Voices from the Field: Perceptions of Maryland Child Care Providers

Study of the perceived impact and challenges of the Maryland EXCELS program through in-depth interviews and online survey of Maryland child care providers
Study of the perceived impact and challenges of the Maryland EXCELS program through in-depth interviews and online survey of Maryland early childhood and school-age educators

Chapter 1. Motivation, Benefits, and Challenges
Chapter 2. Licensing and Compliance, Staff Qualifications and Professional Development, Accreditation and Rating Scales, & Use of Subsidies
Chapter 3. Developmentally Appropriate Learning and Practices & Social and Emotional Learning
Chapter 4. Administrative Policies and Practices & Suspension/Expulsion Practices
Chapter 5. Perceptions of Maryland EXCELS Non-Participants
Appendix: Methodology

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The content is solely the responsibility of the authors and does not necessarily represent the views of the Maryland State Department of Education or Johns Hopkins University.

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Motivation, Benefits, and Challenges
Chapter 1 Motivation, Benefits, and Challenges

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Chapter 1 Motivation, Benefits, and Challenges

Executive Summary

The Maryland EXCELS Research Team conducted the Phase 1 and Phase 2 Early Childhood and School-Age Educator Perception Study in 2018 to understand early childhood and school-age educators’ perceived impact and challenges of Maryland EXCELS, and to identify which aspects of Maryland EXCELS have the most influence on the quality of practices. The Phase 1 Study was conducted from June 14, 2018, to July 11, 2018. The online survey was distributed via the Maryland EXCELS e-newsletter; 532 child care and public PreK educators participated in the study.

Key findings from Phase 1 online survey include the following:

- About 68% of the child care and public PreK educators reported that they think participation in Maryland EXCELS has improved or greatly improved the “best practices” carried out by their programs.
- About 72% of the child care and public PreK educators perceived that participation in Maryland EXCELS is effective or very effective in promoting children’s development.

View of Child Care Providers

- More than 80% of child care providers reported that all Maryland EXCELS content areas are effective or greatly effective in promoting quality care and education, except for Accreditation and Rating Scales (75.3%).
- Developmentally Appropriate Learning and Practice was reported as the most effective area.
- About half of the participants perceived that the content areas are not challenging or slightly challenging. The Accreditation and Rating Scales content area was identified as the most challenging area by child care providers.
- There was no difference in terms of perceptions between center-based and family child care providers, except that center-based providers perceived significantly greater levels of challenges around Staff Qualifications and Professional Development than family child care providers.

View of Public PreK Educators

- More than 90% of educators reported that Accreditation/Validation and Rating Scale and Administrative Policies and Practices are effective areas.
- Administrative Policies and Practices was reported as the most effective but the most challenging area.
- The School Approval and Teacher Qualifications and Professional Development content areas were perceived as the least effective and the least challenging areas.

To understand early childhood and school-age educators’ perceptions on Maryland EXCELS impacts, motivation, benefits, and challenges more in-depth, the Maryland EXCELS Research Team conducted the Phase 2 follow-up research study. Phase 1 participants who were willing to participate in the Phase 2 study (n = 321) were randomly selected to participate in either a Phase 2 telephone interview or a Phase 2 online survey. The interview participants were randomly identified using three criteria: county, program type, and Maryland EXCELS published quality rating. Individual telephone interviews with 60
early childhood and school-age educators (53 Maryland EXCELS participants and 7 non-participants) were conducted from August 21, 2018, to September 12, 2018.

The Phase 2 report includes findings on Maryland EXCELS motivation, benefits, and challenges from interviews with 53 Maryland EXCELS participants.

Key findings include the following:

- The primary benefits of participating in Maryland EXCELS were (a) recognitions by parents and benefits of marketing, (b) intrinsic motivation (e.g., be more professional), (c) quality improvement, and (d) monetary incentives (e.g., additional subsidies).
- About 54% of the participants reported they moved up in quality rating during their time participating in Maryland EXCELS. Most of these participants noted that they are still interested in moving up in quality ratings. In addition, most of the participants who have not increased their rating reported that they are interested in moving up. The most common reasons for moving up were (a) to fulfill their intrinsic motivation, (b) to receive more recognition from families or MSDE, (c) to receive monetary incentives, and (d) because they recognized the ease of moving up. The most common reasons for not moving up were (a) difficulties in meeting the staff qualifications and professional development content area, and (b) having external counterforces, such as lack of money and time.
- The biggest challenges with Maryland EXCELS were (a) understanding the system, content areas, and language in the standards, (b) time commitment and paperwork, (c) acquiring documentation of staff credentials, and (d) getting accreditation. To help with the challenges, early childhood and school-age educators reported that they received assistance primarily from Program Coordinators or Quality Assurance Specialists.
- When participants were asked to share the biggest challenges they face in offering high-quality programs to their children and families, they often mentioned (a) money and budgeting (e.g., a balance between tuition and staff support), (b) difficulties with hiring and retaining quality staff, (c) issues with parents, (d) meeting children’s individual needs, and (e) negative perceptions about early care and education (e.g., perceived as a babysitter).
- Early childhood and school-age educators suggested that the following aspects should be measured as an indicator of quality: (a) parent satisfaction/perceptions and relationships with parents, and (b) various aspects of staff quality (e.g., number of years of experience, staff retention, and staff satisfaction).
- As ideas for motivating Maryland EXCELS non-participants to participate or other participants to move up to the higher quality ratings, the participants suggested (a) offering bonuses and monetary incentives, (b) increasing parent awareness through marketing of Maryland EXCELS, (c) educating early childhood and school-age educators on Maryland EXCELS benefits using different media, (d) recognizing Maryland EXCELS participants’ efforts, and (e) offering peer-to-peer mentoring or on-site workshops.
Summary of Participants

The stratified random sampling strategy was employed using a list of 321 research participants from the Maryland EXCELS Early Childhood and School-Age Educators Perception Phase 1 Study. The participants were stratified using three criteria: county, program type, and Maryland EXCELS published quality rating. We randomly selected one participant from each cell created by the stratification process. We contacted 95 early childhood and school-age educators and completed a total of 60 interviews. Among 60 participants, 53 educators were Maryland EXCELS participants and 7 educators were Maryland EXCELS non-participants; and 88% of the participants (n = 53) were center directors/owners/operators or family child care homes owners/operators. In addition, 81% of the educators who were Maryland EXCELS participants were the lead contact for Maryland EXCELS. The Appendix describes more specific characteristics of participants.

There were four sets of interview questions. Center-based, family, or school-age ONLY child care providers were randomly asked questions from either Type A or Type B (n = 26 each); Maryland EXCELS non-participants were given Non-Participants Type interview questions (n = 7); and a Public PreK participant (n = 1) was given Public PreK Type interview questions. The average interview duration was 35 minutes.

Table 1. The number of interview participants by program type

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Center</th>
<th>Family</th>
<th>School-Age ONLY</th>
<th>Public PreK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maryland EXCELS Participants</td>
<td>26</td>
<td>24</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Maryland EXCELS Non-participants</td>
<td>4</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>30 (50%)</td>
<td>27 (45%)</td>
<td>2 (3%)</td>
<td>1 (2%)</td>
</tr>
</tbody>
</table>

Table 2. The number of participants by Maryland EXCELS published quality rating

<table>
<thead>
<tr>
<th>Quality Rating</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Non-participants</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>13 (22%)</td>
<td>5 (8%)</td>
<td>17 (29%)</td>
<td>2 (3%)</td>
<td>15 (25%)</td>
<td>7 (12%)</td>
<td>59³</td>
</tr>
</tbody>
</table>

Note. ³One participant has closed the family child care and moved to a center that participates in Maryland EXCELS but she did not have Maryland EXCELS knowledge. This participant was dropped in the final analysis.

Note: The quotes in this report were drawn from interview notes. There was no significant difference in findings across Maryland EXCELS published quality ratings.

Maryland EXCELS Motivation, Benefits, and Experience

Primary Benefits of Being Part of Maryland EXCELS

1) Recognition by parents and marketing (n = 23, 15 centers and 8 family)
   - “For the parents who are more knowledgeable about the ratings as in there are options out there, it sets us apart.”
   - “Being able to educate parents about quality child care.”
   - “More public awareness and parents are calling because we are a level 5 program.”
2) Intrinsic motivation and motivation for teachers ($n = 18$, 10 family and 8 center)

- “I was able to say to staff, ‘Look at what you are doing that you don't realize the quality you were doing.’” (level 5)
- “One benefit is I get to network with different people.”
- “More for my personal accomplishments.”
- “Prove that I am a professional, not a babysitter.”

3) Quality improvement ($n = 14$, 10 center and 4 family)

- “It raises the standards and expectations of the program and hopefully the quality of the teachers and what is expected of them as well.”
- “Maryland EXCELS breaks things down so I get to see what they are doing and how they can improve.”
- “For teachers it gives us a bar to work towards.”
- “It's just a reminder for providers the many ways that we should be providing quality in our program.”
- “It gives you support to help look to continue to have quality. Always looking to see what we can do next in order to improve.”
- “Get to understand how to operate in professional way with children because it asks us to do things in a detailed and specific manner.” (family)
- “Helped me create a more professional contract with more good information.”

4) External Incentives ($n = 15$, 9 family and 6 center): Subsidy, online resources, and support

- “Beneficial for many families who otherwise would not be able to afford to come to a private PreK program.”

Motivation to Participate in Maryland EXCELS

In total, 16 child care center and 12 family child care home participants have moved up in quality rating during their time participating in Maryland EXCELS. Most of these participants noted that they are still interested in moving up in quality ratings, except one (“not allowed to go any further because the other centers can’t go up to level 4 or 5, so I can’t either. We can’t go up because of the staff ratio for the degree requirements. Reprimanded for going ahead of the other programs too quickly.”).

Most of the participants who have not increased their rating reported they are interested in moving up.

Reasons for moving up:

1) Intrinsic motivation ($n = 21$, 11 center and 10 family)

- “I wanted to show them that I take my job seriously.” (family child care home)
- “To make my business more professional.”
- “I want to do well, and I want to have the top tier of everything.”

2) Recognitions ($n = 11$, 6 center and 5 family)

- “To show parents” “Want to be seen as a high-quality program.”
- “To change mindset of parents about early childhood education.”
Motivation was to make sure that the state knows I am a quality child care provider. Also for parents, I have received 6 or 7 phone calls about my program since becoming level 5. I used to only receive 1 or 2 calls.” (family)

3) Monetary incentives (n = 9, 8 family and 1 center)
   o “Looking for extra subsidy rates” or “bonuses”

4) Readiness and easiness for moving up (n = 4, all level 3, 2 center and 2 family)
   o “Started seeing that some of the information for level 1 could be used for level 2 and 3 so submitted it.”

Reasons for not moving up:

1) Staff qualifications and credentials (n = 9, 7 center and 2 family)
   o “Because of the staff ratio for the degree requirements.”

2) External counterforces (n = 9, 5 center and 4 family)
   o Money (n = 2)
   o Time (n = 7, “It is a lot of work.”)

3) Not necessary (n = 3, 2 family and 1 center)

Biggest Challenge with Maryland EXCELS

1) Understanding the system, content areas, and language (n = 18, 11 family, 5 center, and 2 school)
   o “The unnecessary key stroking or duplication when uploading materials. Inconsistencies with ratings being met or not met.”
   o “Just hard to try to understand the indicators, the language they are written in.”
   o “The back and forth with the documentation through the Maryland EXCELS portal.” (level 5 family)
   o “From the beginning, think that some criteria have changed and wording had changed. I had to go back through and navigate the system and figure out where they have dropped a checkmark and what needs to be resubmitted.”
   o “When Maryland EXCELS requests providers to do something like what statements to use (documentation), we can't use our own words, we have to use the words that Maryland EXCELS requires.”

2) Time commitment and paperwork (n = 17, 11 center and 6 family)
   o “Don't have time to do all the paperwork necessary to get to the next level.”
   o “It was a challenge to get everything in writing.”
   o “As a family child care provider already working 10-15 hours a day along with other business/meetings/trainings, this challenge adds more on me to represent myself according to the quality I know I have. Want to go to level 2 but know it will require going to a class to make sure everything is right before submitting.”

3) Staff qualifications and credentials (n = 8, 7 center and 1 family)
   o “Getting everyone on board.”
“Trying to get staff members to meet the criteria.”
“Credentialing system and my lack of knowledge and incompetence and delays. Other is kind of being rated like a hotel.”
“The availability of the trainings; the deadlines for expiration dates and knowing exactly what I need to move up a level.”
“If the credentialing process does not go smoothly then updating information with Maryland EXCELS every year doesn’t go smoothly either.”

4) Getting accreditation ($n = 3, 2$ center and $1$ family); and multiple systems for accreditation and Maryland EXCELS ($n = 2, 2$ center)

“Nervous about someone coming out to observe for accreditation.” (level 3 family)
“Since we have to renew every year, but accreditation is every 3 years. Every year there has been something that has changed. Would be nice to have a single place to upload documents for both programs (accreditation and Maryland EXCELS).” (level 5 center)

5) Other

A participant from a recreation and parks program: “Some information that Maryland EXCELS asks for, I did not have those things.” (level 1 school)

Assistance Participants Have Received to Help with Issues

*Note*: Several participants provided names of people who assisted. The research team identified their roles, however, we were unable to identify the roles when the last names were not provided. In addition, there is a possibility that the participants might not have accurately recalled the person’s role.

- Quality Assurance Specialist ($n = 15$)
- Program Coordinator ($n = 11$)

*Other assistance*

- Maryland EXCELS observers after observation
- Hired someone – ended up with using her as classroom staff
- Executive director
- Different locations
- Technical specialist
- Staff in school
- Maryland EXCELS booth at conferences
- Accreditation
- Lower Shore Resource Center
- Other family child care providers

Additional Assistance Participants Want to Receive

*Note*: 14 participants (27%) mentioned that they are getting enough support already and they just need to find time to complete the paperwork.

- “Someone to help put the information together.”
- “Samples and examples of documents.”
o “Be able to have someone come to the center who knew exactly how they are scoring and what they are looking for and meet with all the staff.”

o “A check-in to say that we looked at your information and this is what should be on your radar.”

o “Online class (not just resources)”

o “Bonus incentive”

**General Challenges and Recommendations**

**Biggest Challenge for Participants to Offer a High-Quality Program**

1) **Money and budgeting** \((n = 17; 9\) center and 8 family)

   o “Keeping tuition reasonable while giving our comprehensive benefits package to teachers (vacation time, sick leave, 85 percent of healthcare, retirement program).” “Charging reasonable price while making updates to program.”

   o “Parents more care about cost; don’t care about the materials in Maryland EXCELS.”

   o “No motivation for people to enter the field because of low pay.”

   o “Need resources especially for special needs students.”

   o “Curriculum is expensive, so I make my own but that’s time consuming.”

2) **Hiring and retaining quality staff** \((n = 14, 10\) centers and 4 family)

   o “Need more money for higher quality staff.” “Not able to pay as much as larger corporations for staff, don’t know how to get funding, not able to give health benefits, would like to give them paid holidays, health benefits, sick leave but can’t.”

   o “Making sure they take necessary classes.”

3) **Issues with parents** \((n = 9, 7\) family and 2 center)

   o “Making sure they know kids can’t come when sick.”

   o “Parents trying to control program.” “Need time with kids but have to meet parents’ needs.”

   o “Parents not always willing to work with you.”

   o “Parent/community involvement.”

4) **Meeting children’s individual needs** \((n = 4, 2\) center and 2 family)

5) **Negative perception about early care and education** \((n = 3, 2\) family and 1 center)

   o “Seen as babysitting.”

6) **Other**

   o A lack of transportation

   o A lack of access to materials

   o Different ages of children

   o Need more space

   o Issues with the credentialing system for staff

   o All programs seen as the same (“Why would someone choose my program specifically?”)

   o Getting and keeping children (“There is free universal PreK so parents go there in my county.”)
Assistance or Support Participants Would Like to Receive to Help with the Issues

- “More organized system and resources.”
- “Financial support.”
- “Support from the school. A bridge between childcare and the school system. A visit from the teacher, etc.”

Aspects of the Program that the State of Maryland Should Measure as an Indicator of Quality

Note: Most people mentioned that Maryland EXCELS measures various areas appropriately, “everything seems to be in place.”

1) Parent satisfaction/perceptions and relationships with parents ($n = 7$, 5 center and 2 family)
   - “Feels that if you have a good rapport with parents there is almost no obstacle that you can’t handle.”

2) Various aspects of staff quality ($n = 6$, 6 center)
   - Teachers’ years of service or a different pathway for experienced (+20 years) teachers ($n = 4$ center)
     - “Because there is so much turnover, so there should be more recognition for experienced teachers to reduce turnover and give them more recognition for that.”
     - “Bachelor’s degree vs. experience (+20 years).”
   - Teacher turnover and staff retention ($n = 2$ center)
     - “This has a big effect on the quality of the center but don’t use it against the center.”
     - “Staff retention and how long staff have worked at a program (good indicator of stability). Worker satisfaction is important in this industry.”

3) Other
   - Observation – “It would be difficult, but I believe that the state should actually observe the programs to adequately measure, allow the state to actually see what is being done. This will allow the state to measure better.” (level 1 family)
   - “It should be harder to be licensed.” (level 1 family)
   - “Social and emotional learning, and engagement provided by providers.”
   - Health standards – “Not how often the child washes their hands but how often does a child get sick; how many absences do they have.”
   - Provider-child relationships in family child care home (“more important in my setting”)
   - “A family child care version of the CLASS.”

Potential Motivators for Maryland EXCELS Non-Participants to Participate

1) Offer bonuses and monetary incentives ($n = 23$, 12 center and 11 family)
   - “Tell providers what they get out of it (example: discounts from Lakeshore), incentives beyond the checklist.”

2) Marketing: Increase parent awareness and educate child care providers on benefits using different methods ($n = 21$, 13 center and 8 family)
“Maybe try to have other centers/directors talk to the people who are not part of it and give good examples of how it has helped them and assisted them with their program.”

“Just let them know the benefits.”

“Maybe doing a workshop that is specifically, this is how to get to a level one; give a list of what to bring to the workshop and get programs to level one and get them started. A 6-hour continuing education class that they can take and get to level one. Take their hand and walk them through the process.”

“They may need more support on the ground, just getting people started. Once you get started, it’s just a matter of renewing. It’s just scary because it’s the unknown.”

“Advertise to the parents. Very little advertising to the parents on the Lower Shore, no one down there knows what Maryland EXCELS is.”

3) Mentoring \( (n = 12, 7 \text{ family and 5 center}) \)

“Partnering with other programs that are alike [for] mentoring.”

“Having someone come out to help programs with the paperwork.”

“Family child care providers especially need a mentor.”

Potential Motivators for Maryland EXCELS Participants to Increase Quality Ratings

1) Increase awareness, communication, and education \( (n = 17, 11 \text{ center and 6 family}) \)

“I would like better ‘highlights’ about accreditation so there is better understanding of process and requirements to reduce miscommunication/misinterpretation.”

“Maybe more recognition for the different levels. People do like certificates, little awards or names in newsletter and emails so people see them in there. For example, XXX was published at level 3. People should like that.”

“How can Maryland EXCELS partner with colleges to create some kind of path to make it easier for people to be successful?”

“In a competitive market, if Maryland EXCELS could be seen by the consumer as a desire and providers knew this, it would motivate.”

“Parents don’t know about the program; they need to know about it to motivate providers to participate.”

2) Offer bonuses and monetary incentives \( (n = 25, 13 \text{ center and 12 family}) \)

“Offering the one-time bonus for moving up levels but I don’t think it’s enough motivation to overcome the challenge of the increased paperwork. Offering subsidy to programs that would allow them to bring in people to help with programs do this (deal with paperwork). For example, give ‘x’ amount of help for ‘x’ amount of time to get this done.”

“In my area, I feel I have to travel to Baltimore to celebrate at the Orioles game, the 5-year anniversary. Everything requires travel. The providers in my area would like something local. We feel isolated.”

3) Time \( (n = 6, 4 \text{ family and 2 center}) \)
Chapter Appendix: Phase 1 Online Survey
Maryland EXCELS Educator Perception Research – Phase 1 Online Survey

*June 14, 2018, to July 11, 2018*

**Q1 - What is the program type that best describes your program? Please click ALL that apply.**

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Child Care Center</td>
<td>58.46%</td>
<td>311</td>
</tr>
<tr>
<td>2</td>
<td>Public Prekindergarten</td>
<td>4.14%</td>
<td>22</td>
</tr>
<tr>
<td>3</td>
<td>Family Child Care Home</td>
<td>31.20%</td>
<td>166</td>
</tr>
<tr>
<td>4</td>
<td>Programs Serving School-Age ONLY children</td>
<td>6.20%</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
<td>532</td>
</tr>
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</table>
Q2 - Is your child care center any of the following? Please click ALL that apply.

<table>
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<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Early Head Start</td>
<td>5.66%</td>
<td>18</td>
</tr>
<tr>
<td>2</td>
<td>Head Start</td>
<td>8.81%</td>
<td>28</td>
</tr>
<tr>
<td>3</td>
<td>Judy Center Partner</td>
<td>11.32%</td>
<td>36</td>
</tr>
<tr>
<td>4</td>
<td>PreK Expansion Site</td>
<td>6.29%</td>
<td>20</td>
</tr>
<tr>
<td>5</td>
<td>None of Above</td>
<td>67.92%</td>
<td>216</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>318</td>
</tr>
</tbody>
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### Q3 - What is your role in the program? Please click ALL that apply.

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<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Owner/Operator</td>
<td>17.07%</td>
<td>64</td>
</tr>
<tr>
<td>2</td>
<td>Staff or Teacher</td>
<td>37.87%</td>
<td>142</td>
</tr>
<tr>
<td>3</td>
<td>Director (including Head Start)</td>
<td>37.87%</td>
<td>142</td>
</tr>
<tr>
<td>4</td>
<td>Other</td>
<td>7.20%</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>375</td>
</tr>
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<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Public PreK Administrator (e.g., Principal, Program Coordinator, etc.)</td>
<td>31.58%</td>
<td>6</td>
</tr>
<tr>
<td>2</td>
<td>Public PreK Teacher</td>
<td>31.58%</td>
<td>6</td>
</tr>
<tr>
<td>3</td>
<td>Other</td>
<td>36.84%</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>19</td>
</tr>
</tbody>
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<table>
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<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Family Child Care Home Owner/Operator</td>
<td>91.07%</td>
<td>153</td>
</tr>
<tr>
<td>2</td>
<td>Family Child Care Home Staff</td>
<td>7.14%</td>
<td>12</td>
</tr>
<tr>
<td>3</td>
<td>Other</td>
<td>1.79%</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>168</td>
</tr>
</tbody>
</table>
**Q4 - Is your program participating in Maryland EXCELS?**

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>92.02%</td>
<td>450</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>2.66%</td>
<td>13</td>
</tr>
<tr>
<td>3</td>
<td>Don't know</td>
<td>5.32%</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>489</td>
</tr>
</tbody>
</table>

[For participants who chose “No” in Q4]

**Q5 - Have you ever participated in Maryland EXCELS?**

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes, my Maryland EXCELS participation has expired.</td>
<td>46.15%</td>
<td>6</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>53.85%</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>13</td>
</tr>
</tbody>
</table>
Q6 - Below are listed the Maryland EXCELS five main content areas. How effective do you think each Maryland EXCELS content area is in promoting quality care and education?

<table>
<thead>
<tr>
<th>#</th>
<th>Question</th>
<th>Not Effective at all</th>
<th>Slightly Effective</th>
<th>Moderately Effective</th>
<th>Effective</th>
<th>Greatly Effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>a. Licensing and Compliance</td>
<td>1.82%</td>
<td>5.47%</td>
<td>6.77%</td>
<td>26</td>
<td>47.92%</td>
</tr>
<tr>
<td>2</td>
<td>b. Staff Qualifications and Professional Development</td>
<td>2.11%</td>
<td>6.07%</td>
<td>10.55%</td>
<td>40</td>
<td>46.97%</td>
</tr>
<tr>
<td>3</td>
<td>c. Accreditation and Rating Scales</td>
<td>2.72%</td>
<td>7.07%</td>
<td>14.95%</td>
<td>55</td>
<td>39.95%</td>
</tr>
<tr>
<td>4</td>
<td>d. Developmentally Appropriate Learning and Practice</td>
<td>1.83%</td>
<td>1.83%</td>
<td>10.47%</td>
<td>40</td>
<td>50.00%</td>
</tr>
<tr>
<td>5</td>
<td>e. Administrative Policies and Practices</td>
<td>1.05%</td>
<td>3.66%</td>
<td>10.47%</td>
<td>40</td>
<td>40.58%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item</th>
<th>Mean (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Licensing and Compliance</td>
<td>4.25 (.93)</td>
</tr>
<tr>
<td>b. Staff Qualifications and Professional Development</td>
<td>4.18 (.99)</td>
</tr>
<tr>
<td>c. Accreditation and Rating Scales</td>
<td>4.03 (1.04)</td>
</tr>
<tr>
<td>d. Developmentally Appropriate Learning and Practice</td>
<td>4.30 (.87)</td>
</tr>
<tr>
<td>e. Administrative Policies and Practices</td>
<td>4.20 (.85)</td>
</tr>
</tbody>
</table>

n = 368 – 384
Q7 - Below are listed the Maryland EXCELS five main content areas. How effective do you think each Maryland EXCELS content area is in promoting quality care and education?

### Item Mean (SD)

<table>
<thead>
<tr>
<th>Item</th>
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</thead>
<tbody>
<tr>
<td>a. School Approval</td>
<td>3.71 (.83)</td>
</tr>
<tr>
<td>b. Teacher Qualifications and Professional Development</td>
<td>3.93 (.96)</td>
</tr>
<tr>
<td>c. Accreditation/Validation and Rating Scale</td>
<td>4.20 (.56)</td>
</tr>
<tr>
<td>d. Developmentally Appropriate Learning and Practice/Child Assessment (CA)</td>
<td>4.20 (.68)</td>
</tr>
<tr>
<td>e. Administrative Policies and Practices</td>
<td>4.47 (.83)</td>
</tr>
</tbody>
</table>

n = 14 – 15
Q8 - For the same list of Maryland EXCELS content areas, how challenging overall do you think it is to implement each area into your program?

<table>
<thead>
<tr>
<th>#</th>
<th>Question</th>
<th>Not Challenging at all</th>
<th>Slightly Challenging</th>
<th>Moderately Challenging</th>
<th>Challenging</th>
<th>Very Challenging</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>a. Licensing and Compliance</td>
<td>44.96%</td>
<td>174</td>
<td>22.74%</td>
<td>88</td>
<td>16.80%</td>
<td>38</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>65</td>
<td>9.82%</td>
<td>38</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5</td>
<td>5.68%</td>
<td>22</td>
</tr>
<tr>
<td>2</td>
<td>b. Staff Qualifications and Professional Development</td>
<td>24.87%</td>
<td>95</td>
<td>20.42%</td>
<td>78</td>
<td>21.99%</td>
<td>63</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>84</td>
<td>16.49%</td>
<td>62</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>16.23%</td>
<td>16.23%</td>
<td>62</td>
</tr>
<tr>
<td>3</td>
<td>c. Accreditation and Rating Scales</td>
<td>10.50%</td>
<td>40</td>
<td>23.10%</td>
<td>88</td>
<td>22.83%</td>
<td>84</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>87</td>
<td>22.05%</td>
<td>84</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>21.52%</td>
<td>21.52%</td>
<td>82</td>
</tr>
<tr>
<td>4</td>
<td>d. Developmentally Appropriate Learning and Practice</td>
<td>30.43%</td>
<td>119</td>
<td>27.37%</td>
<td>107</td>
<td>23.27%</td>
<td>91</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td>9</td>
<td>12.28%</td>
<td>48</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6.65%</td>
<td>6.65%</td>
<td>26</td>
</tr>
<tr>
<td>5</td>
<td>e. Administrative Policies and Practices</td>
<td>29.97%</td>
<td>113</td>
<td>28.65%</td>
<td>108</td>
<td>21.49%</td>
<td>81</td>
</tr>
<tr>
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<td></td>
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<td></td>
<td></td>
<td>13.26%</td>
<td>13.26%</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6.63%</td>
<td>6.63%</td>
<td>25</td>
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</table>

n = 377 – 391

<table>
<thead>
<tr>
<th>Item</th>
<th>Mean (SD)</th>
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</thead>
<tbody>
<tr>
<td>a. Licensing and Compliance</td>
<td>2.09 (1.23)</td>
</tr>
<tr>
<td>b. Staff Qualifications and Professional Development</td>
<td>2.79 (1.40)</td>
</tr>
<tr>
<td>c. Accreditation and Rating Scales</td>
<td>3.21 (1.30)</td>
</tr>
<tr>
<td>d. Developmentally Appropriate Learning and Practice</td>
<td>2.37 (1.22)</td>
</tr>
<tr>
<td>e. Administrative Policies and Practices</td>
<td>2.38 (1.23)</td>
</tr>
</tbody>
</table>
Q9 - For the same list of Maryland EXCELS content areas, how challenging overall do you think it is to implement each area into your program?

<table>
<thead>
<tr>
<th>#</th>
<th>Question</th>
<th>Not Challenging at all</th>
<th>Not Challenging</th>
<th>Slightly Challenging</th>
<th>Not Challenging</th>
<th>Slightly Challenging</th>
<th>Moderately Challenging</th>
<th>Very Challenging</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>a. School Approval</td>
<td>13.33%</td>
<td>2</td>
<td>26.67%</td>
<td>4</td>
<td>20.00%</td>
<td>3</td>
<td>26.67%</td>
<td>2</td>
</tr>
<tr>
<td>2</td>
<td>b. Teacher Qualifications and Professional Development</td>
<td>13.33%</td>
<td>2</td>
<td>33.33%</td>
<td>5</td>
<td>6.67%</td>
<td>1</td>
<td>33.33%</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>c. Accreditation/Validation and Rating Scale</td>
<td>0.00%</td>
<td>0</td>
<td>26.67%</td>
<td>4</td>
<td>20.00%</td>
<td>3</td>
<td>46.67%</td>
<td>7</td>
</tr>
<tr>
<td>4</td>
<td>d. Developmentally Appropriate Learning and Practice/Child Assessment</td>
<td>6.67%</td>
<td>1</td>
<td>26.67%</td>
<td>4</td>
<td>13.33%</td>
<td>2</td>
<td>46.67%</td>
<td>7</td>
</tr>
<tr>
<td>5</td>
<td>e. Administrative Policies and Practices</td>
<td>0.00%</td>
<td>0</td>
<td>26.67%</td>
<td>4</td>
<td>26.67%</td>
<td>4</td>
<td>20.00%</td>
<td>3</td>
</tr>
</tbody>
</table>

n = 15
Q10 - Overall, how much do you think participation in Maryland EXCELS has made improvements to the “best practices” carried out by your program?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
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<td>1</td>
<td>Greatly improved</td>
<td>32.01%</td>
<td>129</td>
</tr>
<tr>
<td>2</td>
<td>Improved</td>
<td>36.72%</td>
<td>148</td>
</tr>
<tr>
<td>3</td>
<td>Moderately improved</td>
<td>13.65%</td>
<td>55</td>
</tr>
<tr>
<td>4</td>
<td>Slightly improved</td>
<td>12.90%</td>
<td>52</td>
</tr>
<tr>
<td>5</td>
<td>Not improved at all</td>
<td>4.71%</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>403</td>
</tr>
</tbody>
</table>

Total number of responses: 403
Q11 - Overall, how effective do you think participation in Maryland EXCELS is in promoting children’s development?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Greatly effective</td>
<td>37.66%</td>
<td>151</td>
</tr>
<tr>
<td>2</td>
<td>Effective</td>
<td>34.66%</td>
<td>139</td>
</tr>
<tr>
<td>3</td>
<td>Moderately effective</td>
<td>15.21%</td>
<td>61</td>
</tr>
<tr>
<td>4</td>
<td>Slightly effective</td>
<td>8.48%</td>
<td>34</td>
</tr>
<tr>
<td>5</td>
<td>Not effective at all</td>
<td>3.99%</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>401</td>
</tr>
</tbody>
</table>
**Q12 - What is your program’s published quality rating?**

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>30.09%</td>
<td>102</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>15.93%</td>
<td>54</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>27.43%</td>
<td>93</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>4.13%</td>
<td>14</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td>19.76%</td>
<td>67</td>
</tr>
<tr>
<td>6</td>
<td>Not published</td>
<td>2.65%</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>339</strong></td>
</tr>
</tbody>
</table>

[Currently Not Published Programs]

**Q13 - What was your program’s last published quality rating?**

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>20.00%</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>20.00%</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>20.00%</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td>20.00%</td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td>Not published</td>
<td>20.00%</td>
<td>1</td>
</tr>
<tr>
<td>7</td>
<td>I don't remember</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>5</strong></td>
</tr>
</tbody>
</table>
Licensing and Compliance, Staff Qualifications and Professional Development, Accreditation and Rating Scales, & Use of Subsidies
Chapter 2 Licensing and Compliance, Staff Qualifications and Professional Development, Accreditation and Rating Scales, and Use of Subsidies

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Chapter 2 Licensing and Compliance, Staff Qualifications and Professional Development, Accreditation and Rating Scales, and Use of Subsidies

Executive Summary

This report includes findings on Maryland EXCELS participating early childhood and school-age educators’ perceptions on the Licensing and Compliance, Staff Qualifications and Professional Development, and Accreditation and Rating Scales content areas, as well as experiences with subsidy.

Key findings include the following:

**Licensing and Compliance**
- Among 23 interview participants, two (9%) responded that their program had at least one inspection with an issue of non-compliance in the last 12 months.
- Most participants (91%, n = 21) perceived that a licensing inspection is effective for improving the quality of their program because (a) it motivates them to maintain quality and (b) specific feedback from the licensing office helps raise program quality. However, two level 5 participants responded that a licensing inspection itself is not sufficient to improve the quality of their program.

**Staff Qualifications and Professional Development**
- Of 26 interview and 66 survey participants, 23% of the interview participants (n = 6) and 29% of the survey participants (n = 19) reported that they have experienced challenges with the Staff Qualifications and Professional Development content area. The biggest challenges were (a) to find qualified staff, (b) to find appropriate trainings, and (c) to encourage staff to maintain credentials.
- Maryland EXCELS participants manage the Staff Qualifications and Professional Development content area by (a) systematically tracking requirements and/or (b) hiring qualified staff.

**Accreditation and Rating Scales**
- Among 52 interview participants, 79% of the educators reported that the Accreditation and Rating Scales content area is effective because (a) it improves their program quality, (b) it promotes extrinsic motivation to maintain program quality, and (c) it assists parents in recognizing quality in child care programs.
- About 66% of the interview participants reported that they experience challenges with the Accreditation and Rating Scales due to difficulties with (a) the amount of work and time commitment, (b) obtaining accreditation, (c) understanding the specific criteria, (d) getting staff buy-in, (e) financial constraints, and (f) implementing and applying rating scales, such as the Environment Rating Scales (ECERS, ITERS, FCCERS, SACERS, and/or CLASS) and/or the Classroom Assessment Scoring System (CLASS). The participants described that human resources and support are the key to manage the Accreditation and Rating Scale content area successfully.
• More than a half of the interview and survey participants reported that they use rating scales. The participants described that applying rating scales is helpful and important because it guides self-assessment and program improvement (e.g., identifying strengths and weaknesses).

• A quarter of the interview and survey participants perceived applying ratings scales to be challenging. They described that (a) it is difficult to train staff, (b) it is challenging to understand the criteria in rating scales, (c) some programs have space constraints to effectively implement rating scales, and (d) it can be time-consuming.

• Approximately half of the survey participants reported that their programs complete a Program Improvement Plan for Maryland EXCELS based on a self-assessment. Fifteen of these participants (43%) responded that they have received assistance from Maryland EXCELS staff in developing this plan. More than 60% of the participants reported that their staff review, revisit, revise, and/or update their program improvement plan within six months to a year.

Subsidy

• Among 26 interview participants, 22 educators responded that they accept Child Care Subsidy payments. A total of 8 educators said that they had positive experiences with Child Care Subsidy because it benefits families and children. However, 18 educators described negative experiences with child care subsidies due to issues with the payment process system or difficulties with families who do not follow subsidy requirements.
Summary of Participants

Among a total of 53 Maryland EXCELS Early Childhood and School-Age Educators Perceptions Study interview participants, 23 participants answered questions on the Licensing and Compliance content area (3 participants skipped this content area questions due to the time limit) and 26 participants answered questions on the Staff Qualifications and Professional Development content area. In addition, all interview participants answered general questions on the Accreditation and Rating Scales content area and 26 participants responded to more specific questions on different rating scales. We also asked about participants’ experiences with subsidy: a total of 26 participants responded to the subsidy questions. We note that there were no significant differences in findings across Maryland EXCELS published quality ratings.

Note: The quotes in this report were drawn from interviewer notes.

This report also includes findings from 129 Maryland EXCELS Early Childhood and School-Age Educators Perceptions Study survey participants. Among 129 participants, 66 participants responded to questions asking about their experience with the Staff Qualifications and Professional Development content area and the Accreditation and Rating Scales content area.

Licensing and Compliance

Licensing Non-Compliance Issues

Among 23 interview participants who responded to this question, two participants responded that their program had at least one inspection with an issue of non-compliance in the last 12 months. For one program, it had not affected their standing with Maryland EXCELS because it was a one-time occurrence, “running out of milk.” For the other program, it had affected their standing with Maryland EXCELS. The participant said that, “We are joined with the school so if the school fails, we automatically fail.” One participant reported that they did not have updated emergency forms during the last inspection, however, this had not affected their standing with Maryland EXCELS.

Effectiveness of Licensing Inspection

We asked how interview participants perceive the effectiveness of licensing inspection in improving the quality of care and education they provide. Among 23 participants, 21 participants (91%) felt that a licensing inspection is effective for improving the quality of their program. The reasons are:

1) Extrinsic motivation to keep quality (n = 15, 9 center and 6 family)
   - “It helps to make you aware that you need to make sure the files are together and I try to do a good job of staying organized.”
   - “It gives you a deadline or a timeline.”
   - “If there is no one to hold us accountable for it, why would we put extra work into the pieces that are more time consuming?”
   - “If you know that you are going to be inspected, you will make sure that everything is kept as it should be.”
2) Program improvement through feedback \((n = 4, 2 \text{ center and 2 family})\)
   - “If I miss something, they will let me know.”
   - “Let you know what you are doing wrong and what you can fix.”

Two participants (level 5 centers) responded that a licensing inspection itself is not sufficient to improve the quality of their program.
   - “Licensing inspections keep us on target but I am not sure if it actually improves things. Licensing is only basic requirements but NAEYC and Maryland EXCELS goes above basics. Licensing does not acknowledge going above requirement.”
   - “The inspections are more around health and safety. For the licensing inspections, I would not change anything. It doesn’t matter if they come or not.”

Staff Qualifications and Professional Development

In the Phase 1 online survey, the participants identified the Staff Qualifications and Professional Development content area as the most challenging area. We asked whether they have experienced any challenges with receiving Maryland EXCELS quality ratings in this content area.

Challenges with Staff Qualifications and Professional Development

Among 26 interview participants, 6 participants (23%, 4 center and 2 family) responded that they have experienced challenges with the Staff Qualifications and Professional Development content area. The participants mentioned that the biggest challenges are to “find appropriate trainings timely” and to “help staff to maintain credentials.”

A participant from a level 3 center stated that:

“I love Maryland EXCELS and it’s a fantastic program. But I am looking for something in this one content area to be changed.”

Among 66 survey participants, 19 participants (29%, 19 center) responded that they have experienced challenges with the Staff Qualifications and Professional Development content area. The participants mentioned that the biggest challenges are to “find and hire qualified staff” and to “motivate and help staff to maintain credentials.”

Staff Qualifications and Professional Development Management

For the interview participants who said that they have not experienced challenges in this content area \((n = 15, 58\%)\), we asked how they manage this area. The participants stated the following strategies:

1) Track requirements \((n = 9, 5 \text{ center and 4 family})\)
   - “I have a list of all staff, rules/regulations, and post it.”
   - “I keep a file in the office on each staff member and tracks each class taken by staff member. I also keep a copy of complied staff development certificates for each staff member.”

2) Hire qualified staff \((n = 5, 4 \text{ family and 1 center})\)
   - “Hire at the highest credential possible but it is difficult with turnover.”
Accreditation and Rating Scales

Accreditation Status

Among 52 interview participants, 22 of their programs (42%) were accredited by an organization recognized by MSDE. Among 66 survey participants, 30 participants (45%) reported that their programs are accredited by an organization recognized by MSDE. The participants identified accreditation organizations, such as MSDE, NAEYC, NAFCC, AdvancED, and NECPA in their responses.

Effectiveness of the Accreditation and Rating Scale Content Area

All interview participants were asked whether the Accreditation and Rating Scale content area is effective in promoting quality care and education. Of 52 participants, 41 educators (79%) reported that the content area is effective. Approximately half of these educators’ programs (n = 20) are accredited. Reasons that the participants perceived this content area to be effective are:

1) Improvement of program quality (n = 11, 7 center and 4 family)
   - “Help us see what we have to do and what we are not doing.”
   - “It gives staff a lot to think about what to do about the classroom environment and what they choose. We also use it as a tool for staff to assess each other.”

2) Extrinsic motivation for program improvement (n = 9, 6 center and 3 family)
   - “It’s a helpful reminder to maintain the high level of quality.”
   - “It makes providers more accountable to make sure they are offering quality care.”
   - “It helps with checks and balances to keep a high standard. It keeps the programs current and always improving.”

3) Assisting parents in recognizing quality in child care programs. (n = 5, 5 family)
   - “Parents don’t trust anyone nowadays, and I am able to have proof.”
   - “Gives parent a good idea of where they want to bring their children.”
   - “I have to show parents.”

Challenges with the Accreditation and Rating Scale Content Area

All interview participants were also asked whether the Accreditation and Rating Scale content area is challenging to implement. Of 52 participants, 33 participants (63%) reported that the content area is challenging. Less than half of these participants (n = 13, 40%) were accredited. Reasons that the participants perceived this content area to be challenging are:

1) The amount of work and time commitment (n = 14, 7 center and 7 family)
   - “Takes a lot of time and group meetings and preparations to achieve it.”
   - “Pulling everything together and having the time to do it is a big challenge.”

2) Obtaining accreditation (n = 9, 5 family and 4 center)
   - “Accreditation is a lot.”
   - “To get to level 5, you have to have accreditation. Even 4 you pretty much have to finish accreditation. A lot of work. NAFCC is changing their ratios to have only 6 kids in the future.”
“I was nervous to go through accreditation. It can be very intimidating to providers.” (level 5 family)

3) Understanding the criteria in the content area (n = 4, 2 center and 2 family)
  o “Hard to know when enough materials were in a group or when we met that standard.”
  o “It is hard to meet some of the criteria due to space constraints in family child care.”

4) Staff buy-in (n = 4, 4 center)
  o “It is stressful for staff to worry about being assessed.”
  o “Getting staff on board with what is required for accreditation is hard.”

5) Financial constraints (n = 4, 2 center and 2 family)
  o “We are a small center and there are not a lot of funds for that. My understanding is that training reimbursement runs out of money.”
  o “Setting up child care to meet requirements for accreditation and buying the materials needed can get pricey.”

6) Implementing and applying rating scales (n = 2, level 5; 1 center and 1 family)
  o “ECERS is tough. I am trying to meet all the health requirements and I don’t think ECERS was necessary or helpful for that.”
  o “FCCERS and contract is what a lot of providers are having trouble with. Getting the contract approved is difficult for many providers. The terminology is also not clear to the providers.”

7) Other reasons
  o “It’s different when someone else comes in and observes because I am nervous.” (level 3 family)
  o “It’s difficult when someone comes out and they don’t give feedback to help me improve.” (level 3 family)

The remaining 37% of the participants (n = 19) reported that the content area is not challenging. The participants who perceive the content area not to be challenging mentioned the importance of human resources:
  o “It was not as challenging for me because I was lucky to work in a group.”
  o “I got help from another provider who had already gone through it, and this was very helpful.”
  o “Recently I found some excellent people that have allowed us to call and ask questions when needed.”
  o “I reached out to Tara [QAS] who came out after her observation and helped me get everything together.”

Use of Rating Scales

We asked more specific questions about the use of various rating scales to 26 interview participants. Of these participants, 17 interview participants (65%, 11 center and 6 family) responded that they use rating scales, such as ECERS, ITERS, FCCERS, SACERS, and/or CLASS. Sixteen of them use the ECERS, ITERS, FCCERS, and/or SACERS, and 3 programs use the CLASS. More than half of them use the rating scales for a self-assessment or a staff training. One participant never heard about rating scales (level 1 center).
Of survey participants, 33 (52%) responded that they use ECERS, ITERS, FCCERS, and/or SACERS, and 7 (11%) responded that they use the CLASS. Table 2.1 describes how participants are utilizing the rating scales.

Table 2.1. Use of the Rating Scales

<table>
<thead>
<tr>
<th>Purpose</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-assessment</td>
<td>25</td>
<td>56%</td>
</tr>
<tr>
<td>Conducted by an approved assessor</td>
<td>5</td>
<td>11%</td>
</tr>
<tr>
<td>Informal external observer</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Both self-assessment and external assessor</td>
<td>14</td>
<td>31%</td>
</tr>
<tr>
<td><strong>Frequency</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than once a year</td>
<td>5</td>
<td>13%</td>
</tr>
<tr>
<td>Once a year</td>
<td>24</td>
<td>62%</td>
</tr>
<tr>
<td>Two times a year</td>
<td>8</td>
<td>21%</td>
</tr>
<tr>
<td>Three or four times a year</td>
<td>2</td>
<td>5%</td>
</tr>
<tr>
<td>More than five times a year</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Effectiveness of Rating Scales to Improve the Program Quality

Of 26 interview participants, 16 (62%, 9 center and 7 family) responded that rating scales help them to improve their program quality because it provides guidance for quality improvement. The participants mentioned:

- “It brings attention to things we need to improve.”
- “It helps us improve and see where we are lacking.”
- “It helps to improve if people use it appropriately.”

Of 63 survey participants, 73% (n = 46) reported that “conducting rating scales” are important or very important in promoting quality care and education. The participants explained that rating scales help self-assessment and improvement:

- “They are a good way to assess how a center and class is doing.”
- “I think assessments determine how much improvements can be made.”
- “It tells where the child is not progressing and needs guidance.”

Eight survey participants (13%) described the reasons why they do not feel that “conducting rating scales” are important:

- “Rating scales can be helpful for collecting data to guide improvement, but more paperwork isn’t going to improve these programs. There must be more support offered to help providers navigate all of the expectations. There seems to be more and more expectations with no support from the state.”
- “Some of the things they are looking for are not feasible.”
- “Because it takes away some of the uniqueness from our program.”
- “It’s important but need to include other factors.”
In addition, 76% of the survey participants (n = 48) reported that rating scales are helpful or very helpful for continuous quality improvement. The participants described that rating scales help them improve and provide guidance for quality care:

- “Because you will address any issue and solved it in a period of time.”
- “If you don’t know you cannot grow.”
- “It provides constructive criticism.”
- “Helps give you a sense of where you have strengths and weaknesses.”

Four survey participants (6%) described the reasons why they feel that rating scales are not very helpful:

- “The categories were helpful as thinking points but the numerical scoring was not helpful to us.”
- “Scales often contain elements that don’t apply to individual programs. One size fits all doesn’t work and it’s not always clear that adaptations will be accepted by assessors.”
- “It’s helpful but sometimes we can get too stuck on specific items without looking at the individuality of a program or classroom that makes it work well.”

Challenges with Rating Scales

Seven interview participants (27%) perceived that rating scales are difficult to use. The reasons are:

1) Training staff (n = 4, 4 center)
   - “It’s difficult to change teachers.”

2) Understanding criteria (n = 2, 2 center)
   - “At times, you may not have understood exactly what the scale was looking for.”

3) Space constraints (n = 1, 1 family)
   - “I feel like the scales are based on the belief that every house has space like a center so you have to include a lot of stuff that there is no way to include.”

When we asked survey participants, 26% of them (n = 16) reported that it is very challenging or challenging to implement Maryland EXCELS requirements described in the rating scales; 40% (n = 25) reported that it is moderately challenging; 24% (n = 15) reported that it is slightly challenging; and 10% (n = 6) reported that it is not challenging at all. The reasons that the participants described to be challenging are:

- “The EXCELS requirements under rating scales are very difficult to implement in a family child care. Without additional staff or support, finding the time to complete these types of rating scales is close to impossible.”
- “For me, I have limited space in my home/program.”
- “I think staff are capable of following the standards but somewhat resistant.”
- “Cost...we don’t always have the resources.”
- “Without help from the Maryland EXCELS Program Coordinator and PG Resource Center we would not have been able to complete it for our level 3. I think more clear, concise instructions would be helpful.”
- “It can be time consuming, but it is evidence of a high-rated program.”
“It is very challenging. I am only at a level 1 and it took me about two weeks to implement the requirements needed.”

Use of Other Scales

The interview participants were asked whether they utilize any scales other than the ECERS, ITERS, FCCERS, SACERS, and CLASS to assess their program environment and practice. Six interview (23%) participants responded that they use different scales, which include:

- Healthy Beginning program
- Head Start criteria
- Acelero curriculum (Ready to Shine) that has a teacher and teacher assistant rubric
- Own checklist
- NAEYC guidelines
- Creative Curriculum book to find ideas

Program Improvement Plan

The survey participants were asked about their Program Improvement Plan. Among 63 survey participants, 56% (n = 35) reported that their programs complete a Program Improvement Plan for Maryland EXCELS based on a self-assessment. Fifteen of these participants (43%) responded that they have received assistance from Maryland EXCELS staff in developing this plan. Most of them received assistance from Program Coordinator (n = 7), Quality Assurance Specialist (n = 7), or Child Care Resource Center (n = 6).

Furthermore, 11 survey participants (31%) reported that their staff review, revisit, revise, and/or update their program improvement plan less often than once a year, 22 participants (63%) reported that this occurs within six months to one year, and 2 (6%) reported that this takes place every three to six months.

Subsidy

Among 26 interview participants, 22 providers (85%) responded that they accept child care subsidy payments. Four providers in child care centers reported that they do not accept child care subsidy payments (two level 3 and two level 5. Two of these participants had not heard of subsidy and two provided scholarships). We asked about their positive or negative experiences with accepting child care subsidies.

Positive Experiences with Child Care Subsidy

A total of 8 providers said that they had positive experiences with child care subsidies. Four respondents (3 family and 1 center) described that child care subsidy benefits families and children.

- “I take voucher because a lot of their parents are younger and the children aren’t getting what they need in order to be ready to start school.”
- “It allows families to access high-quality programs that they may not be able to afford.”
Negative Experiences with Child Care Subsidy

A total of 18 providers said that they had negative experiences with child care subsidies. The primary reasons were:

1) Issues with payment (n = 12, 7 family and 5 center)
   - “Getting paid is kind of slow when you first start. Once you get into it it’s alright.”
   - “Only negative had more to do with the parents not being able to afford the copay.”
   - “There were problems with invoices. It takes 3-4 weeks for a payment to go through. I have no problems with the family, just the paper trail that I had issues with.”

2) Difficulties with families who do not follow subsidy requirements (n = 3, 2 family and 1 center)
   - “Parents arguing with me, not wanting to follow the rules. Parents have to be reminded to sign children in/out and to come in to pick up child, not send older sibling in to get child.”*
   - “The parent didn’t understand the process with the voucher.”

*Subsidy payments require providers to submit attendance initialed by parents or guardians.
Chapter 3

Developmentally Appropriate Learning and Practices & Social and Emotional Learning
### Chapter 3: Developmentally Appropriate Learning and Practices & Social and Emotional Learning

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Chapter 3 Developmentally Appropriate Learning and Practices & Social and Emotional Learning

Executive Summary

This report includes findings on Maryland EXCELS participating early childhood and school-age educators’ perceptions on the Developmentally Appropriate Learning and Practice content area.

Key findings include the following:

**General Perspectives**

- The majority of interview participants (90%) reported that the Developmentally Appropriate Learning and Practices content area is effective in promoting quality care and education because (a) it improves the overall program quality and teaching practices, (b) it benefits children by meeting each individual child’s needs, (c) it helps educators understand what best practices are, and (d) it benefits families in understanding expectations and practices.

- Although most participants (92%) reported that they do not find the Developmentally Appropriate Learning and Practices content area challenging, some participants mentioned that the content area could be challenging because of (a) an unclear system and criteria, (b) the need to train staff, and (c) costs.

**Specific Criteria**

- The majority of the survey participants (93%) reported that having a schedule is very important or important because it establishes structure and routines, and it sets expectations for children.

- Although some survey participants noted that it is more important to take actions rather than just having a written philosophy statement, most of them (80%) agreed that having a written philosophy statement is important because it increases awareness of the overall goals of the program and provides guiding principles for the program.

- The majority of the survey participants (97%) reported that the selection of learning materials is very important or important. The most common reason why the participants perceive the selection of learning materials is important is that it helps them provide developmentally appropriate materials for a child’s growth, learning, and development. Just 62% of the participants agreed that documenting the selection of learning materials in a written statement is important. Although it helps parents understand what the program is intentional about and helps the program keep track of their inventory and availability of various age-appropriate materials, some participants noted that it is more important to select and use appropriate learning materials than having a written statement.

- The majority of the survey participants (98%) reported that positive guidance is very important or important because it guides children, helps build strong relationships with children, and provides supportive learning experiences and a positive environment for children.

- Approximately 90% of the survey participants reported that their programs have a curriculum.
• The majority of the survey participants (93%) reported that lesson planning is very important or important because (a) it provides guidance for teaching, (b) it benefits children, and (c) it provides structure for the program.
• Approximately 80% of the survey participants reported that a screen time policy is very important or important. At the same time, the participants noted that the age-appropriate screen time could benefit children’s learning when technology is used intentionally.
• Of the survey participants, 85% reported that they have ongoing child assessments. The majority of the participants (92%) perceived child assessment to be very important or important because it ensures appropriate lesson planning and it helps the educators understand the individual learning needs of each child.

Social and Emotional Learning Practices

• Among 26 interview participants, 16 (62%, 9 family and 7 center) reported that their program uses specific strategies, curriculum, or practices to develop children's social and emotional learning. To monitor children’s progress they primarily use informal staff observations, documentation of behaviors, and assessments incorporated into the curriculum.
Summary of Participants

A total of 53 Maryland EXCELS Early Childhood and School-Age Educators Perceptions Study interview participants responded to questions asking about their perceptions on the Developmentally Appropriate Learning and Practice content area. Furthermore, we asked about programs’ social and emotional learning practices to a subgroup of 26 participants. The quotes in this report were drawn from interview notes.

This report also includes findings from 129 Maryland EXCELS Early Childhood and School-Age Educators Perceptions Study survey participants. The survey participants responded to questions asking about their perceptions of specific criteria within the Developmentally Appropriate Learning and Practice content area. Note: There was no significant difference in findings across Maryland EXCELS published quality ratings.

Developmentally Appropriate Learning and Practices

Effectiveness of the Developmentally Appropriate Learning and Practices Content Area

All interview participants were asked about the effectiveness of the Developmentally Appropriate Learning and Practices content area in promoting quality care and education. Most participants (n = 47, 90%) perceived this content area to be effective. The common reasons that the participants mentioned are:

1) Quality improvement of the program overall and teaching practices (n = 19, 12 center and 7 family)
   - “Helps to develop policies at the center.”
   - “Keeps programs up to date with developmental screening and opportunities to make programs and families aware that what they are doing is developmentally appropriate for children.”
   - “Being able to develop a schedule validates what the program does.”
   - “It shows some additional things that you can be doing.”
   - “It keeps me on track.”
   - “It’s able to show you the different ranges [of child development] and how to approach each child.”

2) Benefits children: Meeting each child’s needs (n = 11, 7 center and 4 family)
   - “It helps meet the needs of each individual child.”
   - “It opens the door for all children.”
   - “Children do better when a program is in place.”

3) Helps providers easily understand what best practices are (n = 6, 4 family and 2 center)
   - “It is something easier to understand. It is like a roadmap to follow.”
   - “It gives you a map of what to follow and how to teach the kids. It’s very basic and not hard to follow.”

4) Benefits families (n = 5, 3 center, 1 school and 1 family)
“Explains to families what is happening in classroom and why we are doing what we are doing.”
“We share the developmental expectations with parents.”
“It helps parents to get an important gauge to get early intervention.”

5) Other suggestion
“It would be better to have a checklist.”

Challenges with the Developmentally Appropriate Learning and Practices Content Area

All interview participants were asked about the challenges with implementing the Developmentally Appropriate Learning and Practices content area. Although most participants ($n = 48, 92\%$) reported that this content area is not very challenging, when they were asked why this content area could be challenging, they described the following common reasons:

1) Unclear system and criteria ($n = 7, 4$ center and $3$ family)
   “I’m not sure what they were looking for.”
   “Some areas were not appropriate for my center.”
   “English is my second language so I feel like it takes me longer than others to make sure my grammar is correct. So the challenges are time and the ability to understand specifically what Maryland EXCELS wants.”
   “At the beginning, certain things [documents] were not accepted because of wording but it explained clearly what was missing.”

2) Training staff ($n = 2$ center)
   “Occasionally getting teachers to get on board with behavior issues. Some of them would prefer just not to have any challenging children, but that's not practical.”

3) Money ($n = 2, 1$ center and $1$ family)
   “Using the recommended curriculum is too expensive.”

4) Other reason
   “Too much emphasis put on education at young age instead of focusing more on their social skills.”
   “I am aware of the peer-to-peer activities, but I’d like some type of resource to have students teach other students.”

Perceptions on the Specific Developmentally Appropriate Learning and Practices Criteria

The survey participants answered questions on different criteria within the Developmentally Appropriate Learning and Practices content area: schedule, philosophy statement, selection of learning materials, positive guidance and behavior strategies, curriculum, lesson planning, screen time policy, and child assessment.
Schedule

Question: How important do you think having a “schedule” is in promoting quality care and education (1 = very important, 5 = not important at all)?

Mean = 1.36, SD = 0.65

<table>
<thead>
<tr>
<th>Importance</th>
<th>% (n = 61)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very important</td>
<td>72.13%</td>
</tr>
<tr>
<td>Important</td>
<td>21.31%</td>
</tr>
<tr>
<td>Moderately important</td>
<td>4.92%</td>
</tr>
<tr>
<td>Slightly important</td>
<td>1.64%</td>
</tr>
<tr>
<td>Not important at all</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

Approximately 93% (n = 57) of the survey respondents reported that they thought it was important or very important to have a schedule to promote quality care and education. The reasons why the participants perceive having a schedule to be important are:

1) Establish structure and routines (n = 26, 18 center, 6 family, 2 school)
   - “This allows for the day to be laid out so anyone can see what is coming and what needs to be done.”
   - “It allows for students and teachers to cover all essential curriculum in a set time.”
   - “It allows the parents to be involved and helps the children with a routine.”

2) Set expectations for children (n = 16, 8 center, 6 family, 2 school)
   - “Having a schedule not only helps to keep you on track but assures that developmentally appropriate practices are maintained.”
   - “Routine is important for establishing sense of expectations.”
   - “It is very important, especially a picture schedule. This way it helps the children know what to expect next. They get used to the schedule and know what to expect next during the day. It helps everyone stay on task too. We love following our schedule.”
   - “Schedules help build trust between the children and their care givers; predictability diminishes the unknown which diminishes emotional anxiety.”
   - “Structure, Lesson plans and being prepared are key to having the children feel organized and ‘in control’ of their day.”

Educators also noted that it is important to establish a flexible schedule that meets the need for children.

   - “A plan for play and learning is important, but a rigid schedule makes no sense at all. Children need a sense of the ‘rhythm of the day,’ but need to be free to follow their passions and play with intensity.”
   - “As a family childcare provider sticking to a daily program can be challenging because often providers work solo. I take pride that I am able to provide flexibility to my program; I think this is what makes family childcare so unique.”
Question: How important are the following schedule components in promoting quality care and education (1 = very important, 5 = not important at all)?

<table>
<thead>
<tr>
<th>Question</th>
<th>Very important</th>
<th>Important</th>
<th>Moderately important</th>
<th>Slightly important</th>
<th>Not important at all</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) A balance of child-initiated and teacher-directed activities</td>
<td>77.1%</td>
<td>18.0%</td>
<td>4.9%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>61</td>
<td>1.28</td>
<td>0.55</td>
</tr>
<tr>
<td>b) Whole group activities</td>
<td>62.3%</td>
<td>26.2%</td>
<td>4.9%</td>
<td>6.6%</td>
<td>0.0%</td>
<td>61</td>
<td>1.56</td>
<td>0.86</td>
</tr>
<tr>
<td>c) Small group activities</td>
<td>72.1%</td>
<td>21.3%</td>
<td>4.9%</td>
<td>1.6%</td>
<td>0.0%</td>
<td>61</td>
<td>1.36</td>
<td>0.65</td>
</tr>
<tr>
<td>d) Opportunities for individual learning</td>
<td>88.3%</td>
<td>10.0%</td>
<td>1.7%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.13</td>
<td>0.39</td>
</tr>
<tr>
<td>e) Adequate time for transition</td>
<td>79.7%</td>
<td>17.0%</td>
<td>3.4%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>59</td>
<td>1.24</td>
<td>0.50</td>
</tr>
<tr>
<td>f) Adequate time for literacy/reading opportunities</td>
<td>81.4%</td>
<td>13.6%</td>
<td>5.1%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>59</td>
<td>1.24</td>
<td>0.53</td>
</tr>
</tbody>
</table>

Of all the schedule components, the most frequently cited as very important or important overall (mean = 1.13) is “opportunities for individual learning.”

Philosophy Statement

Question: How important do you think having a “philosophy statement” is in promoting quality care and education (1 = very important, 5 = not important at all)?

<p>| | | | | | | | |</p>
<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very important</td>
<td>Important</td>
<td>Moderately important</td>
<td>Slightly important</td>
<td>Not important at all</td>
<td>% (n = 61)</td>
<td></td>
</tr>
<tr>
<td>Very important</td>
<td>62.30%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Important</td>
<td>16.39%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderately important</td>
<td>13.11%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slightly important</td>
<td>6.56%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not important at all</td>
<td>1.64%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mean = 1.69, SD = 1.03

Approximately 79% (n = 48) of the survey respondents reported that they thought it was important or very important to have a philosophy statement to promote quality care and education.

The reasons why the participants perceive having a philosophy statement is important are:

1) Increase awareness of program philosophy (n = 19, 14 center, 4 family, 1 school)
   
   ○ “This lets everyone know what our view is for our center.”
- “I think it’s important to let parents know what you are about before they enroll their children. So they know what to expect prior to enrolling their child.”

- “A philosophy statement allows parents, teachers, staff members, and the outside community to understand the overall goals of the program. It allows all stakeholders to follow the same mission statement and be on the same page.”

2) Provide guiding principles ($n = 14, 11 \text{ center}, 2 \text{ family}, 1 \text{ school}$)

- “A philosophy shows your overall guiding principles behind why you do things a certain way. It is the framework and can help if things get off track.”

- “An organization needs to have a mission and a vision. Basically, a philosophy statement is another way of describing the purpose of operating such a program and what one hopes to achieve by it.”

- “A philosophy helps you maintain your focus in maintaining and working to increase the quality of your program.”

Some participants ($n = 5$), however, also noted that it is more important to take actions than just having the philosophy statement.

- “You can have the best philosophy statement that’s out there but if you’re not doing or providing what it says, then what’s the point? I understand that having one allows people to hold you accountable.”

- “Who really believes what’s written on paper? Action speaks louder than words. I’ve seen enough daycare centers to know there are a lot of things that go on behind closed doors.”

- “What you do is more important than what you say.”

**Question:** How important are the following components in a philosophy statement ($1 = \text{ very important}, 5 = \text{ not important at all}$)?

<table>
<thead>
<tr>
<th>Question</th>
<th>Very important</th>
<th>Important</th>
<th>Moderately important</th>
<th>Slightly important</th>
<th>Not important at all</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Welcoming children of all abilities</td>
<td>86.9%</td>
<td>6.6%</td>
<td>3.3%</td>
<td>3.3%</td>
<td>0.0%</td>
<td>61</td>
<td>1.23</td>
<td>0.66</td>
</tr>
<tr>
<td>b) Addressing children’s interests</td>
<td>81.7%</td>
<td>15.0%</td>
<td>3.3%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.22</td>
<td>0.49</td>
</tr>
<tr>
<td>c) Addressing children’s primary language</td>
<td>63.9%</td>
<td>23.0%</td>
<td>11.5%</td>
<td>1.6%</td>
<td>0.0%</td>
<td>61</td>
<td>1.51</td>
<td>0.76</td>
</tr>
<tr>
<td>d) Addressing children’s cultural backgrounds</td>
<td>75.4%</td>
<td>19.7%</td>
<td>1.6%</td>
<td>1.6%</td>
<td>1.6%</td>
<td>61</td>
<td>1.34</td>
<td>0.74</td>
</tr>
</tbody>
</table>

Of all the philosophy statement components, the most frequently cited as very important or important are “addressing children’s interests” (mean=1.22) and “welcoming children of all abilities” (mean=1.23).
Learning Materials

Question: How important do you think the “selection of learning materials” is in promoting quality care and education (1 = very important, 5 = not important at all)?

Mean = 1.21, SD = 0.52

Approximately 98% (n = 60) of the survey respondents reported that they thought it was important or very important to have a selection of learning materials to promote quality care and education.

The most common reason why the participants perceive the selection of learning materials is important is that it helps them provide developmentally appropriate materials for a child’s learning and development. They noted that the learning materials should be age-appropriate.

- “The selection of learning materials is important because it sets up the rich opportunities for children to meet developmental milestones.”
- “Selecting the proper learning materials is important in quality education because the materials chosen must match the academic, social, physical, and emotional needs of the students. They must be age-appropriate and thoughtfully chosen.”
- “It is very important to choose the material according to the ages and stages of the children so they can take interest and learn.”
- “Children spend a lot of their day with these materials in playing and learning.”

Question: How important do you think documenting “selection of learning materials” in a written statement is (1 = very important, 5 = not important at all)?

Mean = 2.23, SD = 1.25

<table>
<thead>
<tr>
<th>Importance</th>
<th>% (n = 61)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very important</td>
<td>39.34%</td>
</tr>
<tr>
<td>Important</td>
<td>22.95%</td>
</tr>
<tr>
<td>Moderately important</td>
<td>18.03%</td>
</tr>
<tr>
<td>Slightly important</td>
<td>14.75%</td>
</tr>
<tr>
<td>Not important at all</td>
<td>4.92%</td>
</tr>
</tbody>
</table>
Survey respondents thought documenting the selection of learning materials in a written statement is less important compared to other developmentally appropriate practices presented in the survey. The mean of the responses (2.23) is considerably higher (i.e., less important) than for other content areas (in the range of 1.1 or 1.2).

The participants perceived having a written statement as important because it helps parents understand what the program is intentional about and helps the program keep track of their inventory and availability of various age-appropriate materials.

- “This shows families that we are intentional about this, and that we consider it when choosing materials. We have intent behind why we get something for the classroom.”
- “I keep parents informed and educated on things we do every day, and what kind of learning materials we use and for what reasons (what learning domains).”
- “Parent should know what materials are being taught to their child/children. These materials may change from time to time because a child moves up in age and goes to a different curriculum.”
- “It made me put thought into what we provide for our children and how we will continue to select our materials in the future.”
- “Children’s interests change sometimes daily. It’s important to note what and what not they’re choosing to play with.”
- “It is important to document the selection of learning materials so that staff members, parents, and the community understand what is available for their teaching purposes.”

Some participants, however, noted that it is more important to select and use appropriate learning materials than writing it down.

- “I am not sure if the time spent to document ‘selecting of learning materials’ is worthwhile.”
- “Doing is more important than writing it down.”
- “We don’t believe the process of us selecting the learning materials we use formatted in a statement is that important.”

Question: How important are the following characteristics in selecting learning materials? Learning materials should be... (1 = very important, 5 = not important at all)

<table>
<thead>
<tr>
<th>Question</th>
<th>Very important</th>
<th>Important</th>
<th>Moderately important</th>
<th>Slightly important</th>
<th>Not important at all</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) developmentally appropriate</td>
<td>91.8%</td>
<td>8.2%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>61</td>
<td>1.08</td>
<td>0.27</td>
</tr>
<tr>
<td>b) accessible</td>
<td>81.7%</td>
<td>15.0%</td>
<td>3.3%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.22</td>
<td>0.49</td>
</tr>
<tr>
<td>c) conducive to multiple modes of exploration and learning</td>
<td>77.1%</td>
<td>19.7%</td>
<td>3.3%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>61</td>
<td>1.26</td>
<td>0.51</td>
</tr>
<tr>
<td>d) reflective of children’s interests</td>
<td>76.3%</td>
<td>23.7%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>59</td>
<td>1.24</td>
<td>0.43</td>
</tr>
<tr>
<td>e) reflective of children’s primary languages and cultural backgrounds</td>
<td>72.1%</td>
<td>19.7%</td>
<td>6.6%</td>
<td>1.6%</td>
<td>0.0%</td>
<td>61</td>
<td>1.38</td>
<td>0.68</td>
</tr>
<tr>
<td>f) supportive of children of all abilities</td>
<td>85.3%</td>
<td>9.8%</td>
<td>4.9%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>61</td>
<td>1.20</td>
<td>0.51</td>
</tr>
<tr>
<td>g) rotated</td>
<td>75.0%</td>
<td>21.7%</td>
<td>3.3%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.28</td>
<td>0.52</td>
</tr>
</tbody>
</table>
Of all the characteristics in selecting learning materials, the most frequently cited as very important or important is that they are developmentally appropriate (mean = 1.08).

Positive Guidance

Question: How important do you think “positive guidance” is in promoting quality care and education (1 = very important, 5 = not important at all)?

Mean = 1.08, SD = 0.33

Approximately 98% (n = 60) of the survey respondents reported that they thought it was important or very important to have a positive guidance to promote quality care and education.

The participants perceived that positive guidance is important because it guides children, builds strong relationships with children, and provides supportive learning experience and a positive environment for children.

- “Positivity can build strong relationships and help everyone learn and grow.”
- “Positive guidance will help children learn to regulate their own behavior.”
- “All children need to feel supported and loved, and should be guided with that philosophy in mind. Our goal is to create a positive, happy, loving learning environment for children so they leave preschool with a love of school.”
- “This will ensure a positive first school experience for all children.”
- “People learn best in a positive environment.”

Question: How important are the following behavior strategies in promoting quality care and education (1 = very important, 5 = not important at all)?

<table>
<thead>
<tr>
<th>Question</th>
<th>Very important</th>
<th>Important</th>
<th>Moderately important</th>
<th>Slightly important</th>
<th>Not important at all</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Providing choices</td>
<td>86.9%</td>
<td>11.5%</td>
<td>1.6%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>61</td>
<td>1.15</td>
<td>0.40</td>
</tr>
<tr>
<td>b) Using redirection</td>
<td>90.0%</td>
<td>10.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.10</td>
<td>0.30</td>
</tr>
<tr>
<td>c) Using reflection and problem solving</td>
<td>86.7%</td>
<td>13.3%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.13</td>
<td>0.34</td>
</tr>
<tr>
<td>d) Having clear rules and expectations</td>
<td>93.4%</td>
<td>6.6%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>61</td>
<td>1.07</td>
<td>0.25</td>
</tr>
<tr>
<td>e) Having rules and expectations that are developed with input from the children</td>
<td>70.0%</td>
<td>21.7%</td>
<td>8.3%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>60</td>
<td>1.38</td>
<td>0.63</td>
</tr>
</tbody>
</table>
Of all the behavior strategies in providing positive guidance, the most frequently cited as very important or important is having clear rules and expectations (mean = 1.07).

Curriculum

Question: Does your program use a “curriculum” to address what children should learn and how they should be taught?

Approximately 90% (n = 57) of the survey respondents indicated that their program used a curriculum to address what children should learn and how they should be taught.

Lesson Planning

Question: How important do you think “lesson planning” is in promoting quality care and education (1 = very important, 5 = not important at all)?

Approximately 93% (n = 55) of the survey respondents reported that they thought it was important or very important to have lesson planning to promote quality care and education.

The survey participants described why they think that “lesson planning” is important. The reasons are:

1) Provides guidance for teaching (n = 23, 17 center, 5 family, 1 school)
   - “A teacher with a plan is set for a successful day; a teacher without a plan is set for failure.”
   - “I think planning your lesson will make the day go smoother with the children and gives the teacher time to add learning materials or make the lesson age-appropriate for the children.”
   - “Lesson plans allow teachers to be more intentional in selection of materials and interactions.”
2) Benefits children \((n = 18, 7 \text{ center}, 10 \text{ family}, 1 \text{ school})\)

- “We need to plan according to the child’s needs and interests to empower their leaning.”
- “By planning the appropriate learning opportunities that are based on the children's interest, it allows the children to be interested and learn to their highest potential.”
- “It ensures objectives are being practiced and children are exposed to a wide range of skills/activities/learning opportunities.”

3) Provides structure for the program \((n = 15, 7 \text{ center}, 7 \text{ family}, 1 \text{ school})\)

- “A lesson plan is a perfect guide which provides proper structure and essential learning.”
- “The curriculum is the foundation of a child care center. A solid curriculum, backed up by quality lesson plans, will make a center great. Parents want to know that their children are getting that solid educational foundation and that starts with us.”
- “Lesson planning is very important because it's what we base our activities every day.”

**Question:** To what extent do the following elements contribute to making “lesson plans” effective \((1 = \text{very effective}, 5 = \text{not effective at all})\)?

<table>
<thead>
<tr>
<th>Question</th>
<th>Very effective</th>
<th>Effective</th>
<th>Moderately effective</th>
<th>Slightly effective</th>
<th>Not effective at all</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Lesson plans incorporate information from an IFSP/IEP when IFSP/IEP is provided by families to your program.</td>
<td>51.7%</td>
<td>37.9%</td>
<td>8.6%</td>
<td>0.0%</td>
<td>1.7%</td>
<td>58</td>
<td>1.62</td>
<td>0.78</td>
</tr>
<tr>
<td>b) Lesson plans address the developmental needs of each and every child.</td>
<td>78.0%</td>
<td>15.3%</td>
<td>5.1%</td>
<td>0.0%</td>
<td>1.7%</td>
<td>59</td>
<td>1.32</td>
<td>0.72</td>
</tr>
<tr>
<td>c) Lesson plans use information gained from families to inform planning.</td>
<td>44.8%</td>
<td>34.5%</td>
<td>15.5%</td>
<td>1.7%</td>
<td>3.5%</td>
<td>58</td>
<td>1.84</td>
<td>0.98</td>
</tr>
<tr>
<td>d) Lesson plans reflect the children’s interests and skills.</td>
<td>75.4%</td>
<td>19.3%</td>
<td>3.5%</td>
<td>0.0%</td>
<td>1.8%</td>
<td>57</td>
<td>1.33</td>
<td>0.71</td>
</tr>
<tr>
<td>e) Lesson plans include information gained from direct observation of the children.</td>
<td>78.6%</td>
<td>17.9%</td>
<td>1.8%</td>
<td>1.8%</td>
<td>0.0%</td>
<td>56</td>
<td>1.27</td>
<td>0.58</td>
</tr>
<tr>
<td>f) Lesson plans have a separate activity domain dedicated to social and personal development.</td>
<td>54.6%</td>
<td>34.6%</td>
<td>5.5%</td>
<td>3.6%</td>
<td>1.8%</td>
<td>55</td>
<td>1.64</td>
<td>0.88</td>
</tr>
</tbody>
</table>

According to the survey respondents, the elements in a lesson plan that make them effective are including information gained from direct observation of the children \((\text{mean} = 1.27)\), addressing the developmental needs of each and every child \((\text{mean} = 1.32)\), and reflecting the children’s interests and skills \((\text{mean} = 1.33)\).
Screen Time Policy

Question: How important do you think a “screen time policy” (for example, only used when directly related to facilitated learning experiences, and/or not used for children under age 2) is in promoting quality care and education (1 = very important, 5 = not important at all)?

Mean = 1.93, SD = 1.32

% (n = 59)

- Very important: 54.24%
- Important: 25.42%
- Moderately important: 5.08%
- Slightly important: 5.08%
- Not important at all: 10.17%

Approximately 80% (n = 47) of the survey respondents reported that they thought it was important or very important to have a screen time policy to promote quality care and education. Ten percent (n = 6) said it was not important at all.

The survey participants asserted that children should not spend too much time in front of a screen (n = 28, 16 center, 8 family, 4 school). However, the participants also noted that “sometimes children learn from visually seeing what the teacher is explaining” and that age-appropriate screen time could benefit children’s learning (n = 10, 6 center, 4 family):

- “Eliminating screen time from children under 2 really isn’t important in promoting quality care and education. Screen time can provide support to the curriculum. Showing the children how a caterpillar turns into a butterfly in a YouTube video would be more effective that just showing them on paper. My daughters have learned sign language at the age of 18 months so that they are able to communicate. We learned the concept together and it was great, interactive screen time.”

In addition, some participants noted that a screen time can be beneficial for children to learn technology (n = 8, 3 center, 4 family, 1 school). However, its importance depends on how programs use the technology in the classroom.
Child Assessment

Question: Is there a process in place for “assessing children’s development and learning” in your classroom?

Approximately 85% ($n = 50$) of the survey respondents indicated that there is a process in place in their classroom for assessing children’s development and learning.

Question: How important do you think “observing children’s progress and conducting ongoing assessment” are in promoting quality care and education ($1 = \text{very important}, 5 = \text{not important at all}$)?

Mean = 1.68, SD = 0.64

Approximately 93% ($n = 55$) of the survey respondents reported that they thought it was important or very important to observe children’s progress and conduct ongoing assessment to promote quality care and education.

The participants described why they think that “observing children’s progress and conducting ongoing assessment” is important. The reasons are:

1) Ensures appropriate lesson planning ($n = 12$, 5 center, 7 family)
   - “If you do not continue to do ongoing assessments and observations on your students how can you know what your students need? You cannot make effective lesson plans.”
   - “By observing a child, you get the opportunity to plan according to children’s needs.”
   - “Observations can be used to determine lesson plans and differentiation goals for students of different levels of development. As a child grows and develops, new assessments allow for further presentation of new materials and learning goals.”
2) Helps in understanding each child’s needs ($n = 18, 9$ center, $8$ family, $1$ school)
   - “Children at each age are expected to meet certain Development Milestones and observation and conducting assessments are very key regarding this process. If this is not done, then we might not realize if a child needs help in any area which is becoming a challenge and this might affect that particular child regarding kindergarten readiness at five.”
   - “Ongoing observations and assessments helps the teacher, child, and parent determine what a child’s strengths and weaknesses are along the developmental skills checklist. In doing so we can work together as a team to help the child master their skills.”
   - “Conducting assessment is important, as being a teacher in partnership with the parents allows them to be notified about performance in the classroom situation.”

**Social and Emotional Learning**

Among 26 interview participants, $16 (62\%, 9$ family and $7$ center) reported that their program uses specific strategies, curriculum, or practices to develop children's social and emotional learning. Many of them ($n = 10$) mentioned specific programs (e.g., Healthy Beginnings, Creative Curriculum, Social and Emotional Foundations for Early Learning). Some educators mentioned that they use “outdoor or indoor play time” ($n = 4$) or “role play” ($n = 2$) as opportunities for social and emotional learning or they encourage children to “express feelings by having a calming/quiet corner or mirrors” ($n = 5$).

When we asked how programs monitor children’s progress in social and emotional development, the participants provided the following responses:

- Informal staff observation ($n = 12$)
- Documentation of behaviors ($n = 10$)
- Assessments incorporated into the curriculum ($n = 8$)
- Feedback from parents ($n = 5$)
Administrative Policies and Practices and Suspension/Expulsion Practices
# Chapter 4 Administrative Policies and Practices & Suspension/Expulsion Practices

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Chapter 4 Administrative Policies and Practices & Suspension/Expulsion Practices

Executive Summary

This report includes findings on Maryland EXCELS participating early childhood and school-age educators’ perceptions of the Administrative Policies and Practices content area and their expulsion and suspension practices. Key findings include the following:

General Perspectives

- Among 26 interview participants, 20 participants (77%) responded that the Administrative Policies and Practices content area is effective in promoting quality care and education because (a) it ensures program quality, (b) it encourages staff development and motivates staff, and (c) it helps improve parent engagement. Six interview participants (23%) responded that some criteria are less relevant and effective in their setting.
- The interview participants stated that the Administrative Policies and Practices content area could be challenging because (a) it is difficult to engage families, particularly for family conferences, and (b) the content area requires overwhelming paperwork and time commitment.

Family Engagement

- The key strategies for the interview participants to engage families were to (a) have frequent, planned, and one-on-one communications with families, and (b) involve children in activities such as performances. The educators use multiple methods to communicate with families (e.g., social media, email, text, flyer, verbal conversations, calendar sharing, or posters).
- The common challenges for the interview participants with family engagement were (a) getting families’ attendance, (b) planning new events, (c) communication with families, (d) cost, and (e) finding age-appropriate family engagement activities.
- More than half of both interview and survey participants reported that having a written parent handbook is helpful for parents because it explains practices, policies, procedures, and expectations for parents, and it provides guidelines for their program. However, the participants also expressed concerns with the parent handbook that not many parents read the handbook, and other resources would be more helpful to engage families.
- A total of 16 interview participants (62%) and 26 survey participants (45%) were familiar with Maryland’s Family Engagement Toolkit. Among them, 3 interview participants and 6 survey participants have used it and found it useful. In addition, 12 interview participants (46%) and 23 survey participants (40%) have heard about the new Family Engagement website via different channels (e.g., newsletter, MSDE meetings, OCC meeting, etc.), however, most of them have not visited the website.
**Staff Development**

- Child care center providers reported that programs utilize various methods to support staff: (a) training, courses, and conferences, (b) staff meetings, (c) goal settings, (d) staff evaluations, and (e) financial support.
- Participants noted that benefits of staff-related criteria within the Administrative Policies and Practices content area are that it holds everyone accountable and it ensures program quality. Participants, however, also noted a concern about insufficient salary and staff turnover. More than half of the survey participants perceived staff-related criteria to be helpful for staff development and continuous quality improvement: 67% for regular staff meetings, 60% for having a yearly staff meeting schedule in place, 74% for providing an evaluation of staff performance, 81% for a written handbook stating staff policies, 60% for incremental salary scale, and 73% for employee benefits.

**Children with Disabilities**

- Almost half of the interview participants (n = 12) had a child with a disability in their program receiving services through Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP). Five participants reported that they had experienced a situation where they had to ask a family of a child with a disability to leave the program because of safety or health-related reasons.
- The interview participants described that they would (a) contact early intervention or special education service providers, (b) use referral services, (c) reach out to a Judy Center, or (d) take online courses when there is a situation in which they might need to consider asking a family to leave their program because of a child’s disability. The majority of the survey participants (90%) reported that they have information about community resources, including referral resources, for children with disabilities and special health care needs and they felt that it is important to have community resource information in promoting quality care and education.

**Nutrition Policy**

- Of the interview participants, 81% reported that their program has a nutrition policy. They perceived a nutrition policy to be helpful because it ensures children get healthy foods, educates children on healthy eating habits, and shows parents that children eat healthy foods. Some participants, however, noted difficulties with getting specific foods required by the Child and Adult Care Food Program (CACFP) and challenges with children’s eating habits and parents’ requests.

**Expulsion and Suspension Practices**

- Approximately 35% of the interview and survey participants reported that they have experienced a situation where they had to ask a family to leave their program because of concerns with their child's behavior. Although 54% of the interview and 39% of the survey participants were aware of the Maryland State Department of Education resource “Guidance for Preventing Suspension and Expulsion in Early Care and Education Programs,” most of them said that they had not read it.
Summary of Participants

In this report, we first analyzed the data from 26 Early Childhood and School-Age Educators Perceptions Study interview participants to understand their general perceptions about the Administrative Policies and Practices content area. Participants also responded to specific questions asking about family engagement, staff-related criteria, Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP), and nutrition policy. We note that there was no significant difference in findings across Maryland EXCELS published quality ratings.

Note: The quotes in this report were drawn from interviewer notes.

This report also includes findings from 129 Maryland EXCELS Early Childhood and School-Age Educators Perceptions Study survey participants. The survey participants responded to questions asking about their perceptions on specific criteria within the Administrative Policies and Practices content area: parent handbook, staff development, and community resources.

We also asked both interview and survey participants questions about programs’ suspension and expulsion practices.

Administrative Policies and Practices – General Perspectives

Effectiveness of the Administrative Policies and Practices Content Area

Among 26 interview participants, 20 participants (77%) thought that the Administrative Policies and Practices content area is effective in promoting quality care and education. In addition, 4 of 26 participants (15%) noted that the content area was easy to implement (3 center and 1 family child care providers). Reasons that they feel this area to be effective are:

1) Ensures quality \(n = 8, 6 \text{ family and 2 center}\)
   - “It’s valuable for quality.”
   - “It made me aware of what I was missing in my parent handbook.”
   - “It forced me to do things that I didn’t realize that I needed.”

2) Promotes staff development and motivation \(n = 4, 3 \text{ center and 1 family}\)
   - “Kuddos to Maryland EXCELS for encouraging professional development to have teachers to keep up with what is happening in the field. It goes beyond licensing.”
   - “In order to maintain good staff, you have to have staff handbooks and meetings to communicate with each other.”
   - “It helps to strengthen the team and school as a whole.”
   - “Staff should be knowledgeable as well and ready to share with parents at any time.”

3) Encourages parent engagement \(n = 4, 2 \text{ center and 2 family}\)
   - “Parent/teacher conferences are valued by parents.”
   - “Parents should know what the center has to offer.”
   - “Great for orientation and getting parents more engaged.”
   - “All parents want to be informed.”
Once I have an approved contract, a family handbook, it helps with parents who don’t want to follow the procedures and expectations.”

Six interview participants (23%) responded that some criteria are effective (e.g., handbook, IEP, etc.), however, some criteria are less relevant and effective.

- “I have no staff so it doesn’t apply to me. My biggest struggle was that the program coordinator didn’t understand that I didn’t have staff.”
- “The staffing section is not relevant.”
- “I don’t know why Maryland EXCELS wants to see contract with parents.”
- “I am looking for more support with the family engagement piece. A lot of times families don’t show up to events that are planned.”

Difficulties following the Administrative Policies and Practices Content Area

1) Family engagement and cooperation (n = 8, 4 center and 4 family)
   - Family conferences are challenging
     - “The conferences are almost unnecessary because I see the families every day and talk to them every morning and afternoon. It seems to apply more to center-based care than family child care.” (family)
     - “There is a time limit for the conferences. I meet with parents as needed, not according to what Maryland EXCELS is saying. A conference makes parents think ‘What’s wrong?’”
   - “Some parents don’t want to release IFSP to me.”
   - “Sometimes it is hard to get families to want to participate. If families aren’t willing to participate, it makes it difficult to reach the Maryland EXCELS standard of family engagement.”

2) Time constraints and overwhelming paperwork (n = 4, 3 family and 1 center)
   - “There is just a lot to do in addition to interacting with the children.”
   - “It is too overwhelming to get it all down.”

3) Differences among programs (n = 1 center)
   - “Not every place is run the same. When you are under a church, publishing staff salaries may be a different policy. They don’t put salaries out because of being through a church. Take into consideration how different programs are run. May be easier through a government program to meet this content area.”

4) Inconsistent feedback (n = 1 family)
   - “Different program coordinators are reading the contracts [documents] differently and giving different approval/disapproval. I did it as a group but some were accepted, and some were not. It is confusing to providers.”
Administrative Policies and Practices – Family Engagement

Approaches to Family Engagement

The interview participants (n = 26) noted that their programs are offering many different types of family engagement activities. The most common activities cited were outdoor or in-house field trips (n = 12), holiday celebrations (n = 10), mom’s, dad’s, and/or grandparent’s days (n = 8), volunteering in classroom (n = 7), culture sharing events (n = 6), back-to-school night (n = 4), family conferences (n = 4), open houses (n = 3), parent committees (n = 3) or workshops (n = 3), and group text or Facebook group interactions (n = 3).

Family Engagement Strategies

When the interview participants were asked what they have found to be most effective in engaging families, 16 participants (62%) reported communication with families as the most effective strategy to engage parents. Four educators (15%) reported that it is easier to engage parents when children participate (for example, performing).

- “One-on-one conversations are helpful.” (n = 3)
- “Let them know at the beginning of the year what is lined up for the whole year so they can arrange schedules.”
- “They are part of their children so they need to be in the process of planning.”
- “Let family know the importance of spending more quality time with children.”
- “I send text messages and constantly remind them three times a week verbally.”
- “Showing families that I really care about what goes on with family and child.”

Communication with Families

When the interview participants were more specifically asked how they communicate family engagement opportunities to families, all of them reported that they use multiple methods (e.g., “I have learned to tell families 5 ways and 5 different times.”).

The methods that programs utilize are:

- Electronic channels such as email, text, website, and parent Facebook page (n = 20)
- Flyer or newsletters (n = 18)
- Reminders/posters on bulletin boards or classroom doors (n = 10)
- Informal verbal conversations (n = 9)
- Calendar sharing (n = 3)
- Phone call if needed (n = 1)
- Telling children to tell their parents (n = 1)

Challenges in Promoting Family Engagement Activities

The interview participants noted some challenges they encounter when they promote family engagement activities. The most common challenges are:

1) Attendance (n = 19, 11 center and 8 family)
“We need to meet needs of working parents, the timing, offering evenings and weekends, making sure it is something that parents would be interested in.”

“Families are too busy and cannot attend. I notify them with a lot of advanced notice.”

“Families are already involved in so many other outside activities.”

“Don’t call it parenting workshop because parents don’t want to come to a parenting workshop. So we call cafe or breakfast with friends, packaging to make it less threatening. We also make sure the children are involved, which is something they enjoy.”

2) Planning new events (n = 4, 2 center and 2 family)

“With a new activity is sometimes hard to gauge interest. It is hard to plan and make sure you have everything you need.”

3) Communication (n = 4, 3 center and 1 family)

“You always get a handful of people who don’t read anything.”

“Making sure parents hear about it so they actually come out. Increasingly there are more parents who are working and grandparents are doing drop off. It’s a time commitment to do as much as we do (emails and newsletters) but 60% are reading them. It would be nice if it were 100%.”

4) Cost (n = 2 family)

“If I want to do something big, it has to come out of my own pocket and it is often more than I am actually able to do.”

5) Finding age-appropriate activities (n = 2 center)

6) Language barrier (n = 1 center)

Effectiveness of Parent Handbook

We asked the participants questions about the use of a written handbook. Among 26 interview participants, 25 participants (96%) reported that their program has a written parent handbook. More than 60% of them (n = 16) said that a written parent handbook is helpful for parents; 8 (31%) said that it is helpful for educators, and 7 (27%) expressed a concern that parents may not read the handbook (e.g., “Even when parents sign that they read it, I am not sure how much of it is read and remembered.”; “Sometimes I hear from parents that they don’t know it was a rule because they don’t read their parent handbook, so it’s not always a win.”). The following reasons are why the participants feel that having a written parent handbook is helpful:

1) Explanations of practices, policies, and procedures for parents (n = 14, 9 center and 5 family)

“Parents will know expectations of policies and procedures and follow them.”

“They are able to see the rules.”

“If families have questions, it’s in handbook.”

2) Helps providers to have communication with parents (n = 5, 3 center and 2 family)

“It allows us to be able to defend anything that we have going on as far as vacations or holiday closings. If a parent doesn’t know, I show the handbook to them. For instance, when it comes to potty training, they have options that I refer to our handbook. It serves as a back-up to me.”
Parents understand that they [providers] are quality and not just babysitters.”

3) Accountability for providers (n = 3, 2 family and 1 center)

- “It's a guideline for both the parents and myself.”
- “It reminds me of expectations. For example, I have a statement in the nutrition section that I serve wheat 3 days a week. Because it is in my handbook, I am obligated to do this.”

4) Informs a parent’s choice (n = 2 family)

- “Gives them an option to see ahead of time if the program fits their child.”

A total of 51 survey participants (86%) reported that they have a written parent handbook. Among them, 78% (n = 40) and 16% (n = 8) reported that it is “very important” or “important”, respectively, to have a written parent handbook. They mentioned similar reasons as the interview participants described.

When survey participants were asked how much they think the parent handbook helps family engagement practices, they answered the following:

(Bar chart showing distribution of responses: Very helpful 43.1%, Helpful 23.5%, Moderately helpful 9.8%, Slightly helpful 19.6%, Not helpful at all 3.9%)

Mean = 2.14, SD = 1.23

Two thirds of the survey respondents felt that parent handbook was “very helpful” or “helpful.” Notably about a fifth found it only “slightly helpful.”

The most common reason why the survey participants feel that having a parent handbook is helpful is that it “provides information about the program, family engagement activities, and expectations.” (n = 23, 13 center, 7 family, 3 school).

The participants also expressed concern that not many parents had read the parent handbook and that other resources are more helpful to engage families:

- “Parents only read the handbook once when they first enroll.”
- “Not everyone takes the time to read the handbook.”
- “The handbook helps facilitate the first steps of family engagement, but then we must follow up with other activities and options.”
- “The parents have the handbook which outlines our goals and expectations for family engagement, but they tend to rely more heavily on newsletter communication to truly understand and get involved in the program.”
Family Engagement Toolkit and Website

Family Engagement Toolkit
A total of 16 interview participants (62%) and 26 survey participants (45%) were familiar with Maryland’s Family Engagement Toolkit. Among them, 3 interview participants and 6 survey participants have used it and found it useful.

- “Yes, it is useful because we are constantly getting new families who are very multi-cultural. I used the Toolkit to gather ideas to meet needs of what we should be doing with families.”
- “It helped us as far as adding to our handbook with health and safety. You can say that you are doing these things but having the questions asked from the Toolkit gave me the opportunity to respond more, based on the questions in the Toolkit. Interviews with parents indicated that they felt that I looked more professional.”
- “This gives you so many more ideas how to get families to be a part of program and policies and get them more active. I think that the Toolkit helps fill the gap so that parents and providers are really working together as a team.”

It is noted that 12 interview participants (46%) have seen it but have not used it.

- “I looked at it once or twice, didn’t get into it.”
- “I have not used it because I am old school and I want a real tangible tool. I have gone to conferences where they passed out a kit (one conference in Western Maryland) but online doesn’t work for me.”

Furthermore, one interview participant reported that “I found it confusing. It was hard to take the materials out. It was bulky and big. A binder would have been easier.”

New Family Engagement Website
A total of 12 interview participants (46%) and 23 survey participants (40%) reported that they have heard about the new Family Engagement website via different channels (e.g., newsletter, MSDE meetings, OCC meeting, etc.), however, most of them have not visited the website.

Administrative Policies and Practices – Staff-Related Criteria
To understand early childhood and school-age educators’ perceptions of specific staff-related criteria within the Administrative Policies and Practices content area, we asked a set of questions below.

Family Child Care Providers’ Professional Development
We asked 13 family child care interview participants whether they have staff in their program. Only one family child care provider had staff in her program. Most participants reported that they take classes or trainings in different places for their own professional development (n = 11).

Child Care Center Staff Professional Development
We asked 13 child care center interview participants how their program supports staff development and performance improvement. Most programs utilize various methods to support their staff:

1) Trainings, courses, and conferences (n = 12)
o “The director shares information about local classes being offered.”
o “Have in-house training to support staff since it’s hard to find the time to go out and get development.”
o “Supervisor/owner gives times and helps find trainings. We have a board where posts about trainings are located. The owner is big on staff going back to school.”

2) Meetings and goal settings (n = 6)
o “We work with each person to set goals for own continuing education and get credential renewed as needed.”
o “We hold monthly staff meetings.”

3) Staff evaluation and credentials (n = 5)
o “Staff evaluations twice a year.” or “Annual evaluations.”
o “I quiz them on licensing regulations.”

4) Financial support (n = 4)
o “School provides 12 clock hours of training that all staff are required to take and they cover the expense.”
o “Anything else that teachers take we encourage them to file voucher with credentialing. Anything not covered, we pay 50% for teacher. We will also work to finance by paying up front costs and then the teacher can pay back out of their paychecks.”
o “We offer them classes that are paid for and we pay them for their time as well.”

Benefits or Challenges of Staff-Related Criteria

The interview participants (n = 26) were asked whether staff-related criteria within the Administrative Policies and Practices are beneficial or challenging. Three participants (12%) reported that the criteria are beneficial because “it holds everyone accountable” and “it ensures quality.” In addition, 12 participants (46%) reported that there is no challenge. Three participants (12%) noted a concern about insufficient salary and staff turnover:
o “We do offer all benefits that are recommended. We pay at the higher end of average salaries but those are not enough [to avoid turnover].”
o “We have highly qualified staff and they get lured away from public school system that pays more money and we can’t pay the same rate.”
The survey participants were asked how helpful the following activities are for staff development and continuous quality improvement on a 5-point scale (1 = very helpful, 5 = not helpful at all).

<table>
<thead>
<tr>
<th>Question</th>
<th>Very helpful</th>
<th>Helpful</th>
<th>Moderately helpful</th>
<th>Slightly helpful</th>
<th>Not helpful at all</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Regular staff meetings (e.g., monthly meeting)</td>
<td>67.2%</td>
<td>19.0%</td>
<td>0.0%</td>
<td>5.2%</td>
<td>8.6%</td>
<td>58</td>
<td>1.69</td>
<td>1.25</td>
</tr>
<tr>
<td>b) Having a yearly staff meeting schedule in place</td>
<td>59.7%</td>
<td>19.3%</td>
<td>7.0%</td>
<td>7.0%</td>
<td>7.0%</td>
<td>57</td>
<td>1.82</td>
<td>1.24</td>
</tr>
<tr>
<td>c) Providing an evaluation of staff performance</td>
<td>74.1%</td>
<td>13.8%</td>
<td>5.2%</td>
<td>1.7%</td>
<td>5.2%</td>
<td>58</td>
<td>1.50</td>
<td>1.04</td>
</tr>
<tr>
<td>d) Written handbook stating staff policies</td>
<td>81.0%</td>
<td>8.6%</td>
<td>1.7%</td>
<td>3.5%</td>
<td>5.2%</td>
<td>58</td>
<td>1.43</td>
<td>1.05</td>
</tr>
<tr>
<td>e) Incremental salary scale</td>
<td>59.7%</td>
<td>26.3%</td>
<td>3.5%</td>
<td>5.3%</td>
<td>5.3%</td>
<td>57</td>
<td>1.70</td>
<td>1.11</td>
</tr>
<tr>
<td>f) Employee benefits</td>
<td>73.2%</td>
<td>10.7%</td>
<td>7.1%</td>
<td>3.6%</td>
<td>5.4%</td>
<td>56</td>
<td>1.57</td>
<td>1.12</td>
</tr>
</tbody>
</table>

The three types of activities that survey respondents found most helpful overall were having a yearly staff meeting schedule in place, having an incremental salary scale, and holding regular staff meetings.

**Administrative Policies and Practices – IEP/IFSP**

**Practice for Children with a Disability**

A total of 12 interview participants (46%) had a child with a disability in their program receiving services through Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP). We asked who works with the children. Respondents gave multiple answers:

1) Early intervention or special education service providers directly work with children ($n = 9$, 8 center and 1 family providers)

2) Staff works with service providers to support children with a disability ($n = 9$ center)
   - “Service provider passes on information to the teachers on how to support child. They give pointers so that teachers can have a successful day.”
   - “I communicate directly with the speech therapist or other therapist (email or phone calls) to communicate. Teachers help complete checklists or forms.”
   - “Have team meetings as requested and every quarter with parents, other service providers and teachers at center.”

3) Providers/staff work with family to support children with a disability ($n = 8$, 5 center and 3 family)
   - “Talks to parent regularly to report how the child is doing and we exchange information.”
   - “Staff are encouraged to attend IEP meetings.”

**Leaving the Program**

Of the interview participants, 5 participants (19%) reported that they had experienced a situation where they had to ask a family to leave the program because of safety or health-related reasons:
“Safety is the most important thing for all children. If we cannot keep the child or other children safe, it is a conversation we need to have.”

“A boy was throwing chairs, biting children, kicking teachers and pulling hair.”

“The child required a urinary tract tube I couldn’t handle.”

“The family wanted us to feed the child French fries and chocolate every hour because he needed to gain calories. We felt that we couldn’t do this. We didn’t agree that it had the nutrition that the child needed. The family decided to leave.”

Resources

When the interview participants were asked where they might find resources for a situation where they might need to consider asking a family to leave their program because of a child’s disability, they mentioned that they would (a) contact early intervention or special education service providers, (b) use referral services, (c) reach out to a Judy Center, or (d) take online courses.

When we asked about community resources, 90% of the survey participants (n = 53) reported that they have information about community resources including referral resources for children with disabilities and special health care needs that is kept current and available to families and staff. Of the survey participants, 78% (n = 45) and 14% (n = 8) reported that it is “very important” or “important”, respectively, to have “community resource information” in order to promote quality care and education.

Availability of Individualized Practice Based on Children’s Needs

We asked interview participants about the method that programs use to provide individualized practice based on children’s needs. The participants described the following practices:

1) Accommodate for special needs (n = 12, 6 center and 6 family)
   - “If children have sensory/special needs, there are fidget toys for them and special seats for them to participate in circle time. Plan shorter times that they are expected to stick with anything in a large group.”
   - “We have had children with hearing impairment and we worked with them to put on hearing aids. We had a visually blind child and invested in nice big books. We make modifications in the classroom when we have to.”
   - “We had kids with autism so we rearranged entire center to make sure it works for them.”

2) Make plans to satisfy individual needs (n = 11, 7 family and 4 center)
   - “We create individual activities for each child with their own goals.”
   - “Teachers need to accommodate all learners in their rooms.”
   - “In the first month that the children are enrolled, we evaluate the children. Then, we tailor lesson plans for children’s needs.”

3) Small group planning (n = 4, 2 center and 2 family)
   - “Differential grouping so that everyone learns the same thing, but on their own level.”

4) Language support (n = 1 center)
   - “Have Spanish speaking teachers.”
Administrative Policies and Practices – Nutrition Policy

Of 26 interview participants, 21 participants (81%) reported that their program has a nutrition policy. They said that a nutrition policy is helpful because it ensures children get healthy foods, educates children on healthy eating habits, and shows parents that children eat healthy foods.

A total of 17 interview participants (65%) reported that they do not have any difficulties in creating or implementing a nutrition policy. However, three participants (12%) mentioned that it is sometimes hard to get specific foods (e.g., “Very few vendors have the correct label on their food to be part of Child and Adult Care Food Program (CACFP) to prove what is in the food.”; “Edamame is a favorite for the kids, but expensive. Thank god for CACFP. You do get some reimbursement and college does provide a budget for food as well.”). Two participants reported challenges with children’s eating habits (e.g., “Kids don’t like vegetables”), and three participants reported challenges with parents (“We are nut free, which parents don’t like.”; “Parents don’t always like it. Parents want to make allowances for children, but I don’t allow that unless it is doctor recommended”).

Expulsion and Suspension Practices

Among 26 interview participants, 9 (35%, 7 center and 2 family) reported that they have experienced a situation(2,8),(995,993) where they had to ask a family to leave their program because of concerns with their child's behavior. We asked them to describe the situation and any resources they had used in this situation. Most of them mentioned that the children had severe behavioral issues (e.g., “throwing chairs,” “biting others,” “screamed and ran constantly”) and educators tried to work with service providers and families. Some educators expressed frustration with families that “parents didn’t follow through.”

We also asked the educators whether they are aware of any resources that they might be able to use if they have a situation where they might need to consider asking a family to leave their program because of concerns with their child's behavior. Resources they identified were:

- Service providers (n = 4)
- Therapists or Mental Health Consultation (n = 4)
- Behavioral Specialist (n = 3)
- Kennedy Krieger (n = 3)
- Parent conferences/meetings (n = 3)
- Licensing Specialist (n = 2)
- Judy Center (n = 2)
- Unspecified state resources (n = 3)

When 58 survey participants were asked whether they have experienced a situation where they had to ask a family to leave their program because of concerns with their child’s disability, 36% of the participants (n = 21) reported that they have had to ask a family to leave, primarily due to children’s aggressive behavior.

Furthermore, we asked whether the participants are aware of the Maryland State Department of Education resource “Guidance for Preventing Suspension and Expulsion in Early Care and Education Programs.” Among 26 interview participants, 14 participants (54%) reported that they are aware of it. All of them said that although they have heard of it, they have not read it, except one participant who was
on the committee at MSDE to create it. Among 57 survey participants, 22 participants (39%) reported that they are aware of it.
Chapter 5

Perceptions of Maryland EXCELS Non-Participants
Chapter 5 Perceptions of Maryland EXCELS Non-Participants

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Chapter 5 Perceptions of Maryland EXCELS Non-Participants

Executive Summary
This chapter includes findings from interviews with 7 Maryland EXCELS non-participants (4 center and 3 family) as part of interviews with 60 Maryland early childhood and school-age educators. We asked questions about their overall perceptions of Maryland EXCELS.

- All Maryland EXCELS non-participants answered that they have heard about Maryland EXCELS. Three participants had previously participated in Maryland EXCELS.
- When the Maryland EXCELS non-participants were asked what they knew about Maryland EXCELS, they mentioned a rating system, credentialing, and subsidy. Two participants answered that Maryland EXCELS is about how to run their program.
- The respondents stated that they are not participating in Maryland EXCELS because (a) they prefer to keep uniqueness and individuality, (b) they do not have enough information to participate, and (c) Maryland EXCELS requires paperwork and time commitment.
- Four of seven Maryland EXCELS non-participants were interested in participating in Maryland EXCELS in the future because it helps (a) marketing, (b) professional growth, and (c) children and families.
- The participants suggested that Maryland EXCELS might motivate early childhood and school-age educators to participate in the program by (a) providing more information, and (b) offering bonuses.
- The participants perceived the primary benefits of participating in Maryland EXCELS are (a) quality monitoring and improvement, (b) getting training and information, (c) marketing, and (d) meeting families’ interest.
Summary of Participants

This chapter includes findings from interviews with 7 Maryland EXCELS non-participants (4 center and 3 family) as part of interviews with 60 Maryland early childhood and school-age educators. We asked questions about their overall perceptions of Maryland EXCELS.

Note: The quotes in this report were drawn from interviewer notes.

Familiarity with Maryland EXCELS

All Maryland EXCELS non-participants answered that they have heard about Maryland EXCELS. Three participants had previously participated in Maryland EXCELS (one teacher’s previous program participated, one director participated as a teacher in her previous program, and one family child care provider left Maryland EXCELS because their program documentation was not approved).

Non-Participants’ Knowledge of the Maryland EXCELS Program

We asked what the participants know about the Maryland EXCELS program. They answered the following:

- Awareness of the rating system (n = 2; 1 family and 1 center)
- “Credentialing” program or “a kind of credentialing higher level.” (n = 2 center)
- “How you run the program” and “Making sure that child care providers have knowledge of how to be productive around the children and their families, engaging them in lessons and activities, food nutrition and safety.” (n = 2 family)
- “Steering parents of low income families or people who qualify for POC (child care subsidy) to direct them to day care providers who go beyond the minimum requirements of their license.” (n = 1 family)

Reasons for Not Participating in Maryland EXCELS

We asked the participants why they do not participate in Maryland EXCELS. The participants responded the following:

- “We are individual businesses and they take that uniqueness and individuality away. Feels it is the family's business what they feed their children in my opinion.” (n = 2 family)
- “Not enough information and concerned about what rating they would be able to reach.” (n = 1 center)
- “There was a problem parent last October who stated she wanted to get vouchers, so I withheld from going forward with Maryland EXCELS because it was my way of ending the relationship with the parent. I understand it was not the best reason but it was easier to tell parent I couldn't accept vouchers.” (n = 1 family)
- Required paperwork and a lack of time (n = 1 center)
- No specific reasons stated (n = 2 center)
Interest in Participating in Maryland EXCELS

We asked whether the participants are interested in participating in Maryland EXCELS in the future. Four of the seven participants (57%) stated that they are interested in participating in Maryland EXCELS. They mentioned the following reasons:

1) Marketing ($n = 2$, 1 center and 1 family)
   - “Parents have asked about it.”
   - “Because I would rather have my child care shine and go above and beyond what normal day cares do.”

2) Professional growth benefits ($n = 1$ center)
   - “It will help me become a school teacher.”

3) For children and families ($n = 1$ family)
   - “I went into child care to help families. I want to accommodate whoever the lord sends my way. I get my license from the state of Maryland and I don’t understand why I’m not good enough to get paid for by the state of Maryland but I am good enough [to participate in Maryland EXCELS] for the general population [children and families].”

Suggestions for Motivating Educators to be in Maryland EXCELS

We asked educators how Maryland EXCELS might motivate educators to participate in the program. The participants made the following suggestions:

1) Provide more information ($n = 5$, 3 center and 2 family)
   - “It’s hard to get in contact with them and find out information.”
   - “The only actual information I have gotten was through a couple of minutes conversation at the Ocean City conference.”
   - “I know trainings are offered but some people are not familiar.”

2) Offer bonuses ($n = 1$ family)

Primary Benefits of Being Part of Maryland EXCELS

We asked what educators perceive as benefits of being part of Maryland EXCELS. The participants mentioned the following benefits:

1) Quality monitoring and improvement ($n = 2$, 1 center and 1 family)
   - “It’s good to have standards to adhere to when running a center and you have a goal you want to look up to.”
   - “Helps educate providers in certain areas they may not be familiar.”

2) Training and information ($n = 2$, 1 center and 1 family)

3) Advertisement and meeting families’ interest ($n = 1$ center)
   - “Families are looking for ‘credentials’ like Maryland EXCELS, and people are starting to ask about Maryland EXCELS.”

4) No perceived benefit ($n = 1$ family)
Overview

The Maryland EXCELS Research Team at Johns Hopkins University conducted the Early Childhood and School-Age Educator Perception Study in 2018 to understand the early childhood and school-age educator’s perceived impact and challenges of Maryland EXCELS, and to identify which aspects of Maryland EXCELS have the most influence on producing quality in child care practices. The Early Childhood and School-Age Educator Perception Study consisted of two phases: (a) Phase 1, a brief 5-minute online survey asking about early childhood and school-age educators’ perceptions of various Maryland EXCELS content areas, and (b) Phase 2, in-depth interviews and an online survey asking about early childhood and school-age educators’ perceptions of specific Maryland EXCELS criteria.

The Phase 1 study was conducted from June 14, 2018 to July 11, 2018. The online survey was distributed via the Maryland EXCELS e-newsletter and a total of 532 child care (58% center, 31% family, and 6% school-age only) and public PreK educators (4%) participated in the study. At the end of the survey, we asked the participants whether they are interested in participating in the Phase 2 Study, and 321 participants were identified as potential participants for the Phase 2 Study.

The stratified random sampling strategy was employed using a list of the 321 interested research participants from the Maryland EXCELS Early Childhood and School-Age Educator Perception Phase 1 Study. The participants were stratified using three criteria: county, program type, and Maryland EXCELS published quality rating. We randomly selected one participant from each cell created by the stratification process. From this sampling frame we contacted 95 early childhood and school-age educators and completed a total of 60 interviews. About 88% of the participants were center directors/owners/operators or family child care homes owners/operators, and 81% of the participants were the lead contact for Maryland EXCELS. The participants who were not randomly selected for an interview were asked to complete a 40-minute online survey.

The content of the Phase 2 interview and survey protocols was based on the results from the Phase 1 Study. The instruments delved into early childhood and school-age educators’ perceptions of Developmentally Appropriate Learning and Practice and of Administrative Policies and Practices, which were reported as the most effective content areas in promoting quality care and education. Additionally, the instruments explored the topic of Accreditation and Rating Scales, which was cited as a challenging content area for the educators.

Interview Participants Background Information

There were three sets of interview questions: (a) a child care provider set for center-based, family, or school-age ONLY program child care providers \((n = 52)\), (b) a set for public PreK educators \((n = 1)\), and (c) a set for Maryland EXCELS non-participants \((n = 7)\). Due to the length of the survey, the child care provider set was divided into two sets – each set was completed by 26 participants. The average interview duration was 35 minutes. Table 1 and Table 2 describe the characteristics of the interview participants.
Table 1. The number of interview participants by program type

<table>
<thead>
<tr>
<th></th>
<th>Center</th>
<th>Family</th>
<th>School-Age ONLY</th>
<th>Public PreK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maryland EXCELS Participants</td>
<td>26&lt;sup&gt;a&lt;/sup&gt;</td>
<td>24</td>
<td>2</td>
<td>1&lt;sup&gt;b&lt;/sup&gt;</td>
</tr>
<tr>
<td>Maryland EXCELS Non-participants</td>
<td>4</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>30 (50%)</td>
<td>27 (45%)</td>
<td>2 (3%)</td>
<td>1 (2%)</td>
</tr>
</tbody>
</table>

<sup>a</sup>One respondent closed her family child care and moved to a center that participates in Maryland EXCELS but she did not have Maryland EXCELS knowledge. This participant was counted as a center participant in this table, however, was dropped in the final analysis as she was not able to respond to many of the detailed questions regarding EXCELS content.

<sup>b</sup>Because there was only one Public PreK respondent, we did not include this data in the final analysis to protect confidentiality of participation.

Table 2. The number of participants by Maryland EXCELS published quality rating

<table>
<thead>
<tr>
<th>Maryland EXCELS Participants</th>
<th>Non-participants</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1 (13 (22%))</td>
<td>7 (12%)</td>
<td>59&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Level 2 (5 (8%))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 3 (17 (29%))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 4 (2 (3%))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 5 (15 (25%))</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup>One respondent closed her family child care and moved to a center that participates in Maryland EXCELS but she did not have Maryland EXCELS knowledge. This participant was dropped in the final analysis as she was not able to respond to many of the detailed questions regarding EXCELS content.

**Participant Role:**

Of 27 child care center and school-age ONLY program participants, 22 were directors (4 of them were also owners/operators), 1 participant was an assistant to education director, and 4 participants were staff/teachers (additionally, 4 of directors teach in the classrooms). All 24 participants from family child care homes were owners/operators. Of 7 Maryland EXCELS non-participants, all three family child care provider participants were owners/operators, two child care center participants were directors, and two were staff or teachers.

**Credential:**

Among 52 Maryland EXCELS participants, 48 participants currently hold a Maryland Child Care Credential (40 staff credential and 8 administrator credential). Four of seven non-participants currently hold a staff credential.

**Maryland EXCELS Lead Contact:**

Of 27 child care center and school-age ONLY participants, 19 participants were the lead contact for Maryland EXCELS. All 23 family child care home participants were the lead contact.

**Maryland EXCELS Published Quality Rating:**

Two participants reported different published quality ratings from the Maryland EXCELS record. When asked, they mentioned that they recently submitted paperwork for a higher quality rating but they were not clear whether it had been approved.
Survey Participants Background Information

As described above, after we interviewed 60 participants from a stratified sample, the rest of the self-nominated educators were asked to complete a 40-minute online survey. A total of 129 educators completed the survey. Due to the length of the survey, we divided the survey questions into two sets with some questions common in both surveys and other topics covered only in one of the instruments. Participants were randomly assigned to one of the sets. The first set was distributed to 116 educators and we received responses from 66 participants (57% response rate); the second set was distributed to 112 educators and we received responses from 63 participants (56% response rate). Table 3 summarizes the characteristics of participants for both survey sets. There were no significant differences in educator characteristics between the respondents to the first and second set of surveys except that survey 1 had more owners/directors of the programs and survey 2 had more staff/teachers.

Table 3. Survey participants’ characteristics

<table>
<thead>
<tr>
<th></th>
<th>Survey 1 (n = 66)</th>
<th>Survey 2 (n = 63)</th>
<th>Total (n = 129)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maryland EXCELS Lead Contact</td>
<td>52 (78%)</td>
<td>45 (71%)</td>
<td>92 (75%)</td>
</tr>
<tr>
<td>Familiar with Maryland EXCELS</td>
<td>63 (95%)</td>
<td>58 (92%)</td>
<td>121 (94%)</td>
</tr>
<tr>
<td>process and standards</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rating level 1</td>
<td>19 (29%)</td>
<td>14 (22%)</td>
<td>33 (26%)</td>
</tr>
<tr>
<td>Rating level 2</td>
<td>10 (15%)</td>
<td>11 (17%)</td>
<td>21 (16%)</td>
</tr>
<tr>
<td>Rating level 3</td>
<td>14 (21%)</td>
<td>15 (24%)</td>
<td>29 (22%)</td>
</tr>
<tr>
<td>Rating level 4</td>
<td>5 (8%)</td>
<td>5 (8%)</td>
<td>10 (8%)</td>
</tr>
<tr>
<td>Rating level 5</td>
<td>13 (20%)</td>
<td>9 (14%)</td>
<td>22 (17%)</td>
</tr>
<tr>
<td>Type – Child Care Center</td>
<td>40 (62%)</td>
<td>37 (60%)</td>
<td>77 (60%)</td>
</tr>
<tr>
<td>Owner/Operator or Director</td>
<td>29</td>
<td>22</td>
<td>51</td>
</tr>
<tr>
<td>Staff or Teacher</td>
<td>14</td>
<td>21</td>
<td>35</td>
</tr>
<tr>
<td>Type – Family Child Care Home</td>
<td>21 (32%)</td>
<td>19 (31%)</td>
<td>40 (31%)</td>
</tr>
<tr>
<td>(all owner/operator)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type – School-Age Only</td>
<td>4 (6%)</td>
<td>6 (10%)</td>
<td>10 (8%)</td>
</tr>
</tbody>
</table>
Research to Action
Executive Summary Research to Action
Voices from the Field:
Perceptions of Maryland Early Childhood and School-Age Educators

The Maryland EXCELS research team identified the following ‘research to action’ recommendations using the relevant findings from the Early Childhood and School-Age Educators Perception Study.

Recommendation 1: Increase Tailored Outreach for Maryland EXCELS

- Publicize the findings from this research study to support Maryland EXCELS caregivers and better attract non-participants.
- Clarify and advertise various types of incentives for participation in Maryland EXCELS.
- Tailor assistance based on type of early childhood and school-age educators.

Relevant Findings in Chapters 1 and 5: The primary benefits of participating in Maryland EXCELS were (a) recognitions by parents and benefits of marketing, (b) intrinsic motivation (e.g., be more professional), (c) quality improvement, and (d) monetary incentives (e.g., additional subsidies). Non-participants suggested that Maryland EXCELS might motivate child care providers to participate in the program by (a) providing more information to both families and providers about Maryland EXCELS, and (b) offering bonuses (note: bonuses had not resumed yet at the time of this research). A significantly greater proportion of family child care providers over child care center providers reported monetary incentives as a reason for motivation to participate in Maryland EXCELS. Center child care providers reported greater challenges than family child care providers in Staff Qualifications and Professional Development.

Recommendation 2: Increase Support for Maryland EXCELS Participants

- Offer additional support and professional development for centers and family providers.
- Explore peer-to-peer mentoring, particularly for family child care providers.
- Explore the pros and cons of developing a platform where credentialed staff and directors seeking credentialed staff can connect with one another.
- Increase awareness of resources such as the Child Care Quality Incentive Grant Program and other opportunities by which programs and providers may be able to improve the quality of their programs.
- Look for efficiencies or reductions within the Maryland EXCELS standards.

Relevant Findings in Chapter 1: The most common reasons for not increasing Maryland EXCELS quality rating levels were (a) difficulties in meeting the staff qualifications and professional development content area, and (b) having external counterforces, such as lack of money and time.
Recommendation 3: Provide Support for Effective Use of Rating Scales

- Provide increased training and technical assistance to Maryland EXCELS early childhood and school-age educators in self-assessment through use of rating scales.

Relevant Findings in Chapter 2: More than a half of the interview and survey participants reported that they use rating scales. The participants described that applying rating scales are helpful and important because it guides self-assessment and program improvement (e.g., identifying strengths and weaknesses). A quarter of the interview and survey participants perceived applying rating scales to be challenging. They described that (a) it is difficult to train staff, (b) it is challenging to understand the criteria in rating scales, (c) some programs have space constraints to effectively implement rating scales, and (d) it can be time-consuming.

Recommendation 4: Address Barriers Relevant to Subsidies

- Address issues that discourage acceptance of Child Care Subsidy payments by providing assistance or resources to educate early childhood and school-age educators.
- Reconsider a campaign that makes a connection between Child Care Subsidy and the importance of quality child care.
- Further explore perceived challenges reported by providers.

Relevant Findings in Chapter 2: Among 26 interview participants, 22 participants responded that they accept Child Care Subsidy payments. A total of 8 participants said that they had positive experiences with Child Care Subsidy payments because they benefit families and children. However, 18 providers described negative experiences with Child Care Subsidy due to issues with the payment process system or difficulties with families who do not follow Child Care Subsidy requirements.

Recommendation 5: Increase Awareness of MSDE Resources

- Employ additional approaches to publicizing and disseminating MSDE resources, such as Maryland EXCELS Toolkit, Family Engagement Toolkit, and Guidance for Preventing Suspension and Expulsion in Early Care and Education Programs. Participants were aware of the resources but they were not actively using them.
- Provide training and guidance to Maryland EXCELS Support Staff to encourage the use of these resources in the training, Technical Assistance and support they provide to programs to increase the providers’ active use of these tools.

Relevant Findings in Chapter 4: A total of 16 interview participants (62%) and 26 survey participants (45%) were familiar with Maryland’s Family Engagement Toolkit. Among them, 3 interview participants and 6 survey participants have used it and found it useful. In addition, 12 interview participants (46%) and 23 survey participants (40%) have heard about the new Family Engagement website via different channels (e.g., newsletter, MSDE meetings, OCC meeting, etc.) However, most of them have not visited the website. Although 54% of the interview and 39% of the survey participants were aware of the Maryland State Department of Education resource “Guidance for Preventing Suspension and Expulsion in Early Care and Education Programs,” most of them said that they have not read it.
Recommendation 6: Revisit required documentation of criteria based on providers’ responses and consider alternative evidence (e.g., photos, on-site observations, drop-down menu)

Relevant Findings in Chapter 3: Although 98% of providers report that the selection of learning materials is important or very important, 62% report that documenting the selection of learning materials in a written statement is important or very important.

Key Recommendations for Dissemination:

- Use findings and quotes from the Early Childhood and School-Age Educators Perception Study interviews and surveys as marketing strategies (e.g., newsletter, provider-led podcast or webinar, communication tools).
- Disseminate findings to Program Coordinators, Quality Assurance Specialists, or Technical Assistants to help them understand the voices from the field and target areas that early childhood and school-age educators experience barriers.