



Quality Matters: Setting the Stage for Life for Virginia's Infants and Toddlers



VIRGINIA
INFANT & TODDLER SPECIALIST
NETWORK

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Why is quality of care so important?

In Virginia, as across the nation, about 60%¹ of all infants and toddlers are in child care while their parents or guardians are at work. Recent research shows that most of the structure of a child's brain is established by age three.

It is, therefore, not surprising to find a strong body of evidence that the quality of infants' and toddlers' care is extremely important to their development. During the first few years of life, a child's experiences and relationships actually shape brain development.²

Warm and nurturing relationships are, in fact, essential to a child's healthy development. Child care systems, programs, and providers have a huge responsibility of providing children with opportunities for meaningful interactions, play, and learning in the context of secure, caring relationships. Virginia is making great strides toward promoting the healthy growth and development of infants and toddlers by ensuring that working families have access to quality early care programs.

What are the key elements of quality for infant and toddler programs?

The first way to assess the quality of care is to look at features that are covered by program standards such as licensing regulations. These standards usually have to do with a program's basic structure such as health and safety conditions and procedures, adult-to-child ratios, group size, director and staff qualifications, staff wages, and facilities both indoor and outside. While essential, structural elements do not provide, by themselves, enough information to determine quality in an infant and toddler program.

Many elements of quality care can only be measured by direct observation. These features have to do with process rather than structure, that is, what actually happens during the time a child is in care and the way in which providers interact with children and how often. Is there frequent one-to-one contact? Is it warm and nurturing? Are care providers playful? Are care routines used to promote relationships and to teach language and new skills? Does the care provider talk softly as she dresses or feeds a baby? Is there a good balance between active and quiet activity? Do active toddlers have room to explore but kept safe from accidents? Do adults support young children's interactions with each other? Is the room arranged in advance of children's arrival each day to provide play opportunities and activities that promote learning and respond to individual needs, abilities, and play preferences? Some of the most important features of quality are described below.

HEALTH AND SAFETY

Making sure that infants and toddlers are healthy and safe is a top priority of any quality care program. The best programs ensure that children have appropriate and adequate diets and plenty of time and space indoors and outside for exercise and motor development. Quality programs have and enforce age appropriate health and safety policies and procedures.

Quality programs provide supervision and reliable oversight of:

- Children's activities;
- Daily health checks;
- Daily safety checks of the environment;
- Safe administration of medications;
- Hand-washing and sanitation of toys, surfaces, and bathrooms;
- Sanitary toileting and diapering procedures;
- Proper handling and storage of disinfectants;
- Emergency procedures including first aid and CPR; and
- Reporting of child abuse and neglect as mandated.

Policies are not enough to guarantee children's health and safety. Infant and toddler care providers, particularly newly hired providers, need training in the meaning of written policies and procedures and in ways to put them into practice. Quality programs have systems for training, continuous oversight, and supervision to make sure that written policies and procedures are followed by all providers. An example of this is when all involved including providers, children, and families support and practice hand-washing.

LOW RATIOS AND SMALL GROUP SIZES

Small classes, low teacher-child ratios, and flexible schedules help to create a quality child care environment in which secure and trusting relationships can flourish. In the safety of those relationships, children will come to have confidence that their world is a safe and welcoming space and will be free to explore and learn from the world around them.³ In smaller, quieter spaces with fewer distractions and less noise, care providers are better able to:

- Ensure children's safety;
- Have frequent and positive interactions with babies and toddlers;
- Be aware of babies' signals and behaviors;
- Respond promptly and warmly to their individual needs for eating, rest, comfort, interaction; and
- Provide an environment rich in language and learning opportunities.

EDUCATION AND TRAINING OF INFANT AND TODDLER CARE PROVIDERS

Early care providers in quality programs need to have a fundamental knowledge of infant and toddler growth and development. Studies have shown that care providers with higher levels of education provide warmer, more responsive care, and use more varied language with young children.⁴ For those who care for children under age three, a bachelor's degree may be less important than it appears to be in caring for children over the age of three. Nevertheless, infant and toddler care providers need a strong working knowledge of child development. The child care schedule must allow care providers the time they need in order to share information, strategies, and resources with each other and with family members, and the time for training.

Training is essential to help early care providers gain the knowledge and skills needed to support quality care. For example, a provider who attends a training on dealing with difficult behaviors follows-up by making changes to the care environment to reduce conflict. Equally important, training encourages care providers to set high standards for their own work and to take pride in their own professionalism.

CONTINUITY OF CARE

Continuity of care is a system of early care staffing designed to keep young children, early care providers, and families together for at least one year, ideally two or three. An example of continuity of care is when children are cared for by one provider on a continuous basis in a home setting. Having the same caring adults responsible for young children for longer periods of time sets the stage for the development of close, warm relationships. Continuity of care builds trust between infants and toddlers and their providers, and between family members and providers.

However, some programs move infants and toddlers from one provider and room to another based on birthdays or when children reach developmental milestones such as walking or acquiring self help skills. Young children may also be moved from room to room during each day to maintain required ratios and to decrease staffing costs, particularly early in the morning and late in the afternoon. Care providers and directors, as well as parents choosing a care provider, will want to keep in mind that moving infants and toddlers to new groups throughout the year disrupts the very relationships that support their development.

ASK THE EXPERTS

According to the National Institute of Child Health and Human Development (NICHD), children in higher quality care:

- *Consistently showed better cognitive function and language development across the first three years of life*
- *Had more positive interactions with other children at age three*
- *Were more cooperative and slightly less aggressive and disobedient at age two and three*





WHAT DOES POSITIVE CAREGIVING LOOK LIKE?

- *Showing a positive attitude*
- *Having positive physical contact*
- *Responding to vocalizations with smiles, sounds, and words*
- *Asking questions and encouraging children to talk*
- *Talking to children in other ways such as praising children, teaching, telling stories, and singing*
- *Encouraging physical development (standing, walking, stacking blocks, etc.)*
- *Advancing positive behaviors, such as encouraging children to smile, laugh, and play*
- *Reading to children*
- *Taking warm and positive approaches to children*

ENGAGING ENVIRONMENTS

Engaging environments for infants and toddlers are specifically designed to promote relationships as well as to encourage exploration, self-directed learning, and development of motor skills.⁵ An engaging environment must be safe, age appropriate, functional, and attractive without being distracting. Environmental design is not so much about architecture as it is about surfaces, furnishings, equipment, toys and play materials, and how they are placed in the child care world, indoors and out.

Arranging the environment to invite safe and active exploration is an important part of the curriculum for infant and toddler care. When infant and toddler areas are being planned, early care providers must consider the needs of very young children, including those with special needs. Toddlers should have opportunities to move about freely, change activities at will, sit and observe, find a quiet spot, and have time to rest.

The quality of the environment can be determined by asking these questions:

- Is there room for active play or is most of the room taken up by cribs?
- Are there enough toys so that the children do not need to take them from one another?
- Are there toys like blocks, trucks, and dolls that children can use in a variety of ways as they develop new concepts and practice new skills?
- Are pictures, children’s art, and verbal labels for objects hung at child level?
- Is there a place for quiet play and looking at picture books that is safe from more active play equipment and materials?

A well-planned, child-sized world helps to support the relationship between children and providers. An engaging environment that can be safely explored by young children can limit the number of times an early care provider needs to say “no” or redirect a child’s activity. This can increase the time providers have for positive interactions and for encouraging and reinforcing child movement, play, and learning.

PARENT AND FAMILY INVOLVEMENT

Care providers in high quality infant and toddler programs work in partnership with parents and other family members. Regular and respectful communication between families and early care providers builds important bridges in children’s lives as they move between home and early care settings. Parents and providers need to share information about a child’s daily schedules and rhythms, about a baby’s new discoveries and milestones, and about events at home or in child care that may affect a child’s feelings and behavior. For example, a mother shares that her baby has begun crawling, and the provider makes a special effort to encourage the baby’s attempts to crawl. Parents and providers must work together to understand new behaviors and developmental stages, to address challenges, and to provide timely and relevant emotional support to the child.

**THE QUALITY OF EARLY CARE AND EDUCATION
IS DIRECTLY LINKED TO THE SKILLS AND EXPERTISE
OF THE EARLY CARE PROVIDER.**



How can quality be measured?

High quality programs are at least, licensed or regulated, and at best, accredited. Some early care and education programs must meet standards set by agencies and organizations that provide their financial support, such as the federal Head Start or a local program. Many states are now beginning to use their own state rating systems to assess and increase the quality of early care programs.

LICENSING

Licensing permits a program to operate and requires care settings to meet and maintain a set of minimum standards. The Virginia Department of Social Services (VDSS) is the agency responsible for licensing and regulation of child care, whether in centers or homes. Whether a home setting needs to be licensed is dependent on many factors such as the number of children in care, ages of the children, etc. Periodic visits and licensing reviews by VDSS inspectors ensure that licensed programs continue to meet standards over time.

ACCREDITATION

Accreditation indicates that an early care program has reached a high level of quality and uses exemplary practices. It is not easy to become accredited. A program that chooses to complete the challenging accreditation process commits to intensive self-study and external review. To maintain accreditation, periodic reviews ensure that any changes that were recommended have been made and that the quality of the program has not decreased over time.

Two highly regarded national organizations that provide accreditation for early care programs are the National Association for the Education of Young Children (NAEYC)⁶ and the National Association for Family Child Care (NAFCC).⁷ Both consider all aspects of the program, including the environment, relationships, developmental learning activities, safety and health, and professional practices.

EARLY HEAD START PERFORMANCE STANDARDS

Early Head Start, a federally funded program for low income families with infants and toddlers, is one program that has its own extensive regulations and demanding performance indicators. Some Early Head Start programs provide full-day, year-round care. Early Head Start program reviews are conducted periodically, at least every few years.

HOW CAN QUALITY BE MEASURED?

- *Licensing*
- *Accreditation*
- *Early Head Start Performance Standards or other program certifications*

Research Based Measures:

- *ITERS-R and FCCERS-R*
- *Toddler CLASS™*



RESEARCH-BASED MEASURES OF QUALITY

In addition to licensing and accreditation, many programs striving for high quality choose to work on their own to measure the quality of their work and to plan for program improvement. They can use one of several standardized measures such as the Infant/Toddler Environment Rating Scale-Revised Edition (ITERS-R), the Family Child Care Environment Rating Scale-Revised Edition (FCCERS-R) or the Toddler Classroom Assessment Scoring System (CLASS).

The ITERS-R was developed especially for the assessment of center-based infant and toddler group care. Using research findings, recommended practice, and the realities of child care settings, the scale is used to assess the quality of care for children up to 30 months of age. The scale is divided into three age groups: 1) infants (birth–11 months), 2) young toddlers (12-23 months), and 3) older toddlers (24–30 months). Criteria are specific to the needs of each age group.⁸ The FCCERS-R shares the format and scoring system of the ITERS-R. However, it is designed to assess family child care programs operating in providers' homes and covers a broader age range than does the ITERS-R.⁹

Another measure focused on classroom quality is the Toddler CLASS™. The Toddler CLASS™ focuses on provider/child interactions in classrooms with children ages 15 to 36 months. Based on literature suggesting that interactions in child care settings are associated with positive child development outcomes, the Toddler CLASS™ uses eight dimensions to assess the quality of classrooms. The Toddler CLASS™ includes dimensions of quality such as the relationship between the care provider and children, how the provider responds to children's needs, the provider's ability to promote behavioral self-regulation in children, how the provider facilitates activities to maximize children's exploration, the quality of the provider's feedback to children to expand their learning; and lastly, how well early care providers promote children's language development and create an environment rich in language.¹⁰

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What are significant challenges and barriers to providing quality care?

The high cost of infant and toddler care is a major challenge in the delivery of quality early care. The high costs of infant and toddler care are related, in part, to the space that babies need in which to move and explore and the separate quiet space they need in which to sleep during the day. In addition, infants and toddlers need safe and developmentally appropriate toys, materials, and outdoor play equipment.¹¹ But undoubtedly, the greatest costs of infant and toddler care are a result of the low child-caregiver ratios that are required for licensing, accreditation, and for quality care.

Simply having more adults in the child care environment does not guarantee quality care. Infant and toddler care skills are not easily found. Providers need to understand enough about child development to be able to structure an appropriate environment and plan an appropriate day. They need to know how to respond to each child in ways that promote child development and the development of warm and trusting relationships. While knowledge and skills can be built with training and supervision, even those involve additional costs as well as difficult schedule adaptations.

The development of secure relationships is, as discussed earlier, an essential element of quality early care. Staff turnover, typically high in child care, disrupts important adult-child relationships. Programs aiming for high quality will maximize the amount of time that children spend with their primary care providers, not only each day, but throughout the year, and even during a child's entire enrollment in the program.

Staff turnover is, at least in part, a result of inadequate salary and benefits. The entire early care community and early care system planners need to examine all strategies available for ensuring adequate compensation for the infant and toddler caregivers whose hands hold our young children and whose shoulders bear much of the responsibility for their health and development.

***THE HIGH COST OF
INFANT AND TODDLER
CARE IS A MAJOR
CHALLENGE IN THE
DELIVERY OF QUALITY
EARLY CARE.***



How can we improve quality?

All infant and toddler programs face challenges to providing quality care from time to time. But high quality programs work to identify emerging problems and take measures to address them. Quality programs rarely remain static but rather are in a continuous cycle of program assessment and improvement.

QUALITY: A CONTINUOUS PROCESS



QUALITY: A CONTINUOUS PROCESS

Quality begins with **planning**: setting standards, procedures, and policies to create a safe and developmentally appropriate environment in which children can grow and learn. State regulations, standards set by funders, and evidence-based information about best practice provide guidance for program standards, policies, and procedures.

Planning lays the foundation for **quality assessment**. Licensing and accreditation reviews are just one part of the quality assessment process. Individuals managing programs who are committed to quality assessment do not wait for outside reviews to work on quality assessment. Rather, they provide frequent and routine records review, observation, and supervision. They are responsible for making sure that what actually happens in the child care environment is consistent with written policies, procedures, and standards.

Finally, **quality improvement** ensures that information gathered about how a program delivers early care and education is paired with continuous staff and program development. Observations are followed by feedback, training, coaching, and mentorship that meet individual and staff-wide needs for increased knowledge and skills.

Technical assistance can support continuous quality improvement by meeting the shared training needs of staff and helping programs address broader needs, such as changes in standards, policies, procedures, and methods. Even programs of the highest quality benefit from technical assistance that can help them respond to changes in best practice and knowledge of infant and toddler development.

What is being done to build Virginia's quality improvement system?

Several Virginia training and technical assistance initiatives support infant and toddler programs that are committed to the continuous process of quality planning, assessment, and improvement. However, Virginia still has a variety of important initiatives that need to be brought together in a unified system. In addition to facing the daunting challenge of addressing the compensation of early care providers, the Commonwealth needs to build upon its successful training and technical assistance initiatives in order to guarantee quality early care and education for infants and toddlers and to complete the quality improvement system.

VIRGINIA STAR QUALITY INITIATIVE (www.vecf.org)

To help Virginia's early childhood programs meet quality standards, a Quality Rating and Improvement System (QRIS) was developed. QRIS assessments offer care providers in classrooms or center-based settings a roadmap for quality improvement that includes technical assistance and professional development. In Virginia, where quality rating and improvement processes are voluntary, the QRIS is known as the Virginia Star Quality Initiative (VSQI).

Working with local Smart Beginnings coalitions, the VSQI has been piloted in public and private early childhood programs in more than a dozen communities statewide. The VSQI provides standards in four program areas: 1) education, qualifications and training; 2) interactions; 3) structure; and 4) environment and instruction. In addition, the VSQI gives incentives for achieving and maintaining standards, offers a network of support and outreach for providers, and increases quality information available to parents.¹²

In centers that have received a QRIS rating, the center director and care providers work with a VSQI mentor to develop a Quality Improvement Plan. Each program is assigned a mentor who works with that program. Mentors ensure that on-site support, coaching, and training address both individual and classroom needs identified by the assessment and included in the Quality Improvement Plan.



**SEVERAL VIRGINIA
TRAINING AND
TECHNICAL ASSISTANCE
INITIATIVES SUPPORT
INFANT AND TODDLER
PROGRAMS.**



**THE MISSION OF THE
VA ITSN IS TO BUILD A
STRONGER INFANT AND
TODDLER WORKFORCE
THAT PROVIDES HIGH
QUALITY CARE FOR
CHILDREN FROM BIRTH
TO AGE THREE.**

The Virginia Star Quality Initiative has some distance to go before it can fulfill its potential for impact. Currently, the VSQI is offered in a limited number of Virginia communities and does not yet cover family child care or infant settings. However, Virginia is taking steps to ensure that the VSQI fulfills its promise as a powerful tool in promoting high quality care.

The Virginia Star Quality Initiative itself has already been piloted successfully. Virginia can move forward by:

- Expanding the VSQI to include family care and infant settings;
- Incorporating, in the state QRIS system, financial incentives that encourage and support program and provider quality improvement; and,
- Increasing outreach and public education about the Virginia Star Quality rating system so families understand it and use it to inform their child care choices.

VIRGINIA INFANT & TODDLER SPECIALIST NETWORK

(www.va-itsnetwork.org)

Virginia, along with a growing number of other states, has developed an Infant and Toddler Specialist Network. The mission of Virginia's network is to build a stronger infant and toddler workforce that provides high quality care for children from birth to age three. Virginia's Infant & Toddler Specialist Network (VA ITSN) is a program of Child Development Resources and has eight regional offices throughout the Commonwealth. The VA ITSN promotes excellence in centers and family homes by increasing the educational level and skills of those who work with infants and toddlers. Each regional office has highly trained infant and toddler specialists. Specialists provide three levels of service to early care programs:

- **Quality Improvement**—On-site consultation, mentoring, and support using quality improvement plans.
- **Quality Enhancement**—Training and technical assistance to groups of caregivers, teachers, and directors.
- **Quality Assurance**—Resources, e-mail and telephone consultation, web site support, audio-conferencing, and linkages to existing professional development opportunities.

The Virginia Infant & Toddler Specialist Network is an innovative approach that uses on-site consultation and training to improve the quality of early care. However, current funding supports only 10 full time and 2 part-time infant and toddler specialists to cover the entire state. As a result, specialists who work in large geographic and highly populated areas find it difficult to meet the already great, and now growing, needs that providers have for program and professional development.

Considerations for expansion of the VA Infant & Toddler Specialist Network are:

- Increase the service availability throughout the state so every early care program has easy access to on-site consultation and training services,
- Increase the number of infant and toddler programs receiving services from the VA Infant & Toddler Specialist Network, and
- Increase the variety of professional development options such as distance learning opportunities and model programs that serve as observation and peer-coaching sites.

OTHER PROFESSIONAL DEVELOPMENT OPPORTUNITIES IN VIRGINIA

Professional development is fundamental to improving the quality of infant and toddler programs. In addition to the VA ITSN, Virginia has two other major programs of professional development: Virginia's Infant and Toddler Endorsement and the Virginia Child Care Provider Scholarship Program.

The Infant and Toddler Endorsement Program¹³ of the Virginia Department of Social Services was established to help meet the growing need for highly qualified early childhood care and education providers. Designed to provide the foundation of knowledge needed to work with infants and toddlers and/or preschool aged children, the program is a collaborative effort by the VDSS Division of Child Care and Early Childhood Development, the Virginia Community College System, and the Community College Workforce Alliance. It offers two endorsements – the Infant and Toddler Endorsement and the Preschool Endorsement. Earning an Infant and Toddler Endorsement requires completion of 12 VDSS sponsored courses or required college credit courses offered by the Virginia Community College System.

The Virginia Child Care Provider Scholarship (VCCPS)¹⁴ promotes high quality early care and education programs by supporting professional development for early care providers through a tuition assistance program. The VCCPS provides opportunities for current and future early care providers to gain the skills and knowledge necessary for building quality early learning environments.

PROFESSIONAL DEVELOPMENT REGISTRY SYSTEM

Virginia's quality improvement system is missing an important element. Virginia is one of only 19 states that do not have a Professional Development Registry System. Without a registry, it is very difficult to know how and where providers are receiving training, if trainers are well qualified, and if quality training curricula are being used.

Virginia is taking a big step forward to address these issues. The Virginia Department of Social Services has started to develop a much needed statewide Professional Development Registry System. The registry will be used to track professional development, trainer approval, and training approval. The registry will also provide a record of the professional development of any child care provider who wishes to become a registry member. Registry data can be used to share information about workforce transitions, wages, trainers, and training. VDSS hopes to pilot the registry with providers who take part in the Virginia Star Quality Initiative starting in the summer of 2011.

NEW VIRGINIA INITIATIVES

- *Virginia Star Quality Initiative*
- *Virginia Infant & Toddler Specialist Network*
- *Infant and Toddler Endorsement*
- *Child Care Provider Scholarship*
- *Professional Development Registry*



CONCLUSIONS:

With the majority of infants and toddlers in child care while their parents are at work and evidence that the quality of that care is a major influence in early development, Virginia and other states across the nation are placing new emphasis on ensuring the quality of early care. The Commonwealth has made great progress toward the development of a system to promote, support, and assess the quality of early care. Initiatives such as the Virginia Infant & Toddler Specialist Network, the development of a professional registry, and the Virginia Star Quality Initiative are all helping to build this statewide system.

Although Virginia is moving forward with these successful efforts, the system will become fully functional when all early care programs have the resources and qualified staff needed to provide the highest level of quality care. Further aligning all components of the statewide system and taking the additional steps needed will ensure that quality is the cornerstone of early care for infants and toddlers. Quality matters and our youngest children will grow and flourish when they are cared for in high quality programs by nurturing adults who understand and are attuned to each child's unique needs.

Endnotes

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 - 14 The Virginia Child Care Provider Scholarship, www.dss.virginia.gov/redirect/?83
- More professional development resources and opportunities are offered by organizations such as the Program for Infant & Toddler Care (www.pitc.org), the National Association for the Education of Young Children (www.naeyc.com), the Virginia Child Care Resource and Referral Network (www.vachildcare.org), and the Early Head Start National Resource Center (www.ehsnrc.org).*

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