Promoting Healthy Eating & Physical Activity
for Indiana’s Out-of-School Time Programs through Paths to QUALITY

DECEMBER 2015
December 2015

This publication was prepared by Julie Ralston Aoki, Staff Attorney at the Public Health Law Center at William Mitchell College of Law, St. Paul, Minnesota, in partnership with the YMCA of the USA, as part of a project to promote healthy child care and out-of-school time settings. Financial support for the development of this resource was provided by the YMCA of the USA through a grant from the Robert Wood Johnson Foundation.

This publication is provided for educational purposes only and is not to be construed as legal advice or as a substitute for obtaining legal advice from an attorney. Information cited is current as of the publication date. The Public Health Law Center provides legal information and education about public health, but does not provide legal representation. Readers with questions about the application of the law to specific facts are encouraged to consult legal counsel familiar with the laws of their jurisdictions.

Acknowledgements

The Public Health Law Center thanks Michelle Hersh for her assistance in preparing portions of this report; and Jennifer Hofman of the YMCA of the USA, Brent Wake of the Indiana State Alliance of YMCAs, and Elizabeth Kelley Cierziak for their review of an earlier draft of this resource.

Copyright © 2015 by the Public Health Law Center
Introduction

Children and youth spend up to 15 hours per week in afterschool and other out-of-school time (OST) activities when school is in session, or as many as 40 hours per week during the summer or other extended school breaks. Implementation of nutrition and physical activity standards and programming in OST settings is a natural complement to school wellness and early learning wellness initiatives. While the evidence for the effectiveness of physical activity and nutrition guidelines in OST programs is still growing, multiple studies have found that OST programs can make modest improvements in unhealthy weight gain in children and youth.\textsuperscript{1} A focus on OST environments must be part of a comprehensive strategy to prevent childhood obesity.\textsuperscript{2} To support healthier out-of-school-time settings, the YMCA of the USA, together with the National Institute on Out-of-School Time and the University of Massachusetts/Boston, formed the Healthy Out-of-School-Time Coalition and developed a national set of healthy eating and physical activity (HEPA) standards tailored specifically for OST providers.\textsuperscript{3} The Indiana Afterschool Network also has created sets of voluntary standards for afterschool programs, including one that specifically focuses on HEPA and which includes many of the national HEPA standards.\textsuperscript{4}

Quality rating and improvement systems (QRIS) such as Indiana’s Paths to QUALITY program offer potential for incorporating voluntary HEPA standards into early learning and OST programs in a systematic way. This publication discusses ideas and key considerations for exploring this strategy in Indiana.
Indiana’s Quality Rating and Improvement System (QRIS)

QRIS programs provide a framework to encourage and support early care and school-age providers in improving the quality of their programs beyond minimum legal requirements. They provide standards; an assessment process to measure progress and ensure accountability in achieving the standards; financial and other assistance to participating providers; and communications and marketing support to both educate consumers about quality care and promote providers that participate in the program. Participation in QRIS programs is typically voluntary, although states sometimes require providers who receive certain kinds of subsidies or grants to participate. At the time of writing, according to the QRIS National Learning Network, at least 40 states (including Indiana) have statewide QRIS programs, two states (CA and FL) have regional QRIS programs, and QRIS pilots or planning is occurring in seven states.

How does Indiana’s QRIS program work?

Indiana’s QRIS program is called Paths to QUALITY. It began as a pilot program in one county in Indiana and was implemented statewide in 2008 and 2009 in partnership with the Indiana Association of Child Care Resource and Referral and the Indiana Association for the Education of Young Children. It establishes separate (but similar) voluntary standards for three types of child care providers:

- Licensed child care centers;
- Licensed child care homes; and
- Unlicensed, registered child care ministries.

According to a June 2014 report to the Governor, approximately 90% of Indiana’s licensed child care centers and 63% of Indiana’s licensed child care homes were enrolled in Paths to QUALITY.

Paths to QUALITY has four levels. Each level builds off the earlier level(s) and focuses on certain areas.

- **Level One**: Licensed by or registered with the Family and Social Services Administration (FSSA) and license or registration is current and in good standing. Unlicensed, registered ministries must also meet additional requirements.

- **Level Two**: Environment supports children’s learning

- **Level Three**: Planned curriculum guides child development and school readiness

- **Level Four**: Accreditation by a nationally recognized accrediting body approved by the Bureau of Child Care has been achieved and maintained

The standards address quality indicators such as: licensing compliance; staff qualifications and training; professional membership; infant/toddler indicators; outdoor play; program evaluation; curriculum; and accreditation.
How is Indiana’s QRIS program administered?

The Paths to QUALITY program was implemented through legislation. Indiana law authorizes the (FSSA) to adopt rules to administer the program, including the establishment or modification of standards used in the rating process. To date, no rules have been adopted. The FSSA administers it programmatically. State law also requires the FSSA to adopt rules to establish a steering council for the program. This steering council is tasked with providing recommendations regarding the program.

In 2014, the Indiana Legislature established the Early Learning Advisory Committee (ELAC) to assess the quality and availability of early education programs from birth to school entry in Indiana. In the 2014 Annual Report from ELAC to the Governor, ELAC recommended the creation of an alternate pathway to Paths to QUALITY for public preschool providers, with equivalent standards to the other Paths to QUALITY programs.

Does Indiana’s QRIS program apply to school aged children or include out-of-school time (OST) settings?

Like most other QRIS programs, Paths to QUALITY focuses on child care programs, focusing on children ages 0 to 5. It does not establish standards specific to school age or OST programs, although some of these programs may participate in Paths to QUALITY because they are also licensed or registered child care providers. However, because the Paths to QUALITY standards only apply to licensed child care centers, homes, and registered ministries, they would not apply to many OST programs that are not required to be licensed or registered.

The following types of OST providers are exempt from Indiana’s child care licensing requirements:

- before or after school programs that provide care for less than four hours per day;
- recreational programs that operate no more than 90 days per year;
- programs designed to primarily provide “social, recreational, or religious activities for school age children, such as scouting, boys club, girls club, sports, or the arts;”
- programs that serve migrant worker children and operate for one period of less than 120 consecutive days per year; and
- school age child care programs operated by the Department of Education, a school, or a public or private organization under a written contract with the Department of Education or a school.
Do Indiana’s QRIS program standards include HEPA standards?

They include minimal HEPA-related requirements, which are listed in Table A below. Also, at Level Four, they may include additional HEPA standards to the extent that such standards are incorporated into a national accreditation program (to achieve a Level Four rating in Indiana’s QRIS, a participating program must obtain national accreditation). There are several eligible national accreditation organizations, and they vary regarding what types of programs they cover in terms of age groups, and the standards they include. For example, the National Association for the Education of Young Children (NAEYC) Academy for Early Childhood Program Accreditation program includes standards related to healthy eating, physical activity, breastfeeding promotion, and screen time.

Table A below lists the Paths to QUALITY standards that touch on healthy eating and physical activity.

| Food/Nutrition | Food or nutrition issues are referenced beginning at Level 2, but the standards promote healthy eating in a minimal way, as follows:  
|■■ Child care contract must contain: Child information including food preferences/allergies.*  
|■■ Meal times are relaxed, with no scolding or nagging. Children are encouraged to sample new foods but allowed to eat the foods of their choice. |

| Physical activity | The standards do not include any specific physical activity requirements except for minimum requirements related to outdoor play (see below). |

| Physical activity/Outdoor play (included within all three standards) | The standards do not include any specific physical activity requirements except for the following:  
|■■ Outdoor play is included daily when weather, air quality, or environmental safety conditions do not pose a health risk. Active indoor play may be a replacement when necessary.  
|■■ Outdoor/large motor activities and plentiful play materials for a variety of skills are offered (for example, climbing, running, jumping, balancing, riding and playing with balls).  
|■■ Children are offered a variety of outdoor play experiences. |

| Screen time limits (included within all three standards) | TV/VCR/DVD, if used, is primarily an educational experience. Caregiver discusses what is viewed with children, and provides an alternative activity; or TV/VCR/DVD is not used at all. |

* Please note this requirement was set for the Licensed Child Care Homes and Unlicensed Registered Child Care Ministries.

Source: Paths to Quality, Ind. Family & Social Servs. Admin., Standards for Participation in Indiana, Licensed Child Care Center (Feb. 2008); Paths to Quality, Ind. Family & Social Servs. Admin., Standards for Participation in Indiana, Licensed Child Care Home (Feb. 2008); and Paths to Quality, Ind. Family & Social Servs. Admin., Standards for Participation in Indiana, Unlicensed Registered Child Care Ministry (Feb. 2008).
Indiana’s Afterschool Specialty Standards

The Indiana Afterschool Network has created sets of voluntary specialty standards for afterschool programs to utilize. These standards provide a framework for providers to assess their own program sites. One set of specialty standards focuses specifically on healthy eating and physical activity.31

What HEPA standards are included in the Indiana Afterschool Network standards?

The Afterschool Specialty Standards focused on HEPA are similar to the YMCA and national HEPA standards (except for the YMCA standards that address infant care). However, they are not identical. Table B below provides a comparison.
<table>
<thead>
<tr>
<th>Standard</th>
<th>YMCA HEPA Standards</th>
<th>Indiana Afterschool Specialty Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beverages</td>
<td>Water is accessible and available to all children at all times, including at the table during snacks and meals. Provide only water and unflavored low-fat (1%) or nonfat milk (for children 2 or older), family style.</td>
<td>Drinking water is readily available at all times.</td>
</tr>
<tr>
<td>Food</td>
<td>Children serve themselves (family style) all food and beverages from common bowls and pitchers with limited help. Staff sit with children during snacks and meals. Provide fruits and vegetables (fresh, frozen, dried, canned in their own juice) at every meal and snack. Do not provide any fried foods. Do not provide any food that contains trans fat. Offer only whole grains. Provide foods that don’t list sugar as one of the first three ingredients or that contain no more than 8 grams of added sugar per serving. Staff will model healthy eating behaviors. Children/youth serve themselves food and beverages with limited help when feasible.</td>
<td>Children/youth serve themselves food and beverages with limited help when feasible. Children/youth know and understand the purpose of each utensil. Children/youth wait in line patiently for service and/or participation. Children/youth learn how healthy eating and physical activity connects to their daily lives and world in which they live. The program provides a healthy meal and/or snack each day. The program serves foods that are low in sodium and sugar and do not contain trans fat. When serving grains, the program serves whole grains. Food is not used as a reward or a punishment. Holidays and birthdays are celebrated with healthy items. The children and youth participate in food selection, preparation, distribution, and clean-up. The program environment provides a positive healthy eating environment. Students and staff do not have access to vending machines that sell foods and beverages that do not support healthy eating standards. Appropriate staff receive training in healthy menu development. Staff will consume the same food and beverages as the children and youth during meal or snack time (when feasible). Staff will not consume food and beverages during the program that are inconsistent with HEPA standards.</td>
</tr>
</tbody>
</table>
HEPA standards are also included in the Indiana Afterschool Standards: A Guide for High Quality Programs Serving Youth in Out-of-School Time ("Afterschool Standards"). Those HEPA standards, however, are not quite identical to the Afterschool Specialty HEPA Standards. For example, the Specialty Standards state that all foods that are served during out-of-school programs should not contain trans fat. In contrast, the more general Afterschool Standards state that snacks served during out-of-school programs are to be low in trans fat.
Potential pathways for incorporating HEPA and school-age care into Indiana’s QRIS

Indiana’s Paths to QUALITY program do not address healthy eating or physical activity in a substantial way (although as mentioned above, some national accreditation programs may require a provider to meet certain HEPA standards which could impact providers who seek accreditation from that program to attain a Level Four rating). Some states have included specific HEPA standards within their QRIS programs. Indiana’s Paths to QUALITY program could be strengthened through the incorporation of standards aimed at promoting healthy eating and physical activity.

Additionally, like most QRIS programs, Indiana’s Paths to QUALITY program focuses on early care programs. However, a growing number of states are exploring expanding their QRIS systems to include school-age care settings in more meaningful ways. Indiana already requires programs that participate in the School Age Child Care Project Fund or the Child Care and Development Fund to meet minimal requirements (including nutrition and activity requirements). Indiana’s Paths to QUALITY program could build off these minimum requirements by adding voluntary standards for school age and OST programs through its QRIS.

Both of these objectives could be addressed using the strategies discussed below.
FSSA Rulemaking or Program Change

The FSSA could start incorporating the HEPA/afterschool standards into Indiana’s QRIS program through the administrative rulemaking process. In Indiana, state agencies may initiate their own changes to rules or may be required to do so by law. The typical rulemaking process generally takes about ten months. 37

As explained above, the FSSA is authorized by state law to adopt rules to administer the QRIS program, including the establishment or modification of standards used in the rating process. 38 Thus, the FSSA has the authority to propose new rules to include HEPA standards or establish related standards for OST programs. Alternatively, the FSSA already administers Paths to QUALITY without using formal rules; thus, it appears to have the flexibility to add requirements that conform to state law through programmatic activity.

Indiana’s Early Learning Advisory Committee

The Early Learning Advisory Committee (ELAC) has been tasked with recommending rules and regulations to the Governor and Legislature to enhance the quality and availability of early education programs from birth to school entry in Indiana. 40 The ELAC publishes an annual report discussing those recommendations. Further, the ELAC holds frequent public meetings. More information about past and future meetings is available from ELAC’s website (http://www.in.gov/fssa/carefinder/4842.htm).

In 2014, the ELAC recommended the QRIS program be expanded to include public pre-school providers. The ELAC would seem to offer a promising vehicle for promoting a statewide discussion about including HEPA in QRIS.

Box A: The federal Child Care and Development Fund (CCDF)

The CCDF 24 is a block grant program designed to promote access to child care for low-income families and improve the quality of child care. As part of this grant program, states are required to utilize funds to carry out at least one of ten specific activities, including:

- enhancing a tiered quality rating system [e.g., QRIS] for child care providers and services, and
- supporting state or local efforts to develop and adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development.

Indiana has utilized CCDF funds to create a voucher program for child care providers. To be eligible to receive the vouchers, providers must be licensed (or be a school-based program), or if not licensed, must meet certain health and safety requirements, including some physical activity and nutritional standards. 25
Box B: Indiana’s School Age Child Care Project Fund

Some minimal HEPA-related requirements apply to school-age care providers who receive funding from Indiana’s School Age Child Care Project Fund. This fund provides payments for programs operated by a school corporation or a nonprofit that offers care for children who are between 5 and 15 years old, before or after the school day (or both); when school is not in session (except weekends and summer vacations); or when school is in session for students in half-day kindergarten. To be eligible for funding, school age child care programs must meet minimum nutrition, physical activity and other health and safety requirements. These requirements include providing “meals and snacks that meet the dietary needs of each child as based on the current National Research Council Recommended Daily Dietary Allowances (NRC/RDA) according to each child’s age, the length of the child’s daily program attendance, and meals served at home” and making drinking water “readily available.” They also include requirements for minimum indoor play space requirements and safe outdoor spaces. Eligible providers must grant enrollment priorities to low-income children and other children as designated by state law and agency regulations.

Considerations for moving forward

The Paths to QUALITY standards have not been modified since they were first released in 2008. The fact that Indiana’s QRIS program does not incorporate best practices for HEPA for infants and pre-school aged children could be one compelling reason to update the program. Further, the fact that the Indiana Afterschool Network has already developed HEPA standards for OST settings reflects a consensus within the state that such standards are important and needed. Also, minimal nutritional and physical activity standards are already part of Indiana’s School Age Child Care Project Fund requirements, which provides additional precedent for incorporating HEPA into school age and OST programs. A natural next step could be to develop a plan for integrating the Indiana Afterschool Network’s HEPA standards into the state’s QRIS.

Of course, it will also be important to acknowledge that OST programs deal with many challenges — they are often underfunded, and yet strive to provide a wide range of services, including providing culturally specific services, meeting the needs of youth with disabilities, and serving underserved communities. As with any implementation of new or additional standards, ECE or school-age care providers are likely to have concerns about cost and other implications, which may deter them from participating in a voluntary QRIS program. This would be an undesirable outcome. To minimize the risks of such an outcome, careful planning and provider input would be needed for how best to distribute the HEPA standards across the levels. This could be especially challenging given the variety of OST programs — many are just a few hours a day, or a few hours a week; some are camps which may operate for several hours a day, but only for a few weeks out of the year; many OST programs focus on specialized activities. Technical assistance tailored specifically for OST programs would be crucial. Funding would be necessary to provide for technical assistance and training needs, and to offer other incentives and support to providers in implementing HEPA standards, such as grants for equipment for food preparation or physical activity.
The School Age Child Care Project Fund provides funding to some school age programs (see Box B). The federal Child Care and Development Fund might also be a source of support (see Box A). These funds could be leveraged to help support providers in meeting stronger HEPA requirements and to support efforts to update the Paths to QUALITY program to incorporate HEPA standards for OST and other programs.

The QRIS Learning Network has a guidance document to help state leaders in thinking through how to design a QRIS program for school-age care. The key questions identified for consideration include:

- What types of school age or OST programs will be covered? The fact that many school age or OST program providers are exempt from licensing requirements creates additional considerations because the entry level QRIS rating in Indiana requires providers to be licensed or registered.
- Which school age stakeholders will help inform the QRIS development, and how?
- Will school age standards be embedded or separate, or a combination of both?
- Does the QRIS build on and connect with other school age quality improvement initiatives, and how?
- What steps must be taken to ensure that the standards and indicators used for school age and OST programs are framed in appropriate language, are tailored to fit with existing QRIS indicators and standards but also unique as necessary; and provide a meaningful pathway (with appropriate incentives or benefits) for improving quality?

Additional resources

Endnotes


3 The complete standards are described in Nat’l AfterSchool Ass’n, HEPA Standards, http://www.niost.org/images/host/Healthy_Eating_and_Physical_Activity_Standards.pdf.


6 For example, to be eligible to receive grants through Indiana’s Early Education Grant Pilot Program, one of the requirements is that the provider is licensed, or is a registered ministry care provider and meets the standards of Level Three or Level Four of Indiana’s Paths to QUALITY. Ind. Code Ann. § 12-17.2-7.2-2 (1) (2015). See also, Tex. Workforce Commission, Texas Rising Star Provider Certification Guidelines 9 (2012), http://www.twc.state.tx.us/svcs/childcare/provcert.pdf.


13 Paths to Quality, Standards for Unlicensed Registered Child Care Ministry, supra note 11, at 2.

14 The following organizations are approved accreditation organizations: Association for Christian Schools International; Council on Accreditation; National Association for the Education of Young Children, Academy for Early Childhood Program Accreditation; National Association for Family Child Care; and National Early Childhood Program Accreditation. See QRIS State Profile: Indiana, supra note 8.


2014 Early Learning Advisory Committee Report, supra note 12, at 6.

2014 Early Learning Advisory Committee Report, supra note 12, at 17.


Ind. Code Ann. § 12-17.2-3.5-5 (2015). Providers must provide “daily activities” appropriate for the age, interests, and developmental needs of children, including active and quiet play, and daily outdoor play. They must also provide “appropriately timed, nutritious meals and snacks” in sufficient quantities to meet children’s needs, and provide drinking water at all times. Ind. Code. Ann. §12-17.2-3.5-5 (e) and (f) (2015).


470 Ind. Admin. Code § 3-4.6-6(e) (2015).

470 Ind. Admin. Code § 3-4.6-6(f) (2015).


Indiana Afterschool Specialty Standards, supra note 4.


Indiana Afterschool Specialty Standards, supra note 4, at 4a.

Indiana Afterschool Standards, supra note 32, at 23a.

For a list of state QRIS programs that may include school-age care in some way, see June 2014 webinar at http://www.qrisnetwork.org/member/calendar/event/140917/qris-school-age-and-youth-development-too.

See Ind. Code Ann. §§ 12-17-12-0.3 to 12-20 (2015) (School Age Child Care Project Fund) and §§12-17.2-3.5-0.1 to IC 12-17.2-3.5-19 (2015) (relating to provider eligibility requirements to receive CCDF vouchers).


