The first five years of a child’s life is a period of incredible cognitive, emotional, and social growth. Providing quality early care and education (ECE) is critical for laying the foundation for success in school and in life. This paper examines the quality of care in Pennsylvania for children ages birth to five.

### Methods

Data were collected from 50 Head Start programs, 48 preschool/nursery schools, 111 family/group child care homes, 46 group child care homes, 198 family child care homes, and 8 legally unregulated/relative/neighboring care providers for a total of 372 sites across Pennsylvania. The reason for this study is to establish a baseline measure of the quality of early care and education. By establishing a baseline, the impact that specific policy interventions have on the overall child care delivery system can be determined along with being instrumental to improvements in the Keystone State program.

The quality of early childhood services varies greatly from home to centers and by form of sponsorship. Many children are cared for informally by adults who are not licensed or regulated by the state, because they take on three or fewer children. A significant number of Pennsylvania children in non-parental, non-regulated care is not known.

### Results

Those providers who have the higher stringent standards, which include Head Start, family/group child care homes, and family child care homes for homes, are scoring higher on the ECERS-R/FDCRS scales.

**Major Findings:**

- Head Start’s quality was significantly higher than all other forms of early care and education programs. Providers with a college degree provided higher quality care (Figure 4).
- Providers/Teachers with a college degree provided higher quality care (Figure 4).
- Early childhood majors have higher quality ECERS-R scores than the teachers whose major was elementary education.
- Providers and teachers with graduate degrees have a more open approach to educators for children and their individual needs.
- Using a curriculum in family child care homes showed a significant relationship to quality.
- Providers with more education and utilizing a curriculum provide a higher level of quality in their programs.
- The overall environmental quality of Pennsylvania child care centers and family/group child care homes has decreased from the mid 1990’s. However, in 2002 there were no comparative data available measuring qualities from 1996 for Head Start programs.

**Comparison**

The overall scores of most early care and education programs were at a minimal or adequate level. Eighty percent of the programs scored at a minimal or adequate level.

The findings show that Head Start and preschool/nursery school programs have the highest quality of care for young children in Pennsylvania. State policy making should focus on utilizing Head Start as a state model. Focusing on the areas that produce the greatest increase in the quality of care at the child care center level will provide a focus on the needs of our existing providers of care.

**Conclusion**

This study has provided valuable information to Pennsylvania on the quality of its early care and education programs in the summer/fall of 2002, which also included quality scores from 1996. The overall quality of care in both center-based and home-based care has dropped after early improvements that had been made between 1980 and 1996. Rates made in the six-year period from 1990-1996 had been reversed in the subsequent time period from 1996-2002. Similar results from an infant child care study (Fiene, 2000) also supported the drop off in child care quality.

More research is needed in this area to determine the factors related to this decline.

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Scarr, S. (1994). Learning activities, the following should be addressed: helping infants and toddlers understand language, helping children to reason, art, and sand/water play, blockades, use of television, and cultural awareness

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This results cannot be described as the average quality of care Pennsylvania children received due to a minimal number of refusals by provider type.

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Head Start programs scored the highest on the ECERS-R/FDCRS scales. However, the ECERS-R/FDCRS scores were taken using a curriculum in family child care homes showed a significant relationship to quality.

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These results when compared to similar statewide child care studies (Melnick & Fiene, 1999), that are excellent reference points to put results in context, are very similar to this study because of utilizing statewide sampling with child care center and home care providers.

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A clear direction for additional training would be to improve overall staff qualifications as well as focus on the specific ECERS-R/FDCRS items that were below a 4.0 level.

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