# Elevate Learning Project: Focus on Transforming Environments

Licensed Family Child Care Homes







Non-profit licensed child care centers, registered ministries and school-based programs can train a team member to conduct assessments and lead intervention selection.

# Who can participate?



Licensed family child care programs can join a cohort facilitated by a community partner who will conduct assessments.

# Agenda

- 1. Elevate Learning Project: Focus on Transforming Environments
- 2. Assessing FCC Home Environments
- 3. How to Participate
- 4. Q&A

# Our Mission

Ensure every child is empowered with the essential knowledge and skills to thrive in kindergarten and beyond.



### **Our Actions**

Children cannot reach their full potential, and Indiana will not be truly prosperous, if we fail to capitalize on the opportunity of learning in the early years. To help children make the most of the early years of learning, ELI aims to:



### **Inform**

- Influence practice, funding and public policy through research insights.
- Monitor and communicate progress.
- Anticipate future needs.



### **Practice**

 Demonstrate the art of possible by operating a network of Day Early Learning centers that continuously improve to optimize learning and development outcomes.



### **Enable**

- Design and attract effective models and tools and incubate pilots.
- Invest in on-the-ground, community-led projects that expand access and deepen practice.
- Equip the early learning workforce to be capable of driving learning and development outcomes.

# Elevate Learning Project: Focus on Transforming Environments

# Elevate Learning Project

This new multi-million-dollar effort will support the growth of classroom practice in early learning programs across Indiana and improve learning outcomes for children under the age of five.











### New Initiatives to Drive Impact

# Focus on Transforming Environments:

Engage programs across the state to implement targeted improvements in their classrooms guided by environment rating scales.

Launching now!

# Focus on Improving Interactions:

Engage educators and community partners in efforts to measure and improve interactions between educators and children.

Coming Summer & Fall 2025





# **Transforming Environments**

### ASSESS CLASSROOMS MAY-JULY

- Eligible early learning providers assess at least two classrooms using ERS tools.
- Family child care homes join cohorts for partnerled assessments using FCCERS tools.

### UNDERSTAND YOUR DATA JULY-AUGUST

- Submit relevant assessment data
- Receive technical assistance from national experts to interpret findings and identify interventions
- Select appropriate interventions

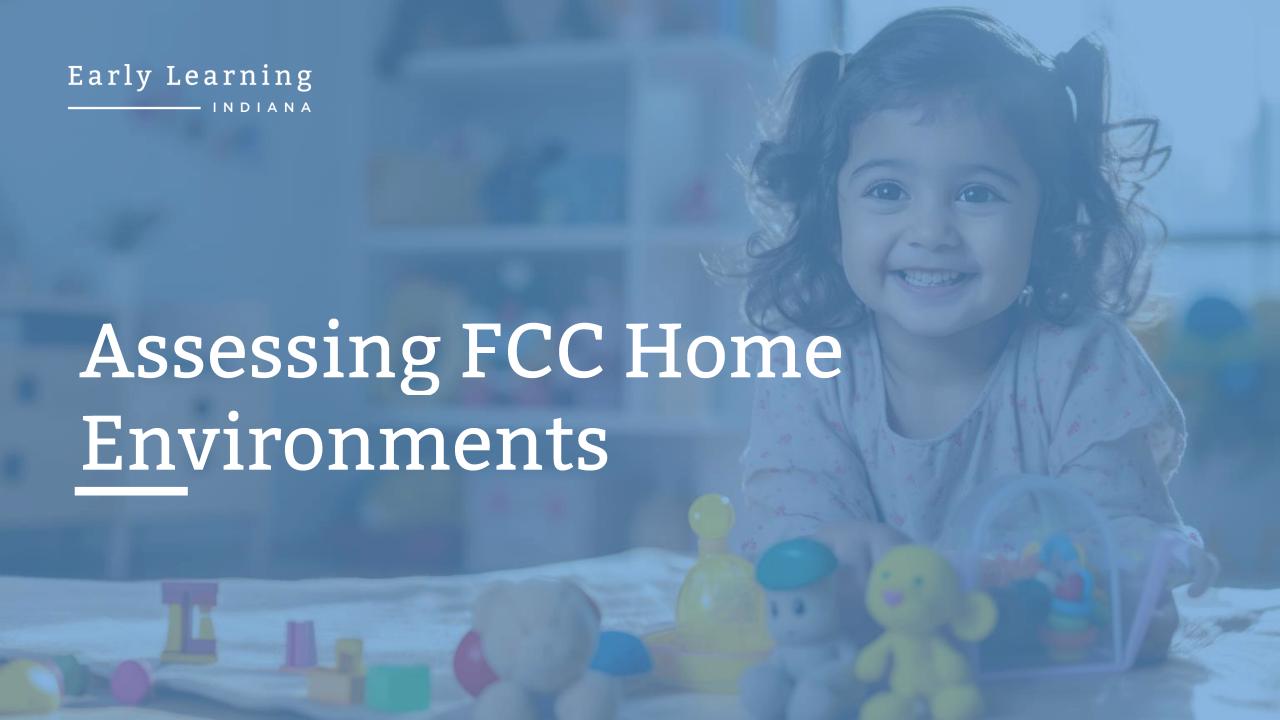
# IMPLEMENT AN INTERVENTION SEPTEMBER-

**NOVEMBER** 

- Receive new classroom materials and training
- Start implementing specific improvements
- Attend specialized professional development

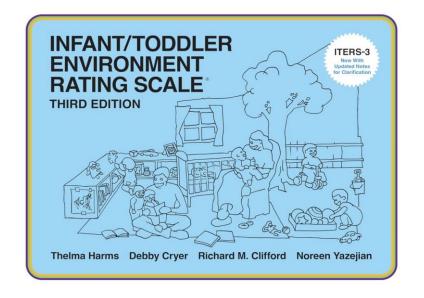
### SEE RESULTS DECEMBER

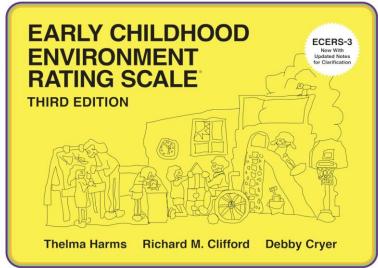
- Reassess classrooms
- Submit follow-up data
- Observe measurable improvement in child learning outcomes

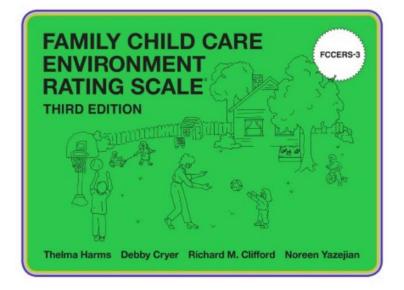




# ITERS, ECERS and FCCERS









### Children are...









Investigators. Inquirers. Explorers. Curious. Creative. Problem-solvers. Mathematicians. Readers. Writers. Scientists. Active members of their communities.

# Why use the Environment Rating Scales?

- Offers a definition of quality and uses observations to collect information
- Used to inform program improvement
- Emphasis on children's cognitive development (language, mathematics, and science)
- Fosters learning environments rich in possibility
- Identifies and demonstrates growth over time
- Accessibility of training
- Research based



# Six Subscales





### Language, literacy & Math: FCCERS-3 items

9. Talking with children
10. Encouraging vocabulary development
11. Responding to children's communication
12. Encouraging children to communicate
13. Provider use of books with children
14. Encouraging children's use of books
18. Blocks
21. Math/number
26. Supervision of play & learning
27. Provider-child interaction
30. Interactions among children

 Inadequate
 Minimal
 Good
 Excellent

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#### 13. Provider use of books with children\*

- Provider does not use any books with children during the observation.
- 1.2 Book time is unpleasant for children (Ex: children forced to listen; punitive atmosphere; children can't see book; book that frightens child is used; children's reactions are treated as interruptions).\*
- 1.3 Book time is not engaging for most children (Ex: provider's reading of book is dull, disinterested, or unenthusiastic).

- 3.1 Provider uses a book with one or more children at least once during the observation (Ex: reads aloud; points out pictures).
- 3.2 Book times are pleasant and most children appear to be engaged (Ex: little if any mild negative interactions; books used generally match children's developmental abilities; no extreme negative provider behavior observed).\*
- 3.3 Children can easily see content of book and are generally comfortable.\*
- 3.4 Provider shows some interest and enjoyment in book (Ex: laughs or smiles at appropriate time in story; shows enthusiasm when talking about pictures).

- 5.1 Provider reads aloud as well as talks about the book's story or pictures.\* Observe once
- 5.2 Book are used with interested children informally, with one child or a very small group. Observe once.
- 5.3 Provider makes book times attractive to the children, including allowing children to leave if not interested (Ex: reads with animation; uses animal sounds when pointing out animals; shows positive response to child's interest in talking about book; reads chapter books with school-agers).\*
- 5.4 Provider shows much interest and enjoyment in book(s) when used with children.

- 7.1 Books are used informally with children at least two different times during the observation. Observe for two different children
- 7.2 Provider encourages children to be actively involved in use of books (Ex: helps infant to pat a picture; helps toddlers turn pages; encourages preschoolers to ask questions; encourages older children to discuss content).
- 7.3 Provider sometimes follows printed words with finger as book is read.\* Observe once NA for infants
- 7.4 Provider extends the ideas in books (Ex: points to pictures and adds information; relates what is in book to children's experiences; encourages schoolagers to use internet to follow up on information from a book they read).

Observe once

### FCCERS-3

# Why are we assessing learning environments?

- Environment is comprehension of a larger view.
- "Physical environment, children's relationships with one another and with significant adults, and instruction."

#### 10. Encouraging vocabulary development

- 1.1 Provider uses very limited vocabulary with the children (Ex: specific names for objects and actions rarely used; few descriptive words used; "this," "that," "it" used in place of more ex
- 1.2 Provider use of wor to children's actual (Ex: calendar or sor days of the week, b week not used in co about when things weather words used weather chart, but 1 children actually ex weather).
- 1.3 Provider rarely talks about materials or c home, or about oth experiences.

- 3.1 Provider sometimes uses specific names for people, places, things, and actions as children experience them in routines or play, throughout the observation
- 5.1 Provider frequently uses specific names for people, places, things, actions, and descriptive words as children experience them in routines and play throughout the
- 7.1 Provider generally uses a wide range of words appropriate to the ages and abilities of the children.\*
- 7.2 Provider follows up to ensure that

### FCCERS-3

#### 11. Responding to children's communication\*

- 1.1 Problems with upset children are often ignored or unresolved (Ex: provider does not respond to crying child; does not notice school-ager with head down; leaves problems with upset children unresolved).\*
- 1.2 Provider usually shows little interest in, or response to, children's non-upset attempts to communicate (Ex: ignores child who is trying to reach for toy or is signaling a desire to be picked up; does not name food that child is pointing to; does not answer school-ager who asks what time it is).\*
- 1.3 Frequent negative response to children's communication is observed (Ex: provider reprimands child who tries to leave circle time: roughly grabs child taking another's toy; belittles crying child; yells at school-ager who is frustrated about school work).\*

3.1 A moderate amount of satisfying response to children who are upset is observed (Ex: provider gives verbal reassurance to crying or fussy child before problem is actually resolved; severely unhappy

#### 5.1 Provider usually responds to crying or upset children with a satisfying result, with only a few minor lapses observed.\*

5.2 Much positive and no

### sc 12. Encouraging children to communicate

- 1.1 Provider never initiates turn-taking conversations with children 3.2 Pr (Ex: rarely encourages infant to babble back; back-and-forth in exchanges with older verbal  $\mathbf{n}$ children never observed).\* cc
  - oł .2 Provider questions usually require cŀ rote or yes/no responses, are inappropriate, or no questions gε are asked (Ex: asks older child CC "What color is this?"; questions too difficult for young children).
- 3.3 Pı 1.3 Provider responds negatively when er children can't answer questions cł (Ex: "Wrong!"; "You did not th listen"; "You should know this"). (E

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3.4 Pr

- 3.1 Provider sometimes initiates conversations with children (Ex: babbles back and forth with infant; has back-and-forth interactions with toddlers and older children).\* Observe three times
- 3.2 Provider sometimes gives child enough time to respond to ageappropriate questions (Ex: asks infant if he likes toy and pays attention as infant smiles; asks toddler what she is eating and waits for her to think of word; asks preschooler how he built a tower and waits for explanation; asks school-ager about her hobby).
- 3.3 Provider responds neutrally or positively to children who can't answer questions.
- 3.4 Questions are sometimes meaningful to children (Ex: child responds with interest; does not ignore provider questions).

- 7.1 Provider generally responds to children's subtle communication (Ex: notices when infant shows mild hunger and warms bottle before infant becomes very upset; ends activity when children show
- 5.1 Provider initiates engaging conversations with children during routines and play (Ex: shows enthusiasm; uses tone that attracts child's attention).\*
- 5.2 Provider often personalizes questions and/or conversations for individual children (Ex: talks about children's families, preferences, interests; what they are playing with; what they did over the weekend; child's mood).
- 5.3 Provider pays attention to children's questions, verbal or nonverbal, and answers in a satisfying manner for the child.\*
- 5.4 Provider asks questions which children show an interest in answering (Ex: makes the question funny or mysterious; uses attractive tone; questions are meaningful and not too difficult to answer).\*
- 5.5 Provider helps children communicate with one another (Ex: asks them to "use their words" if fighting over a toy, and follows through appropriately; reminds child to say "excuse me" when trying to move past another child;

- - 7.1 Provider frequently has engaging conversations with children throughout the observation.\*
  - 7.2 Many appropriate questions are used throughout the observation, during both play and routines.\*
  - 7.3 Provider asks children questions that encourage more complex answers (Ex: young children asked "what" or "where" questions; older children asked "why" or "how" questions).\*
  - 7.4 Provider-child conversations go beyond current activities and materials (Ex: include social talk about home and family life; activities in the community; feelings; school topics for schoolagers).\* NA for infants



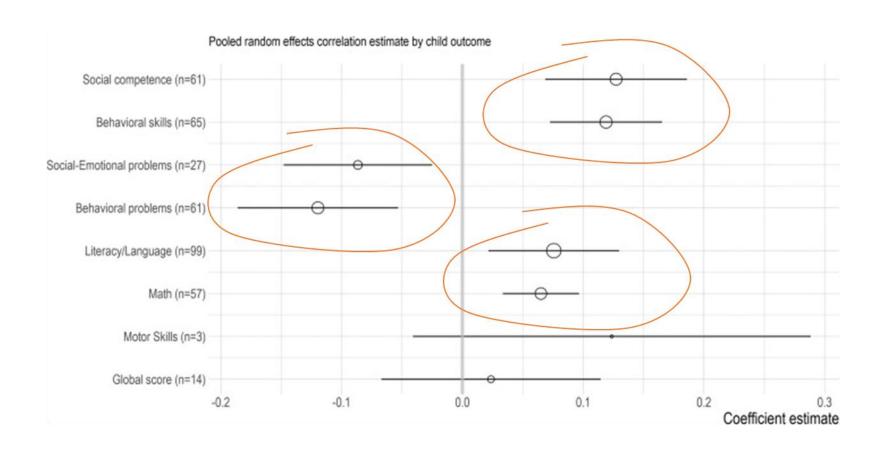
# Why are we assessing learning environments?

- Improve child outcomes
- Increase awareness of quality
- Identify opportunities for professional development
- Increase teacher selfsufficiency & well-being
- Facilitate communication and collaboration





# Global estimates of the association between quality and child development outcomes



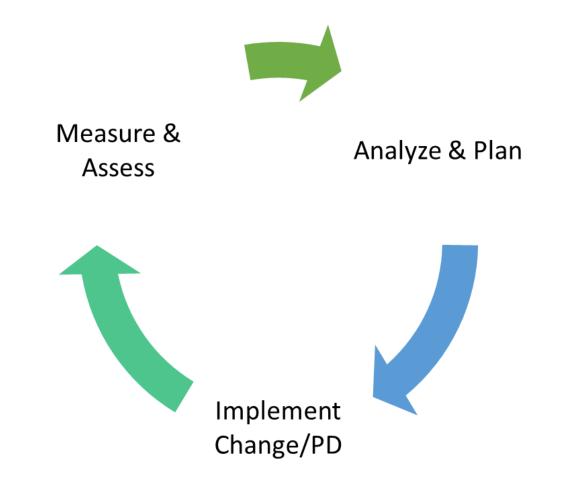
# How do the rating scales help determine next steps?

Data collected via the rating scales (via observation) identifies strengths and areas of focus.

Data analysis – you are not alone!

Experts from the field will support you in identifying these areas and do sense-making of the data with you so you can build your improvement path.

### Continuous Improvement Cycle



INDIANA

How does this information inform our instructional practices?

### Architects in Action

The Building Study



#### How our journey into the building study began...

Children first showed interest in buildings through play in the block center. Peer to peer conversations of homes and other structures were often heard. Questions and thoughts such as, "How big is your house?" and "Why are houses and buildings different shapes?" piqued their interests even more. These questions set the foundation for the study, and the teacher began building upon their curiosities.



#### 3D Materials

After children created detailed observational drawings of their buildings and homes they designed models with 3D materials. These representations help them understand the forms and functions of the structures they're investigating.



#### Methodology

The children used various methods of inquiry to capture their learning.

- Question of the Day
- Charting
- Webbing
- Hands on explorations







#### Drawings of Homes

Observational drawings allows for rich, multi-layered expression and understanding. It serves as a tool for children to represent what they observe and how they interpret the world.



T have big buildings and small buildings. My windows look like tic-tac-toe."-DeAmonte



Mediums used: Cardstock along with black Sharpie markers.

#### Reflection

The building study was not just about constructing models or understanding architecture—it was about encouraging children to engage in a rich, multi-layered inquiry into the world of structures and spaces. It fostered creativity, problem-solving, collaboration, and a deep understanding of the physical world, while encouraging our children to express their ideas in diverse ways. It was a powerful, interdisciplinary way to integrate art, science, and social studies into the classroom.





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# IMPLEMENT AN INTERVENTION

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### SEE RESULTS DECEMBER

- Reassess classrooms
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### **Interest Form**

In addition to basic program demographics, the interest form will gather the following:

- Number and ages of children served
- Any previous experience with Environment Rating Scales
- Current participation in a facilitated family child care cohort
- Connections to potential community organizations interested in facilitating assessments



Interest forms are processed on a rolling basis, but funds are limited and programs will be selected on a firstcome, first served basis. Complete the interest form as soon as possible to secure the opportunity.

# Participating Family Child Care Homes Will:

- Receive resources supporting completion of the Family Child Care Environment Rating Scale (FCCERS), including *All About the ECERS-3*.
- Have your program assessed and assist in submission of selected scores from your assessment.
- Participate in technical assistance facilitated by experts from the National Institute for Early Education Research (NIEER) to explore assessment data and review a menu of interventions in areas like literacy, math, whole child curriculum and more that can foster deeper learning.
- Select and implement an intervention with funding support from Early Learning Indiana.
- Receive new classroom materials and professional development for classroom teams.
- Have your program reassessed and see the impact made.

# Completing FCCERS Assessments

# Early Learning Indiana provides:

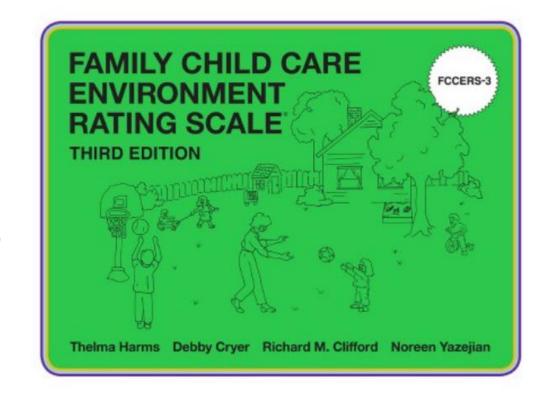
- Code for one-time 5 hour technical training
- Environment Rating Scales
  - All About the ECERS\* books

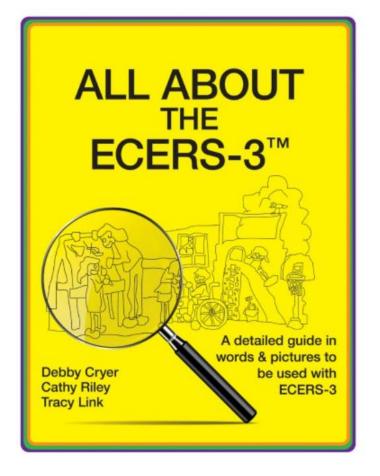
# Community partners designate an individual to:

- Complete one-time technical training
- Conduct individual assessments of 10+ family child care homes

\*All About ECERS-3 book is recommended for family child care homes.

# ERS Resources







May-July 2025 July-August 2025

September-November 2025 December 2025





Understand Your Data Implement an Intervention

See Results

opens
• Take ERS

Interest form

Assess classrooms

trainings



# Thank you!

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**FOLLOW US** 







**ADDRESS** 

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 Inadequate
 Minimal
 Good
 Excellent

 1
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#### LANGUAGE AND BOOKS

### 9. Talking with children\*

- 1.1 Little or no talking to children.
- Provider talk to children is often negative (Ex: demanding, harsh, cruel, or threatening).
- 1.3 No provider sensitivity to child's interest, engagement, or mood observed (Ex: provider continues talking to child who is not interested; interrupts child's activity with talking).
- 1.4 Provider generally is not near children being talked to and children do not easily attend to what is being said (Ex: greetings called from another room; comment on toy child uses on floor as provider quickly walks past).

### FCCERS-3

- 3.1 Moderate amount of talking to children throughout the observation (Ex: provider greets children, gives directions, or announces when it is time to change a diaper or have lunch).\*
- 3.2 Provider talk to children is generally neutral or positive with no extreme unpleasantness or negativity.\*
- 3.3 Some provider sensitivity to children's interest, engagement, or mood (Ex: provider talks to child who is eager for interaction; speaks gently to tired child).
- 3.4 Provider sometimes talks with children in a playful way (Ex: uses nonsense syllables with babies; uses rhymes, chants, songs, or other verbal play with toddlers/twos; uses silly facial expressions; uses puns and jokes with school-agers).\* Observe for two different children

- 5.1 Frequent pleasant talking with children throughout the observation during both play and routines (Ex: no long periods when there is little or no talking to children; talk often warm and playful).\*
- 5.2 Most talking to children is informal, not part of formal group time, and not used mainly to direct children (Ex: provider talks to children as they play, during routines, while holding child and socializing, when showing child something).
- 5.3 Provider talk to children is usually responsive to child's interest, engagement, or mood (Ex: provider does not continue talking to children when they want to play; vary tone according to child's needs).

- 7.1 Most talk with children is personalized, with frequent oneon-one communications (Ex: provider makes eye contact with child; uses child's name; talks to child in child's home language; uses signing or alternative communication when needed).
- 7.2 Frequent use of verbal play with children throughout the observation.\*