at the Roseville SR center or at apartment complexes, Saturday literacy class, and distribution of literacy kits throughout the community.

### *Collaborations and Partnerships*

Staff in Roseville deepened and expanded their collaborations with existing partners and developed new relationships with additional partners.

### *Evaluation Capacity Building*

The evaluator facilitated collaboration between Roseville early childhood programs and Roseville K-12 evaluation and assessment staff to enhance evaluation capacity by link data systems and use assessment. As a result of this work, Roseville SR has developed a plan to better assess their students on skills related to school readiness and compare outcomes of SR participants to non-SR participants.

### **Lessons Learned:**

- The most effective way to connect with underserved families is to meet them face-to-face and offer useful resources and materials.
- Early childhood education programs based in the schools can potentially be a good link between the K-12 system and the community.
- Ensure families participate in events and programs is an ongoing process that requires numerous points of contact and a way for families to access the programs.
- Transportation is a huge barrier, and if families can't come to the program, the program needs to go to the families.
- School-based early childhood programs often don't have a strong data connection to the K-12 system, but there is a strong potential to connect early childhood and the K-12 system to identify family needs earlier to improve children's later school outcomes.

### **Next Steps:**

One important question that was not answered in this evaluation was how to determine impact of the Roseville SR program. Working with an external evaluator who has expertise in early childhood outcomes and school system databases would enable the Roseville SR to start analyzing outcome data.





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# Wilder Family Literacy Study

## MELF Evaluation Summary

### Minnesota Family Literacy and School Readiness Study: First-year baseline results

#### *Findings and Lessons Learned*

#### Program Overview

Minnesota Family Literacy programs are intergenerational, comprehensive programs that provide intensive long-term literacy instruction for children and their parents. These programs pay attention to the adult participants because research shows that if parents' attitudes and behaviors are changed that will affect changes in their children.



The national comprehensive Family Literacy model that is used in Minnesota has four components: early childhood education, adult education, parent education and support, and interactive literacy activities.

#### Program Goal

The Minnesota Early Learning Foundation (MELF) funded Wilder Research to systematically examine the impact of Family Literacy programs on participating adults and children for this innovation project.

#### Evaluation Questions

1. What gains in developmental skills important for school readiness do children make at different levels of participation in Family Literacy?
2. What level of Family Literacy program dosage do children need to substantially benefit from the program with regard to preparation for kindergarten?
3. How is parents' involvement in their children's learning affected by level of participation in Family Literacy?

#### Analysis of MELF Program Features

MELF utilizes a framework developed by CEED to understand how specific grants contribute to what is known about effective early care and education programming. The following features of the framework were identified in the PAT grant proposal:

- Timing
- Duration
- Intensity
- Curriculum
- At-risk Populations
- Compensatory



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## Evaluation Design

The study questions will be addressed through a two year study of primarily four year-old children and families participating in Family Literacy programs in Minnesota. Two separate cohorts of children and their families were assessed in the fall of 2007 and 2008, while they were participating in Family Literacy. Children in each of these cohorts are assessed the subsequent fall when they enter kindergarten (fall 2008 and fall 2009).

## Preliminary Evaluation Results

A report produced by Wilder Research for the MELF in November, 2008, *Minnesota Family Literacy and School Readiness Study: First-year baseline results*, presents the initial findings from the first year of the Minnesota Family Literacy and School Readiness study. Year two results will be shared with the MELF in early 2010.

### Year 1 Results

- Ten Family Literacy programs in Minnesota participated in the first year study.
- Results of Cohort 1 baseline child assessments collected in fall 2007 indicated that the 4-year-olds scored below the national average on most of the indicators of language, literacy, and math. It should be noted that children were assessed in English, and that the first language of most of the children was not English (for most, it was Spanish) and therefore, their scoring below the national average is not surprising. Post assessments were conducted for these children in November and December 2008. Further analyses on progress of Cohort 1 children's language, literacy, math, and social skills by their demographic characteristics and length of participation (dosage) in Family Literacy programs will be presented in the future report.
- Results for Cohort 1 parents indicated that parents improved in their literacy skills and parenting skills during the year. Parent attendance rate during the year is related to gains in parents' Parenting Growth Inventory parental support for early learning and literacy scores.
- Evaluation will compare results of the study to similar school readiness studies of children from similar backgrounds (low-income families, culturally diverse, home language often not English).





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