Step It Up: Taking Steps to Healthy Success Family Child Care Learning Collaboratives

Implemented by Child Care Aware of Kansas with support from General Mills Foundation and Health Care Foundation of Greater Kansas

Overview

Step It Up: Taking Steps to Healthy Success was designed to promote healthy eating and physical activity in licensed family child care homes in Kansas serving small groups of children birth to age five. Step It Up adapted the National Early Care and Education Learning Collaborative (ECELC) Project model and curriculum for use with family child care providers. Forty-five providers – serving more than 475 children – were recruited from three counties (Wyandotte, Johnson, and Allen) and organized into four learning collaboratives, with two collaboratives in Johnson County. The participants engage in four inperson Learning Sessions, four Peer Learning Community Meetings and on-going technical assistance during an 8-month period.

General Mills Foundation, through a Macro Innovation Grant from the Nemours Foundation, and the Health Care Foundation of Greater Kansas jointly funded this initiative which was implemented by Child Care Aware® of Kansas (CCAKS).

Program Model

Step it Up was implemented in fall 2014/spring 2015. Each 4-hour Learning Session contained content on childhood obesity prevention strategies through healthy eating, physical activity, reduced screen time and breastfeeding support. Parent engagement strategies were incorporated throughout each session. The Learning Sessions actively engaged the participants in identifying *Let's Move!* best practices and ways to integrate them in their family child care home. Upon completion of each Learning Session, participants were provided an Action Period task to guide them as they implemented healthy changes.

In addition to the Learning Sessions, participants engaged in Peer Learning Community Meetings to support the Learning Sessions and promote discussions among participants. These meetings allowed participants an opportunity to network and discuss implementation strategies. This is particularly valuable for family child care providers, who often do not have staff or colleagues with whom they can share ideas and problem solve.

Technical Assistance (TA) was provided in between each Learning Session from qualified trainers. TA was conducted via e-mail, telephone and in-person sessions. Each visit allowed providers an opportunity to work with their assigned trainer to develop strategies that best fit their individual needs.

How does Step It Up differ from the center-based model, ECELC?

	ECELC (Center-based)	Step it Up (Family Child Care)
Participants	2-3 staff leadership team from each program; Approximately 30 programs per collaborative	Approximately 15 individual family child care providers per collaborative
Learning Sessions	5 full-day sessions	4 half-day sessions
Peer Learning	N/A, not offered	4 sessions
Community		
Action Tasks	Leadership team accesses technical assistance and engages ECE program staff in discussions to create changes	Individual providers access technical assistance to create changes in their program and utilize Peer Learning Communities for discussions with peers





Evaluation

Gretchen Swanson Center for Nutrition (GSCN) was the evaluation partner for Step It Up. Core evaluation components included: monitoring enrollment and Learning Session attendance; conducting quantitative, pre-post analyses of the Learning Sessions and program self-assessments; monitoring Technical Assistance provided; conducting brief exit interviews with programs; and conducting two Qualitative Menu Analyses (QMA). GSCN is documented the challenges, successes, and opportunities encountered through implementation of the learning collaborative model in family child care (FCC) homes. Key findings from the evaluation include:

Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) — To measure the effect that participation in the Learning Collaboratives had on ECE best practices for nutrition and physical activity across FCC programs, providers completed NAP SACC for Family Child Care Homes prior to beginning the intervention and after it ended. FCC providers reported experiencing statistically significant change in the average number of best practices being met at post-assessment in all five NAP SACC areas¹. The greatest change was seen in Child Nutrition with an additional six best practices being met at post-assessment.

Qualitative Menu Analysis (QMA) – A Quantitative Menu Analysis (QMA)² was conducted at two FCC programs. Neither provider reported using a set menu cycle, which is generally the case in FCC programs in Kansas, as it is not required by the state that they have one. Providers also stated their daily offerings were subject to change based on what they had in their homes. Reported food item changes included switching to whole grain products, making food from scratch instead of using preprepared items, and using fresh instead of canned produce. Most notable changes were decreases in overall sodium.

Provider Interviews — Interviews were conducted with 18 FCC providers to discuss the FCC project experience, learn about any changes occurring as a result of participation, and to ask for overall opinions and recommendations. The monetary incentive given to providers proved to be a great motivator, whether a provider saw it as a reimbursement for the hours spent in training or as a means to purchase equipment for her program. Interviewees reported making many changes in their programs in the area of Child Nutrition. These changes included modifying menus, adding nutrition-related activities, and increasing water availability. Ninety percent of those interviewed commented on instituting family style dining in their program while participating in the FCC Learning Collaboratives. Few providers (n=4) disagreed with the Screen Time best practices presented as part of the FCC Learning Collaboratives was the collaboration aspect as it presented an opportunity to discuss their profession with other FCC providers (n=16).

The FCC Learning Collaboratives project helped FCC providers to make many positive nutrition and physical activity environmental changes in their programs. Evaluation findings support a set of recommendations and opportunities for continued research – available in the complete evaluation report – to support sustaining and expanding childhood obesity prevention efforts in FCC programs.

Materials and resources from the Step It Up: Taking Steps to Healthy Success, Family Child Care Learning Collaboratives, are available on the Let's Move! Child Care website.

² Data collection technique focusing on menu changes at caloric, macro, and micronutrient levels. Individual food items are analyzed from a full four-week menu cycle at both pre- and post-project time points.



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¹ Breastfeeding & Infant Feeding, Child Nutrition, Infant & Child Physical Activity, Outdoor Play, and Screen Time