

Illinois Nontraditional-Hour Child Care Study (INCCS)

A Research-Policy Partnership

Measuring Quality in Nontraditional-Hour Child Care: Selected Measures and Indicators

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Despite the prevalence of nontraditional-hour (NTH) child care, there remain significant gaps in our understanding of what quality caregiving practices and environments look like in these child care arrangements. Given the paucity of research on NTH child care, it is difficult to define and measure which quality practices are most likely to contribute to child and family equitable outcomes. Based on the conceptual framework described in the accompanying report (Bromer et al., 2024), we conducted a targeted review of measures and quality standards in order to identify promising indicators and approaches to measuring quality in NTH child care arrangements.

This resource offers examples of indicators from existing measures and standards. Since the components of quality are not mutually exclusive, we also acknowledge that many of the indicators listed

here could be examples of more than one quality component. For example, an indicator about child care staff planning for “learning opportunities that acknowledge ethnic and cultural background of the children and the community” could be categorized as both *culturally-sustaining care for children* as well as *individualized care for children*.

This resource is not meant to be used as a measure or assessment. Rather, this document presents a list of indicators that describe examples of the kinds of practices that may occur in child care and early education settings during nontraditional hours. In order to explore how these indicators may be used, we recommend going to the full measures and sets of standards. (See Box 1 on page 2.)

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Box 1

List of measures and quality standards reviewed

MEASURES

- Assessing Classroom Sociocultural Equity Scale (ACSES; Curenton et al., 2019)^c
- Child Care Assessment Tool for Relatives (CCAT-R; Porter et al., 2006)^b
- Child Care HOME Inventories (CC-HOME; Bradley et al., 2003)^b
- Child Care Worker Job Stress Inventory (CCW-JSI; Curbow et al., 2000)^c
- Child Development Program Evaluation Scale (CDPES; Fiene, 1984)^a
- Family and Provider/Teacher Quality Measure (FPTRQ; Kim et al, 2015) Provider/Teacher Measure (PROV) and Parent Measure (PAR)^a
- Family Routines Inventory (FRI; Jensen et al., 1983)^c
- The Parent-Caregiver Relationship Scale (PCRS; Elicker, 1997)^c
- The Strengthening Families Self-Assessment for Family Child Care Provider (SFSAFCC; CSSP, 2018) and for Center-Based Early Care and Education Programs (SFSACB; CSSP, 2018)^a
- The Strengths-Based Practices Inventory (SBPI; Green et al, 2004)^c

QUALITY STANDARDS

- Caring for Our Children National Health and Safety Performance Standards(CFOC)^a
- The Model Work Standards for Teaching Staff in Center-Based Child Care (MWSCB; CSCCE and AFT, 2019b) and for Early Educators in Family Child Care (MWSFCC; CSCCE and AFT, 2019a)^a
- National Association for the Education of Young Children Accreditation Standards (NAEYC)^a
National Association for Family Child Care Accreditation Quality Standards (NAFCC)^a

a Publicly-available

b A cost may be associated with use

c Published (contact authors)

Culturally-sustaining, consistent, and nurturing care for children

Component of quality in NTH child care	Selected indicators
<p>Nurturing and responsive provider-child relationships and interactions</p>	<ul style="list-style-type: none"> • CCAT-R F.1: [Caregiver] Kisses or hugs child • CCAT-R F.2: [Caregiver] Holds, pats, or touches child • CCAT-R F.3: [Caregiver] Comforts child • CCAT-R F.5: [Caregiver] Responds to child’s distress • NAFCC 1.3: Holds and carries infants. • NAFCC 3.52 The provider accepts children’s emotional needs and seeing demands for both dependence and independence. • CC-HOME: Caregiver spontaneously praises child at least twice. • CC-HOME: Caregiver’s voice conveys positive feelings toward child. • CC-HOME: Caregiver caresses, kisses, or cuddles child during visit. <p>There are many other measures of provider-child interactions which may include indicators that may be relevant for provider-child interactions during nontraditional hour child care (see Doran et al., 2022):</p> <ul style="list-style-type: none"> • Child-Caregiver Interaction Scale, Revised Edition (CCIS) • The Child Care Ecology Inventory (CCEI) • Child/Home Early language & Literacy Observation (CHELLO) • Early Childhood Quality Improvement Pathway System (EQuIPS) • Quality of Care for Infants and Toddlers (QCIT) • Family Child Care Environment Rating Scale, Third Edition (FCCERS) • Family Child Care Observations (FCCO) • Family Child Care Program Quality Assessment (FCC PQA)
<p>Consistency and continuity of care</p>	<ul style="list-style-type: none"> • NAEYC 10B.2: Show that written policies encourage keeping infants together with the same teaching staff for nine months or longer. • MWSCB 3.9: Classroom assignments are stable and are not routinely changed in response to daily fluctuations in child enrolments. No arbitrary or capricious changes occur.

Culturally-sustaining, consistent, and nurturing care for children. continued

Component of quality in NTH child care	Selected indicators
<p>Individualized care</p>	<ul style="list-style-type: none"> • SFSAFCC 1.10: Make an effort to honor parents’ special requests for their children, such as providing vegetarian meals • ACSES: Teacher challenges/scaffolds children according to their abilities • ACSES: Teacher talks about children’s social identities and family lives • CDPES 30.4 Teaching staff highlights each child by sharing individual ethnic and cultural backgrounds. Review program displays and plans. Interview staff regarding how families share traditional customs with the program. • NAFCC 1.7: The provider shows positive attitudes toward adapting for individual children’s needs, such as, but not limited to, bottle weaning, diapering, toilet learning, discipline, and additional individual needs. • NAFCC 5.25: The provider gathers information about the children and their families such as special needs, fears, food preferences, important holidays and traditions, and updates the information as needed. • NAEYC 2A.3 Show or describe one example of how your program has changed classroom materials or equipment to accommodate the individual needs of a child.
<p>Teachable moments that promote children’s learning</p>	<ul style="list-style-type: none"> • ACSES: Teacher presents topics and materials that show racially minoritized learners in positions of authority and having agency • ACSES: Teacher includes storybooks and other materials that explore social justice and equity themes • ACSES: Teacher provides an opportunity for children to tell personal stories • ACSES: Teacher encourages children to question whether or not information is correct. • NAFCC 3.44: Sometimes children help with safely preparing food, setting the table, or cleaning up after meals. • NAFCC 3.16: The provider takes advantage of and builds upon the many natural learning experiences and “teachable moments” associated with daily life in a home.

Culturally-sustaining, consistent, and nurturing care for children. continued

Component of quality in NTH child care	Selected indicators
<p>Predictable routines and rituals</p>	<ul style="list-style-type: none"> • FRI: In some families, dinnertime is more than just a meal; it has special meaning • FRI: Family eats at the same time each night • FRI: Whole family eats dinner together almost every night • FRI: Family has ‘quiet time’ each evening when everyone talks or plays quietly • FRI: Children have special things they do or ask for each night at bedtime (e.g., a story, a good-night kiss, a drink of water) • FRI: Children go to bed at the same time almost every night • FRI: Children do the same things each morning as soon as they wake up • FRI: At least some of the family eats breakfast together almost every morning • FRI: Family goes some place special together each week • FRI: Family has a certain ‘family time’ each week when they do things together at home • ACSES: Children share personal experiences such as home routines • CC-HOME: Child eats at least one meal per day with caregiver and/or other children • NAFCC 3.21: The provider usually maintains a consistent, yet flexible, sequence of daily events and learning experiences, which are adapted to meet the individual needs of each child and the changing group.
<p>Unhurried and unstructured time</p>	<ul style="list-style-type: none"> • NAFCC 3.22: Learning experiences and transitions are generally smooth and unhurried; children can usually finish activities at their own pace. They seem to know what is expected of them. • NAFCC 3.23: The provider greets children and parents warmly every day. Upon arrival, based on the child’s needs, the provider helps the child become engaged in what is happening, or provides a quiet place until they are ready to be engaged.
<p>Time for child-directed play</p>	<ul style="list-style-type: none"> • NAFCC 3.1: Children have opportunities to make choices and explore their own interests. They direct their own free play for at least ½ hour at a time, totaling at least one hour in each half day. Free play may occur indoors or outdoors. • NAFCC 1.19: The provider supports children in developing friendships with each other. The provider supports children in finding positive ways to interact with others.

Culturally-sustaining, consistent, and nurturing care for children. continued

Component of quality in NTH child care	Selected indicators
Culturally sustaining care	<ul style="list-style-type: none"> • CDPES 30.1 Information is available to staff regarding traditional ethnic cultural observances. Look for program materials in books and media form that are available to staff on ethnic festivals and practices that are applicable to the local community, the nation, and the world. • CDPES 30.2 Staff plans for learning opportunities that acknowledge ethnic and cultural background of the children and the community. Review the program plans for ethnic and cultural activities. Interview staff members regarding their plans for activities, e.g., dramatic play, festive costumes, cooking activities, dancing. • CDPES 30.3 Planned activities are implemented to enhance a sense of cultural pride on the part of all ethnic groups. Observe that activities and displays reflect the history and culture of ethnic groups in the community. • CDPES 30.5 Staff provide multicultural experiences that enlarge each child’s knowledge of other cultures throughout the world. Review program plans and learning materials. • ACSES: Racially minoritized learners are fully integrated into activities and engaged • ACSES: (Inverted score) Teacher uses “over control” with racially minoritized learners, which stifles children’s behavior • NAFCC 3.50 The provider supports children in their growing self-awareness and self-acceptance. • NAFCC 2.28 Materials reflect the lives of the children enrolled and people diverse in race and ethnicity. They show girls and boys, women and men, and older people in a variety of positive activities. Materials include items such as books, dolls, puzzles, and pictures. They do not include stereotyped pictures such as Indians with tomahawks. • NAFCC 3.48 The provider helps children notice incidents of bias and learn effective ways to stand up for each other and themselves in the face of teasing, bullying, and other forms of discrimination. • NAFCC 3.49 The provider introduces cultural activities based on the authentic experiences of individuals rather than a “tourist curriculum” of exotic holidays and stereotyped decorations.

Culturally-sustaining, consistent, and nurturing care for children. continued

Component of quality in NTH child care	Selected indicators
<p>Comfortable & calm caregiving environments</p>	<ul style="list-style-type: none"> • NAFCC 2.13: The environment includes a comfortable and cozy space for children, and a quiet place for children who choose to use it. • NAFCC 2.5: Areas where children read, make art, or play with manipulatives have enough light for children and adults to see and to accomplish the different tasks in each area. There are areas in the child care environment with soft or natural light. There are areas where infants can lie on their backs and look up into lighting that is not bright nor harsh. • NAFCC 2.4: The home has adequate ventilation and room temperature between 69-90(F). If the temperature is over 90(F), air conditioning or safe fans are used. • NAFCC 3.32 School-agers should have age-appropriate, comfortable space and time that meet their needs to relax after the school day. • CC-HOME: Interior of the caregiving home is not dark or perceptually monotonous. • CC-HOME: Caregiving home is reasonably clean and minimally cluttered.
<p>Health & safety practices</p>	<ul style="list-style-type: none"> • CFOC: 3.1.4.1 Safe Sleep Practices and Sudden Unexpected Infant Death (SUID)/SIDS Risk Reduction • CFOC: 3.1.5.1 Routine Oral Hygiene Activities • NAFCC 4.4: When children are sleeping, the provider can hear them (monitors are permitted) • NAFCC 4.99: Toothbrushes are stored in a manner that prevents the bristles from coming into contact with one another, or dripping on one another. • NAFCC 4.100: The provider offers an opportunity for children to brush their teeth after eating at least once during each day. • NAEYC 5A.12 When infants arrive to the program asleep, or fall asleep, in equipment not specifically designed for infant sleep, the infant is removed and placed in appropriate infant sleep equipment.

Responsive arrangements for families

Component of quality in NTH child care	Selected indicators
Logistical supports: flexibility and convenience	<ul style="list-style-type: none"> • SFSAFCC 1.2.3 Welcome parents to visit at any time • SFSAFCC 1.6.4 Taking time to understand when individual parents have complex needs, such as having children with different partners, joint custody arrangements, etc. • FPTRQ PROVQ10d: Part of my job is to change my work schedule in response to parents' work or school schedule
Child care arrangement and relationship stability	<ul style="list-style-type: none"> • PCRS 5. CG is someone I can rely on
Understanding, respecting, and honoring families' traditions, cultural values, and preferences around childrearing	<ul style="list-style-type: none"> • PCRS 35. Overall childrearing approach matches mine • SFSAFCC Show that all parents are valued and that their unique needs are understood • SFSACB 5.9.1 The program welcomes and affirms the cultures of families it serves by inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important. • SBPI 2.7 The program staff respect my family's cultural and/ or religious beliefs • SBPI 2.8 The program staff have materials for my child that positively reflect our cultural background • PCRS 27. Usually agree with caregiver discipline • SFSAFCC 1.11 Encourage parents to share skills, talents and cultural traditions with children and other parents in the program • SFSAFCC 1.2.1: Include images, artwork, books and/or materials throughout the physical space that reflect the racial and ethnic diversity of parents and families in the program community • FPTRQ PROVQ7a: When planning activities for children in your program, how often are you able to take into account information parents share about their children • FPTRQ PROVQ7b: When planning activities for children in your program, how often are you able to take into account families' values and cultures • FPTRQ PARQ4d: How often does your childcare provider or teacher ask you about the cultural values and beliefs you want him/her to communicate to your child • NAFCC 3.8 The provider seeks information about each family's cultural traditions and is sensitive when using this information during curricula planning and other learning activities. • NAEYC 7.A.2: Show or describe how your program's staff orientation process helps new program staff understand the diversity of families in your program.

Responsive arrangements for families, continued

Component of quality in NTH child care	Selected indicators
<p>Close family-provider relationships</p>	<ul style="list-style-type: none"> • PCRS 10. Work closely with caregiver • PCRS 15. We value our relationship • PCRS 20. Interested in caregiver’s personal life • PCRS 26. Consider caregiver true partner • PCRS 28. Like and enjoy being with caregiver • PCRS 31. If caregiver had problem, I would help • SFSAFCC 1.2.2 Have a place in your home where parents can sit comfortably and talk with you • SFSAFCC 1.6.1 Encouraging all family members who are in parenting roles to feel comfortable and get involved.
<p>Transparent family-provider communication</p>	<ul style="list-style-type: none"> • PCRS 1. Trust caregiver to tell me important things • PCRS 2. We talk about problems right away • PCRS 11. Almost always agree about care • PCRS 14. Communication is open • PCRS 25. Gives me valuable suggestions • SFSACB 1.2: The program has multiple avenues for regular communication with families. • SFSAFCC 1.6.3 Establishing ongoing partnerships with community resources that provide services specifically to fathers, mothers, and/or other parenting adults • SFSAFCC 1.7 Interact daily with each child’s parent; for example, tell parents about the child’s day, email photos and/or share a daily activity log • FPTRQ PROVQ10f: Part of my job is to change activities offered to children in response to families’ feedback • FPTRQ PARQ5e: How often does your childcare provider or teacher provide you with opportunities to make decisions about your child’s education and care • NAEYC 7A.7 Show or describe one example of how staff and families have worked together to plan an event • NAEYC 6B.1 Teachers communication with families is culturally sensitive and professional
<p>Trust</p>	<ul style="list-style-type: none"> • PCRS 3. Truly value caregiver’s opinion • PCRS 4. Caregiver genuinely cares for child • PCRS 22. Trust caregiver to give good care • PCRS 30. Admire the way caregiver works with child • PCRS 32. Confident caregiver knows about children • PCRS 24. When I need help, caregiver will help

Healthy and equitable working and caregiving conditions for providers

Component of quality in NTH child care	Selected indicators
<p>Stress and child care-family balance</p>	<ul style="list-style-type: none"> • CCWJSI Job Demands: I feel like I must look after the needs of my own children while I am working • CCWJSI Job Demands: I must do my own chores or personal business while I am working. • CCWJSI Job Demands: I feel that my licensing specialist makes problems for me. • CCWJSI Job Demands: I feel there are too many government rules and regulations. • NAFCC 5.10 The provider takes precautions to minimize personal stress. • NAEYC 6A.9: Show that your program’s staff handbook includes information about how staff can locate resources that support them in stress management, prevention and treatment of depression, and/or general wellness (PP) • MWSFCC 1.20: The provider establishes a work schedule that allows them the respite they need to maintain the energy and stamina required to care for children. • MWSCB 3.12: The individual needs of staff to maintain a healthy work/family balance are considered when establishing work schedules.
<p>Flexibility and control</p>	<ul style="list-style-type: none"> • CCWJSI Job Demands: Parents bring in children who are sick. • CCWJSI Job Demands: Parents expect me to care for their children when they have a day off. • CCWJSI Job Control: <ul style="list-style-type: none"> – I have to work long hours. – Getting parents to follow the rules and policies. – How much you are paid. – When you are paid. – The number of children you care for. – Taking time off from work when you need it. – Cutting back on the number of hours that you work. – How easy it would be for you to change jobs. – When the parents pick up their children. – Taking time by yourself during the workday.

Healthy and equitable working and caregiving conditions for providers, continued

Component of quality in NTH child care	Selected indicators
<p>Compensation</p>	<ul style="list-style-type: none"> • CCWJSI Job Demands: I feel I should be paid more for the work that I do • MWSFCC 1.1: Fees charged for child care, in combination with other sources of income for the child care business, guarantee that all reasonable and customary expenses will be met and that the provider has an income that at minimum is sufficient to meet the cost of living in the provider’s community. • MWSFCC 1.19: In calculating hours worked for the purpose of setting fees, the provider includes time for planning, preparation, cleaning, shopping, recordkeeping and other paperwork, and conversing with enrolled or prospective parents. • MWSCB 1.6: Wages are paid in full when the program has unexpected closure (e.g., inclement weather days) or when teaching staff are released due to low enrollment.
<p>Sources of support and knowledge</p>	<ul style="list-style-type: none"> • SFSAFCC 1.6.2 Taking part in periodic training on the needs of fathers, mothers, and other adults and family members who are in parenting roles. • CFOC 3.1.4.1: A caregiver/teacher trained in safe sleep practices and approved to care for infants should be present in each room at all times where there is an infant. • CCWJSI Job Demands: I feel that my director is never around when I need help. • MWSCB 5.1: Reflective supervision is provided to each staff member by a supervisor, coach, or mentor. This supervision is individualized to meet the needs of each staff member and to engage their curiosity and deeper thinking. • MWSCB 5.5: The center provides accessible and affordable professional development opportunities that promote collaboration and community building with other professionals – both those who work within the program itself and those who work in other programs across early childhood settings.

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About us

The Illinois Nontraditional-Hour Child Care Study (INCCS) is a collaborative research-policy partnership led by Erikson Institute in collaboration with the University of Chicago Crown Family School of Social Work, Policy and Practice, and Illinois Action for Children. The study addresses critical gaps in knowledge about what quality looks like in nontraditional-hour (NTH) child care; the experiences of families who search for and use NTH child care; the lived experiences of providers who offer care during these hours; and the types of supports needed to maintain, sustain, and grow the supply of NTH care. This research project will provide new knowledge to inform policy development aimed at building supply and increasing equitable access, enhancing quality, and sustaining a thriving NTH child care workforce. All products will be shared with our state partner, the Illinois Department of Human Services.

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Learn More

For the accompanying report, please see: Bromer, J., Ragonese-Barnes, M., Miguel, J., Zhang, S., & Melvin, S. A. (2024). *Understanding quality in nontraditional-hour child care for children, families, and providers: A literature review and conceptual framework*. Erikson Institute.

This report is available to download at:
<https://www.erikson.edu/inccs>.

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