



# Research Protocol for CityHealth: High-Quality Pre- Kindergarten

Prepared by National Institute for Early Education Research (NIEER)

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## CITYHEALTH: HIGH QUALITY PRE-KINDERGARTEN

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# Research Protocol

### I. **Date of Protocol:** December 23, 2016

**Scope:** Compile data on policies for state and local pre-kindergarten (pre-K) efforts for the 40 largest cities including the District of Columbia. The purpose of the cityhealth project is to collect important public health policies and determine what makes a healthy city. For a particular health policy, the goal is to display the state, county, and city law involved in shaping this policy at the city level. A cross-sectional dataset capturing currently effective results valid through December 1, 2016 was used. This dataset contains coding questions examining policies for state and local pre-k efforts, including an analysis of state and locally funded pre-K programs by evaluating programs against the National Institute for Early Education Research (NIEER) 2015 Yearbook benchmarks.

NIEER conducts academic research to inform policy supporting high-quality, early education for all young children through independent, research-based analysis and technical assistance to policymakers, journalists, researchers, and educators.

Annually, the NIEER State of Preschool Yearbook analyzes state-funded preschool programs' policies on a set of 10 benchmarks that are consistent with what research suggests as minimums for highly effective programs<sup>1</sup>. In the 2016 Yearbook<sup>1</sup> four of the 10 standards involve teacher credentials and training. In order to meet these teacher benchmarks, programs must require teachers to have at least a bachelor's degree; specialization in preschool education; assistant teachers must be required to have at least a Child Development Associate (CDA) or equivalent credential based on coursework; and teachers are required to have at least 15 hours of annual in-service training. Class sizes must be limited to 20 children and have a teacher to child ratio no more than 1 staff member to 10 children. The Early Learning Standards must be comprehensive, covering the five areas identified by the National Education Goals Panel: children's physical well-being and motor development, social/emotional development, approaches to learning, language development, and cognition and general knowledge. Programs must also be comprehensive, serving at least one meal per day; requiring vision, hearing and health screenings and referrals. Finally, the last benchmark requires programs receive an onsite visit for program quality at least once every five years.



## II. Primary Data Collection

- a. **Original project dates:** October 1, 2015 – December 31, 2016
- b. **Data collection methods:** Data were collected through examining public online records including websites, documents such as program guidelines and legislation; the 2016 NIEER Yearbook; as well as interviews with city and/or state pre-K administrators; and any external program evaluations if available as a public record.
- c. **Databases used:** The 2015-2016 NIEER Yearbook and the 2010 U.S. Census Data. When available, state datasets that included pre-K programs at the city level and/or city pre-K database sets were used.
- d. **Search terms:** names of each city and: state funded pre-k, state funded preschool, city funded pre-k, city funded preschool, locally funded pre-k, locally funded preschool, public school pre-k, public school preschool.
- e. **Information about additional inclusion or exclusion criteria:**
  - i. For cities with multiple programs, the cityhealth ranking was based on the program with the greatest enrollment.
  - ii. Programs that were primarily funded with federal funds such as Head Start and the Child Care Development Fund (CCDF) which is funded through the Child Care Development Block Grant (CCDBG) were not included.
  - iii. Only programs that were based in centers or public schools were included.
  - iv. For cities with multiple school districts, the school district with the greatest number of students enrolled was selected.
- f. **Inclusion or exclusion criteria by question**
  - i. **For the Enrollment variable,** “high” enrollment means at least 30% of the city’s 3- and 4-year-old population OR 4-year-old population served. “Low” enrollment means less than 30% of the city’s 3- and 4-year-old population OR 4-year-old population served.
  - ii. **For the Critical Four Benchmarks variable,** these are benchmarks that are critical for positive child impact: a lead teacher with a B.A. degree, a lead teacher specialized training in pre-K, a staff to child ratio of 1:10 or lower, and monitoring via site visits.

## III. Process



- a. After the number of programs were identified in each city, information about each of the programs was gathered through website review; document review, including program guidelines and legislation; the 2016 NIEER Yearbook; and any external evaluations if available. After data were gathered, contacts for each program were emailed or called to verify descriptions of the program. These data were then evaluated to assess if the program's policies met the 10 NIEER benchmarks, including the four critical benchmarks. After the benchmark assessments were made, contacts from each program were again contacted to verify the determinations.

To determine the percentage of children served for the programs, the 2010 census data on the total number of children under five by city was divided by five, to estimate the number of four-year-olds and doubled if the city served three-year-olds. If actual pre-K enrollment numbers were not available, then the state average from the 2015 NIEER Yearbook was used or estimate populations were calculated based on the number of classrooms (# of classrooms X 20 children).

- b. **Quality control:** An external consultant familiar with state and local pre-k programs was engaged to review all of the data and coding. Discrepant items were researched and corrected if necessary. Ranking was revised accordingly.

#### IV. Importation into the MonQcle

- a. On December 13, the data pages were turned over to the research group at Legal Science who worked on importing the data into the MonQcle for rendering on the cityhealth website. The teams met to explain the variables and results as necessary.

#### V. Scoring Criteria

- a. Scoring was primarily based upon the number of benchmarks met by the city's program. To earn a silver or a gold medal, the city program had to at least meet eight out of the following ten benchmarks:
  - i. Comprehensive early learning standards
  - ii. Lead teacher has a B.A.
  - iii. Lead teacher has specialized training in pre-K
  - iv. Assistant teacher has a CDA or equivalent
  - v. At least 15 hours per year of teacher in service professional development
  - vi. Maximum class size of 20 children
  - vii. Staff to child ratio of 1:10 or lower
  - viii. Vision, hearing, health screening and referral and at least 1 support service
  - ix. At least one meal served per day
  - x. Site visits



- b. To earn a silver or gold medal the city program also had to meet all four critical benchmarks. These benchmarks are critical for positive child impact:
  - i. Lead teacher has a B.A.
  - ii. Lead teacher has specialized training in pre-K
  - iii. Staff to child ratio of 1:10 or lower
  - iv. Site visits
  
- c. To earn a gold medal, city programs had to satisfy all of the above and have moderate to high enrollment, as previously defined. City programs that satisfied all of the above criteria but have low enrollment earned a silver medal. Lastly, city programs that fell short of the above criteria but have moderate to high enrollment earned a bronze medal.
  
- d. This scoring criteria is depicted by the chart below:

	No Medal	Bronze	Silver	Gold
Meets at least 8 out of 10 Benchmarks			✓	✓
CBM 1: Lead teacher has a BA			✓	✓
CBM 2: Lead teacher has specialized training in pre-K			✓	✓
CBM 3: Staff-child ratio of 1:10 or lower			✓	✓
CBM 4: Monitoring (site visits)			✓	✓
Program enrollment	Low	Moderate-High	Low	Moderate-High