The Child Care Partnership Project

Using Results to Improve the Lives of Children and Families:

A Guide for Public-Private Child Care Partnerships

Contents

Introduction

Across the country, public and private sector partners are joining forces to improve child care as part of efforts to improve the lives of children and families in their community. These partnerships take many forms, and have diverse plans for helping young children — strategies include increasing public awareness of the importance of high quality care, spending money on more or better child care services, and advocating for changes in the way government, employers and others support high quality care. Each partnership may have a different action plan and a different definition of success. But what they all have in common is a desire to see results, and a need to know that their work is on the right track to achieve those results.

The next section defines many of the key terms in detail, but a brief synopsis here will help. A **"RESULT"** (or outcome) is a "broad condition of well-being for families, children or communities," such as children ready for school. An **"INDICATOR"** is a measure which helps quantify community-wide progress towards the result, such as children reaching developmental milestones. **"PERFORMANCE MEASURES"** track one person's, program's or organization's contribution to that progress. These and other terms are also defined in the glossary.

To do this, a partnership needs to use a new way of measuring and achieving success, called "results-based decisionmaking." Using results-based decisionmaking means that a partnership decides to organize its work around results for children and families; chooses the results, indicators and performance measures on which it will focus; implements the actions it thinks are necessary; measures its progress; and uses this information to constantly improve its work. It means the partnership measures progress based not only on activity, but also on whether it is making a positive difference in the lives of children and families. Changing this definition of success is fundamental to results-based decisionmaking.

This change might seem like a long-overdue shift that everyone would embrace with open arms. Yet, some partnerships are less than enthusiastic — wary even — about results-based decisionmaking. Even though using results in this way can help a partnership accomplish its aims, it sounds complicated, challenging and time-consuming.

But there are many reasons to forge on-there are great rewards in knowing where the partnership is headed and whether it is making progress. Using results has the potential to make the partnership not only more knowledgeable about where it is headed, but more likely to get there. And this guide can help the partnership avoid common pitfalls while using results-based decisionmaking to its fullest advantage.

How can public-private partnerships use results-based decisionmaking?

In general, public-private child care partnerships form when the public sector — federal, state, local and/or tribal officials or agencies — joins with the private sector — families, employers, philanthropies, media, civic groups, and/or service providers — to attain a shared goal of improving child care in their

state or community. The partnership may be formally created by an official body, such as a governor, legislature or mayor; it may form when a few community leaders (such as business leaders) decide to create such a body and then invite others to join; or it may form as a group of peers who see a joint mission. Although each partnership is unique, they typically share some common characteristics:

- They bring together public- and private-sector partners
- Partners work together towards shared goals or objectives
- Each partner contributes time, money, expertise and/or other resources
- Decisionmaking and management responsibilities are shared among the partners

These diverse origins and structures mean that partnerships may be accountable for improving results in many different ways to various groups of people — they may have very little direct accountability or more formal responsibility for specific goals. They may therefore use results-based decisionmaking in a variety of ways.

However, it is important that any accountability relationship be a two-way partnership, rather than an absolute transfer of responsibility. Improving the lives of children and families is difficult work, and no one has guaranteed answers. Creating a fair and effective system means sharing responsibility between those who manage changes and those who work to produce them (Iowa leaders use the terms "results brokers" and "results producers"). It means pooling knowledge and making joint decisions about what works for children and families. It does not mean leading with the threat to criticize or reduce funds but rather with the joint mission of improving services and thereby results for children and families.

It may be helpful to think about three general ways partnerships can use results-based decisionmaking to help them move towards their goals.

> Creating a fair and effective system means sharing responsibility between "results brokers" and "results producers."

1. To manage their own work — as a partnership — to improve the lives of children and families.

Child care partnerships are created, by themselves or others, to improve some aspect of children's lives. The first type of joint accountability, then, is

to themselves or an outside body for their work. This outside body is likely to be the entity that created or funded the partnership, such as the Governor, legislature or a foundation. If there is no formal, outside body to which the partnership is accountable, it may hold itself accountable for its work — or expect that the public would hold it accountable for what it hopes to accomplish.

Partnerships may take on responsibility for limited changes, measured by performance measures. And they may contribute to larger impacts, measured by community-wide indicators.

> There is an important distinction between accountability for the performance of an individual program, and for the status of larger populations.

It is important that partnerships understand the distinction between accountability for an individual program, which can often show changes in a short period of time with limited resources and partners; and accountability for broader changes across larger populations, which usually require diverse coalitions working over longer periods of time.

Babyland Family Services in Newark, New Jersey works with many partners to sponsor a wide variety of child and family services, including child care, home visiting, foster parent recruitment, medical services and parenting support. All are aimed at helping Newark's children learn and grow. Babyland can work with its partners to measure the impact of its combined activities on children and families in its target areas.

2. To manage the work of others (such as contractors or individual partnership members).

The partnership may decide to delegate or contract out some of its work to other individuals and organizations-usually specific activities such as direct services to families. In those cases, partnerships can use performance measures to evaluate the achievements of these other individuals and organizations. Performance measures can tell the partnership how the activities affected the people served, and how this information should influence future program and funding decisions. For example, a partnership may contract with service providers to improve teaching practices and would work with them in taking on accountability for improvements among the teachers they serve.

The Georgia Voluntary Prekindergarten Program provides funds for a variety of child care programs; its child care providers can measure the effectiveness of their work by examining performance measures among the children they serve.

3. To contribute to the work of others (such as peer organizations).

Partnerships may be working with other organizations and systems that are tracking progress in their own area, such as child and family health, educational performance or family wages. They may even decide to collaborate to take joint responsibility for community-wide indicators. Taking this step requires understanding how results-based decisionmaking works, the vocabulary and framework other organizations may use, and how to fit the different approaches together.

Most of the major results that society cares about cannot be achieved by one organization acting alone but require joint work across systems and communities.

The Michigan Child Care Futures Project collaborates with the United Way of Saginaw County; United Way is using performance measures in its program evaluations, and is moving towards setting community– *wide results and indicators. The two partners can collaborate to enhance each other's understanding of using results, indicators and performance measures to improve service delivery.*

The figure below illustrates these three ways of using result-based decisionmaking. Note that the arrows go both ways. Effective and fair accountability requires a two-way relationship, not one-way transfer of responsibility.

Figure 1:

Three types of accountability roles and relationships for public-private partnerships

Oversight Organization

1. TO MANAGE THEIR OWN WORK "results producer"

Child Care Partnership

3. TO CONTRIBUTE TO THE WORK OF OTHERS "results peer"

Peer Organizations

2. TO MANAGE THE WORK OF OTHERS "results broker"

Subcontractor Organizations
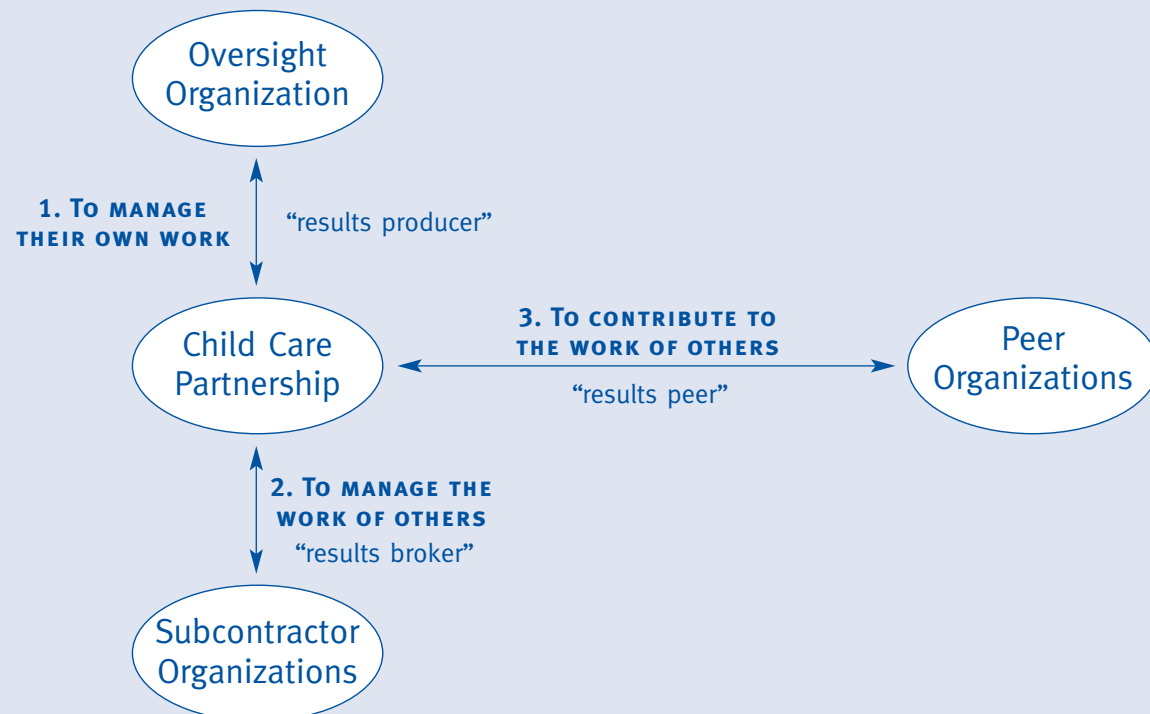
This guide is designed to help partnerships understand these three different ways of using results-based decisionmaking, and how they can use this process most effectively to improve the lives of children and families. The guide is intended to help partnerships recognize and manage the political

issues around results-based decisionmaking, and understand enough about the technical considerations to be able to ask good questions and seek more information.

The guide is organized into the following sections: (1) this introduction; (2) benefits of, and cautions about, using results-based decisionmaking; (3) the language of results-based decisionmaking; (4) the creation of "logic models," which are frameworks for linking the partnership's desired results with activities to effect change; (5) guidelines for using results-based decisionmaking to improve performance; (6) a phased approach for using results-based decisionmaking to improve the lives of children and families; and (7) a conclusion. The appendices also include resources for more detailed information on specific topics.

Benefits and Considerations

In the for-profit sector, measuring results — sales, revenue, profits — is a basic element of the work environment. Knowing who sold the most products, what items are most popular, and what are the revenue forecasts is essential for a profitable bottom line. Comparable information on the status of children is equally

essential to efficient work with children and families. The difficulty has been that the obstacles to developing and using a fair and effective system loom large in the human service sector. Measuring the healthy development of children, and deciding who should be accountable for that result, is often more difficult than measuring and determining accountability for sales and profits of specific products. However, that's not a reason to be daunted; it's a reason to be cautious and to plan carefully.

Reasons for Using Results-Based Decisionmaking

■ *Partnerships can use results-based decisionmaking to help generate interest in and commitment to improving the lives of children and families.*
Improving the status of young children often requires different sectors of the community to work together in new ways. It may require policy change to improve existing systems, decisions to redirecting existing resources and an infusion of new dollars. Implementing these decisions requires support from diverse community stakeholders, including public and private funders, state legislators, service providers, parents, voters and others. Using results-based decisionmaking can generate this support in two ways.

First, having a well-managed public process to set priority results opens up the decisionmaking process to parents and other stakeholders, inviting them to be more invested in success. It can also reduce controversy and issues of turf among sometimes competing stakeholders, by building a process for them to collaborate on an agreed set of results.

Second, taking responsibility for improved results, and then documenting progress, is a powerful tool to generate ongoing support. The combination of changing quantitative data, coupled with stories about children and families, can build a strong case for support among current and future partners.

> Data add substance to what could otherwise be dismissed as anecdotes, while stories add a personal element to cold numbers on a page.

Partnerships can use data to show potential supporters where they are going, why they are going in that direction, and the progress they are making. They can also show why supports for young children can be such a wise investment, both now and over time.

For example, a partnership is formed, and through public discussion and debate it decides that its joint aim will be to improve children's readiness for kindergarten. The partnership uses a process to set its desired result and the strategies to affect that result that encourages joint responsibility for progress and that brings new players together. Making a commitment to measure and report on progress also generates confidence that the public will be able to see progress.

■ *Partnerships can use results-based decisionmaking to help them know where they are, where they want to go, and what progress is reasonable to expect.* Partnerships can maximize their likelihood of success by learning how families and communities are faring before they decide what to do. Baseline data on the status of children and families can help a partnership decide where to go by knowing what issues are most pressing, how its community compares to other places or to research-based standards, and where its efforts can have the most impact. Setting joint results also requires partners who may have different agendas to reach agreement on where they are trying to go together. Of course, data on the current status of children and families isn't the only factor in setting the agenda — the partnership's vision and goals, the political environment, individual members' interests, and other considerations are also critical.[1] But objective data is a key ingredient to shaping effective strategies.

Another key decision is deciding what progress is reasonable to expect. Knowing how a community compares to other places and agreed-upon standards — as well as whether the numbers have been getting better or worse — is vital to making an informed decision about how far the partnership can expect to go. As Lisbeth Schorr has noted, using results helps to expose the myth that society can fix huge problems that have taken decades to develop, with tiny pots of money over relatively brief periods of time.[2] All partnerships need to decide what it will take to achieve their desired results, and what is reasonable to expect, given their resources and scope.

When the partnership begins to study kindergarten readiness, it finds that many children aren't ready for kindergarten when they reach school age. Further study finds that a large number of these children have been in child-care centers where the training for center staff is below recommended standards, and research indicates a connection between training and children's improved development. The partnership decides to invest in a program to give child care teachers at particular centers more training, which will, it hopes, cause them to use more effective teaching techniques, which will improve the quality of child care, which will improve the children's development. The partnership realizes that improved development takes more than training, and that changing the larger population will require more resources than it has alone, but it decides to start there. This is the overall plan (or logic model) that describes where the partnership expects to go, how it will get there, how it will mark progress and why it thinks this will work.

■ *Partnerships can use results-based decisionmaking to help them track and improve performance.*

Partnerships are created to effect improvements, and they need to know and demonstrate if they are making progress. To do so, a partnership needs to know what performance measures it wants to affect, either through its own work or in collaboration with its contractors. Indicators then measure if the individual and joint initiatives across a community are adding up to progress towards the

results. These measures help meet the need to show visible progress, to be accountable for performance, and to keep the partnership members (and funders) committed to the work. They can also be used as a management tool enabling the partnership to make corrections to keep improving its work.

To carry the example forward, suppose that the partnership now designs and conducts a training program. It pays attention not only to how many teachers sign up and complete the course, but also whether it made any difference. One performance measure would be the degree to which providers in the program learned the material. Another would be whether the training had an impact on child development among the children served. So the partnership would need to measure changes in the behavior of teachers in the classroom, and changes in the children's behavior. While the partnership's program is likely to affect teacher learning, it will be harder to affect children's development. But each set of performance measures — changes in teacher knowledge, changes in teacher behavior and changes in children's development — would give information to the partnership and others about whether the partnership's work was effective in changing teachers' behavior and in helping children. It would also show what measures could not be impacted by a single program. This information in turns tells the partnership if something needs to be added or modified.

So, the partnership then finds out that teachers who go through the program increased their understanding of child development, teaching techniques, effective discipline, etc. But they did not always use their techniques in the classroom, and children's development did not change much. The $64,000 question is, what does the partnership do with this information?

■ *Partnerships can use results-based decisionmaking to help them decide what to do next.*

Setting results and using indicator and performance measure data on children, families, and the early childhood system is essential to managing the partnership effectively. This may mean the partnership manages its agenda or resources differently — taking on different activities, shifting money from one activity to another, asking new players to do old things, or inspiring old players to do new things. Faced with slumping sales figures, a com-

> The power of results and indicators is not just in collecting data—it's in taking the much harder step of using those data to change what the partnership or its service providers are doing.

pany would galvanize into action to figure out the cause. Is it a poor product? Changing demand? New competitor? Slump in the economy? Key salesperson out sick? All of these are possible, and each calls for a different solution. If the problem is new competition, and the company mistakenly fires its best salesperson, it's made a critical mistake. To use results-based decisionmaking successfully, organizations need to find out:

- ■ what is happening,
- ■ why it is happening, and
- ■ what could improve the partnership's progress.

> The example continues...With the information described above, the partnership can celebrate what it has accomplished and increase its focus on what needs to be changed or added. It also realizes that its expectations about what it can accomplish need to be commensurate with its level of activity and amount of resources. The partnership may realize that a good training course for child care providers can be expected to increase their knowledge. But it may not be enough to increase their performance and improve children's overall experience. As it considers what to do next, it will want to note where its achievements on performance measures met expectations, where they didn't, why they didn't, and what should happen differently in the future. Based on these data, the partnership decides that it has a great teacher training course, but it needs to be supplemented with work to reduce child-teacher ratios, provide better teaching supplies, develop a mentoring component, and offer refresher courses. The story continues...

A Few Considerations and Cautions

The move to results-based decisionmaking is a powerful shift — it can change everything from multi-year plans for billions of dollars, to an individual child care provider's ability to teach a child in the way she thinks will work best. But it is not without challenges. There are reasons why the

current systems have developed, and why they are so hard to change. A brief sketch of the challenges may help partnerships address them.

■ *Demand for quick, tangible change.* There is a temptation to fund only those activities, and work with only those populations, that can generate quick and tangible changes. However, often the partnership needs to be able to support activities that do not generate changes so readily or easily. Partnerships (and their funders) should be realistic about what it takes to achieve desired results and how long it will take for change to be visible. Furthermore, they will need to decide how to address activities that are widely supported but virtually impossible to measure, such as services that are very informal, time-limited or anonymous (e.g., parent warmlines). (More on this later.)

■ *Attribution.* Partnerships generally choose activities, performance measures and indicators, on the assumption that the activity will cause the desired change in the performance measures (and perhaps even in the indicators). Yet one of the most challenging aspects of shifting to results-based decisionmaking is being able to prove that a particular activity caused the targeted measure to change — that the change could be attributed to the activity. Indicators and performance measures may change for reasons unrelated to a particular activity, and claiming that an activity directly caused a measure to change requires a fairly sophisticated level of logic and data analysis. For this reason, partnerships need to be careful about the level of attribution they claim.[3] Appendix 3 gives more detail about measuring and analyzing data.

■ *Data availability.* It's often difficult to find or measure data for many of the indicators and even performance measures partnerships care about, especially changes in behavior or knowledge in young children. Partnerships may need to find proxies, use creative evaluation methods, and know the limits of the data.

■ *Potential for unintended effects.* Measuring changes in indicators or performance measures among specific subgroups of children and using those data to make decisions about services or placement for them can lead to harmful labeling or tracking of children. Accurately testing very young children is especially difficult (more on this later). For this reason, most experts do not recommend individual testing of very young children (except for diagnoses of specific disabilities or delays). Many experts also recommend creative testing methods, such as portfolios and asset-based methods, that may be less subject to misuse.

■ *Consequences.* Using results, indicators and performance measures effectively is inherently controversial, since it involves assessing who or

why the program performed as it did before deciding what to do to improve. They also need to ensure there is a collaborative relationship between those who manage changes and those who work to produce those changes.

■ *Continued need for basic protections.* Systems that use results-based decisionmaking still need to maintain basic health, safety and civil rights protections. As indicated in the first bullet above, people can use the demand for quick, tangible change as an excuse to serve only certain groups, or to skimp on activities that do not seem to contribute directly to what is being measured. For example, ensuring that a child care center meets basic fire codes may not contribute visibly to improved outcomes — but those restrictions exist for good reasons. Therefore, there is a need to maintain certain basic requirements and boundaries to ensure that fundamental protections are kept in place.

These issues and concerns are not reasons to avoid results-based decisionmaking. But they do illustrate why partnerships need to be extremely careful to design decisionmaking systems that "do no harm." The guidelines described later can help create a system that works for everyone.

what is productive, or not, and how to improve effectiveness. One of the toughest parts of results-based decisionmaking is creating a fair and effective relationship between a level of achievement on a performance measure and the consequences of that performance. Too often poor performance by a particular service provider is automatically associated with decreased funding, when other responses might be more effective at improving performance. Or the opposite problem occurs — funding continues to flow to ineffective service providers or services when it could be redirected to more productive uses. Partnerships need to be extremely careful to separate performance from consequences — to ensure that they know exactly

NOTES

[1] See The Child Care Partnership Project/The Finance Project, *A Guide to Successful Public-Private Partnerships for Child Care*, Washington, D.C.: U.S. DHHS/Child Care Bureau, 1999.

[2] Lisbeth Schorr, with Frank Farrow, David Hornbeck and Sara Watson, *The Case for Moving to Results-Based Accountability*, Washington, DC: Center for the Study of Social Policy, 1995.

[3] For a more detailed discussion of attribution, see Child Trends, *Children and Welfare Reform: A Guide to Evaluating the Effects of State Welfare Policies on Children*, Washington, D.C.: author, no date.

The Language of Results-Based Decisionmaking

CONCEPTS AND TERMS

In order to measure results, partnerships must become familiar with the language of results-based decisionmaking.[4] Once the major concepts are clear, and the partnership has agreed on its

own words for these concepts, partnerships will know that the members of their own group mean the same thing when they use the same words.

And understanding their own terminology will help partnership members understand the different terms that other groups use-they will have

their own "Rosetta Stone" that they can use to translate back and forth between the different vocabulary used by different groups. The figure and then the table below show the three major categories of terms used in this guide. (The terms are also defined in the glossary.)

Figure 2:

Results, indicators and performance measures

RESULTS
Broad conditions
of well being

INDICATORS
Measures of community-wide progress
toward results

PERFORMANCE MEASURES
Measures of program-specific progress on indicators,
or level or quality of services
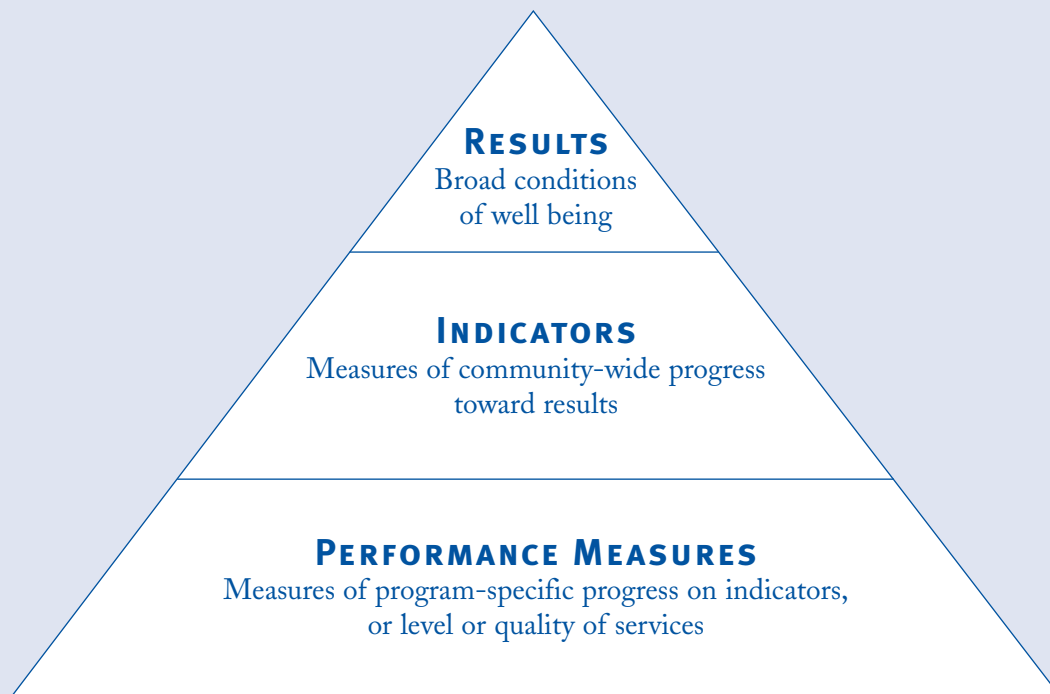
Results:

The "results" category is the general aim or outcome to which the partnership is trying to contribute. The framework starts here because any initiative, like any business venture, should start with what it wants to accomplish. This category reflects what communities and families ultimately want to happen for young children. Results generally can't be measured directly but are the catch phrases that generate commitment and enthusiasm for this work. A partnership working alone usually will not be able to achieve the result, but its work should contribute to it.

Indicators:

"Indicators" are the measurable elements of the desired result and show if the partnership is on the right path towards achieving its results. Results, indicators and the performance measures that reflect the effect of the work are "*ends*" rather than "*means*"; they capture what a partnership wants to happen — changes in the people or systems the partnership wants to affect — not the measures of the partnership's activity to get there.

Indicators reflect substantial changes — generally behavior or status — across an entire community. Influencing indicator data generally requires action by multiple partners rather than any single program or individual.

Depending on the size of the community, the intractability of the problem, and the size of the investment, indicators can change in the shorter term (a few years) or take much longer to change.

The concept of indicators can also be used to measure changes not only among children and families but also among systems or policies. Progress would be measured by "systems" indica-

tors (such as enactment of a law) among a target population of decision makers (such as the legislature). (The next chapter explores these two types of indicators in more detail.)

Any given indicator can be expressed in different ways:

- *Level of specificity:* Indicators can be expressed in general terms (improved reading scores) or in terms of specific achievement levels within a specific population over a specific period of time (improve the percentage of children reading by the end of first grade by 10 percent in 2 years within all public school children in this county). These more specific indicators can express what the partnership plans to achieve, or a particular standard against which the partnership will measure progress (e.g., progress towards a standard of 100% immunization). Partnerships may express their desired indicators in general terms initially, but they will need to provide the latter level of specificity when they move to determining the specific level of performance for which they are being held accountable, or for which they are holding others accountable.

> Indicators expressed in more specific terms are often called "benchmarks" or "milestones."

- *Rates or numbers:* Indicators can be expressed in terms of numbers or rates; generally both are necessary for a complete picture. Numbers give a sense of the scope of the problem or program, while rates are necessary to know if changes in the indicator are reflecting real differences in the status of the target population. Knowing that the number of children

not reading by the end of first grade grew from 3,000 to 3,200 does not show whether this reflects an increase or decrease of the prevalence of the problem among the entire population. But knowing that the percentage of children not reading decreased from 10% of 30,000 children to 8% of 40,000 children not only reveals the scope of the problem, but shows that it is actually improving among the overall population.

PERFORMANCE MEASURES:

In a complete results-based decisionmaking system, it is important to consider how to allocate responsibility for change among the different partners. Each individual or program that is contributing to changing the community-wide indicator has a role to play. "*Performance measures*" reflect changes that one worker, stakeholder, program or organization can expect to affect. Performance measures are vehicles for individual programs to evaluate their own contributions to changes in indicators for the entire community.

Performance measures can be divided into two types:

- *"Effect or product"* measures that reflect the impact of the work on children and families.

  These answer the question "Is anyone better off" because of the work. They can reflect changes in the knowledge, skills, attitudes, behavior, or status of the target population. Generally, those terms are in ascending order of difficulty in terms of both measuring and achieving them. That is, it's usually more powerful to say that people changed their behavior than to say that they learned something, but learning something is still better than just reporting that they sat in a class for

a certain number of hours. However, performance measures by definition reflect changes that a single actor or organization can affect. Therefore, they tend to reflect smaller changes than indicators.

However, they do share some similarities with indicators. Performance measures can reflect changes in people or systems; they can be expressed generally, or as a specific level of achievement; and as rates or numbers.

It is important to point out that there can be some overlap between indicators and performance measures. If a community is very small, or a program very big, the program-specific performance measure may be the same as the community-wide indicator. Also, very intensive programs, serving small groups of people, can sometimes affect the larger changes in behavior that are usually thought of as indicators.

- *"Effort or process"* measures that reflect the level or quality of activity.

  These reflect actions a partnership takes, the amount of services it provides, the products it produces, the money it raises or spends,

and the number of people it serves. Varieties include:

- Materials that go into a program (funds, people, in-kind donations, volunteer hours, etc.).

- The activity produced because of the program (number of newsletters or brochures published, classes held, etc.).

- Measures of the quality of the program. Examples are error rates, lag time between referral and service, compliance with service delivery standards, accident rates, and customer satisfaction. For a child care center, one measure would be the student-teacher ratio. For a collaborative partnership, one measure would be the number and type of partners involved.

Changing the definition of success to focus on results, indicators and the "effect" form of performance measures, rather than on the "effort" form of performance measures is fundamental to using results-based decisionmaking. However, measures of effort are still important.

At the planning stage, partnerships need to consider what needs to go into a program in order to

have a realistic chance of affecting what happens because of the program. Then at the implementation stage, knowing how a service or activity is performing on effort or process measures is the first step in knowing if the service is on track to achieve the desired changes. For example, service providers need to have people coming to their

programs if they hope to effect change. Collaboratives need to have the right partners at the table to hope to effect systemic change. Knowing how the programs are performing on these measures can also help the partnership evaluate why a service reached the desired achievement level on its performance measures or not.

Figure 3:
Definitions of terms

Definitions	Measurement	Examples	
RESULT OR OUTCOME: *(Community-wide)* A condition of well-being for children, adults, families, or communities.	The result is the vision or goal of the partnership. Results generally cannot be measured directly but rather are composites of various indicators.	Children ready for kindergarten, children and youth succeeding in school, children in nurturing environments	**ENDS**
INDICATOR: *(Community-wide)* A measure, for which data are available, which helps quantify the achievement of the desired result for community-wide populations.	Indicators can: • Change over a few years or several decades • Reflect changes in people or systems • Be expressed generally or as a specific level of achievement expected by a specific time • Be specified as rates or numbers	Rates of children reading by the end of first grade, rates of children left alone after school before appropriate age	
PERFORMANCE MEASURE: *(Program-specific)* A measure, for which data are available, of the impact of agency or program service delivery; or the quantity or quality of agency or program service delivery. It quantifies the contributions of individual people or programs towards movement on the indicators.	Performance measures reflect the contributions of individual stakeholders, workers, programs or organizations. Performance measures can measure either "effect/product" or "effort/process": Effect measures can be: • Changes in knowledge, skills, attitudes, behavior or status of the target population • Expressed generally or as a specific level of achievement by a specific time • Specified as rates or numbers.	Rates of children completing homework on time, rates of child care teachers using new skills.	
	Effort/process measures can include: • "Raw materials" that go into a program — dollars, in-kind donations • Levels of activity — number of classes, products • Measures of the quality of a service — customer satisfaction, error rates.	Number of students in classes, hours of staff training, student-teacher ratio.	**MEANS**

One of the most difficult aspects of results-based decisionmaking is the distinction between measures of effect and measures of effort. The table below describes some common areas of confusion. The elements in the first column are sometimes thought of as measures of effect. While they may be important measures and have their own uses, they usually don't measure changes in the population. The third column shows what would be a better measure of effect.

Figure 4:
Common pitfalls in defining measures of "effort" and "effect"

Avoid:	Because:	Use Instead:
Anecdotes about the impact of a service	Stories can be very important to put a human face on otherwise cold numbers. But they are not, by themselves, sufficient to measure effect or impact.	Rates of changes of behavior among people served by a particular program
Client satisfaction with a service	Parent satisfaction with child care is an extremely important measure and needs to be taken into account. However, it should not be the only measure of progress. Parents may be happy with mediocre child care, because they don't have other experiences to which they can compare it. Or a parent or teacher may be dissatisfied with a service (such as a challenging teacher training class) precisely because it is holding them to a high standard.	Measures of client changes because of a service
Descriptions of how hard people are working	Improving children's and families' lives is hard, and people want to be acknowledged for how hard they try. This acknowledgement should be an important part of any report. But measures of effect go beyond that level and talk about what happened because of the work, and what changes need to be made to reach higher levels of achievement.	Measures of the changes that happen because of the work

CRITERIA FOR SELECTING RESULTS, INDICATORS AND PERFORMANCE MEASURES

Choosing the right results, indicators and performance measures is key to an initiative that does the right things, measures the right things, and gets credit for the right things. This choice is every bit as much a political choice-reflecting what people care about-as a technical choice-reflecting what statistics are available and accurate. Here are three basic criteria to consider when the partnership is choosing its set of measures:[5]

■ *Communication and political power:* Partnerships should choose results, indicators and performance measures that the members and key stakeholders understand and care about, and that can persuade even skeptics to support the partnership's work. While partnerships may need to measure some "smaller" performance measures that can change quickly (e.g., teacher knowledge among a specific population served), in order to mark progress and achieve some quick successes, it is the "larger" indicators (e.g., reading scores across the community) that carry the most political weight and will figure most heavily in policy decisions. The list of indicators should also be short enough to capture people's attention and convey a clear message.

■ *Data power:* Indicators and performance measures must be variables for which reliable and accurate data are currently and readily available. (More on this in appendix 3.)

■ *Proxy power:* There should be a known relationship among the performance measures, indicators and the results, either from research findings or best practices based on experience. The indicators should correspond to the status or events that the partnership wants to measure.

MATCHING EXPECTATIONS TO RESOURCES

Another key to success in using results-based decisionmaking is setting expectations about achievement that are commensurate with the partnership's resources and timelines. No one really knows how much change in "performance measures" is needed to add up to changes in community-wide indicators. Most partnerships will address only a part of the population, and only some of the factors that need to change in order to see larger effects in the community. The partnership, and the entities to which it is accountable, need to keep re-evaluating the match between what the partnership can effect, and what needs to happen to see community-wide results.

Using a logic model (more on this follows) enables partnerships to lay out exactly what they are doing, what impact they hope each activity has on the people it serves, and how these programs are expected to "add up to" the desired changes in indicators. It can help prevent people from making claims far beyond what they hope to affect. Two points are key:

■ *Separate program-specific performance measures from community-wide indicators; expect progress only among the target population, systems, etc., that the partnership can serve with the funds and time that it has.* One of the key mistakes often made in using results-based decisionmaking is expecting changes in the client population of one program to translate into changes in the status of larger populations. It is quite common for performance measures among clients of a particular program to show improvement, while indicators among the population at large continue to worsen. Partnerships should not expect to change the rate of school readiness for all children if they only have funds to serve 3% of the children who need help-or if they are only providing one element when the children need much more. An initiative that aims for even broader results, such as parents working, will need to include elements in addition to child care to reach its desired aim. However, the logic model shows how the package of strategies and activities is expected to contribute to the broader indicators.

■ *Use baselines to see what future performance is reasonable to expect.* A baseline charts indicators and performance measures over time. Partnerships need to review past data on a particular indicator or performance measure to have any basis for estimating what a reasonable expectation of change would be. If the trends have been getting worse over time, just reducing the rate at which trends are worsening is a real victory — and should be treated as such.

> Partnerships may need to work towards their desired results in stages — and make sure that they don't make public claims that exceed what is reasonable to expect.

Partnerships shouldn't be discouraged by limited resources. But they may need to work towards their desired results in stages-and make sure that they don't make public claims that exceed what is reasonable to expect. For example, if a partnership is working toward school readiness, this year's intervention may aim to improve children's development in a limited area, with later expansion that will move closer towards the ultimate result.

NOTES

[4] Based on Mark Friedman, *A Strategy Map for Results-Based Budgeting*, Washington, D.C.: The Finance Project, September 1996; and Atelia Melaville, *A Guide to Selecting Results and Indicators*, Washington, D.C.: The Finance Project, May 1997.

[5] Adapted from Mark Friedman, *A Strategy Map for Results-Based Budgeting*, Washington, D.C.: The Finance Project, September 1996; and Atelia Melaville, *A Guide to Selecting Results and Indicators*, Washington, D.C.: The Finance Project, May 1997.

Tying Results to Strategies: The Logic Model

The next step in using results and indicators is to put them into a form that lets a partnership see how its strategies and activities are related to its desired results and indicators. One way is by using a "logic model." A logic model is a framework that helps the partnership lay out its desired results, what affects those results, what it plans to do, and how it will measure progress.

Partnerships can use the logic model in ways that correspond to the three "roles" described in the introduction:

■ First, the logic model shows the relationship between the partnership's larger goal (its results), the activities it is pursuing to get there, and how it will measure progress along the way. This reflects the partnership's "theory of change"—its concept of what strategies and actions will cause desired changes in children's status and well-being.[6] This helps the partnership **MANAGE ITS OWN WORK,** both initially and on an ongoing basis. It helps show if its expected changes are reasonable, given its resources and time. And it serves as a record of the partnership's assumptions, in case it does not have its desired impact.

■ Second, partnerships can use a logic model to **HELP MANAGE OTHERS' WORK**—to decide what work to "subcontract" to others. The work of these subcontractors should fit within the logic model; partnerships can even use the model as the basis for a request for proposals.

■ Third, the logic model can show how the partnership's specific activities can fit with the **WORK OF OTHER ORGANIZATIONS TO ADDRESS ALL OF THE FACTORS NECESSARY TO ACHIEVE SOME RESULT.** It can show in stark relief how difficult it is for any one entity to address all of the factors affecting the desired result. It is very possible, and even common, for individual programs to do well, while indicators among the larger population do not improve. In that case, partnerships need to go back to the logic model to see what else it needs to do, or what other partners need to do, to move toward the desired result.

There are many different logic models, just as there are many frameworks for learning about results-based decisionmaking. Below is one that can work for many public-private partnerships—partnerships may want to consider several approaches before choosing or modifying a particular model to fit their circumstances. Again, once the concepts are familiar, one would be able to apply the same understanding to any logic model.

Bear in mind that any state or community effort to improve school readiness will inevitably be a complex undertaking. The logic model—like an architect's scale model of a building—is not meant to be a detailed "blueprint" of what needs to happen. It is rather a place to lay out the major

Figure 5A:

A Logic Model for Public-Private Child Care Partnerships

Elements of the Model		As Measured By	
RESULTS ↓	⟷	**INDICATORS** *Ultimate indicators* *Interim indicators*	*REQUIRE COMMUNITY-WIDE EFFORT TO AFFECT*
"THE STORY" — CONDITIONS AND CAUSES ↓			
STRATEGIES ↓		**PERFORMANCE MEASURES** *Measures of effect* *Measures of effort*	*CAN BE AFFECTED BY THE PARTNERSHIP*
ACTIVITIES			
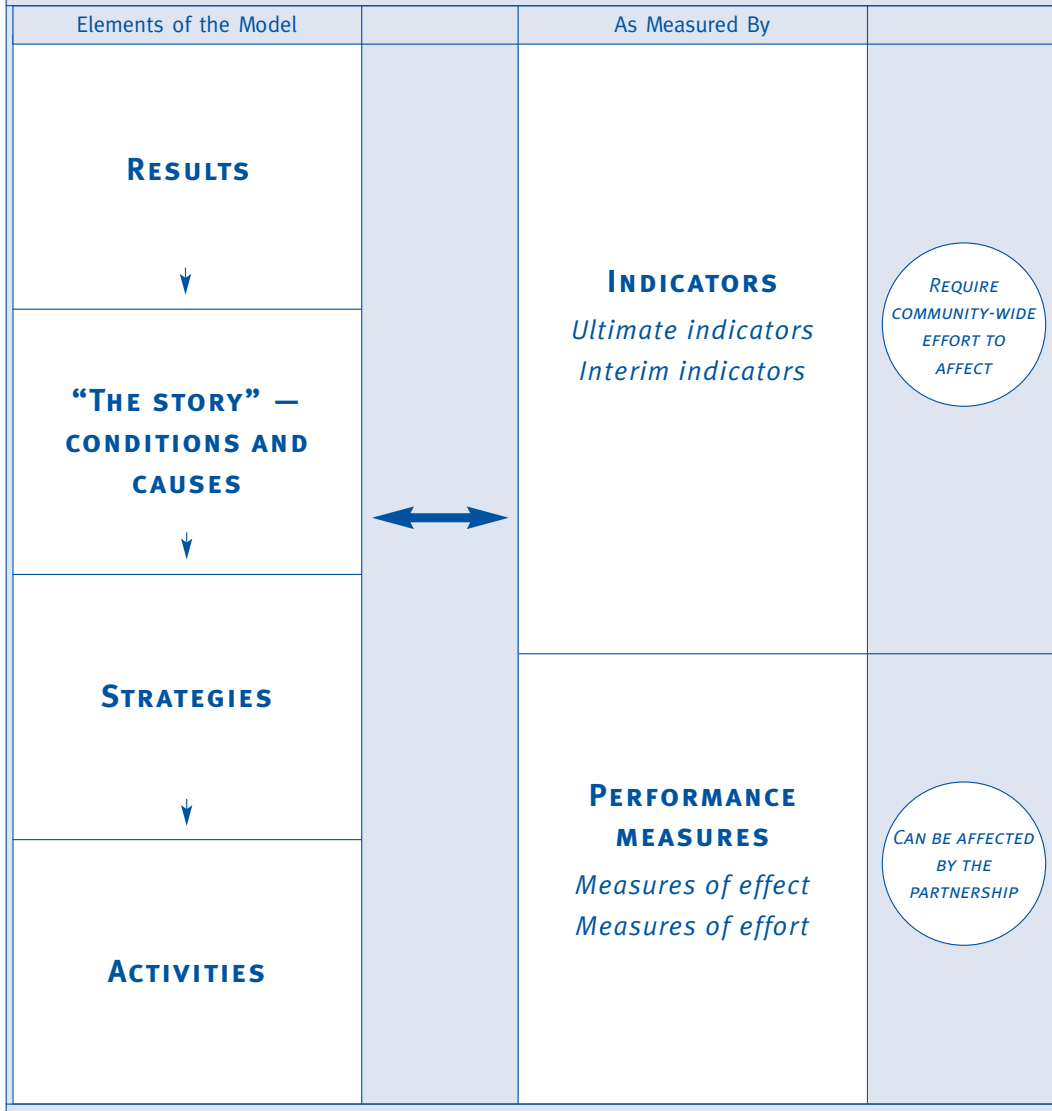
This logic model builds on earlier work by Mark Friedman but has been adapted to fit the particular characteristics of public-private child care partnerships.

Figure 5B:

A Logic Model for Public-Private Child Care Partnerships

Elements of the Model		As Measured By	

RESULTS

The partnership's overall vision for the well-being of children, families and the community.

(e.g., children arriving at kindergarten ready for school),

"THE STORY" — CONDITIONS AND CAUSES

"The story behind the numbers" — the conditions, causes, circumstances, assets, factors, issues, etc., that need to change to achieve the results. Based on research and knowledge about best practices. The partnership will work on some subset of these.

(e.g., insufficient teacher training and skills to work effectively with young children)

STRATEGIES

The broad approach or general action plan the partnership will pursue to change its chosen subset of conditions or causes, including the resources and partners required for success.

(e.g., programs to improve opportunities for child care providers to learn and use new skills)

ACTIVITIES

"What works"—the actions, programs, services, interventions, etc. that the partnership will use to implement the strategies. Includes resources and partners.

(e.g., child care provider training work-shops, mentoring by master teachers)

INDICATORS

Ultimate indicators:
Measure long-term elements of or progress towards the desired results.
(e.g., children scoring well on kinder-garten assessments)

Interim indicators:
Measure short-term elements of or progress towards the desired results. Reflects changes in the conditions or causes that affect achievement of the result.
(e.g., percentage of certified teachers across a whole community, or percentage of children across a whole community scoring well on individual measures of school readiness)

PERFORMANCE MEASURES

Measures of effect:
Measure changes in the target population served by a particular individual, program or organization.
(e.g., child care providers in a particular program have greater knowledge about child development and demonstrate that knowledge by using more effective teaching techniques)

Measures of effort:
Measure activity—how much did the partnership do and how well did it do it.
(e.g., the number of child care providers participating in professional development classes)

REQUIRE COMMUNITY-WIDE EFFORT TO AFFECT

CAN BE AFFECTED BY THE PARTNERSHIP

strategies, to see how they fit together, and whether they can be expected to "add up" to the changes the partnership wants to see.

Elements of the Logic Model

The left column (results, conditions, strategies, activities) shows the basic elements of the logic model (and should be reflected in the partnership's action plan):

- **Result:** The logic model starts with the partnership's desired result — what is its vision, what does it ultimately want to happen or exist in its community? (Example: children arriving at kindergarten ready for school)

- **Conditions and causes:** The next step is to examine the "story" behind the results — what are conditions, causes, circumstances or factors that the partnership needs to affect to move towards the result. These reflect what causes the result to happen or prevents it from happening. These conditions should be based on research or at least specific experience about what works. (Example: insufficient child care provider training and skills to work effectively with young children)

- **Strategies**: The next step is to examine the broad approaches or strategies that will affect those conditions or causes in order to reach the results. Both the strategies and the activities need to include the partners who will work with the partnership to implement the plan. (Example: improve opportunities for child care providers to learn and use new skills)

- **Activities**: The final step is the activities, programs, interventions, services, etc., that need to be implemented to carry out the strategies. (Example: increase child care provider training, provide mentoring by master teachers)

Each activity the partnership pursues will probably change only one or a few of the conditions and causes that would need to change in order to reach the desired result. It may also affect only a subset of the total target population. So the partnership needs to think about how much activity it needs to bring about the desired improvements.

Each element should also be based on research and/or experience that explain why a bad condition exists or a good condition does not exist (the conditions and causes) and what will fix it (strategies and activities).

Measurements of Progress

The right column (ultimate indicators, interim indicators and performance measures) measures progress along each element of the logic model.

- **Ultimate indicators** reflect progress toward the result. They are usually a very few, important,

well-known measures that convey significant changes in status or behavior. They usually take a long time and require significant investment to change. The partnership's logic model reflects its expectation that its interim indicators and performance measures will contribute to the ultimate indicators. (Example: children scoring well on specific kindergarten readiness assessments)

■ **INTERIM INDICATORS** reflect the status of community-wide populations in the short term. They can be useful to document progress on the specific factors that the community feels will affect progress on the result. Successful performance can provide a sense of momentum to encourage the partnership and its partners to keep working

> One of the greatest difficulties in using results-based decisionmaking in the context of child care is developing and collecting data for indicators and performance measures. While other fields such as health care and juvenile justice have a longer history of defining and collecting data for indicators, the early childhood field is at an earlier stage of development in identifying measures that are appropriate and feasible.

towards the ultimate indicators. If the partnership's performance measures are good, but the community-wide indicators are worsening, the partnership and its partners need to re-examine the plausibility that their individual and collective programs can affect the desired indicators. (Example: percentage of certified teachers across a whole community)

■ **PERFORMANCE MEASURES** are of two types:

- *Measures of "effect"* reflect the contributions of individual workers, stakeholders, programs or organizations towards progress on indicators. They allow the partnership to measure its own impacts and how they contribute to the larger changes. (Example: teachers in a particular program have greater knowledge about child development and demonstrate that knowledge by using more effective teaching techniques)

- *Measures of "effort"* help the partnership evaluate how it is implementing its strategies and activities. These measures allow the partnership to see if services are being delivered in ways that have the best chance of achieving the desired level of performance. They can show the partnership if it is on the right track before it can expect performance measures to change. (Example: the number of teachers participating in professional development classes)

The following examples illustrate how child care partnerships could employ logic models to plan and track their work.

EXAMPLE ONE: DIRECT SERVICES

In this example, a public-private partnership has decided that it wants to improve school readiness of kindergarteners for children within a particular school district. One way to do this is to improve the quality and expand the availability of child care for these children. Again, it is important that the logic model reflect reasonable expectations for the resources and time available. The two logic model examples below show a few of the many factors,

Figure 6:

A Logic Model for Direct Services to Children and Families to Improve School Readiness

Elements of the Plan		As measured by
RESULT ■ Improve school readiness of kindergarteners ↓ **CONDITIONS AND CAUSES** ■ Insufficient teacher training, which results in poorer quality care in certain centers ■ Lack of available slots with high quality child care providers ■ Etc. ↓ **STRATEGIES** ■ Teacher training ■ Accreditation of child care centers and child care homes ■ Etc. ↓ **ACTIVITIES** ■ In-service training class for child care aides and teachers ■ Subsidize and provide technical assistance to centers and homes that work towards and become accredited. ■ Etc.	↔	**ULTIMATE INDICATORS** ■ All children will enter kindergarten with readiness scores at or above the national norm **INTERIM INDICATORS** ■ More certified teachers across the entire community ■ Children across the community show improve readiness on one or more dimensions **PERFORMANCE MEASURES** *"Effect"* ■ Teachers in a particular program receive certification of their increased knowledge and skills. ■ More children from the targeted centers show behavioral, social and emotional readiness **PERFORMANCE MEASURES** *"Effort"* ■ Number of child care providers participated in the training ■ Number of children receiving care in newly accredited homes and centers

(Note that this logic model describes only part of the factors, strategies, etc., involved in improving school readiness.)

strategies and activities that a partnership might want to pursue; a complete logic model would have additional information reflecting all of the community's unique circumstances and preferences.

Example Two: Policy Changes

Improving results for children and families often requires not only changes in direct services to children and families, but also changes in the child and family system, including child care. Partnerships can track their progress in changing systems by using interim indicators of systems change. (Indicators of systems change are important because the partnership expects they will support ultimate indicators of improvements in child and family well-being.)

The logic model can incorporate both services to children and families (measured by data on child and family well-being) and activities to change systems (measured by data on systems change).

For example, in order to affect the ultimate indicator of "children ready for school," a partnership may aim to change regulations or laws concerning teacher-child ratios, teacher certification require-ments, or reimbursement rates. In this case, changes that require multiple actors across a community — such as enacting new state laws — would be tracked by interim indicators. Changes that the partner-ship can affect — perhaps wages within a limited area as well as its activities to effect this change — would be tracked by performance measures.

The figure below shows a logic model for systemic or policy changes to move towards the result of school readiness.

Here the "conditions and causes" are systemic changes, such as changes in rules or processes that will themselves result in better services for children and families. Strategies and activities to change those conditions or causes involve work with systems rather than children and families directly. The indicators and performance measures also reflect systemic change activities rather than direct services.

Making progress on results will usually require a combination of direct services and policy changes. Developing the logic model helps partnerships be clear in their thinking and logic about what conditions and causes affect a desired result, and which strategies and activities are needed to address each element.

Figure 7:

A Logic Model for Policy Changes to Improve School Readiness

Elements of the Plan		As measured by
RESULT ■ Improve school readiness of kindergarteners		**ULTIMATE INDICATORS** ■ Children will enter kindergarten with readiness scores at or above the national norm
CONDITIONS AND CAUSES ■ Insufficient child care facilities and therefore child care slots, which means some children are receiving care that does not prepare them for school ■ High teacher-child ratios and high teacher turnover, both of which are linked with substandard care that does not prepare children sufficiently for kindergarten ■ Etc.	⟷	**INTERIM INDICATORS** ■ Creation of 500 new slots for licensed center and home-based care ■ New regulations enacted, or other voluntary compliance with lower ratios ■ Policy changes that increase reimbursement rates from the government for publicly-sponsored child care, leading to higher pay; establishment of a better career track for teachers, leading to higher satisfaction and lower turnover
STRATEGIES ■ Expand child care slots ■ Improve conditions for child care teachers ■ Increase funding for new child care facilities ■ Etc.		**PERFORMANCE MEASURES** *"Effect"* ■ Creation of a fund to support teacher wages within a particular school ■ Change in selected employers' policies on supporting high quality child care
ACTIVITIES ■ Expand available licensed center and home-based child care for an additional 500 pre-school children by expanding public reimbursement for child care, and creating a facilities fund to encourage development of more child care facilities ■ Advocacy work to change regulations to reduce teacher-child ratios ■ Establish a collaborative effort to increase teacher satisfaction to reduce teacher turnover ■ Etc.		**PERFORMANCE MEASURES** *"Effort"* ■ Development of a written plan to create a facilities fund ■ Meetings with legislators on teacher-child ratios, reimbursement rates, etc. ■ Collaborative meetings on teacher turnover, recommendations written and submitted to policymakers ■ Number of employers and other partners in the collaborative

(Note that this logic model describes only part of the factors, strategies, etc., involved in improving school readiness.)

NOTES

6 Carol Weiss, "Nothing As Practical As Good Theory: Exploring Theory-Based Evaluation for Comprehensive Community Initiatives for Children and Families," in James Connell, Anne Kubisch, Lisbeth Schorr and Carol Weiss, eds., *New Approaches to Evaluating Community Initiatives: Concepts, Methods and Contexts* (Washington, D.C.: The Aspen Institute, 1995). See also James Connell and Anne Kubisch, "Applying a Theory of Change Approach to the Evaluation of Comprehensive Community Initiatives: Progress, Prospects and Problems," in Karen Fulbright-Anderson, Anne Kubisch and James Connell, eds., *New Approaches to Evaluating Community Initiatives, Volume 2: Theory, Measurement and Analysis* (Washington, D.C.: The Aspen Institute, 1998).

Guidelines for Using Results-Based Decisionmaking

Once the partnership understands the language and concepts around results-based decisionmaking, the next stage is deciding how to use them. The introduction to this guide describes several ways partnerships could use results-based decisionmaking. One is to manage its own work. Another is to manage the work of

service providers and other entities the partnership funds. A third is to contribute to the work of other organizations responsible for results. The guide also describes three types of accountability relationships. One set of relationships is between the partnership and its creators or funders. Another set of relationships is between the partnership and those service providers or other entities which the partnership funds and holds accountable for performance. A third is between the partnership and other coalitions working on their own child and family results. (See Figure 1.)

These new roles and relationships represent a new way of operating for the partnership. As the "considerations and cautions" section above illustrates, this new way of operating is not without risks. It may be helpful for partnerships to consider guidelines for establishing these new roles and relationships that will help avoid or minimize these risks.

The guidelines will also help the partnership create a process for results-based decisionmaking that is both fair and effective — that contributes to improvements in indicators and performance measures, treats fairly those accountable for achievement and guards against unintended ill effects towards children and families.

In many cases, these guidelines are interrelated; implementing some without the others will weaken the overall impacts. For example, implementing the fifth guideline (moving resources from less effective strategies to more effective strategies) without the sixth one (maintaining basic health, safety and civil rights protections) could mean taking funds away from essential protections for children and families that may not have a demonstrable impact on indicators and performance measures. Each guideline is described in more detail following the table.[7]

Guidelines for Using Results and Indicators

1. Participants *clearly establish* the terms of the performance contract and have the necessary *knowledge and skills* to participate in results-based decisionmaking.

2. Performance measures, and the strategies to reach desired levels of achievement are *negotiated, rather than dictated*, between the partnership and those who are responsible for producing change.

3. People and organizations are *held accountable* for what they can reasonably *expect to affect*.

4. Achievement on performance measures and indicators is tied to consequences, but the *reasons* for good or bad performance are *analyzed* to determine appropriate consequences.

5. The consequences associated with performance move resources from *ineffective strategies to effective ones*. At the same time, people and organizations that do not meet their goals are supported to *move ahead, not fall further behind*.

6. There are effective *safeguards* to prevent inequities and other ill effects, and to protect the basic health, safety and civil rights of children and families.

1. PARTICIPANTS CLEARLY ESTABLISH THE TERMS OF THE PERFORMANCE CONTRACT, AND THEY HAVE THE NECESSARY KNOWLEDGE AND SKILLS TO PARTICIPATE IN RESULTS-BASED DECISIONMAKING.

The "performance contract" is the formal agreement between those who are responsible for performance on indicators and/or performance measures, and those who hold them accountable.[8] Assigning and assuming this responsibility can eventually involve high stakes — not only the lives and life chances of children and families but the status and resources of organizations and individuals responsible for working with them. Assigning and assuming accountability requires that participants clearly spell out the terms of the performance contract — who is responsible for what level of performance, over what period of time, with what resources, and with what consequences. Establishing and agreeing to these ground rules also requires new knowledge and skills. In order for partnerships, service providers and others to participate equitably, they need to understand indicators and performance measures, including how they should be chosen, what level of performance and what timeline is reasonable, and how consequences are assessed.

2. PERFORMANCE MEASURES AND THE STRATEGIES TO REACH THE DESIRED LEVELS OF ACHIEVEMENT ARE NEGOTIATED, RATHER THAN DICTATED, BETWEEN THE PARTNERSHIP AND THOSE WHO ARE RESPONSIBLE FOR PRODUCING CHANGE. Many of those responsible for achieving a certain level of achievement on performance measures (or even indicators) are wary that funders will expect dramatic results

when in fact no one knows for certain how to reach those targets, or even what are reasonable expectations for performance. Or they are concerned that funders will expect them to affect community-wide indicators when they do not have the resources and authority necessary to do so. The partnership and the organizations responsible for performance should be able to negotiate which are the desired performance measures, the expected level of achievement, and the means to accomplish those targets (within logical parameters).[9]

3. People and organizations are held accountable for what they can reasonably expect to affect.

Part of the negotiation described above is to ensure a reasonable level of expectations for those who are to be held accountable. One of the most common objections to using indicators (and sometimes even performance measures) as a measure of success is, "I can't be held responsible for (choose an indicator) since there are so many factors involved." It is true that virtually all of the "ultimate" and "interim" indicators society cares about (child abuse and neglect, high school graduation, etc.) are the result of many factors, spread across the community.

But there are a couple of ways to address this problem. One is to hold smaller programs responsible for more limited changes — a program to train child care workers could not be expected on its own to affect child development. But, depending on the duration and intensity of the intervention, it could be expected to affect performance measures such as teacher knowledge and behavior in the classroom.

Second, this situation underlines the need for larger, collaborative structures to affect indicators (or at least the need for coordination among mul-

tiple actors). Although one small project to train teachers cannot affect child development, a sustained, concerted effort involving private business leaders, the school system, the early childhood community and others, could hope to have such an impact. Indeed, one of the major benefits of results-based decisionmaking is that a focus on results can induce major programs and systems to work together to achieved shared goals — for example, child care, Head Start and maternal and child health agencies all have a role to play in improving child development. When child care partnerships work with these agencies jointly, agreeing to common goals, they can be jointly accountable for progress toward achieving joint results.

Another way to look at this situation is that, in the private sector, one individual cannot control all of the conditions that go into whether his business is profitable and he makes money. A salesperson may work entirely on commission, and yet he does not have control over how his product is made, how quickly it is shipped, and whether his best customer just lost her job. In fact, most American workers' salaries are tied to factors beyond their direct control. While there is not a perfect parallel between private sector production methods and

human services, there is enough experience with this dynamic in the private sector to expect that human services can begin to operate this way too.

4. Achievement on performance measures and indicators is tied to consequences, but the reasons for good or bad performance are analyzed to determine appropriate consequences.

Achievement on indicators and performance measures needs to be tied to some form of consequences, in order to complete the planning loop that uses information to constantly improve. These consequences can include incentive payments for good performance as well as penalties for poor performance. There are vastly different opinions on the best approaches to using consequences, with some states and systems advocating a longer time of assistance and peer pressure before moving to harder edged courses of action, such as de-funding, while others advocate moving more swiftly along that path.

One of the greatest fears about using indicators and performance measures is that poor performance will automatically result in financial penalties, when that may not be either a fair response or one likely to produce better results. Instead, the partnership needs to insert an analytical step between learning about the achievement levels of a program, and administering consequences of that performance. A poor level of achievement may be the result of (1) the wrong strategy; (2) the right strategy, poorly implemented; (3) the right strategy, well-implemented but inadequately funded; (4) outside forces that no one anticipated; or even (5) faulty data that misrepresented the result. The partnership needs to examine the indicators and performance measures to determine the reason for poor perform-

ance before deciding on the indicated course of action to improve.

5. The consequences associated with performance involve moving resources from ineffective strategies to effective ones.

At the same time, people and organizations that do not meet their goals are supported to move ahead, not fall further behind.

The ultimate reason for pursuing the difficult task of using results-based decisionmaking is to move scarce resources to more effective strategies. There are not enough resources to maintain funding for ineffective approaches while funding effective ones at the scale necessary to reach everyone in need. Indicators must be used to move resources towards those workers, organizations and strategies that prove themselves effective at improving the lives of children and families.[10]

At the same time, using results-based decision-making should not mean abandoning children and families who do not do well. Those who do not meet their goals must be supported to move ahead, not fall further behind. While an effective system requires consequences that use achievement levels to constantly improve, a fair system acknowledges the vastly imperfect knowledge about the relationship between a chosen strategy or activity, and the effect on indicators and performance measures. It also takes into account the obstacles to good performance, including outside factors, populations that are more difficult to serve, and what the baseline data show. For example, improving on past performance can be difficult for all programs: those with good historical data, because they are already performing well, and those with worsening trend lines, because they face greater obstacles.

One of the greatest concerns about using results-based decisionmaking is that communities, partnerships and programs that are the most likely to have difficulty achieving the desired indicators and performance measures, because of outside circumstances, the difficulties they face, or other factors, are the very ones that need the most attention. The key to a successful results-based decisionmaking system is structuring consequences so that poor performance is translated into appropriate improvement strategies.

This does not mean that an ineffective service provider is given a dozen more chances to fail its clients. If a service provider does not reach the expected level of achievement on performance measures s/he and the partnership examine the reasons together, and decide on a remedy, such as more training or mentoring. If a school does not improve, it is not penalized with a smaller budget but perhaps given leadership support, more technical assistance or more oversight. If a child is not ready for kindergarten, s/he is not automatically held back, but given more help. If a partnership shows improvement on performance measures, but the community-wide indicators are worsening, it and its funders need to examine the causes to determine the best course of action. The focus is not on reducing funds for entities already desperate

for resources, or otherwise instituting penalties that just aggravate the underlying causes for poor performance.

6. There are effective safeguards to prevent inequities and other ill effects, and to protect the basic health, safety and civil rights of children and families.
One of the most exciting aspects of using results-based decisionmaking is the implication that people will be given more responsibility for deciding how to accomplish the challenges in front of them. But flexibility also incurs risk. If a school is rewarded for improving test scores, there is an enormous temptation to do so by not testing children who are unlikely to score well. If a particular group is likely to improve significantly, there is a temptation to focus on that group and not another that will require more support. Therefore, there must be incentives to serve more difficult populations, and safeguards to ensure that indicators are not used as an excuse to exclude certain groups or otherwise misused.

These guidelines, taken together, will go a long way towards ensuring that the partnerships' use of results-based decisionmaking will be both fair and effective in improving the lives of children and families.

Notes

[7] This section borrows from *Beyond Lists: Moving to Results-Based Accountability*, Washington, D.C.: Center for the Study of Social Policy, August 1996 (draft).

[8] There is a large body of literature on performance contracting — for example, see citations by Bardach, Behn, Hatry and Walters in the bibliography.

[9] See also Mark Friedman, *Trading Outcome Accountability for Fund Flexibility* (Washington, D.C.: Center for the Study of Social Policy, no date).

[10] Sid Gardner, *Beyond Collaboration to Results: Hard Choices in the Future of Services for Children and Families*. Fullerton, CA: Center for Collaboration for Children, January 1996.

A Phased Approach to Results-Based Decisionmaking

Once partnerships understand the basic definitions and concepts of moving to results-based decisionmaking, as well as the guidelines for using results-based decisionmaking fairly and effectively, they can consider how to move in this direction. There are several dimensions of results-based decisionmaking that vary in difficulty,

level of controversy and potential to change services and systems. The ideas below are written specifically for public-private partnerships. Larger entities, such as public agencies or whole systems, can go through similar dimensions. Partnerships may want to think about starting with less complicated and controversial dimensions (such as public information campaigns) and moving to more complicated phases (accountability).

■ **PUBLIC INFORMATION AND ENGAGEMENT:**

The most basic use of indicator and performance measure data is to know and share with the public the status of children and families — how they are faring now, and how that has changed over time. Partnerships can use these data to engage leaders in positions to make significant changes that will support improved results for children and families. The state of Vermont has used its public reports on the health and well-being of Vermonters to draw attention to the need for collaboration between the state and its citizens to "turn the curve" on the results the state cares about. The Annie E. Casey Foundation's Kids Count programs in every state are examples of this use of indicator data (more information can be found at www.aecf.org).

■ **PLANNING:** Another dimension would be to use data on indicators and some performance measures to plan a partnership's agenda, including its results, how it will move towards those results, and how it will measure progress. The logic model is one way to plan the partnership's actions over the short and long term.

■ **BUDGETING:** Once partnerships have planned their agendas, their resources must be aligned to support this agenda. If a partnership uses some of its resources to contract for services delivered

by other organizations, it should know what performance measures those contractors will address and how they fit into its plan to affect

indicators. Partnerships may also want to create "performance contracts" that show who is accountable to whom, and for what level of performance with what population over what period of time.[11]

■ **MANAGEMENT AND CULTURE:** Organizational culture, as well as management policies and practices, need to support movement towards desired indicators and performance measures. Both the partnership and its partners can use indicators and performance measures to manage their own work, building in incentives for good performance. But partnerships should bear in mind that shifting the culture of any organization is a huge undertaking, and moving to results-based accountability requires significant cultural change.

■ **ACCOUNTABILITY:** Finally, a partnership can make itself accountable, to its funders, the public and others for moving towards its desired results. This requires not only measuring data to track changes in indicators and performance measures, but cycling back to the planning and budgeting phase to use that information to assess consequences, including redirecting resources, as necessary. The ultimate purpose of results-based decisionmaking is to improve services and supports in order to improve the lives of children. Indicators and performance measures that do not cause change are little more than list-making exercises; the purpose for going through all of this difficult work is to come out the other side with better supports and systems that improve the lives of children and families. This is by far the hardest step, but using the guidelines described earlier, and building a solid foundation before moving to this stage, can help partnerships create a system that improves and expands child care while working fairly and efficiently with those who are accountable for performance.

NOTES

[11] See also Mark Friedman, *Trading Outcome Accountability for Fund Flexibility* (Washington, D.C.: Center for the Study of Social Policy, no date).

Conclusion

Moving to results-based decisionmaking has the power to transform aspects of the way public-private partnerships support children and families. It can rebuild public faith in the ability to improve the lives of children and families. It can energize tired reformers who can now see progress due to their efforts. And it can catalyze needed changes among those who at last are rewarded not only for following the rules but for using their creativity and energy to create change. This is an exciting time, with exciting tools for progress, and child care partnerships are in an ideal position to use this potential to make long-lasting changes, in their own neighborhoods and across the nation.

Appendices

(Appendices 4-8 were developed by William Philliber of Philliber Research Associates)

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Appendix 1: Glossary

ACHIEVEMENT LEVELS: The expected or actual level of performance on an performance measures or an indicator by a specific population (e.g., 28% of children expected to be reading by second grade; at the end of the program 25% of children actually are reading by second grade).

ACTIVITY: The specific actions — programs, interventions, services, etc. — that need to occur to implement the strategies.

CONDITION: The causes, factors or circumstances that cause the result to happen or prevents it from happening, and that the partnership needs to affect to move towards the result.

INDICATOR: A measure, for which data are available, which helps quantify the achievement of the desired result for community-wide populations. Types of indicators:

- **CHILD AND FAMILY INDICATOR:** Measures that reflect changes in children and families (such as reduced rate of confirmed cases of child abuse)

- **SYSTEM INDICATOR:** Measures that reflect changes in systems (such as enactment of a law)

- **ULTIMATE INDICATOR:** Measures that reflect changes in results (usually change over several years and require community-wide efforts)

- **INTERIM INDICATOR:** Measures that reflect changes in the conditions or causes that lead up to results (usually can change within shorter periods of time but still require community-wide efforts)

LOGIC MODEL: A framework that shows the relationship between the partnership's ultimate aim (its results) and the activities it is pursuing to get there, along with how it will measure progress along the way. The logic model also reflects the partnership's "theory of change" — its theory about what affects the indicators and performance measures it cares about, and what works to improve them. It is a means for a partnership to plan its work and assess its progress, and it provides a vehicle for others to evaluate the logic of its actions as well.

PERFORMANCE CONTRACTS: Agreements between a body that is responsible for achievement on indicators and performance measures, and another body to which it is accountable. The agreement should specify the desired level of achievement, among what population, in what period of time, and the process for determining the consequences of that performance (and, possibly, the consequences themselves).

PERFORMANCE MEASURE: A measure, for which data are available, which helps quantify movement towards the indicator for specific target populations OR that measures the level of activity, efficiency, capacity or quality of a service or intervention. It can be affected by individual organizations or actors.

RESULT: A broad condition of well-being for children, adults, families, or communities, sometimes also known as an outcome.

RESULTS-BASED ACCOUNTABILITY: The phase of results-based decisionmaking in which organizations use results, indicators and performance measures to constantly move closer to their desired result.

RESULTS-BASED BUDGETING: The process of aligning one's resources with the desired results, indicators and performance measures to support the strategies and activities necessary to achieve those results, indicators and performance measures.

RESULTS-BASED DECISIONMAKING: The process of using results, indicators and performance measures to improve children and family well-being. Includes using these for public information and engagement; planning; budgeting; management; and accountability.

RESULTS-BASED PLANNING: The process of establishing results, indicators and performance measures, and using them to plan strategies and activities to achieve those results, indicators and performance measures.

STRATEGY: The broad approaches that the partnership will use to affect the conditions or causes in order to reach the results.

TARGET POPULATION: The people whose skills, knowledge, behavior, etc., the activities are meant to influence, and among whom the indicators will be measured (such as all children within a specific school district, for child and family indicators; and legislators, for a system indicator).

THEORY OF CHANGE: The partnership's assumptions and decisions about the changes it is seeking, what influences that change, and what must happen to bring about that change.

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WEBSITES FOR MORE INFORMATION:

The Finance Project: www.financeproject.org

Families and Work Institute: www. familiesandwork.org

National Governors' Association: www.nga.org

The U.S. Department of Health and Human Services/Child Care Bureau: www.acf.dhhs.gov/programs/ccb

The National Child Care Information Center: www.nccic.org

The Fiscal Policy Studies Institute: www.resultsaccountability.org

The Center for the Study of Social Policy: www.cssp.org

The Annie E. Casey Foundation: www.aecf.org

Appendix 3: Issues in Selecting and Measuring Data on Indicators

This appendix provides a bit more detail on the technical issues associated with selecting and measuring data on indicators.

An essential part of using results and indicators is the ability to collect and analyze data. The partnership may use experts to help with the technical issues around data collection — often partnerships can find help with evaluation and data analysis from faculty and/or graduate students at local colleges and universities. While partnership members may not need an in-depth knowledge of statistical techniques, they do need some basic familiarity with data collection and analysis. Below are some of the key concepts and terminology used in measuring indicators:

- **FITTING THE INDICATORS AND THE DATA COLLECTION PROCESS TO THE STRATEGY AND ACTIVITY:** Comprehensive, long-term strategies and activities call for a more extensive and formal data collection process. By the same token, smaller, more informal services often cannot afford and should not be compelled to have the same level of data collection. A service provider can use indicators to measure the impact of a $2,000 grant to provide books to child care centers and a $1 million initiative to reduce teacher-child ratios and raise teacher pay. But in the first example, the service provider might use interviews with child care teachers to estimate if kids are reading more, while in the second the provider would use more formal techniques to see if children were learning and showing development gains. And indicators for some interventions simply cannot be measured in any meaningful way — in this case, the partnership might look at the package of interventions to see if it makes sense that the whole package is needed to effect change.

- **CHOOSING THE MOST ACCURATE INDICATORS:** Indicators need to be reliable and valid. "Reliable" means that they measure the same situation the same way each time — so the same test administered to two different people with the same situation would show the same results. "Valid" means that they measure what they are intended to measure. Indicators also need to reflect data that can be measured accurately over time, so that an evaluation today and next year provide numbers that can be compared against each other. Finally, they need to be readily interpretable, so that one would know if a change in numbers means the situation is getting better or worse (often one might need to look at several indicators together to understand whether the situation is improving or not).

- **KNOWING IF A CHANGE HAS OCCURRED: PRE- AND POST-TESTS:** The clearest way to know if a person has changed during an intervention is to collect data on the same indicator before and after the intervention. So most data collection methods will try to gather the same data (use the same questionnaire) before, or at the beginning of the service (the pre-test) and after, or at the end of the service (post-test). The difference in the subjects' knowledge, behavior, etc., as shown by the change between the two measurements, is the performance on the indicator.

- **KNOWING IF THE CHANGE CAN BE ATTRIBUTED TO A PARTICULAR INTERVENTION: CONTROL GROUPS:** As described above, one of the trickiest aspects of using indicators is knowing that a particular performance on an indicator was the result of a particular intervention. Indicators can change for a variety of reasons, and even if two data elements are correlated (or change together), the first does not necessarily cause the

other. They could move together for independent reasons, or instead of the first variable causing the second to change, the reverse could be true. For example, if children of a certain teacher perform better on tests, it could be because of the teacher's superior training, or because her classroom has more windows, or because she is assigned students who already tend to perform better on tests.

The best way to establish causality or attribution is to have a "treatment" group, that gets the service, and a "control" group that is similar in every way except that it doesn't get the service. Then one can be fairly sure that if the treatment group behaves differently, the difference is due to the intervention.

But this standard is extremely difficult to achieve in social sciences. For example, it's often seen as unethical to withhold the service, or families often find ways of getting some service even if they are put in the "control" group.

So evaluators often have to find other ways to try and determine if the service made a difference. Sometimes they try to look at the same child earlier in life and then compare that with information later in life, after the service ("longitudinal" studies). They look for similar groups of children in other geographic areas who aren't getting the service ("natural control groups"). They sometimes use anecdotal information from participants to see if there's evidence that it was indeed that service that made the difference.

Another option is to examine the quality of the intervention's theory of change and logic model to see if it seems reasonable that this intervention would be effective. While this method does not actually use indicator data, it does use the principle of results-based decisionmaking to estimate the likelihood that the intervention is having an impact. This evaluation strategy can be used in systemic or community-wide initiatives or with very informal, time-limited or anonymous services, where indicator-based evaluation methods would not be feasible.

■ **CHOOSING A METHOD AND INSTRUMENT TO MEASURE THE INDICATOR:** There are many instruments designed to examine every aspect of a child or parent's functioning. But choosing and administering one is a complex task. There is controversy over the costs and benefits of higher-cost techniques (testing children individually, using trained evaluators with detailed assessments) versus lower-cost techniques (using more generic assessments with evaluators who know the children but who may not have had much training in the assessment, such as kindergarten teachers). There are issues about how intrusive the instrument is to the child or family. And there are controversies over exactly how accurate each is at measuring the particular aspect of behavior or knowledge that partnerships may want.

■ **ADDRESSING PARTICULAR CONCERNS ABOUT ASSESSING YOUNG CHILDREN:** There are special concerns about assessing young children. Young children grow at different rates, and often do not easily demonstrate what they know and can do. Many child development experts believe that testing of young children has been used to label or stigmatize them inappropriately, and that different results are more a reflection of inaccurate tests or different developmental stages than true deficits needing attention. Partnerships need to be especially careful when measuring the results of their work among young children to ensure that the results are accurate, and are not misused.[12]

NOTES

[12] For more information about assessing young children, see Shepard, Lorrie, Sharon Lynn Kagan, and Emily Wurtz, eds., *Principles and Recommendations for Early Childhood Assessments*. Washington, D.C.: National Education Goals Panel, 1998.

Appendix 4: Selected Instruments to Measure Collaboration

(Written by William Philliber of Philliber Research Associates)

Instrument	Dimensions	Description
Comprehensive School Health Program Infrastructure Development (Academy for Educational Development, 1255 23rd St., NW, Washington, D.C. 20037)	Coalition existence Governance Information & training Needs assessment Long-range planning	10 items are rated on a four point scale
Interagency Collaboration Checklist (Center for Applied Research and Educational Improvement, 265-2 Peik Hall, 159 Pillsbury Dr. SE, Minneapolis, MN 55455)	Interagency coordination Interagency domain conflict Interagency satisfaction	30 items are rated on Likert type scales
Organization Dimensions Scale (Center for Applied Research and Educational Improvement, 265-2 Peik Hall, 159 Pillsbury Dr. SE, Minneapolis, MN 55455)	Satisfaction with: Goals Leadership style Coordination Decision making External conditions	28 items are rated
Tools for Assessing Collaboratives' and Community-based Organizations' Capacity to Improve Outcomes for Children and Families: Local Collaborative Assessment of Capacity (Center for Collaboration for Children, California State University, Fullerton, CA 92634)	Governance & Accountability Outcomes Financing Non-financial resources Ownership Staff & Leadership Development Program strategies Policy agenda development Interorganizational coherence Addressing equity issues	57 items are rated on a nine point scale

Instrument	Dimensions	Description
Juvenile Crime Prevention Project Collaboration Survey (Philliber Research Associates, 28 Main Street, Accord, NY 12404)	Reason for participation Meetings Communication Interagency staff relations Ownership Knowledge of other agencies Politics Conflict Direction of action Barriers Assets	Individuals rate 47 items on a four point scale to measure 11 dimensions
Survey for Directors of Collaborative Services Programs (National Center on Education in the Inner Cities, Temple University, Philadelphia, PA 19122 (215) 204-3001)	Interagency relations Communication Financing & Resources	35 items are rated on a five point scale

Appendix 5: Selected Instruments to Measure Quality of Child Care

Instrument	Outcomes Measured	Description
Caring for Our Children: National Health & Safety Performance Standards for Out of Home Child Care Programs (American Public Health Assn., 1015 15th Street, NW, Washington, D.C. 20005)	Staffing Program Nutrition & Food Service Facilities, Supplies, Equipment & Transportation Infectious Diseases Children with Special Needs Administration	Detailed description of standards and rationale with guidelines for measurement
Early Childhood Environment Rating Scale (Teachers College Press, 1234 Amsterdam Ave., New York, NY 10027)	Range from safety of equipment to quality of teaching	Assesses the day-to-day quality of care provided to children
Family Day Care Rating Scale (Teachers College Press, 1234 Amsterdam Ave., New York, NY 10027)	Space & Furnishings Basic Care Language & Reasoning Learning Activities Social Development Adult Needs Provisions for Exceptional Children	40 items rated on scale from 1 to 7 Interrater reliability above .90 Consistent with standards of Child Development Associate Family Day Care credential
High/Scope Program Quality Assessment (High/Scope Press, 600 N River St., Ypsilanti, MI 48198)	Learning Environment Daily Routine Adult-Child Interaction Curriculum Planning & Assessment Parent Involvement & Family Services Staff Qualifications & Staff Development Program Management	Assesses center-based pre-school and child care programs 72 items rated on scale from 1 to 5 Interrater reliability for exact agreement approximately .80; close agreement approximately .97
Infant/Toddler Environment Rating Scale (Teachers College Press, 1234 Amsterdam Ave., New York, NY 10027)	Furnishing & Display Personal Care Routines Listening & Talking Learning Activities Interaction Program Structure Adult Needs	Assesses center-based child care for children up to 30 months 35 items rated on scale from 1 to 7 Consistent with Criteria for Quality Early Childhood Programs stated by the National Academy of Early Childhood Programs

Instrument	Outcomes Measured	Description
School-Age Care Environment Rating Scale (Teachers College Press, 1234 Amsterdam Ave., New York, NY 10027)	Space & Furnishings Health & Safety Activities Interactions Program Structure Staff Development Special Needs	Assesses center-based child care for elementary school aged children 49 items rated on scale from 1 to 7 Interrater reliability for the total scale measured at .83
Standards of Excellence for Child Day Care Services (Child Welfare League of America, 440 First St., NW, Suite 310, Washington, DC 20001)	Child Day Care Program Facilities Staffing Administration Support Services	Describes the components of a quality program in each area. Can be used as a check-list to assess quality.

Appendix 6: Selected Instruments to Measure Child Development

Instrument	Outcomes Measured	Description
Bayley Scales of Infant Development (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Mental development Motor skills	For ages 1 to 42 months Standard scores by age
Bracken Basic Concept Scale (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Concept acquisition Receptive language	For ages 2.6 to 8.0 Standard scores by age
Core Observation Record (High/Scope Press, 600 North River Street, Ypsilanti, MI 48198)	Initiative Social relations Creative representation Music & movement Language & literacy Logic & mathematics	Based on observation of child's behavior during normal program activities For ages 2.5 to 6.0 years
Developmental Indicators for the Assessment of Learning (DIAL) (American Guidance Service, PO Box 99, Circle Pines, MN 55014)	Motor skills Concept skills Language skills Social/emotional Development	Designed to assess large groups quickly & efficiently For ages 2.0 to 5.11
Differential Abilities Scales (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Verbal Ability Nonverbal Ability Diagnostic Ability	For ages 2.6 to 6.0 Standard scores by age
FirstSTEP (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Cognition Communication Motor	For ages 2.9 to 6.2 Scaled scores by age Able to do in 15 minutes
Kaufman Assessment Battery for Children (American Guidance Service, PO Box 99, Circle Pines, MN 55014)	Sequential processing Simultaneous processing Achievement scale	For ages 2.5 to 12.5
Kaufman Survey of Early Academic and Language Skills (Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, CA 90025	Expressive skills Receptive skills Number skills Letter & word skills	Normed for 3 to 6 year olds Administered in 15-25 minutes Used to assess school readiness

Instrument	Outcomes Measured	Description
Kindergarten Readiness Test (Slosson Educational Publications, PO Box 280, East Aurora, NY 14052)	Understanding, awareness, & interaction with environment Judgment & reasoning in problem solving Numerical awareness Visual & fine-motor coordination Auditory attention span & concentration	For 4 to 6 year old children Primary purpose to assess child's readiness for school
McCarthy Scales of Children's Abilities (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Verbal Perceptual-Performance Quantitative Cognitive Memory Motor	For ages 2.5 to 8.5 Standard scores by age
Miller Assessment for Preschoolers (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Motor Coordination Verbal Nonverbal Complex tasks	For ages 2.9 to 5.8 Percentile ranks
Minnesota Child Development Inventory (American Guidance Service, PO Box 99, Circle Pines, MN 55014)	Expressive language Comprehension/conceptual Personal/social General development Gross motor Fine motor Situational comprehension Self-help	Parents complete inventory after observing child For ages 0.5 to 6.0
Mullen Scales of Early Learning (Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, CA 90025)	Gross motor skills Fine motor skills Visual reception Expressive language Receptive language	For ages birth to 5 years 8 months
Peabody Picture Vocabulary Test (American Guidance Service, PO Box 99, Circle Pines, MN 55014)	Receptive language	For ages 2.5 to 18.0 Standard scores by age
Preschool Inventory (Educational Testing Service, 1947 Center St., Berkeley, CA 94704)	Personal/social Associative vocabulary Concept activation-numerical Concept activation-sensory	For ages 3.to 6 15 minutes to administer

Appendix 7: Selected Instruments to Measure Family Functioning

Instrument	Outcomes Measured	Description
Family Assessment Form (Children's Bureau of Southern California, 50 South Anaheim Blvd., Suite 241, Anaheim, CA 92805)	Family's environment Physical Financial Support Caregiver(s) History Personal characteristics Child-rearing Family interaction Parent to child Child to parent Parent to parent	Staff rate family on 61 items using a scale from one to five
Family Assessment Measure (Addiction Research Fdn., 33 Russell St., Toronto M5S 2S1)	Task Accomplishment Role Performance Communication Affective Expression Involvement Control Values & Norms	Assesses the family from 3 perspectives: 1. General (health of the family from a systems perspectives) 2. Dyadic (relationships among specific pairs) 3. Self-rating (own functioning in the family) Self-administered questionnaires
Family Environment Scale (Consulting Psychologists Press, 577 College Ave., Palo Alto, CA 94306)	Relationships Cohesion Expressiveness Conflict Personal Growth Independence Achieve Orientation Intellectual/Cultural Orientation Active/Recreational Orientation Moral/Religious System Maintenance Organization Control	90 item self administered questionnaire Normed for normal families

Appendix 8: Selected Instruments to Measure Parenting Skills

Instrument	Outcomes Measured	Description
Adult-Adolescent Parenting Inventory (Family Development Resources, Eau Claire, WI 54703)	Age appropriate Expectations Empathy toward child Belief in physical Punishment Role expectations	For parents of preschoolers Normed scores Self-administered 30 item questionnaire
Nursing Child Assessment Teaching Scales (NCAST, University of Washington, Seattle, WA 98195)	Sensitivity to cues Response to child distress Social-emotional growth Fostering Cognitive growth fostering Clarity of cues Responsiveness to parent	73 items assess teaching interaction between caregiver and child For ages birth to 3.0 years
Parent Awareness Skills Survey (Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, CA 90025)	Assesses awareness of: Critical issues Adequate solutions Need to communicate Importance of child's history Need to pay attention to child's response	Assesses how well a parent responds to typical child-care situations
Parent Behavior Checklist (Clinical Psychological Publishing Co., 4 Conant Square, Brandon, VT 05733)	Expectations Discipline Nurturing	For parents of children 1 through 4 years Normed scores by age of child Self-administered 100 item questionnaire
Parent-Child Relationship Inventory (Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, CA 90025)	Parental support Satisfaction with parenting Involvement Communication Limit setting Autonomy Role orientation	For parents of children 3 through 15 Requires only 4th grade reading level 15 minutes to complete
Parent Satisfaction Scale (Psychological Corporation, 555 Academic Court, San Antonio, TX 78204)	Satisfaction with: Spouse's parenting performance Parent-child relationship Parenting performance	Self-administered 46 item questionnaire Appropriate for parents of any age child Normed scores and percentiles

The Child Care Partnership Project

This guide is a product of the Child Care Partnership Project, a multi-year technical assistance effort funded by the Child Care Bureau, U.S. Department of Health and Human Services. The Partnership Project is providing a series of technical assistance resources and materials to support the development and strengthening of public-private partnerships to improve the quality and supply of child care.

All of the materials produced under the Child Care Partnership Project will be available through the National Child Care Information Center at:

http://nccic.org/ccpartnerships
or 1-800-616-2242.

For more information on the project, please contact:

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