

**Family-Provider Relationship Quality (FPRQ)
Practices: Relationship Skills**

Definition: Relationship skills is defined by:

- o Positive, two-way communication that is responsive to families' preferences and provider's personal boundaries.
- o Opportunities for communication with parents about children, family, and self.
- o Sensitivity, flexibility, and responsiveness to support families' identified needs and goals.
- o Equitable, culturally-responsive relationship between provider/program and family.
- o Inclusion of diverse languages.

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	My caregiver and I share information. We've talked about how to deal with problems that might arise. I feel comfortable telling my caregiver what's going on at home.	Never, Sometimes, Rarely, Often, Always, Don't know, Does not apply to me	Emlen Scales	55 items in 7 factors; face validity; "validation by replication;" prediction of quality; Cronbach's alpha for internal consistency: talk and share information (3 items): .72.	Care Setting: Center (not-specified) Age Range: 0-12 Type of Instrument: Self-Administered Questionnaire
Parent	[The staff member] listens to us. [The staff member] plans meetings at times that are good for our family. [The staff member] talks in everyday language that we can understand.	5-point scale: 1=Never performs this behavior and 5=Always performs the behavior. It also notes to circle "0" if you have not had a chance to observe how the staff member acts	Family-Centered Behavior Scale	Cronbach's alpha coefficient: .97 (N=133), test-retest correlation was .96, and after items removed, 26-item scale had a .98 alpha	Care Setting: Unspecified Age Range: Unspecified (mean age: 10.7) Type of Instrument: Self-Administered Questionnaire Special Population: Special needs children
Parent	I am able to work with agencies and professionals to decide what services my child needs. I make sure I stay in regular contact with professionals who are providing services to my child.	Not true at all, Occasionally true, Somewhat true, True, Very True	Family Empowerment Scale	34-item self-report w/5-pt likert scale; alphas (.87-.88); Pearson's r (.77-.85) for stability; 2 analyses of validity (unspecified) Piloted w/ 94 parents for pre/post evaluation of a family empowerment intervention	Care Setting: Other Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with emotional disabilities
Parent	[Provider] provides information about child's needs. [Provider] listened and respected your choices. [Provider] scheduled convenient meetings. [Provider] talked with you about your priorities. [Provider] felt like team member. [Provider] developed good relationship.	5-point scale: 1=Not at all, 2=A little, 3=Somewhat, 4=Almost, 5=Completely	Family Outcomes Survey Revised	Cronbach's alpha for full family outcomes scale: .90, but had poor psychometric properties ($X^2=1,487$) Second-order factor showed that five subscale model fit better ($X^2=752.51$) Alphas for the five outcomes subscales (all of which dealt with parent-staff relationships) were .73, .78, .87, .78, .91	Care Setting: Early intervention program Age Range: Unspecified (mean age: 25.3 months) Type of Instrument: Self-Administered Questionnaire Special Population: Parents of children with disabilities
Parent	How helpful has each of the following been to you in terms of raising your child(ren): - school/day care center? - early childhood intervention program?	5-point scale: 1=Not at all helpful, 2=Sometimes helpful, 3=Generally helpful, 4=Very helpful, 5=Extremely helpful	Family Support Scale	Coefficient alpha computed from average correlation among 18 scale items was .79. The split-half reliability was .77 corrected for length using Spearman-Brown formula. Test-retest reliability average $r = .42$ ($SD = .15$) for the 18 separate items and $r = .50$ for the total scale score. Professional helpers test-retest correlation was marginally statistically significant ($p > .05$). All other stability coefficients were significant beyond the $p < .001$ level.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with disabilities or children at risk for poor development

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	<p>[Helper] believes I know my needs and strengths.</p> <p>[Helper] tries to understand my concerns.</p> <p>[Helper] seems honest and sincere with me.</p> <p>[Helper] listens to my situation or desires.</p> <p>[Helper] supports me when I make a decision.</p>	5-point scale: 1=Rarely, 2=Seldom, 3=Sometimes, 4=Generally, 5=Almost always.	Helpgiving Practices Scale	Psychometric information available for purchase.	Care Setting: Center (not-specified) Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Parent	<p>How difficult is it for you to make contact with your child's teacher?</p> <p>In general, how often do you go to parent/teacher conferences or open houses at school?</p> <p>You feel welcome to visit your child's school.</p> <p>You enjoy talking with your child's teacher.</p> <p>You feel comfortable talking with your child's teacher about your child.</p>	<p>Very easy, Moderately easy, Slightly easy, Neither easy nor difficult, Slightly hard, Moderately hard, Very hard</p> <p>Never, A few times per year, about once per month, a few times per month, about once per week, a few times per week, every day, Not applicable</p> <p>5-point scale: 1=Not at all, 2=A little, 3=Some, 4= A lot, 5=A great deal</p>	Incredible Years Evaluation: INVOLVE - Parent Questionnaire	45-item, 7-pt likert scale. Alpha coefficients for INVOLVE-P Parent Questionnaire Summary Scales: Parent bonding with school teacher .90 (pre); .90 (post) Satisfaction with Family Service Worker .87 (pre); .90 (post) Involvement with child-importance .88 (pre); .92 (post) Involvement with child-frequency-.82 (pre); .82 (post) Positive family atmosphere .90(pre); .90 (post)	Care Setting: K-12 Age Range: 6-12 Type of Instrument: Self-Administered Questionnaire These questions may belong better under attitudes.
Parent	<p>In the past year, to what extent do the people who work with your child-</p> <ul style="list-style-type: none"> -suggest therapy plans that fit with your family's needs and lifestyle? -fully explain treatment choices to you? - offer you positive feedback or encouragement (e.g., in carrying out a home program)? - explain things to your child in a way that your child understands? - take the time to establish rapport with you or your child when changes occur in your services? - discuss with you everyone's expectations for your child, so that all agree on what is best? - accept you and your family in a nonjudgmental way? - show sensitivity to your family's feelings about having a child with special needs (e.g., your worries about your child's health or function)? 	(*Indicate how much each event or situation happens to you.*) 8-point scale: 7=To a very great extent, 6= To a great extent, 5= To a fairly great extent, 4= To a moderate extent, 3= To a small extent, 2= To a very small extent, 1=Not at all, 0=Not applicable	Measure of Process of Care	Internal Consistency as assessed by Cronbach's coefficient alpha: Respectful and Supportive Care (9 items) - Pilot Study = .91, Field testing = .92, Reliability re-text = .86. Providing Specific Info about the Child (5 items) - Pilot Study = .81, Field Testing = .82, Reliability re-test = .63. Providing general info (9 items) - Pilot Study = .91, Field Testing = .93, Reliability re-test = .94. Enabling & Partnership (16 items) - Pilot Study = .95, Field Study = .96 Reliability re-test = .86.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with a disability (developmental or physical)
Parent	<p>Do you have any difficulties talking with (PROVIDER/your caregiver at PROVIDER) because you both aren't comfortable speaking the same language?</p> <p>How many times in the past month have you had conversations with (PROVIDER/your caregiver at PROVIDER) on the following issues:</p> <ul style="list-style-type: none"> - your concerns about the child's behavior? - your concerns about something your child's teacher/caregiver is doing with child or group? - your concerns about the child's development? - seeking direction for how to support children's learning at home? <p>(PROVIDER/My caregiver at PROVIDER) is very open to new information and learning.</p>	<p>Yes, No</p> <p>3-point scale: 1=Never, 2=Once or twice, 3=Three or more times</p> <p>5-point scale: 1=Rarely,2=Once or twice, 3=Three or more times</p>	National Study of Early Care and Education, Design Questionnaire for Parents (NSECE)	None available. Survey will not be fielded until 2012.	Care Setting: Unspecified Age Range: 0-18 Type of Instrument: Interviewer-Administered Survey

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	<p>To what extent are discussions and inquiry common and accepted practices at all levels of the network?</p> <p>Is information shared and decisions made together?</p> <p>Are problems solved collaboratively?</p> <p>Do leaders provide formal and informal means for all members of the network to raise and solve problems?</p>	Always/yes, In progress, In the plans, No, not yet	Parent Leadership Development Self-Assessment	None available online or internally. Child Trends staff have contacted the author.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Parents participating in child abuse prevention programs
Parent	<p>I was told about my child's progress in a language that I understand and in ways that are respectful to my family and me.</p> <p>The program offers regular parent-teacher conferences at least twice per year to discuss your child's progress.</p> <p>The program has regular opportunities for parents to be involved; for example, volunteering, sharing meal time, reading to children, fundraising, etc.</p> <p>Please tell us if the following is available to you from this provider:</p> <ul style="list-style-type: none"> - I was given information in a language that I understand. - I am told about my child's progress in a language that I understand and in ways that are respectful to my family and me. 	Yes, No, Not sure	Quality for ME: Quality of Child Care Services	Items were adapted from Emlen scales, see Emlen scale psychometrics.	Care Setting: Head Start; Community-based Center; Family Child Care; K-12 Age Range: 0-12 Type of Instrument: Self-Administered Questionnaire; QRIS Special Population: Parent feedback survey for families with children in ECE programs participating in Maine's Quality Rating System
Parent	The care provider is open to new information and learning.	5-point scale: 1=Never, 2=Rarely, 3=Sometimes, 4=Often, or 5=Always	Three-City Study Child Care Interview Protocol	Items on the maternal ratings of child care survey were adapted from Emlen scales, see Emlen scale psychometrics.	Care Setting: Community-based Care; Family Child Care; Family, Friend, or Neighbor care Age Range: 0-5 Type of Instrument: Interviewer-Administered Survey
Parent	How would you describe your relationship with the person who cares for your child?	Open-ended	Work-Child Care Fit	Contacted developer to see if psychometric information is available.	Care Setting: Center (not-specified); Family Child Care; Family, Friend or Neighbor Care Age Range: 0-5 Type of Instrument: Interviewer-Administered Survey; Qualitative
Parent	<p>I volunteer in my child's classroom.</p> <p>I participate in parent and family social activities with the teacher.</p> <p>I participate in planning classroom activities with the teacher.</p> <p>I talk to the teacher about how my child gets along with his/her classmates at school.</p> <p>I talk with my child's teacher about classroom rules.</p> <p>I talk to my child's teacher about his/her difficulties at school.</p> <p>I talk to my child's teacher about his/her daily routine.</p> <p>The teacher and I write notes about my child or school activities.</p> <p>I talk with my child's teacher on the telephone.</p> <p>I talk with my child's teacher about personal or family matters.</p>	4-point scale: 1=Rarely, 2=Sometimes, 3=Often, 4=Always	Family Involvement Questionnaire	<p>School-Based Involvement (first 3 items - $\alpha=.85$) Home-School Conferencing (second set of items - $\alpha=.81$)</p> <p>"Thirty-five of the forty-two items (85%) loaded appreciably on only one dimension, with only two double-loading and 4 nonloading items" (p. 370).</p> <p>"High levels of congruence (coefficients > .98) were found for like factors in comparison between each subgroup and the large sample" (p. 371).</p>	Care Setting: Head Start; Pre-K; K-12 Age Range: Ages 3-12 Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	<p>Were your ideas valued in planning services for your child?</p> <p>Were your family's values and culture taken into account when planning for your child?</p> <p>Were the needs/circumstances of your family considered in this planning?</p> <p>How much did staff listen to your ideas about ways to change or improve treatment or service planning?</p> <p>How much did staff make changes in the service plan for your child as a result of your suggestions?</p>	4-point scale: 4=A lot, 3=Some, 2=A little, 1=Not at all	Family Participation Measure	Child Trends is contacting author for psychometrics and other missing information.	Care Setting: Center (not-specified) Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Parent	Full item wording is not available.		Parent Caregiver Relationship Scale (PCRS)	Reliability - "Total scales showed high levels of internal consistency", with alpha = .93 for parent scale and .94 for caregiver scale. Test-retest reliability - Family Child Care: r = .80; Center Care: r = .84. Validity - "caregiver PCRA total scores exhibited predicted patterns" in center subsample. In family child care subsample, no sig. correlation.	Care Setting: Center (not-specified); Family Child Care Age Range: 0-2 Type of Instrument: Self-Administered Questionnaire
Parent	Full item wording is not available.		Family Professional Partnership Tool	Piloted 60 items, 5-pt Likert scale; two factors: child-focused relationships, family-focused relationships; revised scale: 18 items; rated on importance and satisfaction; Cronbach's alpha (.93; .96)	Care Setting: Other Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Parent	I am confident that the teachers are sensitive to cultural differences.	4-point scale: 3=Very satisfying, it is easy for me to work with teachers/parents, 2 (Somewhat satisfying, it's OK), 1 (Somewhat unsatisfying, could definitely be improved), or 0 (Very unsatisfying, it is difficult for me to work with teachers/parents).	Trust Scale	Reliability for the Trust Scale, as measured by alpha coefficients, was .90 for teachers and .96 for parents. No additional psychometric information is available from this source.	Care Setting: K-12 Age Range: 6-12 Type of Instrument: Self-Administered Questionnaire
Provider	<p>How often do you talk to (FOCUS PARENT) about (FOCUS CHILD)?</p> <p>With (FOCUS PARENT), how frequently do you talk about:</p> <ul style="list-style-type: none"> - What (FOCUS CHILD) ate that day? - What kin of activities you did with (FOCUS CHILD) during that day (reading, playing ball, painting, playing with dolls, puzzles)? - (FOCUS CHILD)'s routines, such as any toileting, sleeping, and/or eating issues? - How (FOCUS CHILD) got along with the other children that day? - How (FOCUS CHILD) felt that day? - What's happening at home with (FOCUS CHILD)? - What's happening in (FOCUS CHILD)'s life? - What's happening in your life? 	<p>Every day, Two or three times a week, Once a week, Less often, Some other amount of time</p> <p>3-point scale: 0=Never, 1=Sometimes, 2=Often</p>	Child Care Assessment Tool for Relatives (CCAT-R) Interview	<p>Criterion validity; construct validity through factor analysis (factors: nurturing, bi-directional communication, uni-directional communication, engagement); content validity; informal test of concurrent validity w/ FDCRS 4 items</p> <p>No other reliability information is available.</p>	Care Setting: Family Child Care; Family, Friend or Neighbor care Age Range: 0-5 Type of Instrument: Interviewer-Administered Survey

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Provider	<p>Do you and your staff-</p> <ul style="list-style-type: none"> - Partner with families to help define their role in their child's care? - Act to support each family's chosen role? - Ask families about any cultural values, beliefs or practices that might relate to their child/youth's care? - Offer trained interpretation (foreign language or sign)? - Share information with families about elements of family-centered and culturally and linguistically competent care? - Honor family's beliefs and practices when developing diagnostic and treatment plans? - Recognize families' schedules and cultural events as important factors related to scheduling appointments? - Respond to families' concerns about proposed scheduling of appointments and procedures? - Honor families' requests for longer appointments to discuss complex issues? - Schedule appointments tailored to the needs of the child/youth and family? (For example, have "no wait" appointments for patients who may have immune system problems or developmental/behavioral issues that make it difficult to sit in the waiting room.) -Discuss which treatment and care choices would be best for the family and child/youth? -Have a process to identify the strengths of families within the practice that they can share with other families? <p>Is there a respectful negotiation process to resolve any disagreement about a child/youth's treatment and care?</p> <p>Does your partnership with families change over time as their experiences, knowledge and skills change?</p> <p>Do you and your staff-</p> <ul style="list-style-type: none"> - offer peer mentoring/support opportunities for families/caregiver to be supported in their changing roles from decision-makers to supporting their children/youth in making decisions? - ask families what is working well? - help families identify area where they may need additional support? - honor families beliefs and practices when developing diagnostics and treatment plans? (This includes respect for diet; customs regarding eating, bathing, dressing; religious rituals related to health; modesty concerns such as gender of the provider, expected roles to gender or generation.) <p>If a family uses alternative and traditional medicine, do you and your staff work with the family to integrate traditional and alternative healing treatments into the child/youth's overall care?</p> <p>Do you and your staff ask about:</p> <ul style="list-style-type: none"> - the family's support network and the role of religion or other cultural supports? - the family's concerns and any stresses or successes they may experience as a caregiver? -depression, domestic violence, substance abuse, housing or food insecurity? 	Never, Some of the time, Most of the time, Always	Family-Centered Care Self-Assessment Tool	Not available online, Child Trends staff has contact author and is awaiting a response.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Provider	How well do you feel you can talk to and be heard by this parent? If you had a problem with this child, how comfortable would you feel talking to his/her parent?	5-point scale: 1=Not at all, 2=A little, 3=Somewhat, 4=Well, 5=Very well 5-point scale: 1=Not at all, 2=A little, 3=Somewhat, 4=Comfortable, 5=Very comfortable	Incredible Years Evaluation: INVOLVE - Teacher Questionnaire	20 items; 5-pt likert scale. Alpha coefficients for INVOLVE-T Teacher Questionnaire Summary Scales Parent involvement in education .91 Parent involvement with school/teacher .84 Parent involvement total .90 Teacher bonding with parent .76	Care Setting: K-12 Age Range: 6-12 Type of Instrument: Self-Administered Questionnaire
Provider	In the last 3 months, how often has a parent talked with you or someone else on your staff about any of the following- - the child's behavior? - something the child's teacher/caregiver is doing with child or group? - the child's development? - how parents can support the children's learning at home? - recent family activities or events?	4-point scale: 1=Never, 2=Monthly, 3=Weekly, 4=Daily	National Study of Early Care and Education Design Questionnaire for Center-Based Care Settings (NSECE) National Study of Early Care and Education Design Questionnaire for Home-Based Care Settings (NSECE)	None available. Survey will not be fielded until 2012.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 0-12 Type of Instrument: Interviewer-Administered Survey Care Setting: Family Child Care Age Range: 0-12 Type of Instrument: Interviewer-Administered Survey
Provider	Full item wording is not available.		Perceptions of Communication Questionnaire	α ranged from .70 to .97 for the three types of communication (one, two, and three-way communication). *The ratio of the parents' agreements/agreements + disagreements was .81" (p. 213). Caregiver rration was .81.	Care Setting: Community-based Center Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Provider	How often do you communicate in the following ways with STUDY CHILd's parents about the child's progress or about things that are going on in the child care arrangement? - written note given to parents? - informal conversation with parents (e.g., at pick up or drop off or while the parent visits)? - telephone calls initiated by you or the parent? - visit with child and parent at home? - parent asks you questions or gives you suggestions about the child? - regularly scheduled parent conference?	5-point scale: 1=Never, 2=1-2 times a year, 3=3-4 times a year, 4=About once a month, 5=Almost every week, 6=More than once per week, 7=Almost every day	NICHD Study of Early Child Care (SECC) - Parent Involvement (Child Care Provider Report)	Psychometrics available for purchase.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Provider	How often has this child's parent called you this school year? How often have you called the child's parent this school year? How often has this child's parent stopped by to talk to you this school year? How often has this child's parent attended a parent-teacher conference this school year? How much is this parent interested in getting to know you? How well do you feel you can talk to and be heard by this parent? If you had a problem with this child, how comfortable would you feel talking to his/her parent about it?	5-point scale: 1=Never, 2=Once or twice a year, 3=Almost every month, 4=Almost every week, 5=More than once per week	Parent and Teacher Involvement Measure	Psychometrics for Parent and Teacher Involvement Measure: Alphas were calculated for 3 factors: Parent comfort and endorsement of school=.93 Parent Involvement=.79 Parent-teacher contact=.68 Correlation between factors Parent comfort and endorsement of school and Parent involvement factors was relatively high (r=.64). Psychometrics for the NICHD study are available for purchase.	Care Setting: K-12 Age Range: Grades 5-8 Type of Instrument: Self-Administered Questionnaire Care Setting: Unspecified Age Range: Unspecified. Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Observer	The teacher communicates with families at least once a month concerning each child's overall progress at school. The school or teacher ask families how they want to be involved in classroom-related activities.	Not applicable - observational scale	Assessment of Practices in Early Elementary Classrooms	Criterion validity: Pearson correlation between measure and Team Observation Measure =.857.	Care setting: K-12 Age Range: K-Grade 3 Type of instrument: Observational and Interviewer administered Special population: Classroom that include children with special needs for at least part of the day
Observer	Teacher schedules individual parent conferences at least 2 times during the year. Teacher makes attempts to respond to parent initiated communication on the same day.	Not applicable - observational scale	Assessment Profile for Early Childhood Programs	Inter-rater reliability: mean - 93 to 95% agreement, range of 83 to 99%, The reliability coefficients for the five scales range from .79 to .98 Path coefficients for year 1 and year 2 for interacting scale are .59 and .52.	Care Setting: Center (not-specified) Age Range: 0-12 Type of Instrument: Observational
Observer	The provider speaks the parent's primary language or utilizes resources to communicate.	Not applicable - observational scale	Business Administration Scale for Family Child Care (BAS)	Scale cronbach's alpha: .77 (N=65) interrater reliability: 94% distribution of provider-parent communication item: 55% of respondents got the top score. intercorrelation between this item and other items on the scale ranged from .01 to .38 sig correlation (.44) between item and FCCERS-R measure	Care Setting: Family Child Care Age Range: Unspecified Type of Instrument: Observational; Interview-Administered Survey
Observer	Much sharing of child-related information between parents and staff (Ex. Frequent informal communication; periodic conferences for all children; parent meetings, newsletters, parenting information available).	Not applicable - observational scale	Early Childhood Environmental Rating Scale-Revised (ECERS-R)	Overall the ECERS-R is reliable at the indicator and the item level, and at the level of the total score. The percentage of agreement across the full 470 indicators in the scale is 86.1%. Internal consistency: Parents and Staff =.71, Total=.92 Inter-rater reliability: The correlations between the two observers were .92 product moment correlation (Pearson). The interclass correlation was .92.	Care Setting: Center (not-specified) Age Range: 3-5 Type of Instrument: Observational; Interviewer-Administered Survey
Observer	Full item wording is not available.		Family Provider Interaction Analysis (FPIA)	4 trained subjects rated 3 10-minute videotaped family/provider sessions; face validity (chi-square analysis: significant differences in categories); reliability: rho's (.17-1.0) for intrarater;.01-.77 for interrater	Care Setting: Family-provider session through Let's Play! Project, a federally funded model demonstration project Age Range: 0-2 Type of Instrument: Observational Special Population: Infants and Toddlers w/ special needs
Observer	Home visitor: - gets more information by asking questions. - asks parents about his or her goals. - brainstorm with parent, ways to achieve goals. - is relaxed in interacting with both the parent and the child. - is accepting of the family system. - shows interest in what is happening with the family.	Not applicable - observational scale	Home Visit Rating Scale (HOVRS)	7 scales w/ 7 ratings (HV Responsiveness to Family, Relationship/ Family, Non-Intrusiveness); interrater reliability: greater than .85; predictive validity with the HOME and the PPVT-III	Care Setting: Other Age Range: Unspecified Type of Instrument: Observational
Observer	Teacher is able to describe ways they personally connect with families that indicate personal knowledge of the family situation and an appreciation for the family. Teacher uses a variety of methods (e.g., home visits, phone calls, classroom visits, notes, newsletters) to communicate with family to ensure that an effort is made to connect with all families. Communication systems with families are bi-directional, offering families a mechanism to share information about the family or child with the teacher.	Not applicable - observational scale	Teaching Pyramid Observation Tool	This measure is still undergoing development. Currently, there is a study being conducted to measure the psychometric properties of the TPOT. There is no information about the reliability or validity at this time.	Care Setting: Center (not-specified) Age Range: 3-5 Type of Instrument: Observational

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Observer	Parents made aware of philosophy and approaches practiced (Ex. parent handbook; discipline policy; description of activities; parent orientation meeting). *Materials must be easily understood by all parents. For example, translations provided in languages other than English, if necessary.	Not applicable - observational scale	Infant/Toddler Environmental Rating Scale- Revised (ITERS-R)	Average agreement on the 467 indicators on 39 items in the ITERS-R was 91.65%. Cohen's Kappa was also computed. Across the 39 items, the weighted Kappa was .58. Across the 32 child-related items, the weighted Kappa was .55. Cronbach's alpha: Parents and Staff =.68, Total=.93. Parents and Staff subscale intraclass correlation= 0.92	Care Setting: Center (not-specified) Age Range: 0-2 Type of Instrument: Observational; Interviewer-Administered Survey
Observer	Staff seek input from parents about how they are supporting children's development at home and provide parents with additional resources.	Not applicable - observational scale	Preschool Program Quality Assessment-Agency Items	Psychometric information available in: Jurkiewicz, T. C. (2003). The Revised Preschool PQA: Report on Psychometric Properties. Ypsilanti, MI: High/Scope Educational Research Foundation, Research Division. Unpublished paper. This reference is not available online. Contacted developer to obtain information but have not gotten a response.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 3-5 Type of Instrument: Observational
Director/ Administrator	Do teachers schedule meetings with the parents of each child to discuss their child's care and activities? How many times are meetings typically scheduled with parents?	Yes, No Fill in number of times and specify "per year/per month/per week."	Early Childhood Longitudinal Study- Birth Cohort Center Director Questionnaire (ECLS-B)	Per NCES, psychometric data not available for this survey.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 3-5 Type of Instrument: Self-Administered Questionnaire
Director/ Administrator	The center communicates with families in their primary language or utilizes resources as needed to communicate with families.	7-point scale: 7 = Excellent, 5 = Good, 3 = Minimal, 1 = Inadequate	Program Administration Scale (PAS)	Content Validity-reviewed by a panel of 10 ECE experts and 10 administrators, consultants and trainers Interrater reliability-Overall=.90, individual rater agreement=.81 to .95 Concurrent (Criterion) Validity-PAS Family Partnerships subscale correlation with Early Childhood Work Environment Survey Opportunities for Professional Growth subscale=.43 PAS Family Partnerships correlation with Early Childhood Environment Rating Scale-Revised Parents and Staff subscale=.34	Care Setting: Center (not-specified) Age Range: Unspecified Type of Instrument: Observational; Interviewer-Administered Survey

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Director/ Administrator	<p>Parents are invited to visit and observe their children in the classroom.</p> <p>Staff reinforce parent authority by:</p> <ul style="list-style-type: none"> - supporting parents' directions and/or decisions about their child. - talking with parents in a respectful manner about how best to handle the differences in expectations regarding children's behavior. <p>Staff develop personal relationships with parents by taking time to get to know them individually - listening and learning about their interests, families, current activities, and hope and expectations for their child.</p> <p>When staff are concerned about parenting techniques or behavior, they:</p> <ul style="list-style-type: none"> - Proactively and respectfully reach out to parents and share their concerns about the children or about the parents' parenting practices <p>Staff are accepting and supportive of diverse family constellations, i.e. single parents, grandparents, foster parents, gay/lesbian couples, etc.</p>	5-point scale: 5=Strongly agree, 4=Agree, 3=Neither agree nor disagree, 2=Disagree, 1=Strongly Disagree, Not applicable	Strengthening Families Through Early Care and Education Program Self-Assessments	Contacted developer to see if psychometric information is available.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (Client and social worker)	<p>How much have you and your social worker discussed how you are going to approach your work together?</p> <p>Do you and your social worker work well together?</p> <p>Do you feel your social worker pays attention to you? Does your social worker explain to you his or her understanding of your difficulties?</p> <p>In addition to talking about your difficulties, does your social worker give you the impression that he or she enjoys meeting and talking with you?</p>	5-point Likert scale (additional details not provided)	Helping Relationship Inventory for Social Work Practice	<p>Reliability - The HRI:C (Respondent = Client) structural index had an alpha coefficient of .91, and the interpersonal index had an alpha coefficient of .96. The combined 20-item HRI:C had an alpha coefficient of .96. The HRI:W (Respondent = Social Worker) structural index had an alpha coefficient of .86, and the interpersonal index had an alpha coefficient of .91. The combined 20-item HRI:W had an alpha coefficient of .93. Therefore, both "have high reliability".</p> <p>Validity - HRI was compared to WAI indexes (Working Alliance Inventory), which already established validity (Horvath & Greenberg). High correlations (support the validity" of HRI. The correlation b/t HRI:C and WAI-C is .84.</p>	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Other (Family's resource facilitator, also known as a case manager)	<p>Were the strengths of your child and family used in the planning and modification of services and supports?</p> <p>Do team members "overrule" your wishes regarding your child?</p> <p>Do people providing professional services understand and respect your family's culture, traditions, lifestyles, and spiritual beliefs?</p>	8-point scale: 0=Low fidelity, 8=High fidelity	Wraparound Fidelity Index (WFI-4)	Reliability: Overall alpha ranged from .83 to .92. Alphas for 10 subscales ranged from .3 to .6, but individual subscale alphas were not provided for the WFI-4.	Care Setting: care services for children with emotional and behavioral disorders Age Range: 4-19 Type of Instrument: Interviewer-Administered Survey
Other (medical staff and non-medical staff)	<p>Practice and family communicate at agreed upon intervals and both agree on "best time and way to contact me"; individual needs prompt week or other special appointments.</p> <p>Communication between the family and the primary care provider occurs as a result of family inquiry.</p> <p>Special needs concerning physical access and other visit accommodations are considered at the time of the appointment and are met if possible.</p> <p>Feedback from families of CSHCN regarding their perception of care is gathered through systematic methods (e.g., surveys, focus groups, or interviews); there is a process for staff to review this feedback and to begin problem solving.</p> <p>Family assessments include pertinent cultural information, particularly about health beliefs; this information is incorporated into care plans; the practice uses these encounters to assess patient & community cultural needs.</p> <p>The primary care provider attempts to overcome obstacles of language, literacy, or personal preferences on a case by case basis when confronted with barriers to care.</p>	Levels 1-4	Medical Home Index: Pediatric	Kappa coefficients of interrater reliability between two Center for Medical Home Improvement project staff were above .50 for all 25 themes. Kappa scores comparing each staff member and the practice sites' self-assessment found 80% of the themes at .65 or better for one interviewer (J.W.M.) and 60% of the themes at .65 or better for the second interviewer (K.S.). The internal consistency reliability standardized alpha coefficients across the 6 domains of the MHI ranged from .81 to .91, and the overall standardized alpha coefficient was .96.	Care Setting: Pediatric medical care setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (nurses)	<p>Sensitivity toward families' perceptions is not an important aspect of my job.</p> <p>Seeking the families' input when making decisions about care is not essential.</p> <p>It is important for me to establish a relationship with the family so they can trust me with their child.</p> <p>Families have a right to say what is important to them in planning care.</p>	5-point scale: 1=Strongly disagree, 5= Strongly agree	Family Nurse Caring Belief Scale (FNCBS)	<p>27-items w/5-pt Likert scale; Internal reliability: Cronbach's alpha (.81); construct validity: 4 factors: ethical caring practices; systems orientation to families; child advocacy, normalizing milieu; concurrent validity (Pearson's r .57 with the Caring Behaviors Inventory and the Family Caring Scale); criterion validity</p> <p>Phase 1: instrument construction: pilot tested w/ 60 PICO nurses; phase 2: psychometric testing w/ random sample of 720 PICO/NICU nurses; although intended to measure attitudes; could be used for knowledge and behaviors</p>	Care Setting: Center (not-specified) Age Range: 0-2 Type of Instrument: Self-Administered Questionnaire
Other (Senior leaders such as the Chief Operating Officer and Medical care provider)	<p>Family members are not viewed as visitors; they are always welcome to be with the patient, in accordance with the patient's preference.</p> <p>Patients and families have the opportunity to participate in interdisciplinary meetings to plan care.</p> <p>Staff acknowledge the individuality, culture, capacity, and abilities of each patient and family.</p> <p>Staff collaborate with the patient and family to manage pain.</p> <p>There is continual, open, and honest communication among patients, families, and staff.</p> <p>Written information is provided in primary languages of patients and families served by the hospital.</p>	5-point scale: 1=Not at all, 3=OK, 5=Very Well	A Hospital Self-Assessment Inventory, Patient - and Family-Centered Care	Per author, psychometrics testing has not been conducted for this measure.	Care Setting: Medical Setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Family-Provider Relationship Quality (FPRQ)
Practices: Goal-Oriented Skills -Advocate for and connect families

Definition: Advocate for and connect families is defined by:
o Advocate for and connect families to peer and community supports/resources

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	[The program] connects you with people and services.		Family Outcomes Survey Revised	Cronbach's alpha for full family outcomes scale: .90, but had poor psychometric properties (X2=1,487) Second-order factor showed that five subscale model fit better (X2=752.51) Alphas for the five outcomes subscales (all of which dealt with parent-staff relationships) were .73, .78, .87, .78, .91.	Care Setting: Early intervention program. Age Range: Unspecified (mean age: 25.3 months) Type of Instrument: Self-Administered Questionnaire Special Population: Parents of children with disabilities Full item wording is not available.
Parent	In the past year, to what extent do the people who work with your child: - provide ideas to help you work with the health care "system"? In the past year, to what extent does the organization where you receive services- - give you information about the types of services offered at the organization or in your community? - provide opportunities for the entire family to obtain information? - provide advice on how to get information or to contact other parents (e.g., organization's parent resource library?) - promote family-to-family gatherings for social, informational or shared experiences?	("Indicate how much each event or situation happens to you.") 8-point scale: 7=To a very great extent, 6= To a great extent, 5= To a fairly great extent, 4= To a moderate extent, 3= To a small extent, 2= To a very small extent, 1=Not at all, 0=Not applicable	Measure of Process of Care	Internal Consistency as assessed by Cronbach's coefficient alpha: Respectful and Supportive Care (9 items) - Pilot Study = .91, Field testing = .92, Reliability re-text = .86. Providing Specific Info about the Child (5 items) - Pilot Study = .81, Field Testing = .82, Reliability re-test = .63. Providing general info (9 items) - Pilot Study = .91, Field Testing = .93, Reliability re-test = .94. Enabling & Partnership (16 items) - Pilot Study = .95, Field Study = .96 Reliability re-test = .86.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with a disability (developmental or physical)
Parent	Has a child-care provider ever provided you with or referred you to any of the following services? - health screening, medical, dental, vision, hearing, or speech? - developmental assessments? - counseling services for children or parents? - social services to families such as housing assistance, food stamps, financial aid, or medical care?	Yes, No	National Study of Early Care and Education, Design Questionnaire for Parents (NSECE) National Study of Early Care and Education Design Questionnaire for Home-Based Care Settings (NSECE)	None available. Survey will not be fielded until 2012.	Care Setting: Unspecified Age Range: 0-18 Type of Instrument: Interviewer-Administered Survey Care Setting: Family Child Care Age Range: 0-12 Type of Instrument: Interviewer-Administered Survey
Parent	I was given information about government health insurance program for me and or for my child(ren)/family. I was given information about local health or human services that may be helpful for me and/or my family and me.	Yes, No, Not sure	Quality for ME: Quality of Child Care Services	Items were adapted from Emlen scales, see Emlen scale psychometrics.	Care Setting: Head Start; Community-based Center; Family Child Care; K-12 Age Range: 0-12 Type of Instrument: Self-Administered Questionnaire; QRIS Special Population: Parent feedback survey for families with children in ECE programs participating in Maine's Quality Rating System
Parent	The program staff give me good information about where to go for other services I need. The program staff provide opportunities for me to get to know other parents in the community. The program staff encourage me to go to friends and family when I need help or support.	7-point scale: 1=Strongly disagree, 7=Strongly agree	Strength-Based Practices Inventory	Internal consistency: alphas for subscales ranged from .81 to .92, measure was positively correlated with Parent Empowerment Scale. Predictive validity: strength-based practices at 14-months were not found to be predictive of parent empowerment, social support, and other parent outcomes measured at 24 months.	Care Setting: Head Start Age Range: 0-2 Type of Instrument: Qualitative Special Population: Parents at or below Federal Poverty guidelines

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	Does XX and/or the center ever give you information for yourself such as employment opportunities, education, housing, etc.?	Open-ended	Work-Child Care Fit	Contacted developer to see if psychometric information is available.	Care Setting: Center (not-specified); Family Child Care; Family, Friend or Neighbor Care Age Range: 0-5 Type of Instrument: Interviewer-Administered Survey; Qualitative
Provider	Teacher has a procedure for seeking advice and referrals for children suspected of having special needs.	Not applicable - observational scale	Assessment Profile for Early Childhood Programs	Sub-scale alpha not available for relevant items. Interrater agreement: average 86%, median weighted Kappa: .59, construct validity (correlation b/w APEEC and 3 other measures of developmentally appropriate practices) = .67, .55, .61	Care Setting: Center (not-specified) Age Range: 0-12 Type of Instrument: Observational
Provider	Do you help parents link to subsidies or give parents information about payment assistance for child care that they may qualify for?	Yes = 1, No = 2, Refuse = RF, Don't know = DK	Early Childhood Longitudinal Study- Birth Cohort Provider Questionnaire (ECLS-B)	Per NCES, psychometric data not available for this survey.	Care Setting: Head Start; Pre-K; Community-based Center; Family Child Care Age Range: 3-5 Type of Instrument: Self-Administered Questionnaire
Provider	Parents referred to other professionals when needed (Ex. for special parenting help, for health concerns about child). What do you do when parents seem to be having difficulties? Do you refer them to other professionals for help?	Not applicable - observational scale	Early Childhood Environmental Rating Scale-Revised (ECERS-R)	Overall the ECERS-R is reliable at the indicator and the item level, and at the level of the total score. The percentage of agreement across the full 470 indicators in the scale is 86.1%. Internal consistency: Parents and Staff = .71, Total = .92 Inter-rater reliability: The correlations between the two observers were .92 product moment correlation (Pearson). The interclass correlation was .92.	Care Setting: Center (not-specified) Age Range: 3-5 Type of Instrument: Observational; Interviewer-Administered Survey
Provider	Do you and your staff: - Help families advocate for services and work to improve systems of care, if they so choose? - Offer peer mentoring/support opportunities for families/caregivers to be supported in their changing roles from decision-makers to supporting their children/youth in making decisions? - Connect families and youth with information and resources to support achieving their vision in ways that respect their cultural beliefs about roles and expectations in adulthood? - Help families find information and educational materials that can easily read or that don't need reading, like videos to watch?	Never, Some of the time, Most of the time, Always	Family-Centered Care Self-Assessment Tool	Not available online or internally. Child Trends staff has contacted author and is awaiting a response.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Provider	Full item wording is not available.		Perceptions of Communication Questionnaire	α ranged from .70 to .97 for the three types of communication (one, two, and three-way communication). "The ratio of the parents' agreements/agreements + disagreements was .81" (p. 213). Caregiver ration was .81.	Care Setting: Community-based Center Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Observer	The provider recommends to all parents with children birth to age 5 that they access community resources that provide developmental screening services.	Not applicable - observational scale	Business Administration Scale for Family Child Care (BAS)	Scale cronbach's alpha: .77 (N=65) interrater reliability: 94% distribution of provider-parent communication item: 55% of respondents got the top score. intercorrelation between this item and other items on the scale ranged from .01 to .38 sig correlation (.44) between item and FCCERS-R measure	Care Setting: Family Child Care Age Range: Unspecified Type of Instrument: Observational; Interview-Administered Survey
Observer	Parents are informed of any need for health care follow-up and are given referrals as necessary.	Not applicable. This is an observational measure.	Child Development Program Evaluation Scale (CDPES)	Total 37 items from 900 items from 4 states (NY, PA, CA, WVA); statistically significant predictors of compliance and quality; face validity with NAEYC and CWLA standards	Care Setting: Center (not-specified) Age Range: 0-12 Type of Instrument: Observational Special Population: Includes items for special needs children.
Observer	Parents referred to other professionals when needed (Ex. For special parenting help, for health concerns about child).	Not applicable. These are both observational measures.	Infant/Toddler Environmental Rating Scale- Revised (ITERS-R) Early Childhood Environmental Rating Scale-Revised (ECERS-R)	ITERS-R Psychometrics: Average agreement on the 467 indicators on 39 items in the ITERS-R was 91.65%. Cohen's Kappa was also computed. Across the 39 items, the weighted Kappa was .58. Across the 32 child-related items, the weighted Kappa was .55. Parents and Staff subscale intraclass correlation= 0.92 ECERS-R Psychometrics: Overall, the ECERS-R is reliable at the indicator and the item level, and at the level of the total score. The percentage of agreement across the full 470 indicators in the scale is 86.1%. Inter-rater reliability: The correlations between the two observers were .92 product moment correlation (Pearson). The interclass correlation was .92. Subscale internal consistencies range from .71 to .88 (Parents and staff subscale was .71).	ITERS-R : Care Setting: Center (not-specified) Age Range: 0-2 Type of Instrument: Observational; Interviewer-Administered Survey ECERS-R: Care Setting: Center (not-specified) Age Range: 3-5 Type of Instrument: Observational; Interviewer-Administered Survey
Observer	Children are provided with/referred for diagnostic and/or special education services as needed for suspected or diagnosed disabilities in speech, language, physical, visual, audiological, and social development (and in other areas as needed). Staff work together with parents to locate and access any special education services needed by the child. Staff facilitate access to family services (e.g., staff provide documentation for parents to share with providers; staff make initial phone call to help arrange appointment; staff help families find child care or transportation so that they can use community resources).	Not applicable - observational scale	Preschool Program Quality Assessment-Agency Items	Psychometric information available in: Jurkiewicz, T. C. (2003). The Revised Preschool PQA: Report on Psychometric Properties. Ypsilanti, MI: High/Scope Educational Research Foundation, Research Division. Unpublished paper. This reference is not available online. Contacted developer to obtain information but have not gotten a response.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 3-5 Type of Instrument: Observational
Director/ Administrator	In the last month, how many students or parents have you referred to local agencies or organizations for assistance or information?	6-point scale: 1=More than 20, 2=16-20, 3=11-15, 4=6-10, 5=1-5, 6=None.	Evaluation of The After School Corporation After-School Program Site Coordinator Survey	Not available online, Child Trends staff contacting author.	Care Setting: K-12 Age Range: School-aged children Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Director/ Administrator	<p>The program helps parents set up formal and informal support mechanisms, such as phone trees, car pools, babysitting co-ops, and play groups.</p> <p>The program provides opportunities for families to socialize and foster a sense of community.</p> <p>The program offers or connects families to resources to strengthen relationships between adults, e.g., healthy marriage, communication skills for couples, parents and grandparents, co-parenting, etc.</p> <p>The program connects parents to opportunities that promote:</p> <ul style="list-style-type: none"> - their continued growth and development. - family enrichment, i.e., reading hours at the library, parent-child book groups, and cultural heritage events. - fathers' involvement with their children. - enrichment activities for children. 	5-point scale: 5=Strongly agree, 4=Agree, 3=Neither agree nor disagree, 2=Disagree, 1=Strongly Disagree, Not applicable	Strengthening Families Through Early Care and Education Program Self-Assessments	Contacted developer to see if psychometric information is available.	Care Setting: Head Start Age Range: 0-2 Type of Instrument: Qualitative Special Population: Parents at or below Federal Poverty guidelines
Other (Medical staff and non-medical staff)	<p>Systematic practice activities foster communication among the practice, family, and external providers such as specialists, schools, and other community professionals for CSHCN; these methods are documented and include information exchange forms or ad hoc meetings with external providers.</p> <p>The practice actively takes into account the overall family impact when a child has a chronic health condition by considering all family members in care; when family requests it, staff will assist them to set up family support connections.</p> <p>The practice team identifies resources to the family for support and advocacy, facilitates the connection, and advocates on a family's behalf to solve specific problems pertinent to CSHCNs.</p>	Levels 1-4	Medical Home Index: Pediatric	Kappa coefficients of interrater reliability between two Center for Medical Home Improvement project staff were above .50 for all 25 themes. Kappa scores comparing each staff member and the practice sites' self-assessment found 80% of the themes at .65 or better for one interviewer (J.W.M.) and 60% of the themes at .65 or better for the second interviewer (K.S.). The internal consistency reliability standardized alpha coefficients across the 6 domains of the MHI ranged from .81 to .91, and the overall standardized alpha coefficient was .96.	Care Setting: Pediatric medical care setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (nurses)	Advocating for the family is not an essential aspect of my professional responsibility.	5-point scale: 1=Strongly disagree, 5= Strongly agree	Family Nurse Caring Belief Scale (FNCBS)	<p>27-items w/5-pt Likert scale; Internal reliability: Cronbach's alpha (.81); construct validity: 4 factors: ethical caring practices; systems orientation to families; child advocacy, normalizing milieu; concurrent validity (Pearson's r .57 with the Caring Behaviors Inventory and the Family Caring Scale); criterion validity</p> <p>Phase 1: instrument construction: pilot tested w/ 60 PICO nurses; phase 2: psychometric testing w/ random sample of 720 PICO/NICU nurses; although intended to measure attitudes; could be used for knowledge and behaviors</p>	Care Setting: Center (not-specified) Age Range: 0-2 Type of Instrument: Self-Administered Questionnaire

Family-Provider Relationship Quality (FPRQ)
Practices: Goal-Oriented Skills - Engage in joint goal setting

Definition: Engage in joint goal setting is defined by:

- o Collaborate with and engage families in the program through joint goal setting and decision-making

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	I am able to work with agencies and professionals to decide what services my child needs.	Not true at all, Occasionally true, Somewhat true, True, Very True	Family Empowerment Scale	34-item self-report w/5-pt likert scale; alphas (.87-.88); Pearson's r (.77-.85) for stability; 2 analyses of validity (unspecified) Piloted w/ 94 parents for pre/post evaluation of a family empowerment intervention .	Care Setting: Other Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with emotional disabilities
Parent	In the past year, to what extent do the people who work with your child: - discuss with you everyone's expectations for your child, so that all agree on what is best? - make sure you have opportunities to explain what you think are important treatment goals? - make you feel like a partner in your child's care? - provide opportunities for you to make decisions about treatment? - treat you as an equal rather than just as the parent of a patient (e.g., by not referring to you as "Mom" or "Dad")?	("Indicate how much each event or situation happens to you.") 8-point scale: 7=To a very great extent, 6= To a great extent, 5= To a fairly great extent, 4= To a moderate extent, 3= To a small extent, 2= To a very small extent, 1=Not at all, 0=Not applicable	Measure of Process of Care	Internal Consistency as assessed by Cronbach's coefficient alpha: Respectful and Supportive Care (9 items) - Pilot Study = .91, Field testing = .92, Reliability re-text = .86. Providing Specific Info about the Child (5 items) - Pilot Study = .81, Field Testing = .82, Reliability re-test = .63. Providing general info (9 items) - Pilot Study = .91, Field Testing = .93, Reliability re-test = .94. Enabling & Partnership (16 items) - Pilot Study = .95, Field Study = .96 Reliability re-test = .86.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with a disability (developmental or physical)
Parent	Does your center have a process for working with families to set goals for their preschoolers? Does your center have a process for working with families to set goals for your family?	Yes, No	Partnership Impact Research Study Parent Questionnaires	None available online or internally. Child Trends staff have contacted the author.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: Preschool aged children Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	<p>How much did staff listen to your ideas about ways to change or improve treatment or service planning?</p> <p>How much did staff make changes in the service plan for your child as a result of your suggestions?</p> <p>Were your ideas valued in planning services for your child?</p>	4-point scale: 4=A lot, 3=Some, 2=A little, 1=Not at all	Family Participation Measure	Child Trends is contacting author for psychometrics and other missing information.	Care Setting: Center (not-specified) Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Provider	<p>Do you and your staff:</p> <ul style="list-style-type: none"> - Partner with families to help define their role in their child's care? - Work in partnership with families/youth to make health care decisions? - Honor the family's request about how much they want their child involved in decision-making? <p>Is there a respectful negotiation process to resolve any disagreements about a child/youth's treatment and care?</p>	Never, Some of the time, Most of the time, Always	Family-Centered Care Self-Assessment Tool	Not available online, Child Trends staff has contact author and is awaiting a response.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Observer	<p>Caregiver uses parent's knowledge of children in planning, evaluation, and assessment.</p> <p>Caregivers work in partnership with families to assist in child's development.</p>	Not applicable - observational scale	Child and Caregiver Interaction Scale (CCIS)	Reliability: Cronbach's alpha = .938, Corrected Item-Total Correlation > .50 for all but one item Concurrent validity correlation between CCIS and Environmental Rating Scale (ERS) =.74 Corrected Item-Total Correlation for parent and staff subscale: .643	Care Setting: Center (not-specified); Family, Friend or Neighbor care Age Range: 0-12 Type of Instrument: Observational
Observer	<p>Home visitor:</p> <ul style="list-style-type: none"> - brainstorms with parent ways to achieve goals. 	Not applicable - observational scale	Home Visit Rating Scale (HOVRS)	7 scales w/ 7 ratings (HV Responsiveness to Family, Relationship/ Family, Non-Intrusiveness); interrater reliability: greater than .85; predictive validity with the HOME and the PPVT-III	Care Setting: Other Age Range: Unspecified Type of Instrument: Observational

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Observer	Families participate in developing or have significant influence on school policies. Families participate in developing or have significant influence on school decision-making.	Never, Seldom, Sometimes, Often, Always, Don't know	Ready School Assessment (RSA)	Internal consistency reliability alphas: Family, School, and Community Partnerships=.88 Family Involvement in School=.79 Parent-School Communication=.77 Outreach=.84	Care Setting: K-12 Age Range: 6-12 Type of Instrument: Observational; Self-Administered Questionnaire; Interviewer-Administered Survey
Observer	Teacher involves families in the process of developing a support plan for addressing challenging behaviors. Teacher works with families to develop strategies that families can use at home to address their concerns about their child's social emotional development. Procedures and materials for teaching problem solving vary across children based on their individual goals and needs.	Not applicable - observational scale	Teaching Pyramid Observation Tool	This measure is still undergoing development. Currently, there is a study being conducted to measure the psychometric properties of the TPOT. There is no information about the reliability or validity at this time.	Care Setting: Center (not-specified) Age Range: 3-5 Type of Instrument: Observational
Observer	Families are included in planning and decision-making for the program.	Not applicable - observational scale	Qualistar Rating Criteria Chart	None available. This tool is used in Colorado to evaluate programs participating in the Colorado quality rating and improvement system.	Care Setting: Head Start; Pre-K; Community-based Center; Center (not-specified); Family Child Care Age Range: 0-5 Type of Instrument: QRIS Special Population: Quality Rating and Improvement System for Colorado's child care centers/FCC homes
Director/Administrator	The program develops family plans with parents that: - identify their interests, skills, needs and goals for themselves and their children. - are regularly revised and updated in conjunction with families. Staff share parenting tips and discuss parenting issues with parents when: - a parent appears to be frustrated or stressed and in need of support. - a parent appears to be having a difficulty relating to or communicating with their child(ren). - child behavior or development issues arise. If staff are concerned about a child's social and emotional development, they: -Connect the family to resources that can support the child's social and emotional development (such as play therapy, mental health services, or parenting classes).	5-point scale: 5=Strongly agree, 4=Agree, 3=Neither agree nor disagree, 2=Disagree, 1=Strongly Disagree, Not applicable	Strengthening Families Through Early Care and Education Program Self-Assessments	Contacted developer to see if psychometric information is available.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Other (Client and social worker)	<p>How much have you and your social worker discussed how you are going to approach your work together? How clear are you about what is expected in your work together?</p> <p>How much input have you had in determining how the two of you will work together?</p> <p>How much have you and your social worker discussed the specific problem(s) with which you want help?</p> <p>How much input have you had in determining the goals you are working on?</p> <p>To what extent have you and your social worker discussed the specific actions you will take to address your difficulties?</p> <p>How much have you and your social worker discussed how your progress is going to be assessed?</p>	5-point Likert scale (additional details not provided)	Helping Relationship Inventory for Social Work Practice	<p>Reliability - The HRI:C (Respondent = Client) structural index had an alpha coefficient of .91, and the interpersonal index had an alpha coefficient of .96. The combined 20-item HRI:C had an alpha coefficient of .96. The HRI:W (Respondent = Social Worker) structural index had an alpha coefficient of .86, and the interpersonal index had an alpha coefficient of .91. The combined 20-item HRI:W had an alpha coefficient of .93. Therefore, both "have high reliability."</p> <p>Validity - HRI was compared to WAI indexes (Working Alliance Inventory), which already established validity (Horvath & Greenberg). High correlations (support the validity" of HRI. The correlation b/t HRI:C and WAI-C is .84.</p>	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (Medical staff and non-medical staff)	<p>The primary care provider and family set goals for referrals and communicate these to specialists; together they clarify comanagement roles among family, primary care provider and specialists and determine how specialty feedback to the family and primary care provider is expressed, used and shared.</p> <p>Families are regularly asked what care supports they need, treatment decisions are made jointly with the primary care provider.</p> <p>The child with special needs, family, and the primary care provider review current child health status and anticipate problems or needs; they create/revise action plans and allocate responsibilities at least 2 times per year or at individualized intervals.</p>	Levels 1-4	Medical Home Index: Pediatric	Kappa coefficients of interrater reliability between two Center for Medical Home Improvement project staff were above .50 for all 25 themes. Kappa scores comparing each staff member and the practice sites' self-assessment found 80% of the themes at .65 or better for one interviewer (J.W.M.) and 60% of the themes at .65 or better for the second interviewer (K.S.). The internal consistency reliability standardized alpha coefficients across the 6 domains of the MHI ranged from .81 to .91, and the overall standardized alpha coefficient was .96	Care Setting: Pediatric medical care setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (Nurses)	<p>Seeking the family's input when making decisions about care is not essential.</p> <p>Families have the right to say what is important to them in planning care.</p> <p>It is my responsibility to change my plan of care over time to incorporate what the family feels is right for them given their perspective of the situation with the child.</p>	5-point scale: 1=Strongly disagree, 5= Strongly agree	Family Nurse Caring Belief Scale (FNCBS)	<p>27-items w/5-pt Likert scale; Internal reliability: Cronbach's alpha (.81); construct validity: 4 factors: ethical caring practices; systems orientation to families; child advocacy, normalizing milieu; concurrent validity (Pearson's r .57 with the Caring Behaviors Inventory and the Family Caring Scale); criterion validity</p> <p>Phase 1: instrument construction: pilot tested w/ 60 PICO nurses; phase 2: psychometric testing w/ random sample of 720 PICO/NICU nurses; although intended to measure attitudes; could be used for knowledge and behaviors</p>	Care Setting: Center (not-specified) Age Range: 0-2 Type of Instrument: Self-Administered Questionnaire
Other (Senior leaders, such as the Chief Operating Officer and Medical care provider)	<p>Leaders of the organization, through words and actions, encourage and support patient and family collaboration at all levels of care: - in strategic planning and facility planning.</p> <p>Patients' and families' goals are included in the medical record/chart.</p>	5-point scale: 1=Not at all, 3=OK, 5=Very Well	A Hospital Self-Assessment Inventory, Patient - and Family-Centered Care	Per author, psychometrics testing has not been conducted for this measure	Care Setting: Medical Setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Other (medical staff)	Full item wording is not available. There should also be a parent and direct/administrator survey.		Pediatric Patient-Family-Centered Care Benchmarking Survey	<p>Cronbach α for Subscales</p> <p>Togetherness (degree to which hospitals allow families to remain together)</p> <p>Togetherness during normal times=.82</p> <p>Togetherness during critical times=.76</p> <p>Family Participation and Involvement=.90</p> <p>Family Involvement in Hospital=.93</p> <p>Children Involvement in Hospital=.92</p>	<p>Care Setting: Hospital setting</p> <p>Age Range: Unspecified</p> <p>Type of Instrument: Self-Administered Questionnaire</p>

Family-Provider Relationship Quality (FPRQ)
Practices: Goal-Oriented Skills- Empower families to advocate for themselves

Definition: Empower families to advocate for themselves is defined by:
o Particularly in the transition to other ECE arrangements, school, or when trying to obtain social services

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	[The staff member] encourages me to speak up during meetings with professionals when there is something I want to say. [The staff member] helps us get all the information we want and/or need. [The staff member] helps my family get services from other agencies or programs as easily as possible.	5-point scale: 1=Never performs this behavior and 5=Always performs the behavior. It also notes to circle "0" if you have not had a chance to observe how the staff member acts.	Family-Centered Behavior Scale	Cronbach's alpha coefficient: .97 (N=133), test-retest correlation was .96, and after items removed, 26-item scale had a .98 alpha	Care Setting: Unspecified Age Range: Unspecified (mean age: 10.7) Type of Instrument: Self-Administered Questionnaire Special Population: Special needs children
Parent	[Helper] encourages me to use my capabilities and knowledge to get resources. [Helper] gives me information about resources and available options. [Helper] works with me to get needed resources. [Helper] helps me learn new skills to deal effectively with my life challenges.	5-point scale: 1=Rarely, 2=Seldom, 3=Sometimes, 4=Generally, 5=Almost always.	Helpgiving Practices Scale	Psychometric information available for purchase.	Care Setting: Center (not-specified) Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Parent	The program staff help me to use my own skills and resources to solve problems. The program staff help me to see strengths in myself I didn't know I had	7-point scale: 1=Strongly disagree, 7=Strongly agree	Strength-Based Practices Inventory	Internal consistency: alphas for subscales ranged from .81 to .92, measure was positively correlated with Parent Empowerment Scale. Predictive validity: strength-based practices at 14-months were not found to be predictive of parent empowerment, social support, and other parent outcomes measured at 24 months.	Care Setting: Head Start Age Range: 0-2 Type of Instrument: Qualitative Special Population: Parents at or below Federal Poverty guidelines
Provider	Do you and your staff: - Help families advocate for services and work to improve systems of care, if they so choose? - Encourage families to initiate consultation appointments or other meetings to discuss changes in their child's care, for example, changes in medications, or other daily procedures? In preparation for transition, do you and your staff: - have a process to share information with adult care providers including: current care plans, transition plans, medical records, key health issues and current family and youth roles in managing care? - have a formal mechanism to identify adult health care providers for youth in transition?	4-point scale: Never, Some of the time, Most of the time, Always	Family-Centered Care Self-Assessment Tool	Not available online, Child Trends staff has contact author and is awaiting a response.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (Senior leaders such as the Chief Operating Officer and Medical care provider)	Policies and practices encourage patient and family involvement in decision-making regarding their health care.	5-point scale: 1=Not at all, 3=OK, 5=Very Well.	A Hospital Self-Assessment Inventory, Patient - and Family-Centered Care	Per author, psychometrics testing has not been conducted for this measure.	Care Setting: Medical Setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Family-Provider Relationship Quality (FPRQ)
Practices: Goal-Oriented Skills - Provide Child-Specific Information

Definition: Provide Child-Specific Information is defined by:

o Sharing information related to the individual child related to the child's development or family supports

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	[The staff member] suggests things that we can do for our child that fit into our family's daily life.	5-point scale: 1=Never performs this behavior and 5=Always performs the behavior. It also notes to circle "0" if you have not had a chance to observe how the staff member acts.	Family-Centered Behavior Scale	Cronbach's alpha coefficient: .97 (N=133), test-retest correlation was .96, and after items removed, 26-item scale had a .98 alpha	Care Setting: Unspecified Age Range: Unspecified (mean age: 10.7) Type of Instrument: Self-Administered Questionnaire Special Population: Special needs children
Parent	I make sure that professionals understand my opinions about my child's needs. I tell professionals what I think about services being provided to my child.	5-point scale: Not true at all, Occasionally true, Somewhat true, True, Very true	Family Empowerment Scale	34-item self-report w/5-pt likert scale; alphas (.87-.88); Pearson's r (.77-.85) for stability; 2 analyses of validity (unspecified) Piloted w/ 94 parents for pre/post evaluation of a family empowerment intervention	Care Setting: Other Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with emotional disabilities
Parent	Full item wording is not available.	5-point scale: 1=Not at all, 2=A little, 3=Somewhat, 4=Almost, 5=Completely	Family Outcomes Survey-Revised	Cronbach's alpha for full family outcomes scale: .90, but had poor psychometric properties ($X^2=1,487$) Second-order factor showed that five subscale model fit better ($X^2=752.51$) Alphas for the five outcomes subscales (all of which dealt with parent-staff relationships) were .73, .78, .87, .78, .91	Care Setting: Early intervention program. Age Range: Unspecified (mean age: 25.3 months) Type of Instrument: Self-Administered Questionnaire Special Population: Parents of children with disabilities
Parent	In the past year, to what extent do the people who work with your child- - explain things to your child in a way that your child understands? - let you choose when to receive information and the type of information you want? - remember personal details about your child or family when speaking with you? - tell you details about your child's services, such as the reasons for them, the type of therapies and the length of time?	("Indicate how much each event or situation happens to you.") 8-point scale: 7=To a very great extent, 6= To a great extent, 5= To a fairly great extent, 4= To a moderate extent, 3= To a small extent, 2= To a very small extent, 1=Not at all, 0=Not applicable	Measure of Process of Care	Internal Consistency as assessed by Cronbach's coefficient alpha: Respectful and Supportive Care (9 items) - Pilot Study = .91, Field testing = .92, Reliability re-test = .86. Providing Specific Info about the Child (5 items) - Pilot Study = .81, Field Testing = .82, Reliability re-test = .63. Providing general info (9 items) - Pilot Study = .91, Field Testing = .93, Reliability re-test = .94. Enabling & Partnership (16 items) - Pilot Study = .95, Field Study = .96 Reliability re-test = .86.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire Special Population: Children with a disability (developmental or physical)
Parent	Staff are familiar with family needs (e.g., staff conduct or have access to needs assessments, intake interviews, or other information-gathering activities with families)	Not applicable- observational scale	Preschool Program Quality Assessment-Agency Items	Psychometric information available in: Jurkiewicz, T. C. (2003). The Revised Preschool PQA: Report on Psychometric Properties. Ypsilanti, MI: High/Scope Educational Research Foundation, Research Division. Unpublished paper. This reference is not available online. Contacted developer to obtain information but have not gotten a response.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 3-5 Type of Instrument: Observational

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	My child's teacher and I share information about my child.	Always true, Often true, Sometimes true, Never true	Partnership Impact Research Study Parent Questionnaires	None available online or internally. Child Trends staff have contacted the author.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: Preschool aged children Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Parent	The program offers daily written communication about your child's day.	Yes, No, Not sure	Quality for ME: Quality of Child Care Services	Items were adapted from Emlen scales, see Emlen scale psychometrics.	Care Setting: Head Start; Community-based Center; Family Child Care; K-12 Age Range: 0-12 Type of Instrument: Self-Administered Questionnaire; QRIS Special Population: Parent feedback survey for families with children in ECE programs participating in Maine's Quality Rating System
Parent	You and the childcare provider share information.	5-point scale: 1=Never, 2=Rarely, 3=Sometimes, 4=Often, or 5=Always	Three-City Study Child Care Interview Protocol	Items on the maternal ratings of child care survey were adapted from Emlen scales, see Emlen scale psychometrics.	Care Setting: Community-based Care; Family Child Care; Family, Friend, or Neighbor care Age Range: 0-5 Type of Instrument: Interviewer-Administered Survey
Parent	Does XX and/or the center ever give you advice about how to raise your child (e.g., personal, informal advice about childrearing, medical opinion)?	Open-ended	Work-Child Care Fit	Contacted developer to see if psychometric information is available.	Care Setting: Center (not-specified); Family Child Care; Family, Friend or Neighbor Care Age Range: 0-5 Type of Instrument: Interviewer-Administered Survey; Qualitative
Parent	I am confident that teachers: - are doing a good job keeping me well-informed of my child's progress. - are doing a good job encouraging my participation in my child's education. - keep me aware of all the information I need related to school.	4-point scale: 0=Strongly disagree, 1=Disagree, 2=Agree, 3=Strongly agree	Trust Scale	Reliability for the Trust Scale, as measured by alpha coefficients, was .90 for teachers and .96 for parents. No additional psychometric information is available from this source.	Care Setting: K-12 Age Range: Parents of students enrolled in kindergarten through 12th grade Type of Instrument: Self-Administered Questionnaire
Parent	I talk to the teacher about how my child gets along with his/her classmates at school. I talk to my child's teacher about his/her difficulties at school. I talk to my child's teacher about his/her daily routine. The teacher and I write notes about my child or school activities.	4-point scale: 1=Rarely, 2=Sometimes, 3=Often, 4=Always	Family Involvement Questionnaire	School-Based Involvement ($\alpha=.85$) Home-Based Involvement ($\alpha=.85$) Home-School Conferencing ($\alpha=.81$) "Thirty-five of the forty-two items (85%) loaded appreciably on only one dimension, with only two double-loading and 4 nonloading items" (p. 370). "High levels of congruence (coefficients > .98) were found for like factors in comparison between each subgroup and the large sample" (p. 371).	Care Setting: Head Start; Pre-K; K-12 Age Range: Ages 3-12 Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Provider	<p>With (focus parent), how frequently do you talk about-</p> <ul style="list-style-type: none"> - What (FOCUS CHILD) ate that day? - What kind of activities you did with (FOCUS CHILD) during that day (reading, playing ball, painting, playing with dolls, puzzles)? - (FOCUS CHILD)'s routines, such as any toileting, sleeping, and/or eating issues? - How (FOCUS CHILD) got along with other child that day? - How (FOCUS CHILD) felt that day? (PROBE: If he was sad, fussy, calm)? - What happened at home with (FOCUS CHILD)? 	3-point scale: 0=Never, 1=Sometimes, 2=Often	Child Care Assessment Tool for Relatives (CCATR) Interview	<p>Criterion validity; construct validity through factor analysis (factors: nurturing, bi-directional communication, uni-directional communication, engagement); content validity; informal test of concurrent validity w/ FDCRS 4 items</p> <p>No other reliability information is available.</p>	<p>Care Setting: Family Child Care; Family, Friend or Neighbor care</p> <p>Age Range: 0-5</p> <p>Type of Instrument: Interviewer-Administered Survey</p>
Provider	<p>Do you and your staff:</p> <ul style="list-style-type: none"> - Talk about the range of treatment and care choices for the child/youth? - Discuss which treatment and care choices would be best for the family and child/youth? - Have a process to share information with adult care provider including: current care plans, transition plans, medical records? 	4-point scale: Never, Some of the time, Most of the time, Always	Family-Centered Care Self-Assessment Tool	Not available online, Child Trends staff has contact author and is awaiting a response.	<p>Care Setting: Unspecified</p> <p>Age Range: Unspecified</p> <p>Type of Instrument: Self-Administered Questionnaire</p>

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Provider	Full item wording is not available.		Family Professional Partnership Tool	Piloted 60 items, 5-pt Likert scale; two factors: child-focused relationships, family-focused relationships; revised scale: 18 items; rated on importance and satisfaction; Cronbach's alpha (.93; .96)	Care Setting: Other Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Provider	Much sharing of child-related information between parents and staff (ex. Frequent informal communication, periodic conferences for all children, parent meetings, newsletters, parenting information available on health safety, and child development).	Not applicable - observational scale	Infant/Toddler Environmental Rating Scale- Revised (ITERS-R)	Average agreement on the 467 indicators on 39 items in the ITERS-R was 91.65%. Cohen's Kappa was also computed. Across the 39 items, the weighted Kappa was .58. Across the 32 child-related items, the weighted Kappa was .55. Cronbach's alpha: Parents and Staff =.68, Total=.93. Parents and Staff subscale intraclass correlation= 0.92	Care Setting: Center (not-specified) Age Range: 0-2 Type of Instrument: Observational; Interviewer-Administered Survey
Provider	As a part of your child care activities, how often do you or your staff have conversations with parents of children you care for on these issues: - parents' worries about getting or keeping a job? - parents' ability to meet their children's basic needs (food, shelter, health care)? - stress parents are feeling? - problems parents are having in their relationships with partners or family members?	5-point scale: 1=Daily, 2=3-4 times/week, 3=1-2 times a week, 4=1-2 times per month, 5=Every few months	National Study of Early Care and Education Design Questionnaire for Center-Based Care Settings (NSECE)	None available. Survey will not be fielded until 2012.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 0-12 Type of Instrument: Interviewer-Administered Survey
Provider	As a part of your child care activities, how often do you have conversations with parents of children you care for on these issues: - parents' worries about getting or keeping a job? - parents' ability to meet their children's basic needs (food, shelter, health care)? - stress parents are feeling? - problems parents are having in their relationships with partners or family members?	5-point scale: 1=Daily, 2=3-4 times/week, 3=1-2 times a week, 4=1-2 times per month, 5=Every few months	National Study of Early Care and Education Design Questionnaire for Home-Based Care Settings (NSECE)	None available. Survey will not be fielded until 2012.	Care Setting: Family Child Care Age Range: 0-12 Type of Instrument: Interviewer-Administered Survey
Observer	The teacher communicates with families at least once a month concerning each child's overall progress at school.	Not applicable - observational scale	Assessment of Practices in Early Elementary Classrooms	Interrater agreement: average 86%, median weighted Kappa: .59, construct validity (correlation b/w APEEC and 3 other measures of developmentally appropriate practices) =.67, .55, .61	Care setting: K-12 Age Range: K-Grade 3 Type of Instrument: Observational and Interviewer administered Special population: Classroom that include children with special needs for at least part of the day
Observer	Provider greets the parents at arrival and/or departure times and is available for the parent to verbally share information about the child's needs for the day. Provider shares information daily with parents regarding the child's learning and social experience while in care either verbally or written. At least one time a year the Provider schedules an individualized parenting meeting, at which the child is not present, for the purpose of sharing child-specific information (such as developmental progress, social relations, special likes and/or fears, future plans).	Not applicable - observational scale	Assessment Profile for Family Child Care Homes	Not available online or internally, Child Trends staff contacting author.	Care Setting: Family Child Care Age Range: Unspecified Type of Instrument: Observational

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Observer	<p>Child assessment information is available and shared during individual parent conferences.</p> <p>Provider greets the parents at arrival and/or departure times and is available for the parent to verbally share information about the child's needs for the day.</p> <p>Parents are able to reach the Provider by phone or message system during the time their children are in care.</p>	Not applicable - observational scale	Assessment Profile for Early Childhood Programs	<p>Inter-rater reliability: mean - 93 to 95% agreement, range of 83 to 99%, The reliability coefficients for the five scales range from .79 to .98</p> <p>Path coefficients for year 1 and year 2 for Interacting scale are .59 and .52.</p>	<p>Care Setting: Center (not-specified)</p> <p>Age Range: 0-12</p> <p>Type of Instrument: Observational</p>
Observer	Provider keeps parents regularly informed on children's activities and interests in the setting.	Not applicable - observational scale	Child/Home Early Language and Literacy Observation (CHELLO)	<p>Interrater reliability: 91% for both scales, cronbach's alpha ranged from .82 for literacy environment checklist to .97 for group/family observation.</p> <p>total scores for the Literacy Environment were significantly correlated with each summary score on the Observation ($r = .67$, $r = .33$, and $r = .47$, respectively for the Physical Environment for Learning, Support for Learning, and Teaching Strategies). Total scores for the Literacy Environment and the Group/Family Observation were correlated ($r = .52$).</p>	<p>Care Setting: Family Child Care</p> <p>Age Range: 0-5</p> <p>Type of Instrument: Observational; Interviewer-Administered Survey</p>
Observer	Caregiver's use parent's knowledge of children in planning, evaluation, and assessment.	Not applicable - observational scale	Child and Caregiver Interaction Scale (CCIS)	<p>Reliability: Cronbach's alpha = .938, Corrected Item-Total Correlation > .50 for all but one item</p> <p>Concurrent validity correlation between CCIS and Environmental Rating Scale (ERS) = .740</p> <p>Corrected Item-Total Correlation for parent and staff subscale: .643</p>	<p>Care Setting: Center (not-specified); Family, Friend or Neighbor care</p> <p>Age Range: 0-12</p> <p>Type of Instrument: Observational</p>
Observer	Full item wording is not available.		Family Provider Interaction Analysis (FPIA)	<p>4 trained subjects rated 3 10-minute videotaped family/provider sessions; face validity (chi-square analysis: significant differences in categories); reliability: rho's (.17-1.0) for intrarater;.01-.77 for interrater</p>	<p>Care Setting: Family-provider session through Let's Play! Project, a federally funded model demonstration project</p> <p>Age Range: 0-2</p> <p>Type of Instrument: Observational</p> <p>Special Population: Infants and Toddlers w/ special needs</p>
Observer	<p>Home visitor:</p> <ul style="list-style-type: none"> - provides information on child development related to the child and his or her family. - notes child's developmental level and gives feedback to parent. 	Not applicable - observational scale	Home Visit Rating Scale (HOVRS)	<p>7 scales w/ 7 ratings (HV Responsiveness to Family, Relationship/ Family, Non-Intrusiveness); interrater reliability: greater than .85; predictive validity with the HOME and the PPVT-III</p>	<p>Care Setting: Other</p> <p>Age Range: Unspecified</p> <p>Type of Instrument: Observational</p>
Observer	Staff and parents frequently interact informally to update each other about the child's recent experiences (e.g., conversing during drop-off and pick-up times, bringing in or sending home things that the child has made, sending notes, making calls).	Not applicable - observational scale	Preschool Program Quality Assessment-Agency Items	This reference is not available online. Contacted developer to obtain information but have not gotten a response.	<p>Care Setting: Head Start; Pre-K; Community-based Center</p> <p>Age Range: 3-5</p> <p>Type of Instrument: Observational</p>
Observer	<p>The program shares information with families regularly about their child's activities, interests, and behavior in the program.</p> <p>The program provides information and activities to families to extend children's learning experiences to home.</p>	Not applicable - observational scale	Qualistar Rating Criteria Chart	None available. This tool is used in Colorado to evaluate programs participating in the Colorado quality rating and improvement system.	<p>Care Setting: Head Start; Pre-K; Community-based Center; Center (not-specified); Family Child Care</p> <p>Age Range: 0-5</p> <p>Type of Instrument: QRIS</p> <p>Special Population: Quality Rating and Improvement System for Colorado's child care centers/FCC homes</p>

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Observer	Teachers consistently and effectively utilize multiple methods of school-to-home communication to provide families with ongoing information about school programs and children's progress and problems (e.g., newsletters, bulletin boards, notes, journals, telephone calls, email, Web sites, family resource rooms, home visits, face-to-face interactions).	Never, Seldom, Sometimes, Often, Always, Don't know	Ready School Assessment (RSA)	Factor loadings for Family, School, and Community Partnership indicators: Outreach, Parent-School Communication, Family Involvement in School (for specific loadings: http://www.readyschoolassessment.org/about/RSADecisionMakerInformation.pdf pg. 16) Internal consistency reliability alphas: Family, School, and Community Partnerships=.88 Family Involvement in School=.79 Parent-School Communication=.77 Outreach=.84	Care Setting: K-12 Age Range: 6-12 Type of Instrument: Observational; Self-Administered Questionnaire; Interviewer-Administered Survey
Observer	Teacher is able to describe ways they personally connect with families that indicate personal knowledge of the family situation and an appreciation for the family.	Not applicable - observational scale	Teaching Pyramid Observation Tool	This measure is still undergoing development. Currently, there is a study being conducted to measure the psychometric properties of the TPOT. There is no information about the reliability or validity at this time.	Care Setting: Center (not-specified) Age Range: 3-5 Type of Instrument: Observational
Director/ Administrator	Do teachers schedule meetings with the parents of each child to discuss their child's care and activities? Not including lesson plans that are given to parents in advance of activities, how often to parents receive written letters describing the play and learning activities that took place in the child's classroom?	Yes, No Daily, A few times a week, Once a week, Less than once a week, About once a month, Less than once a month, Never	Early Childhood Longitudinal Study- Birth Cohort Center Director Questionnaire (ECLS-B)	Per NCES, psychometric data not available for this survey.	Care Setting: Head Start; Pre-K; Community-based Center Age Range: 3-5 Type of Instrument: Self-Administered Questionnaire
Director/ Administrator	The family's perspective about child-rearing and cultural practices is solicited during parent meetings or conferences to create or maintain open communication.	Not applicable - observational scale	Program Administration Scale (PAS)	Content Validity-reviewed by a panel of 10 ECE experts and 10 administrators, consultants and trainers Interrater reliability-Overall=.90, individual rater agreement=.81 to .95 Concurrent (Criterion) Validity-PAS Family Partnerships subscale correlation with Early Childhood Work Environment Survey Opportunities for Professional Growth subscale=.43 PAS Family Partnerships correlation with Early Childhood Environment Rating Scale-Revised Parents and Staff subscale=.34	Care Setting: Center (not-specified) Age Range: Unspecified Type of Instrument: Observational; Interviewer-Administered Survey
Director/ Administrator	Staff reinforce parental authority by: - learning about the parent's expectations and limits for their child. - supporting parents' direction and/or decision about their child. -being careful not to contradict a parent in front of his or her child or other children. Staff reinforce positive parenting by: - noticing when parents are attuned to their children's needs or communicating effectively with their children. Family activities provide opportunities to strengthen bonds between parents and their children- for example, listening to each other, playing together, and cooperative games, such as "feeling charades." For parents of children with special needs, staff: -check in with parents about the impact their children's special needs are having on family dynamics and parental stress. Staff proactively respond to signs of parent or family distress by: -being sensitive and responsive to the impact of family stress on children. Staff coach parents about how to interact effectively with their children (listening; appreciating ideas, efforts, and feelings; creating a non-threatening environment)	5-point scale: 5=Strongly agree, 4=Agree, 3=Neither agree nor disagree, 2=Disagree, 1=Strongly Disagree, Not applicable	Strengthening Families Through Early Care and Education Program Self-Assessments	Contacted developer to see if psychometric information is available.	Care Setting: Unspecified Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire

Respondent	Original Item	Response Scale	Source	Psychometrics	Notes
Director/ Administrator	Teachers share information about individual children's interests and emerging skills, and offer individually tailored recommendations during parent-child conferences, and other times (e.g., parent comes to pick child up and is told how much a child enjoyed a particular book).	Not applicable - observational scale	Supports for Early Literacy Assessment	Summary of General psychometrics: Interrater reliability-Lamy (2004) reported that the average IRR was .98 for the modified SELA. Internal Consistency-In a study of a random sample of 310 pre-school classrooms in Abbott County New Jersey, Lamy et al. (2004) used a modified version of the SELA that eliminated 5 items that overlapped with the ECERS-R. Cronbach's alpha=.92 Criterion Validity-Lamy (2004, as cited in Barnett, Yarosz, Thomas, & Blanco, undated) found that the correlation between SELA and ECERS-R total scores was .75.1	Care Setting: Pre-K; Community-based Care Age Range: 3-5 Type of Instrument: Observational; Interviewer-Administered Survey
Other (Senior leaders such as the Chief Operating Officer and Medical care provider)	Individualized and understandable follow-up instructions are provided to patients from: - in patient areas.	5-point scale: 1=Not at all, 3=OK, 5=Very well	A Hospital Self-Assessment Inventory, Patient - and Family-Centered Care	Per author, psychometrics testing has not been conducted for this measure.	Care Setting: Medical Setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire
Other (medical staff)	Full item wording is not available. There should also be a parent and direct/administrator survey.		Pediatric Patient-Family-Centered Care Benchmarking Survey	Cronbach α for Subscales Togetherness (degree to which hospitals allow families to remain together) Togetherness during normal times=.82 Togetherness during critical times=.76 Family Participation and Involvement=.90 Family Involvement in Hospital=.93 Children Involvement in Hospital=.92	Care Setting: Hospital setting Age Range: Unspecified Type of Instrument: Self-Administered Questionnaire