



# SIXPENCE

## 2013-2014 Evaluation Report

September 2014



Interdisciplinary Center For Program Evaluation

Collaborate

Evaluate

Improve

Sixpence



# PROGRAM DESCRIPTION

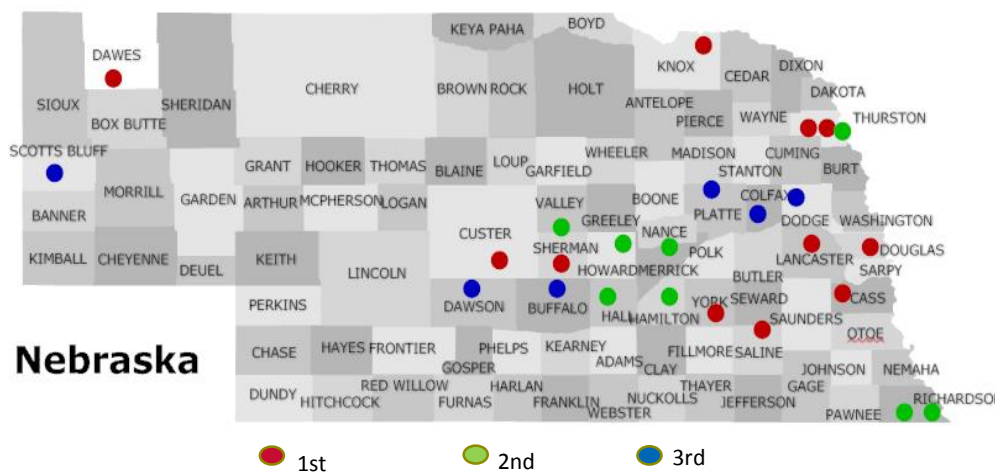
## What is Sixpence?

The Sixpence Early Learning Fund is a public-private partnership that is used primarily for grants to school districts to provide programs and services for infants and toddlers who are most at risk of school failure. The purpose of the Sixpence Programs is to help promote children's opportunities to experience positive environments that provide for their healthy growth and development during their earliest years. The Sixpence Programs promote community level partnerships that focus on meeting the developmental needs of very young children and support parents as their child's first and most important teacher, helping to ensure their child's success in school and later in life.

## Who are the Sixpence programs?

In the 2013-2014 program year, the Sixpence Early Learning Fund increased the number of programs it supported, growing from 11 to 25. Programs were funded through a combination of sources including Sixpence, federal, and local funds. This was Sixpence's sixth year of serving young children across the state.

Each Sixpence program adopted one of three models: family engagement services, center-based infant/toddler care, or a combination of the two. Family engagement services included weekly individualized sessions in the family's home. For some families, the individualized services were provided in a community location. Many of the family engagement services also included group socializations, which were opportunities for children and families to gather together in learning activities. The majority of the center-based programs provided full-day services. All of the center-based programs used strategies to engage parents in their child's education program and conducted home-visits with the family. Programs were provided in rural and urban communities with the majority of the children (59%) being served in rural communities.



**Programs implemented one of the following models:**

- ▶ Center-based care (6).
- ▶ Family engagement services (17).
- ▶ Family engagement and center-based care (2).

**25 programs were funded across 25 school districts in 22 counties.<sup>1</sup>**

<sup>1</sup> (Cohort 1 funded Summer 2007, Cohort 2 funded Summer 2013 and Cohort 3 funded January 2014)

# CHILD AND FAMILY DEMOGRAPHICS

## Who were the children and families served?

In 2013-2014, Sixpence served 590 children (73% increase over previous year) and 531 families across 17 programs. Of the mothers participating in Sixpence this year, 20% (106) were pregnant at the time of enrollment.

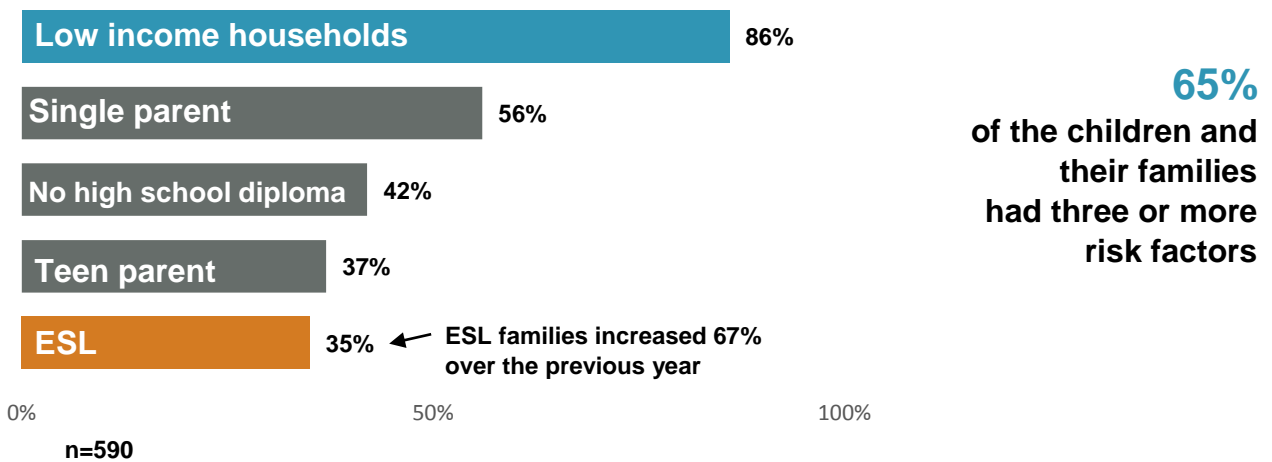
Sixpence added eight new programs mid-year. The demographic and outcome data for these newest programs (including one additional program that was funded in Fall 2014) will not be included in this evaluation report as they were still enrolling new families at the end of the program year.

Sixpence Programs serve infants and toddlers (birth to age three) who are most at risk of failure in school. The children served must have at least one of the five qualifying risk factors. The rate of Sixpence families having each risk factor is listed below:

- ▶ Low income households, as defined by Federal guidelines for free or reduced lunch (86%)
- ▶ Born prematurely or at low birth-weight (9%)
- ▶ English is not the primary language spoken in the home (ESL, English as a Second Language) (35%)
- ▶ Parents who are younger than 20 (37%)
- ▶ Parents who have not completed high school (42%)

Parents who fall into one of the risk categories can also be served during the mother's prenatal period. Seven additional risk factors were tracked: single parents, incarcerated parents, parent absence due to death or military deployment, foster care or CPS involvement, child witnessing violence in home or community, and family mental health issues.

### Low income households is the leading risk factor facing



## Trauma plays a role in the lives of 43% of the children in Sixpence

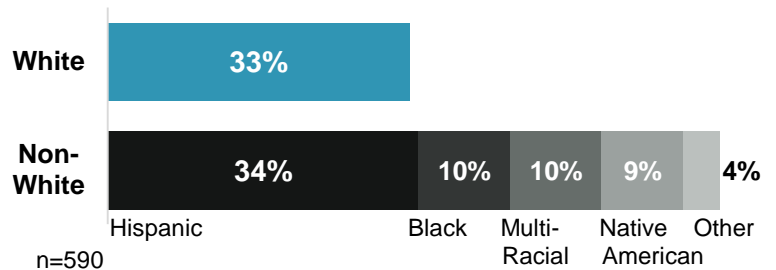
Additional risk factor data was collected on 430 families in the spring of 2014.

- ▶ 31% had parents with mental health problems including drug or alcohol abuse
- ▶ 18% experienced parent absence during the program year due to death or military deployment
- ▶ 12% had an incarcerated parent
- ▶ 10% had witnessed violence
- ▶ 5% were living in foster care or had a CPS referral

### Child Demographics:

There were slightly more males (52%) than females (48%). A total of 8% of the children were enrolled in the early development network. The majority of the children (79%) were under the age of one at the time of intake.

### Most of the children served were minorities.



### Parent Education:

Slightly less than half of the mothers (42%) did not have a high school degree or GED at intake. In the spring, program staff received updates on the educational status of 217 of these mothers. By June, 45% had earned their diploma or GED and 32% were still enrolled in high school or working towards a GED. Only 23% were no longer pursuing any education. Results indicate that many Sixpence mothers were working on their goal to obtain an education.

A smaller number of fathers, 29% did not have a high school degree. By June, 42% of these fathers had attained their diploma or GED or were still pursuing their education (11%). Nearly half, 47%, were no longer pursuing any education.

## What was the retention rate of families in the program?

This year, Sixpence retained 84% of the enrolled children, meaning they stayed in the program through June 30, 2014.

During the course of the year, 96 children (16%) left the program prematurely. The most common reasons were family issues that made it difficult to participate (37%), poor attendance (27%), and a family move (24%). This year, 20 children aged out of the program as they turned 3 and transitioned to other programs such as Head Start or preschool. More children stayed in the program for over a year if they were served in a center-based rather than a family engagement program.

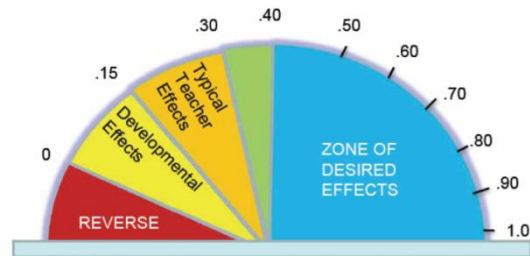
**80%**  
of the children who  
exited prematurely left  
in the first year of  
services

# EVALUATION FINDINGS

A comprehensive evaluation process was conducted to monitor the implementation of the Sixpence Programs and progress towards identified program outcomes. Information was collected and reported uniformly across programs. A continuous improvement process was incorporated as part of the evaluation. The following is a summary of the evaluation results for the sixth year of Sixpence.

## Program Impacts

To quantify program impacts, we will report all pre and post measures relative to significance (were the results statistically significant) and if so, what was the magnitude of the change (effect size). To understand effect size and to place it in context, Cohen (1988) suggests the values of  $d=0.20$  to be small,  $d=0.50$  to be medium, and  $d=.80$  to be a large effect. More recently, Hattie (2009) uses a concept called “zone of desired effects” that starts at a medium effect size, 0.40. Effect sizes can be greater than 1.0; however, they are less common and are therefore not shown on the graphic. Effect sizes tend to be smaller with very young children, so some recommend that the zone of desired effects to begin at around .20. With younger students (infant through kindergarten), lower value effect sizes are recommended because the range of measurement error is larger with very young children (Burchinal, 2008). For this report, a value of 0.20 will be considered in the zone of desired results since we are assessing young children.



Zone of Desired Effects (Hattie 2009)

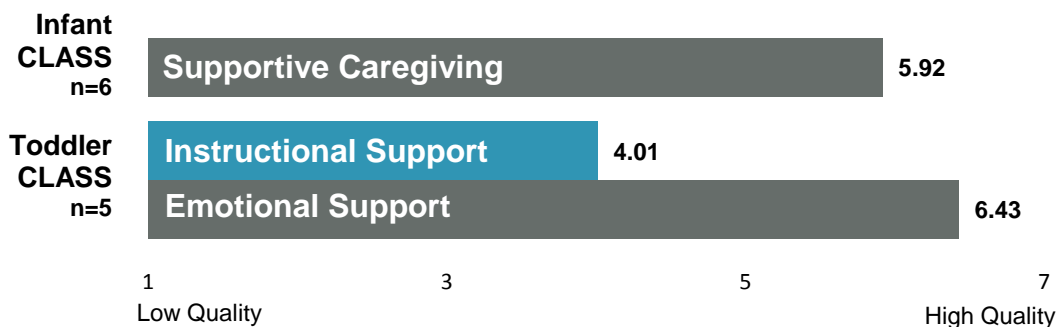


## What was the quality of center-based services?

A total of 20 Sixpence classrooms were evaluated using either the Infant/Toddler Environmental Rating Scale (ITERS) or the Toddler or Infant Classroom Assessment Scoring System (CLASS). The CLASS observation tool was used for experienced teachers who had already met the Sixpence quality benchmarks on the ITERS in the prior year. The CLASS is based on a two-hour video of classroom activities. The Infant and Toddler CLASS both rate teacher-child relationships and social-emotional supports. The Toddler CLASS has an additional scale, Instructional Support, to measure how teachers engage the children in discovery, promote critical thinking, and provide rich language experiences. The scoring uses a seven point scale with 7 indicating highest quality. The CLASS results for 11 classrooms are presented below.

### Sixpence center-based teachers consistently created emotionally supportive and caring classrooms.

*Instructional support was of moderate quality.*

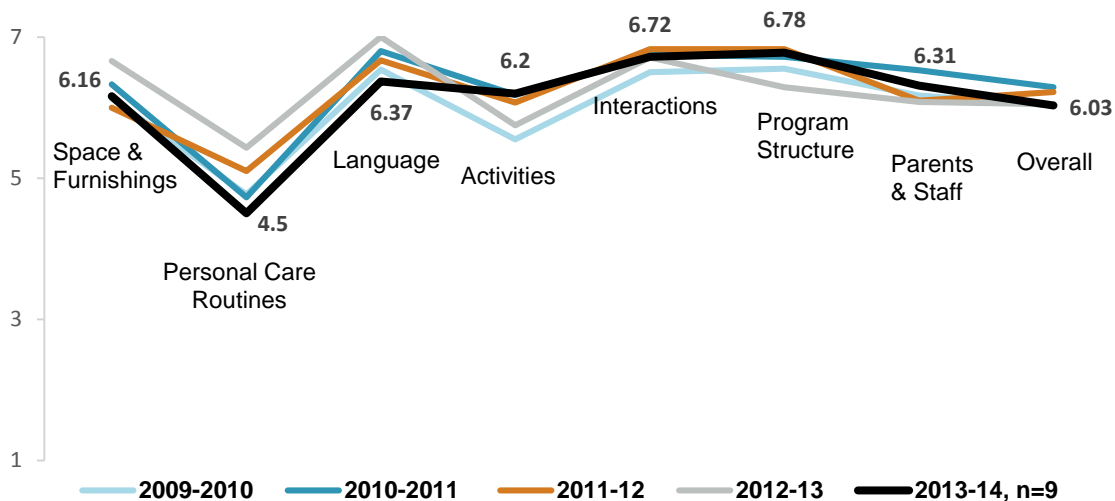


Sixpence classrooms demonstrated high quality in the area of teacher-child relationships and social-emotional support. The teachers were consistently warm, responsive, flexible, and supportive of positive behavior. They showed a high regard for child perspectives and promoted child independence. Sixpence classrooms created an environment of mutual respect between teachers and children and in peer to peer interactions. In the area of Instructional Support, average scores were in the mid-range. Mid-range scores indicate that teachers were not utilizing top tier strategies or they were not consistent in using best strategies. For example, at times teachers facilitated development by ensuring active engagement, by providing assistance to help children gain new understanding, and by connecting familiar words to new vocabulary. At other times, teachers were less likely to use these strategies.

The ITERS was used in programs that were new to Sixpence, in classrooms with a new teacher or a new setting, or in classrooms that had not met the quality indicators in the previous year. The ITERS is based on a three-hour in-person observation. The scoring uses a seven point scale with 7 indicating highest quality. The chart below shows Sixpence ITERS results over the past five years. In 2013-14, ITERS results for nine classrooms were analyzed.

**Sixpence classrooms met the quality benchmarks in 2013-2014.**

*Environmental ratings (ITERS) continued to follow the same trajectory as in previous years.*



All of the classrooms met the overall rating for quality in the 2013-14 program year based on the ITERS. A majority (66%) met the quality criteria across all seven subscales. The highest scores were in the area of Program Structure and Interactions. This past year, Sixpence classrooms set the highest score in five years in the area of Activities, indicating that classrooms consistently provided high quality materials and play activities.

**In 2013-14,  
scores increased  
in Activities,  
Program Structure, and  
Parents & Staff  
over the previous year**

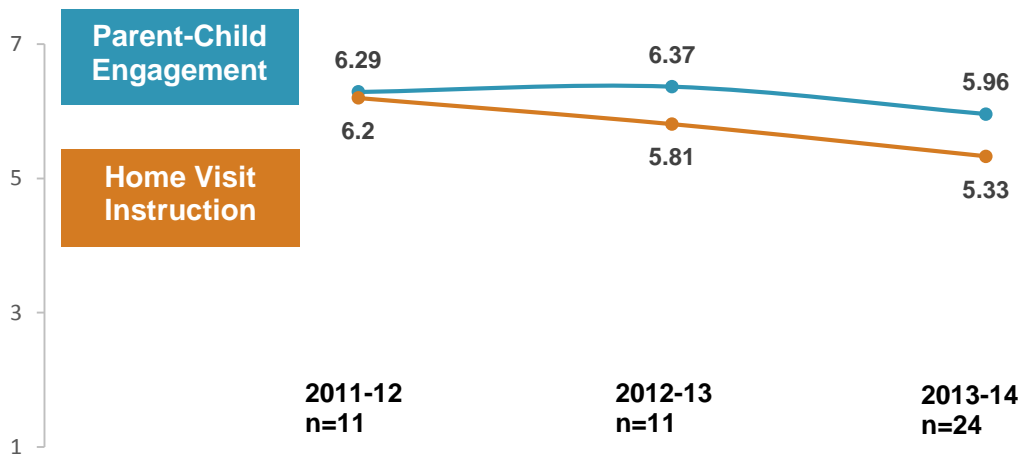


## What was the quality of family engagement services?

The *Home Visit Rating Scales-A* (HoVRS-A) assesses the quality of family engagement sessions from a video of a home visit. It is scored on a 7 point scale, with 7 indicating highest quality. The chart below shows HoVRS-A results over the past three years. In 2013-14, 24 home visitors were assessed.

### Home visitor practices have been consistently high quality over the past three years.

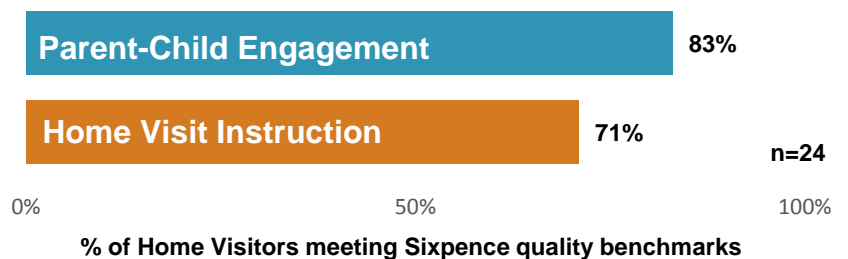
*Parent-child engagement skills were stronger than home visit instruction skills.*



The results of the HoVRS-A indicated that many home visitors utilized best practices during their sessions. The home visitors showed the greatest strengths in the area of *Parent-Child Engagement*, by supporting high parent and child involvement throughout the session. *Home Visit Instruction* measures the way the home visitor facilitates parent-child interaction, builds relationships with the family, and uses non-intrusive approaches. Across three years of home visitor ratings, *Parent-Child Engagement* scores have been consistently higher than *Home Visit Instruction* scores. However, average scores on both scales exceeded the quality benchmark of 5.0.

Scores were slightly lower than in the previous program year but the majority of home visitors met the Sixpence program goals. The number of home visitors more than doubled in 2013-14, which meant that the majority (58%) were new to the program. An analysis of the HoVRS scores that controlled for new staff found that average scores were nearly the same as the previous year.

### The majority of home visitors consistently used best practices with families.

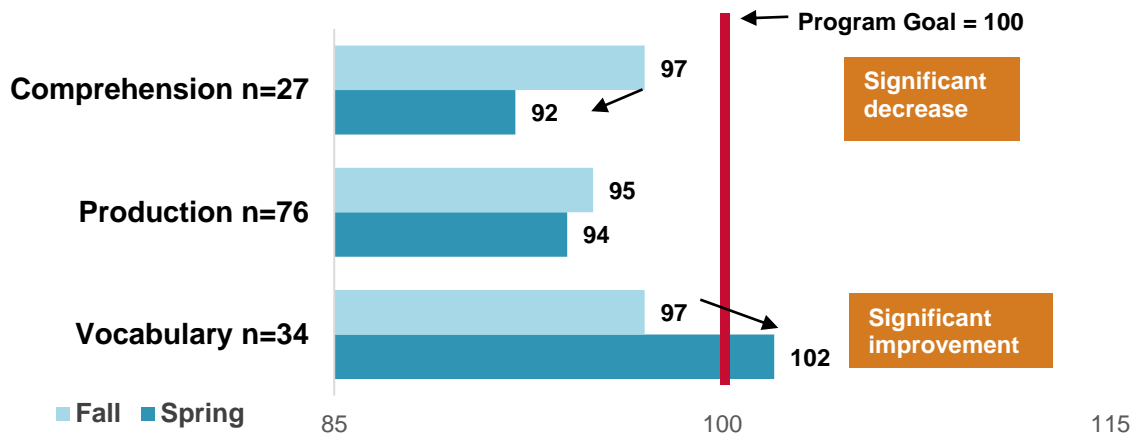


## What were the children’s language outcomes?

Two standardized assessments were administered to monitor the children’s language outcomes. The McArthur-Bates CDI, a parent report assessment measuring language production and comprehension, is given to children ages 8 to 30 months. The Peabody Picture Vocabulary Test–IV (PPVT-IV), a direct child assessment measuring vocabulary, is given to children ages 30 months and older. A total of 110 children had fall and spring language assessments. Sixpence has established a high standard for a program goal, which is a standard score of 100, the mid-point within the average range.

### Sixpence had varied impacts on children's language skills.

*Children made significant increases in vocabulary skills.*



Children made varied progress across language skills. Vocabulary skills increased, comprehension skills decreased and production skills showed no meaningful change. Overall, ELL status influenced the results with ELL children demonstrating significant decreases in comprehension skills. Those differences were not evident with their English speaking peers. On average, children scored in the typical range in fall and spring, but fell below the program goal, except in the area of vocabulary in the spring.

**Only ELL children’s comprehension scores significantly decreased in the spring.**

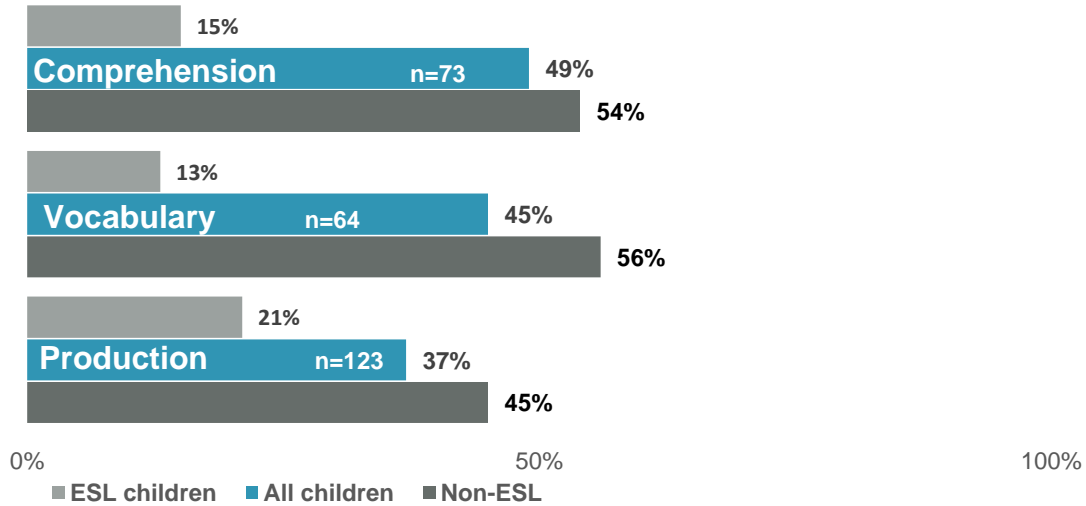
Paired samples analyses were completed to measure change in standard scores from fall to spring across measures.

**Vocabulary:** Results indicate that toddlers made significant improvements in vocabulary from fall (M=97; SD=15.79) to spring (M=102; SD=17.09),  $p=.012$ ,  $d=.45$ . These results represent meaningful differences with an effect size in the zone of desired effects.

**Comprehension and Production:** Results indicate that the infants’ comprehension skills decreased significantly from fall (M=97; SD=28.91) to spring (M=92; SD=27.61),  $p=.028$ ,  $d=.45$ . These results represent meaningful differences. There were no significant differences over time with respect to children’s production skills.

**By spring, more than a third of the children met the program language goals.**

*Children who were ESL had significantly lower skills across all language measures.*



**% of Children meeting Sixpence Language Goals**

Comprehension was the strongest language skill with nearly half of the children meeting the goal. English speakers out-performed their ESL peers across all language areas. These differences between groups were significant.

**Comparisons: ESL vs English Speakers.**

A one-way between subjects ANOVA was conducted to assess the impact of ESL status on language outcomes. Children who were ESL scored significantly lower in comprehension [ $F=10.065, p=.026$ ], production [ $F=6.394, p=.013$ ], and vocabulary [ $F=8.910, p=.004$ ], than children who were native English speakers. Post hoc comparisons indicated that the mean score for children who were ESL scored lower on comprehension ( $M=28$ ) compared to English speakers ( $M=49$ ); ESL production ( $M=27$ ) compared to English speakers ( $M=42$ ); and ESL vocabulary ( $M=88$ ) compared to English speaking children ( $M=101$ ).

**Comparisons: Low and High Risk Groups**

A one-way between subjects ANOVA was conducted to assess the impact of risk factors on vocabulary outcomes. Children with three or more risk factors scored significantly lower on vocabulary than children with fewer family risks [ $F=4.506, p=.038$ ]. Post hoc comparisons indicated that the mean score for children who were associated with higher risk (3 or more risk factors) scored lower on vocabulary ( $M=95$ ) compared to low risk children ( $M=104$ ). There were no significant differences between the groups in production or comprehension.

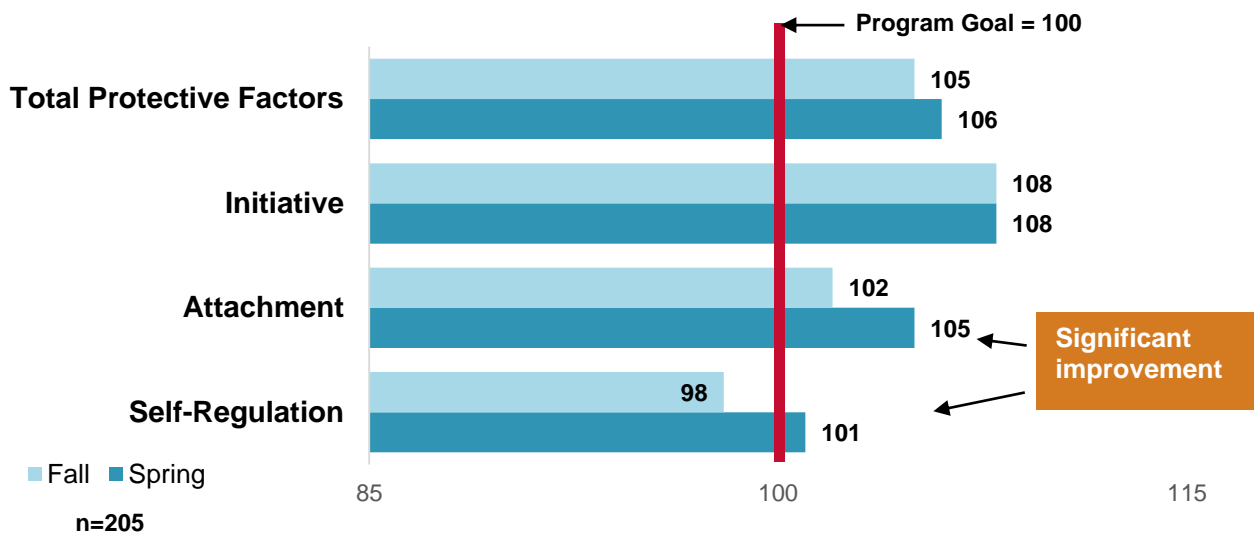
**High risk children  
scored significantly  
lower in the area of  
vocabulary**

## What were the social-emotional outcomes of the children?

In the fall and spring, parents or classroom teachers completed the Devereux Early Childhood Assessment (DECA), a standardized social-emotional assessment that measures children protective factors in the areas of Initiative, Attachment, and Self-Regulation. A total of 205 children had fall and spring assessments.

### Sixpence children were on target for social-emotional competencies.

*Participation in Sixpence resulted in significant improvements in attachment and self-regulation.*



Participation in Sixpence resulted in significant improvements in Attachment and Self-Regulation. On average, Sixpence children scored above the national mean for social-emotional competencies.

Paired samples analyses were completed to measure change in standard scores over time. Children made significant improvements in attachment from fall ( $M=102$ ;  $SD=10.22$ ) to spring ( $M=105$ ;  $SD=8.60$ ),  $p=.025$ ,  $d=.16$ . Significant improvements were also seen in Self-Regulation from fall ( $M=98$ ;  $SD=9.38$ ) to spring ( $M=101$ ;  $SD=8.33$ ),  $p=.018$ ,  $d=.24$ . These results represent a small effect size that falls within the zone of desired results.

A one-way between subjects ANOVA was conducted to compare the social-emotional outcomes of the ESL children to their non-ESL peers. The results found that ESL status did not result in significant differences on children's social-emotional competencies.

By spring  
**70%**  
of the children  
met the program goal  
for social-emotional  
competencies

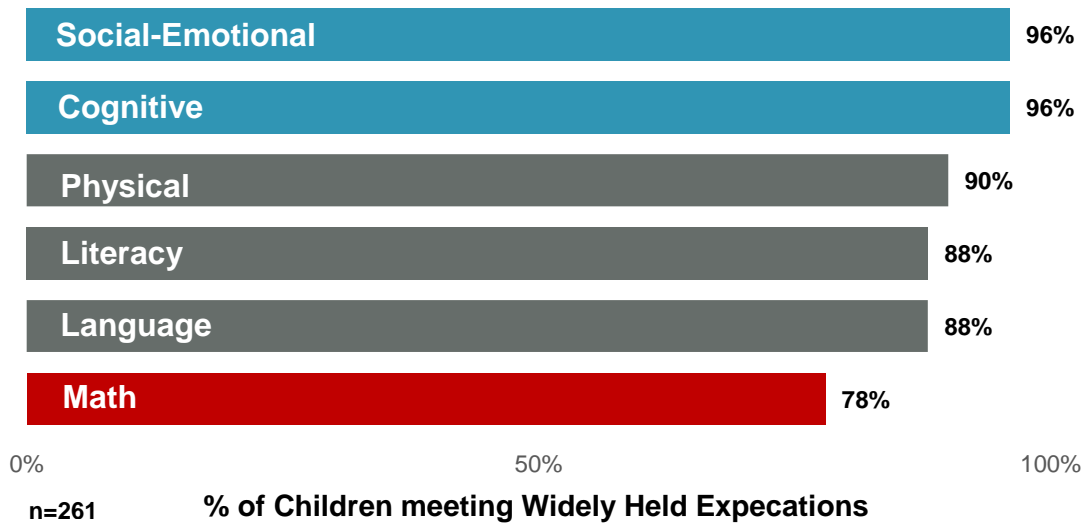
## What were the developmental outcomes for the children?

Teaching Strategies (TS) GOLD, an authentic developmental assessment, was adopted by the Nebraska Department of Education to assess all children receiving services in school district funded programs. The child outcome areas in this assessment include: cognitive, language, fine motor, social-emotional, literacy, and math. TS GOLD established widely held expectations for each age group. These expectations include the skills that children at a given age group would obtain based on research in the field. Assessments were completed on an ongoing basis. For this report, spring checkpoint data were analyzed to monitor children's progress towards achieving widely-held expectations as well as monitoring growth across these outcome areas. Data for this report was collected for all children (i.e., typically developing and those with IEPs and IFSPs). A total of 261 children had assessment data collected in the spring.

**90% of the children were gaining skills at the expected growth rate**

**By spring, high percentages of children were meeting widely held expectations across developmental domains.**

*Lower percentages of children were meeting expectations in math.*



The majority of the children were meeting widely-held expectations across all developmental areas. Strengths were in the areas of social-emotional and physical development with fewer children achieving expectations in math. Across the year, children were progressing as expected based on the growth expectations of the TS GOLD assessment.

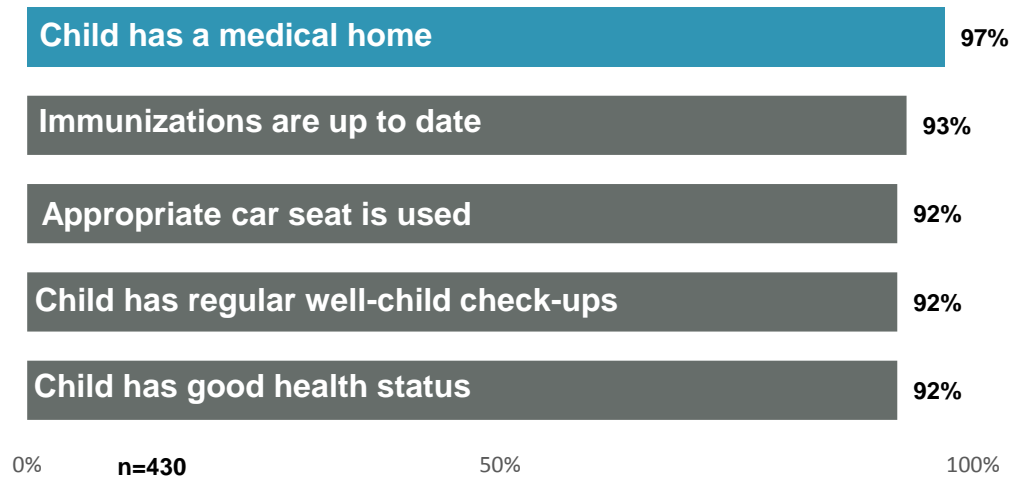
## What were the health outcomes of the children?

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In the spring, health and risk factor updates were collected for 430 families.

### Nearly all of the children met every Sixpence health indicator.

*Sixpence immunization rates were 20 points above the state average of 73%.*



Results indicate that in every category Sixpence families were making healthful choices for their children. Nearly every family had a consistent medical provider who they saw for regular check-ups and immunizations, as opposed to using the emergency room for routine health needs. While most of the children were in good health, 8% had a chronic medical condition such as asthma.



### Views from a Sixpence Family Educator

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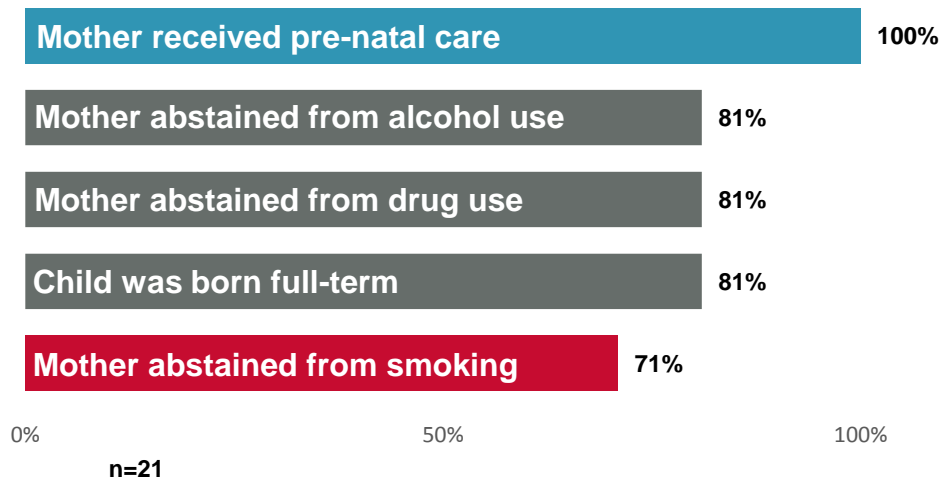
**“As a family engagement coordinator, I help teen parents find resources in the community that can help them further their education and gain experience to become successful adults and parents. We always remind our parents that they are the main teachers in their child’s life!**

**Coming from a Spanish-speaking family and being a single parent, I can relate to many of the families I work with... My parents and family have always been my support system. Unfortunately many of the families that I work with don’t have that support which is why I feel it is so important for our teen parents to have a steady support network.”**

## What were the health outcomes for the pregnant mothers and newborn babies?

Sixpence served 106 pregnant mothers in the 2013-2014 program. A spring health survey was collected for 21 of these mothers.

**All of the pregnant mothers received consistent prenatal care.**  
*Twenty to 30% of the mothers engaged in risky behavior while pregnant.*



Results indicate that Sixpence mothers engaged in a number of healthy practices to promote the health of their infant, including consistent prenatal care and breast feeding their infants. Most of the babies were born full-term with healthy birth weights. Most of the mothers abstained from risky behaviors while pregnant. Smoking is a problem for approximately a third of the mothers.

**86%**  
of the mothers initiated  
breast feeding

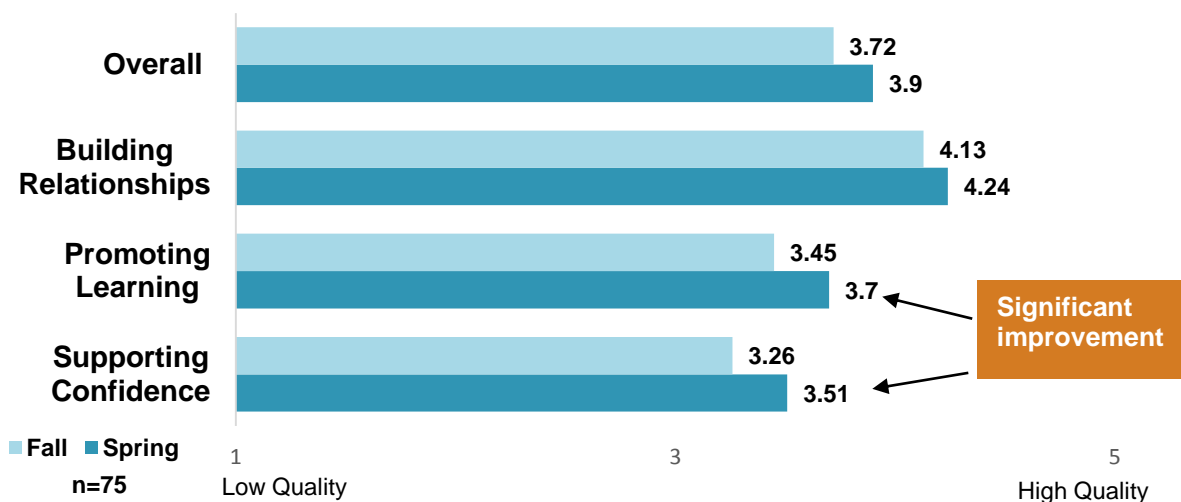
**43%**  
continued to  
breast feed for  
4 months or longer

## How did Sixpence impact parenting practices?

The Keys to Interactive Parenting Scale (KIPS) measures parenting behaviors across three areas: Building Relationships, Promoting Learning, and Supporting Confidence, based on a videotape of a parent playing with his or her child. Scores are based on a five point scale with 5 being high quality. A total of 75 families had fall-spring KIPS.

### Sixpence made a difference in improving parent-child interactions.

*Families made significant improvement in the areas of Promoting Learning and Supporting Confidence.*



Sixpence families demonstrated strong skills in building relationships with their children. On average, they met the program goal (a score of 4.1) in this area. They demonstrated more moderate skills in the other subscales but also showed meaningful improvements which indicated that Sixpence is making a positive difference in parenting skills. Results found that additional factors influenced parent-child interaction including the risk status of the family and time in program.

### Change Over Time

Paired samples analyses were completed to measure change over time. Families made significant improvements in Promoting Learning from fall (M=3.45; SD=.84) to spring (M=3.70; SD=.86),  $p=.023$ ,  $d=.27$ . Significant improvements were also seen in Supporting Confidence from fall (M=3.26; SD=.78) to spring (M=3.51; SD=.89),  $p=.029$ ,  $d=.26$ . These results represent meaningful differences that were within the zone of desired effects. There were no significant differences in the area of Building Relationships.

**By spring,  
68%  
of parents  
met the program  
goal in  
Building Relationships  
with their child**



**Parents with three or more risk factors had significantly lower parent-child interaction scores.**

**Comparison: Low and High Risk**

A one-way between subjects ANOVA was conducted to assess the impact of risk factors on KIPS scores. Parents with three or more risk factors scored significantly lower overall than parents with fewer risk factors [F=4.476, p=.036]. Post hoc comparisons indicated that the mean score for children who were associated with high risk factors (M=3.6; SD=.76) was significantly lower compared to low risk children (M=3.9, SD=.82). These results suggest that the parent-child interaction is impacted by the risk status of the family.

**Parents served for more than a year had significantly higher interaction scores.**

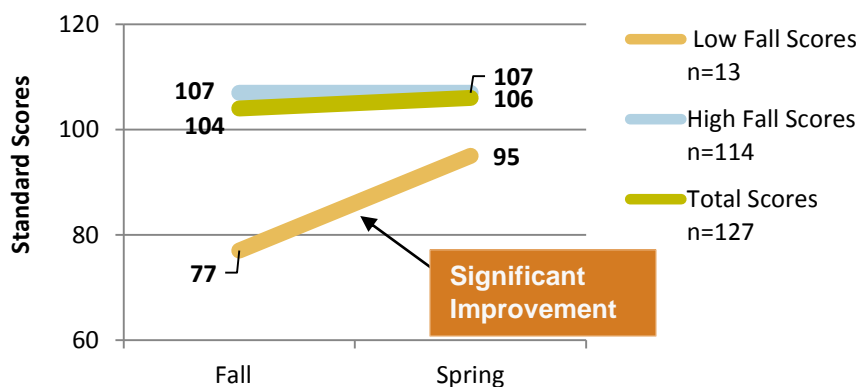
**Comparison: One Year or More of Service**

A one-way between subjects ANOVA was conducted to assess the impact of time in program on KIPS scores. Parents with one or more year in Sixpence scored significantly higher overall than parents with less than one year [F=3.817, p=.05]. Post hoc comparisons indicated that the mean score for parents with less than a year of service (M=3.7) was significantly lower than those with more than a year of service (M=3.9). These results suggest that retention in the program has a positive impact on parent-child interaction.

The HOME-SF is a standardized assessment of the home environment and maternal-child interaction. A total of 127 parents completed the Home Inventory both in the fall and the spring.

**Parents who scored below average in the fall made significant gains in providing supportive and learning home environments.**

A paired samples test was completed to determine if the home environment changed over time. The results show that there was minimal change from fall to spring. However, over all averages indicate that Sixpence home environments were above the national norm (fall M=104, spring M=106). A subgroup analysis (paired samples test) of families who scored in the low average area or



below in the fall (M=77; SD=11.7) found that these families achieved significant positive gains by spring (M=95; SD=15.2) p<.001, d=1.44. These results represent a large effect size that falls within the zone of desired results.

## CONCLUSIONS AND IMPLICATIONS

**Program Description:** Sixpence programs whose purpose is to help young children at risk for school failure experience positive environments is completing its 6<sup>th</sup> year of implementation. This year this statewide program expanded from 11 to 25 programs which are located in 22 counties. The majority of the programs have adopted a family engagement model (17), with others serving children in center-based programs (6) or a combination of both (2). A total of 590 children and 531 families were served across 17 programs. The demographic and outcome data is not included on the newest programs that began in January 2014 as they were still in the enrollment phase of implementation. Sixpence serves a high risk population with 65% of the families having three or more risk factors. Low income households is the leading risk factor. Program retention rates were high with 84% of families staying in Sixpence to the end of the program year. Of children who exited prematurely, 80% left in the first year of service.

**Next Steps:** Identify strategies that can support parent's retention in the program.

**Program Outcomes:** All classrooms met the overall quality benchmarks for providing quality environments to infants and toddlers with 66% of the classrooms meeting the quality criteria across all seven subscales. For those programs that met this indicator last year, their performance on the CLASS suggested that teachers consistently created emotionally supportive and caring classrooms. Their use of instructional support of the children in their classrooms received a moderate rating.



**Next Steps:** Continue to provide technical assistance to teachers to enhance their instructional support of young children in their classrooms including supporting concept development, the quality of their feedback, and language modeling.

Family engagement practices have consistently been of high quality over the past three years. The majority of the programs met the quality benchmarks across areas: family engagement (83%) and instructional practices (71%).

**Next Steps:** Continue to provide technical assistance to home visitors to maximize their impact with families who are at high risk.

**Child Outcomes:** Overall, the majority (range of 78% to 96%) of the children in Sixpence are meeting the widely-held expectations for children across all developmental domains (social-emotional, physical, language, cognitive, literacy, and math) with the fewest children meeting these expectations in math (78%). Sixpence has set a high standard for the program goal, that children will acquire comprehension, vocabulary, production, and protective factor skills at the midpoint of average or higher. Close to half of the children met this goal with respect to comprehension and vocabulary skills with fewer (37%) meeting the goal for production skills. More (70%) children met this goal for social-emotional protective factors. Across the year, significant improvements were made with respect to children's vocabulary, attachment, and self-regulation skills, suggesting that the program is making a difference in those areas of development. Children's comprehension decreased significantly across time. A closer examination of the data suggest that two groups of children, those who are ESL and high risk (>3 risk factors) are scoring significantly lower on most language measures.

**Next Steps:** Identify strategies that will continue to support children's language skills. Review best practice strategies to support ESL children's language both in their native language and in English.

Increase curriculum opportunities in math, language, and literacy.

**Health Outcomes:** Children in Sixpence are healthy and nearly all of the children met all of the Sixpence health indicators. The met or exceeded the state averages. Pregnant mothers received consistent prenatal care. Few pregnant mothers are engaging in risky health behaviors. A majority (86%) of the mothers initiate breast feeding with 46% continuing four months or longer. Most infants are born full term.

**Next Steps:** Identify strategies to support mothers to quit smoking during pregnancy.

**Family Outcomes:** Sixpence programs made a significant impact on parent-child interaction. Parents had a strong relationship with their children and demonstrated significant improvements in supporting their children's learning and self-confidence. Parents who were either associated with lower risk factors (<3) or were served more than one year demonstrated the highest level of parenting skills. Parents whose parenting environment was initially rated as low, demonstrated significant improvements.



**Next Step:** Identify strategies to support those families that are highest risk to enhance their interaction with their children in order to optimize their children's learning and developmental outcomes.

## One family's story

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Amy is a senior at our high school and when she entered the program she had a 15 month old son with another boy due this September. Joshua was highly active with little communication skills, and for a teen mom, a lot to handle. With the months spent working with Lindsey and Joshua she has become a great mother. We even got Joshua the help he needed as we referred him for services through the Early Development Network when he was 17 months old. He was eligible for services and he now receives speech therapy. Without Sixpence who knows when someone would have noticed that Joshua needed help and gotten him the services he needed. We both were able to witness his first “clear” word just a couple weeks ago during a visit, it was “Yeah”. He said it loud and clear and mom was super proud in that moment. When I first started serving them Joshua had not been in contact with many books. Now it’s his favorite thing to do with his mom! Every week I see great changes in Joshua and his mom.



## Assessments

Assessment	Authors	Scoring	Subject	Content
<b>Classroom Measures</b>				
<b>ITERS-R</b> Infant/Toddler Environmental Rating Scale - Revised	Harms, Cryer, & Clifford, 2003	<u>Scale 1 -7</u> 1= inadequate 3 =minimal 5 = good 7 =excellent 39 Items, 7 subscales	Infant/Toddler classroom	Classroom layout, health & safety, play activities, teacher-child interactions, & program administration
<b>Toddler CLASS</b> <b>Infant CLASS</b> Classroom Assessment Scoring System	Pianta, LaParo & Hamre, 2012	Scale 1 – 7 1-2 = low range 3-5 = mid-range 6-7 = high range	Infant or Toddler classroom	Emotional support, & instructional support (Toddler only)
<b>Family Engagement Measure</b>				
<b>HoVRS</b> Home Visit Rating Scales	Roggman, Cook, et. al., 2008	Standard Score 85-115 Average range	Home visitor	Home visitor relationship with parents & coaching support
<b>Language Measures</b>				
<b>MacArthur-Bates CDI</b> Communications Development Inventories	Fenson, Marchman, et. al., 2007	Percentile Rank	8 to 30 months of age	Comprehension and production of language
<b>PPVT-IV</b> Peabody Picture Vocabulary Test	Dunn & Dunn, 2007	Standard Score 85-115 Average range	30 months of age and older	Receptive vocabulary
<b>Social-emotional Measure</b>				
<b>DECA-IT, DECA P</b> Devereux Early Childhood Assessment Infant/Toddlers, Preschool	LeBuffe & Nagliere, 1999	Standard Score 41-59 Average range	4 months of age and older	Measures social- emotional protective factors & behavior concerns
<b>Home Environment Measures</b>				
<b>Home Inventory</b> Home Observation for Measurement of the Environment	Caldwell & Bradley, 2003	Standard Score 85-115 Average range	Interview and observation of parent & child	Parent child interactions & quality of home environment
<b>KIPS</b> Keys to Interactive Parenting Scale	Comfort & Gordon, 2008	Five point Likert Scale, 12 items/3 domains	Parent and child age 4 months & up	Parent child play interactions and social, emotional & cognitive support

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\*Supported (in part) by grant T73MC00023 from the Maternal and Child Health Bureau, Health Resources and Services Administration, Department of Health and Human Services.

\*Supported in part by grant 90DD0601 from the Administration on Developmental Disabilities (ADD), Administration for Children and Families, Department of Health and Human Services.