

United Way of Greater Philadelphia and Southern New Jersey

Reflections on a Decade of Child Care Quality Improvement: Learning from Success By 6[®]

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Success By 6[®]: A Brief Overview

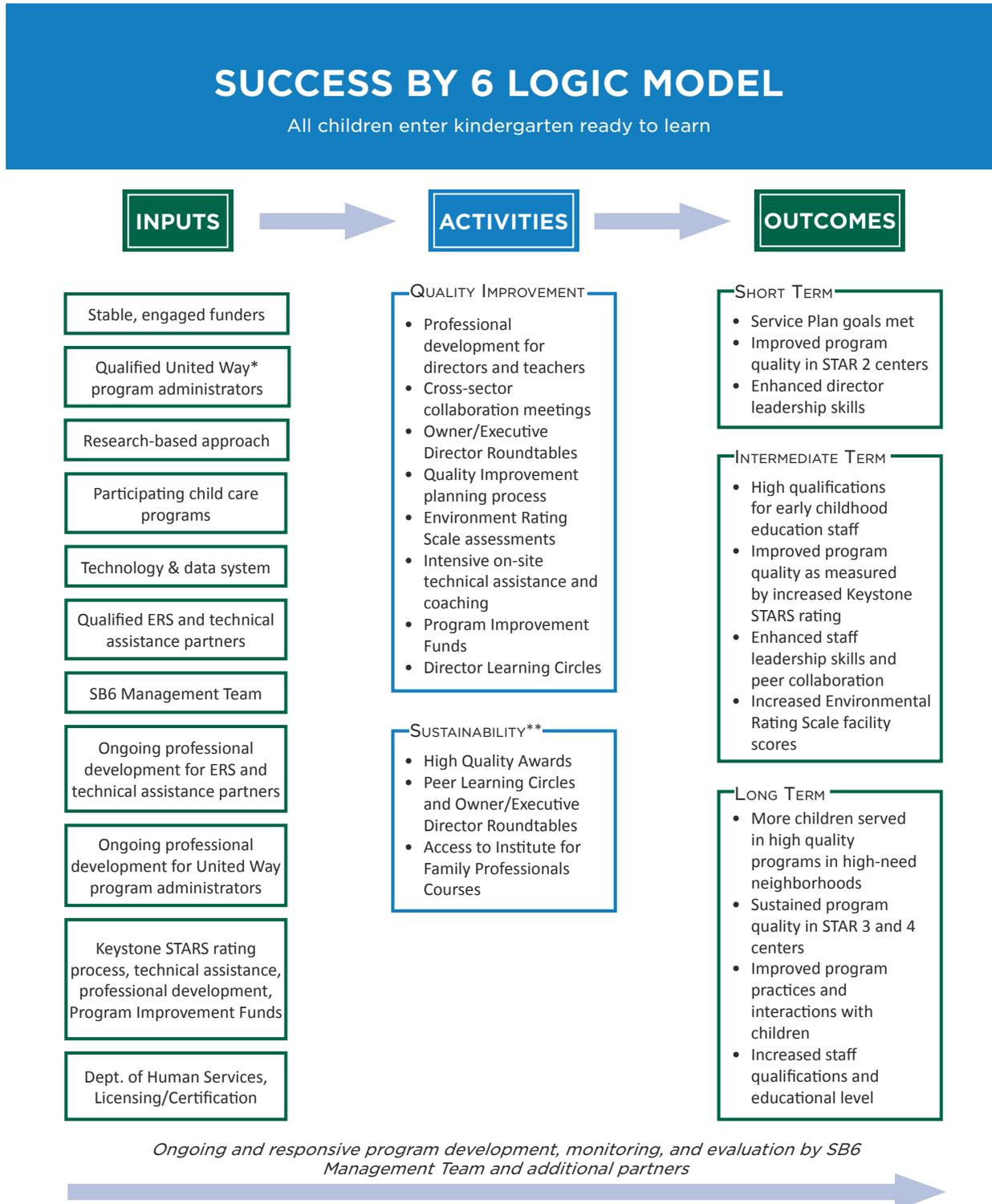
For more than 20 years, United Way of Greater Philadelphia and Southern New Jersey (United Way) has made high-quality early care and education a cornerstone priority of its investment strategy. United Way has also been a longtime champion of school readiness for the youngest children in southeastern Pennsylvania. In 1996, the organization joined with other collaborators to plan for the region's first quality improvement project—Child Care Matters—and, in 2002, launched the Early to Learn: Partners for School Readiness project. These projects, along with the introduction of Pennsylvania's Keystone STARS Quality Rating and Improvement System, influenced the design of United Way's Success By 6[®] (SB6) quality improvement program.

With a commitment to increasing child care quality, United Way launched the SB6 school readiness program in 2007 to help child care centers improve their quality level in the Keystone STARS four-STAR system. To meet the needs of centers in the community, SB6 has targeted services at Keystone STAR 2 centers, helping those that intend to improve quality for the children and families they serve. Once a center achieves STAR 3 or 4, SB6 provides ongoing resources to help maintain changes and seek continued improvements. This dual focus on promoting initial center quality improvements and sustaining quality over time is unique nationally; quality improvement programs typically focus on initial improvements without addressing the challenges of maintaining improvements after participation ends.¹ As a community-based program aimed at promoting and sustaining quality in child care centers, SB6 provides insights and lessons that can be applied to existing quality improvement initiatives locally, statewide, and nationally. This paper describes the history and components of SB6 and synthesizes the results of recent evaluation findings to highlight successes and challenges. Key themes and quotes from recent interviews with the SB6 management team, program participants, and technical assistance consultants help situate the evaluation results within the program's current context.

Success By 6[®] is a unique program with a dual focus on promoting initial quality improvements and providing supports to sustain quality after participation has concluded.

The Success By 6[®] Model

Figure 1: Success By 6[®] Logic Model



* United Way of Greater Philadelphia and Southern New Jersey
 ** Sustainability occurs after STAR 3 or 4 is achieved and completion of 18-month program

Success By 6® (SB6) assists child care centers that serve children throughout southeastern Pennsylvania, a region challenged by high rates of intergenerational poverty. In Philadelphia alone, just over one-quarter of the population lives in poverty.² Since its inception in 2007, SB6 has worked with 431 child care centers in many of the region's neediest neighborhoods to increase center quality, with the goal of improving school readiness for children. The program has focused on providing multi-tiered supports that address centers' financial, professional development, and quality assessment needs, and that sustain support for quality improvement as centers move up within the Keystone STARS framework.

SB6 uses a cohort model where a group of centers begins the program at the same time. Initially, centers participated in SB6 for 12 months; however, within the first several years the SB6 Management Team increased the program term to 18–24 months to more fully respond to the needs of child care centers. The SB6 logic model depicts the activities and intended outcomes of the program and conveys its dual focus on improvement and sustained changes (see figure 1 on the previous page).

Quality Improvement Activities

SB6 uses a multifaceted approach to improve and sustain quality by providing on-site technical assistance (TA), access to professional development (PD), grants, peer learning opportunities, and classroom environment assessments.

Technical Assistance and Professional Development

To provide on-site TA to center staff, United Way partners with the Delaware Valley Association for the Education of Young Children (DVAEYC) and Montgomery Early Learning Centers (MELC), both of which specialize in providing early childhood TA and PD. Centers are matched with a TA consultant and, using a relationship-based approach, TA consultants work onsite with centers throughout their participation in SB6 to set goals, provide PD, and prepare them for Keystone STARS quality assessment. TA consultants and center directors also work closely together early on to develop a service plan^a to track progress toward goals during the program.

Each center receives four to 26 hours of TA each month depending on the number of children served and the number of classrooms.³ While most centers work with their TA consultant for 18 months, SB6 has discretion to extend TA services for an additional three to six months based on center needs. For example, extensions can be offered to centers that have demonstrated progress toward improving their quality, but that need some additional assistance to prepare for STAR 3 designation. SB6 also has criteria for early identification of centers that need specialized TA to strengthen their basic operating systems before beginning the intensive quality improvement program. Centers involved in the Readiness Program work with TA consultants to put systems in place to ensure that they consistently meet basic STAR 2 requirements before beginning further quality improvement work.

TA consultants also play a primary role in delivering ongoing PD by working with centers to identify PD needs and either providing support themselves or connecting centers with others with the required expertise. One of the first PD activities that centers participate in is a workshop designed to prepare them for the quality assessment process.

Grants

Centers participating in SB6 receive Program Improvement Funds (PIF) to purchase materials and training. Centers can apply for funding after participating in the program for at least five months, and award amounts vary from \$4,000 to \$14,500 based on center size.^b While center directors cannot use these funds for general operating expenses, they have flexibility to request funding for materials and services tailored to their centers' individual needs. TA consultants work with center directors to prepare budget requests based on center staff input, service plan goals, and assessment results. An analysis of PIF budgets found that centers most frequently requested funding for materials to support play and

^a A *service plan* is a plan that TAs jointly develop with center directors to set goals for quality improvement aligned with Keystone STARS indicators.

^b Centers with one classroom are eligible for \$4,000. For each additional classroom, centers can receive another \$1,500 up to the maximum funding amount of \$14,500.

learning, including blocks, instruments, and free play materials (65% of line items analyzed). After this, centers most frequently requested health and safety items such as sinks, diaper changing tables, and locked cabinets (20%); facility-related items such as repairs and play area improvements (10%); and professional development opportunities such as trainings and organizational memberships (5%).⁴

Peer Learning Opportunities

SB6 provides opportunities for peer learning in Director Learning Circles (DLCs), bimonthly forums where SB6 directors can discuss challenges they face, share expertise, and further develop as leaders in their field. In a survey of directors currently or formerly involved in SB6, a majority indicated that they enjoyed meeting with other directors in DLCs, and about half indicated that they had learned a lot from their peers in this setting.⁵

In 2014, SB6 expanded peer learning to include Owner/Executive Director Roundtables (OEDs) in response to a growing need expressed by these leaders to have a space to discuss their unique experiences. Unlike director-based groups, OEDs include both current and former SB6 participants. Some participants formerly served as both owners and center directors but later transitioned exclusively into the owner role, while others served as owners or executive directors for the duration of their center's involvement with SB6.

Classroom Environment Assessments

SB6 uses the Environment Rating Scale (ERS) suite of assessment tools to identify the needs and progress of centers in the program. In the first three months of SB6 participation, three classrooms in each center receive an assessment using either the Infant/Toddler Environment Rating Scale (ITERS) or the Early Childhood Environment Rating Scale (ECERS), depending on the age of the children in the classroom.^c The ECERS-R assessment tool was used for cohorts 1-17; SB6 transitioned to using the ECERS-3 when it was published in 2016. After a center's initial assessment, its TA consultant schedules a feedback meeting to discuss the results with the center director and the ERS assessor. The results serve as a baseline for measuring centers' quality and inform the development of service plans. In the final three months of SB6, a second set of ERS assessments are conducted to measure improvements and determine readiness for STAR 3 designation. A similar feedback format is used for the second set of assessments. The 2016 evaluation of SB6 found that TA consultants spent about one-third of their time onsite with directors working on ERS-related topics and activities.⁶ Comparison of ERS scores found that, on average, centers increased their score by 0.44 points between the first assessment and the second, moving from a three-point range score to a four-point range score.^d

Sustainability Components

Access to quality improvement components concludes after 18 to 24 months. Centers that have completed SB6 and also achieved a STAR 3 or 4 rating are eligible for several sustainability supports.

Financial Awards

The SB6 High Quality Awards assist centers with the costs of maintaining their quality ratings. On average, centers receive \$5,000, although total award amounts vary depending on center size.⁷

Ongoing Peer Learning Opportunities

While DLCs provide peer support opportunities for directors currently participating in SB6, Peer Learning Circles (PLCs) are designed to facilitate ongoing peer learning for directors after their participation ends. PLCs meet monthly and are open to directors at centers that have achieved STAR 3 or 4 after SB6 participation. Currently, six PLC groups meet throughout the region, composed of directors from different cohorts. United Way contracts with an external consultant to facilitate these groups. OEDs are also open to past SB6 participants.

^c The ITERS assesses classrooms serving children from birth to two and a half years. The ECERS assesses classrooms serving children ages two to five. (Frank Porter Graham Child Development Institute. Environment Rating Scales: Assessment instruments for early childhood and child care program quality. Accessed from <http://ers.fpg.unc.edu/>)

^d The evaluation analyzed the change in score from first ERS assessment to second ERS assessment for centers in cohorts 5 through 15.

Professional Development

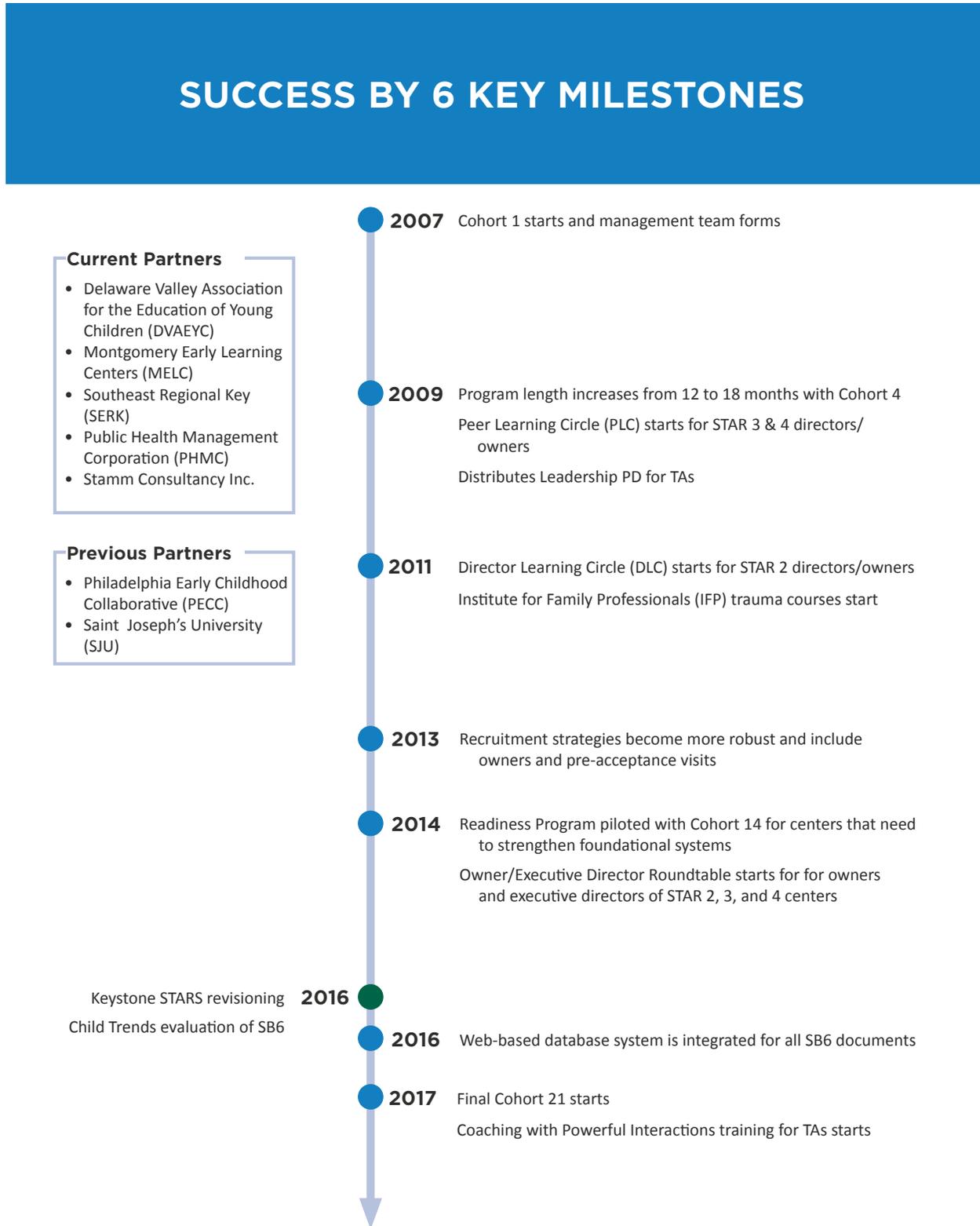
United Way partners with Lakeside Global Institute (formerly The Institute for Family Professionals) to provide ongoing learning opportunities for center directors and teachers. Providers have free access to professional development on a variety of topics, including topics related to trauma awareness and trauma-informed care. United Way is committed to building a trauma-informed early childhood community and preparing child care center leaders and staff to meet the unique needs of children and families who face intergenerational poverty.

SB6 Leadership and Management Team Structure

United Way staff oversee SB6, building and maintaining relationships with funders and partners, and leading the day-to-day management of the program. In its 11 years of operation, the program has been guided by a Management Team composed of partner organizations and facilitated monthly by United Way. The collaborative approach of the Management Team provides flexibility to make adaptations over time that address the changing needs of centers.⁸ The Management Team currently includes representatives from United Way, DVAEYC, MELC, Public Health Management Corporation (PHMC), and the Southeast Regional Key.



Figure 2. Success By 6® Key Milestones



From its inception, SB6 has worked with a variety of partners to provide quality improvement support to child care centers, and has adapted its services to meet the changing needs of child care providers. This set of key milestones highlights the evolution of SB6 over time in response to participant feedback, evaluation, and changes to Keystone STARS (see figure 2).

Success By 6[®]: Commitment to Evaluation and Continuous Improvement

A hallmark of United Way's leadership and the Success By 6[®] Management Team is their investment in regular monitoring and evaluation to inform refinements and revisions to SB6 (see table 1). This commitment to evaluation and continuous improvement has led to changes in the program that address centers' emerging needs. The most comprehensive evaluation of the program, funded by the William Penn Foundation and conducted by Child Trends, occurred in 2016 and was based on analyses of multiple data sources, including the following:

- Surveys of current and past SB6 participants and TA consultants
- Interviews with members of the Management Team
- Review of TA consultant contact logs, service plans, and PIF budgets
- Observations of TA consultants in the classroom
- Environmental Rating Scales results
- Census data
- Data on Keystone STARS level move-up from the Office of Child Development and Early Learning in Pennsylvania (OCDEL)

The resulting report, [*Improving Quality for Child Care Centers in Greater Philadelphia: An Evaluation of Success By 6[®]*](#), reviewed the design of SB6 to assess its degree of alignment with elements of effective quality improvement programs identified in the research literature. Each component of SB6 was then analyzed in-depth to understand how it was associated with progress on the objective measures of success—namely, move-up in Keystone STARS—and the experiences and perceptions of participants and TA consultants. The evaluation found that participation in SB6 boosted overall move-up to a STAR 3 from 27 percent for nonparticipants to 45 percent for participants.⁹ While the overall move-up rate reflects the challenges of quality improvement among child care centers, centers that participated in SB6 had a higher (statistically significant) move-up rate than centers that did not.¹⁰ The study also documented SB6 participants' experiences with and perception of SB6, finding that the program operated effectively, led by a collaborative management team that was responsive to changing needs. Center directors and teachers who participated in SB6 had generally positive experiences with the program. In response to the findings, SB6 management implemented changes to their documentation system (moving to a web-based platform) and shifted their TA model to include a more intensive focus on positive interactions between teachers and children.

United Way initiated further evaluation activities with Child Trends in 2017, which examined:

- Changes in the characteristics of centers participating in SB6 and implications for the services provided
- The ways in which center directors improved their leadership skills through SB6
- The extent to which TA consultants and center staff addressed teacher-child interactions during consultation
- Barriers and opportunities for teacher professional development

The information gathered from two rapid-cycle evaluations provided insight into the SB6 participant experience, as well as SB6's ability to implement changes to the program. These and other findings from the 2016 evaluation will be highlighted throughout this brief.

Table 1. Success By 6® Evaluation Activities

Year	Evaluation Activity	Report	Content / Theme
2015	Identification of effective of quality improvement practices	A Blueprint for Early Care and Education Quality Improvement Initiatives: Final Report	Proposes a blueprint of effective quality improvement practices in early childhood education based on existing research and input from national experts.
2016	Comprehensive program evaluation of Success By 6®	Improving Quality for Child Care Centers in Pennsylvania: An Evaluation of Success By 6®	Describes key findings about Success By 6® based on surveys with current and past participants, interviews with members of the Management Team, review of program documents, classroom observations, Environment Rating Scale results, census data, and data on Keystone STARS move-up.
		Improving Quality for Child Care Centers in Pennsylvania: An Evaluation of Success By 6®: Program Design Appendix	Analyzes alignment between Success By 6® and key components of effective quality improvement practices identified in the Blueprint for Early Care and Education Quality Improvement Initiatives.
		Improving Quality for Child Care Centers in Pennsylvania: An Evaluation of Success By 6®: Technical Appendix	Accompanies the evaluation report and provides more information and details on methodology, as well as additional results on implementation and outcomes.
2017	Rapid Cycle Evaluation #1	Brief	Addresses questions about: <ul style="list-style-type: none"> • Changes in characteristics of centers participating in SB6 across cohorts • Improvements in center director leadership skills
2017	Rapid Cycle Evaluation #2	Brief	Addresses questions about: <ul style="list-style-type: none"> • The extent to which technical assistant (TA) consultants and centers are addressing teacher-child interactions • How teachers are planning for professional development

Learning from Success By 6®

Exploring the implementation and outcomes of Success By 6® (SB6) highlights the long-term influence of a community-based quality improvement program. The remainder of this brief shares findings from these evaluation activities about SB6 accomplishments, the program's responses to changes over time, and areas for improvement. These findings provide insight into the program's successes and challenges that may be helpful in informing other quality improvement initiatives that are currently underway around the country.

A management team that partners with stakeholders in the early care and education system and responds to changing needs provides the foundation for a successful quality improvement initiative.

SB6's ability to successfully enhance child care quality in the region has been supported in part by the program's ongoing commitment to partnerships with other stakeholders within the early care and education system. These partnerships have allowed the program to ensure that practices align with system structures, and to fill gaps in existing supports available to child care centers. SB6 has worked with stakeholders in two major ways.

At the program level, United Way assembled a management team that has included partners involved with providing SB6 services and monitoring quality. This group has included staff from organizations that provide TA, organizations that provide ERS assessment, and the organization responsible for implementing the Keystone STARS rating system. The 2016 evaluation found that management partners worked collaboratively and believed that their flexible, responsive approach was a strength of SB6. In addition, the inclusion of representatives from the Regional Keys organizations tasked with implementing Keystone STARS has allowed for successful collaboration with Pennsylvania's rating system.¹¹ Recent interviews with management staff, TA consultants, and child care center directors reiterated this finding. One management partner noted, "United Way has been able to get all of the regulatory bodies together at one table, which is hard to do."

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At the ground level, SB6 also has viewed child care centers and TA consultants as partners in the process of quality improvement. As a result, SB6 leadership has considered the needs of centers and TA consultants, and has been responsive in addressing areas in need of improvement within the program. In recent interviews, management partners and child care center directors pointed to this responsiveness as a strength of the program. This level of responsiveness has been particularly important as the characteristics of centers entering the program have changed. In 2014, SB6 implemented a Readiness Program, which provided an additional six months of TA support to programs needing more assistance with preparing for quality improvement. After making this change, SB6 continued to ask questions about the ways in which the program needed to adapt to the changing characteristics of child care, conducting further evaluations to understand the areas where centers in recent cohorts needed additional support. Rapid cycle evaluations in 2017 found that newly participating centers had lower classroom quality scores and had staff at lower levels on the career lattice than staff in the previous cohort, providing more insight into areas where these centers struggle. SB6's responsiveness to the changing needs of participants is a characteristic that aligns well with identified best practices for effective quality improvement programs.¹²

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Effective quality improvement incorporates both organizations and staff at the ground level and at the leadership level in early care and education.

Quality improvement initiatives have typically focused on providing support for classroom teachers or strategies to improve program leadership; intentional coordination is not common across these levels of program leadership and classrooms.¹³ SB6 was ahead of an emerging national trend toward focusing simultaneously on multiple levels of child care center staff. The program has developed strategies to account for the unique perspectives of not only teachers and directors, but also owners, who may not spend time on-site and may be less familiar with daily challenges to center quality.¹⁴ The SB6 model includes meetings for owners and executives to introduce them to the program, secure their buy-in to the approach, and provide training on quality dimensions. These meetings were added to the model based on emerging needs identified by the SB6 Management Team. Recent interviews highlighted the importance of the multi-level focus: “One of the most important things for us to do is to build the relationship with the director, the owner, and then the staff.”

Yet even with an intentional focus across levels, the 2016 evaluation showed that directors and teachers had different perceptions of their SB6 experience, with teachers reporting lower levels of satisfaction than directors.¹⁵ This divergence highlights the need to remain focused on effective strategies for individualizing the quality improvement experience for teachers, directors, and owners, and to recognize their differing capacity and motivation to engage in the program.

A multifaceted approach to supporting child care centers facilitates quality improvement and the capacity to sustain improvements.

SB6 has taken a multifaceted approach to quality improvement, providing child care centers with technical assistance, financial resources, and structures to address capacity building and sustained quality. Together, these resources have been delivered using a strengths-based approach tailored to meet the needs of child care centers. The 2016 evaluation revealed that this diversity of supports was critical in promoting engagement in SB6. A majority of directors participating in the program at the time of the evaluation indicated that the following supports were very important: the SB6 ERS assessment process (89 percent), program improvement funds (86 percent), the SB6 TA model (68 percent), and the SB6 service plan (84 percent).

In addition to providing multifaceted support during the quality improvement phase of the program, SB6 has also provided sustainability supports for centers that achieve higher quality. Directors reported that the availability of financial support and continued interaction with other center directors after the program ended were beneficial for sustaining quality.

Effective implementation of quality improvement initiatives requires a strengths-based, flexible technical assistance model.

Research on effective quality improvement initiatives suggests three key sets of practices: foundational elements, or a base for setting goals and identifying the initiative’s focus; implementation efforts, or practices that facilitate the initiative’s implementation on the ground; and implementation activities, or the initiative’s on-the-ground components.¹⁶ The SB6 TA model, which has been consistently highlighted as a strength of the program,¹⁷ has provided supports to centers within each of these three categories. The SB6 TA model aligns with best practices for quality improvement programs in the following ways:¹⁸

- **Foundational elements:** TA consultants work with centers to set goals using a specified model that describes key activities and resources for consultation and improvement.
- **Implementation efforts:** SB6 provides training for TA consultants and uses a data system to track information about on-site consultation.
- **Implementation activities:** TA consultants use individualized strategies to work with centers, and provide a variety of quality improvement activities and supports.

In 2017, the TA model shifted to focus more intentionally on supporting teacher-child interactions. TA consultants were trained on the *Coaching with Powerful Interactions* model to strengthen their approaches for interacting with teachers and, in turn, for helping teachers improve their interactions with children.¹⁹ TA consultants reported that using this approach increased their capacity to focus on teachers' strengths and to consider why interactions are important for supporting children's learning. After TA consultants received training in *Powerful Interactions*, Child Trends conducted center visits and observed an increase in the frequency with which TA consultants focused on interactions during consultation.²⁰ In addition, TA managers reported adapting their model of service delivery. Instead of sending one TA consultant to work with a center, managers reported sending multiple consultants on center visits more frequently so that TA teams could engage in reflective practice to help them integrate and refine their newly learned *Powerful Interactions* skills. After participating in the *Powerful Interactions* training, TA consultants had more positive attitudes about their work.²¹ In recent interviews, SB6 management partners indicated that using *Powerful Interactions* gave them a new perspective on their role as TA consultants, better allowing them to share ownership and responsibility for quality improvement work with center directors—rather than feeling like they had to solve all problems themselves. TA consultants have reframed the way they provide feedback with a stronger emphasis on the strengths of providers rather than their deficits, and have focused on leveraging those strengths to improve center quality.

Despite comprehensive supports, many child care centers still struggle with achieving a higher quality rating.

Child care centers that participated in SB6 were more likely to increase their quality level within Keystone STARS than programs that did not participate. Within two years of completing the program, 37 percent of SB6 centers moved up to STAR 3 or 4, compared to 27 percent of nonparticipating programs. In the longer term, the gap in move-up rates widened further, with 45 percent of all SB6 participant programs moving up, compared to 29 percent of nonparticipating programs in the same time span.²² Despite this success, just over half of programs did not increase their quality level. Meeting staff educational qualifications outlined in the Pennsylvania Early Learning Keys to Quality Career Lattice was a primary barrier to STARS movement, which is consistent with findings from evaluations of other quality improvement initiatives around the country.²³ This persistent challenge reinforces the need to connect staff to resources such as higher education and other workforce supports.

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Even when programs did not increase their Keystone STARS rating, child care center directors and TA consultants felt that centers made notable improvements. The 2016 evaluation found that 94 percent of directors who had participated in SB6 agreed that their center attained higher quality as a result of participation.²⁴ In recent interviews, center directors and management partners emphasized this perspective. One partner noted, for example, that they saw positive changes in classroom practices in a center that had not increased in Keystone STARS level, including the use of curriculum, room arrangements, and inclusion of new materials to promote learning. This aligns with earlier findings on ERS score results. Although some centers scored below the STAR 3 cutoff on the second ERS assessment, their scores increased by 0.44 points after participation in SB6.²⁵

Participation in a quality improvement initiative can improve center directors' knowledge about the importance of making changes to increase quality.

For many child care centers, taking the first step to acknowledge their existing quality level and developing a plan to address quality issues is an important accomplishment. Management partners noted that providers who participated in SB6 experienced growth in their understanding of quality child care practices, which is a prerequisite for prioritizing and engaging in long-term quality improvement. In recent interviews, one management partner stated, “The SB6 program itself, the knowledge that [providers] got, was an invaluable springboard.” Greater knowledge and understanding of quality has also contributed to changes in providers' openness to and recognition of change, which management partners also noted as a success. One partner reported, “I think throughout the years, SB6 was able to ... really bring a level of recognition that [STARS movement] is important and something we should consider, so that I think is a big success.” Engagement and relationships with consultants were perceived as particularly important for supporting providers who were resistant to new practices or reluctant to abandon practices that they previously thought were effective. Center directors reinforced this belief, saying that the program helped them understand areas where their centers could improve and provided assistance with implementing those changes.

Quality improvement initiatives must consider the varied needs and capacities of child care centers and use a range of strategies to provide effective services.

Since its beginning, SB6 has focused on providing quality support to centers at a Keystone STAR 2 quality level, rather than focusing on STAR 3 and 4 centers. As SB6 has expanded to work with higher-need centers, new challenges have risen based on changing characteristics of child care centers. Data from rapid cycle evaluations in 2017 indicated that entering centers had lower classroom ERS assessment scores and that staff were at lower levels on the Keystone STARS career lattice.²⁶ Many new centers needed assistance to maintain their STAR 2 eligibility at the beginning of SB6 before focusing on the requirements of STAR 3. In recent interviews, management partners cited changes to participating centers' capacity as a challenge, indicating that some centers had a lower capacity to work on goals outlined by the service plans. One partner said that TA consultants who work with these centers often arrive to find a center in “crisis mode”—being understaffed or needing responses to immediate concerns—and are unable to work on goal-related aspects of quality improvement. One added, “I think we have on the fly shifted some of our practices to accommodate different needs, but I don't know that we have been successful enough.” Another partner reflected on the contextual factors shaping participation in quality improvement, saying that, in some cases, TA consultants support programs in making changes with the goal of getting a center to a higher STAR level quickly. This allows centers to meet requirements for child care subsidies or become eligible for other funding opportunities, but does not emphasize maintaining those changes over time. The SB6 model has long emphasized the importance of achieving and sustaining quality, but the reality of maintaining financial stability influences decisions that centers make about long-term quality for children and families.

Supporting the needs of the early care and education workforce is a high priority for quality improvement and sustainability initiatives.

Persistent challenges related to the early care and education workforce include barriers to improving educational qualifications and low compensation and benefits.²⁷ These challenges impact a center's ability to embed classroom quality improvements. For example, the 2016 evaluation found that educational qualifications in the career lattice were a challenge to increasing STAR levels.²⁸ Rapid cycle evaluations conducted in 2017 found that center directors in later SB6 cohorts (19 and 20) were lower on the career lattice than directors of centers in an earlier cohort (18), indicating increasing challenges in the qualifications of new SB6 participants.²⁹ In addition to impacting centers' ability to move up to STAR 3, staff qualifications standards have also posed challenges to

maintaining STAR 3 for centers that do move up: Centers meeting STAR 3 career lattice standards may be at risk of dropping back to STAR 2 if they experience any staff turnover. In addition, centers have found it challenging to hire and provide adequate compensation to staff who have the credentials required to achieve STAR 3 and 4. Changes to the Keystone STARS staff qualification standards in 2017 may influence these dynamics, although it is too early in the implementation phases to assess.

Looking to the Future

Intergenerational poverty looms as the most pressing challenge for Philadelphia, the nation's poorest major city, and for some of its neighboring communities. In 2017, United Way articulated its aspirational goal of breaking the cycle of poverty that traps families for generations by focusing on two strategies: ensuring successful children and youth, and promoting self-reliant individuals and families. The early learning goal will be to ensure that by 2030, 90 percent of children read at grade level by the end of third grade.

School readiness represents a critical milestone on the path to early literacy proficiency. Lessons learned from Success By 6® (SB6) will provide a foundation from which to develop a new school readiness initiative that engages families, Keystone STAR 1 child care programs, and community organizations to develop partnerships on behalf of young children. The program will incorporate trauma-informed, strengths-based, and two-generational approaches that will lead to strong outcomes for children. The school readiness program will:

- Empower parenting adults to engage with their children in ways that promote emergent literacy
- Increase access to resources that address basic needs of individuals and families
- Increase quality of early learning programs and strengthen family and community partnerships

United Way has convened stakeholders across sectors to provide information that will be instrumental in the program design and evaluation processes. Simultaneously, technical assistance consultants are receiving extensive training and coaching on best practices in family engagement and emergent literacy.

Like SB6, the next phase of school readiness work provides an opportunity to continue delivering supports to child care programs with a focus on developing strong relationships, helping programs engage in continuous improvement, and recognizing the challenges of providing services to children and families in centers with limited resources. Consistent with the approach taken for over a decade, it will be important to set and track progress toward clear and achievable goals, attend to implementation through a strong and flexible management structure, and keep the needs of young children and their families at the center of the program.

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