

Empower Implementation Report

Years 1 through 6

Arizona Department of Health Services
Division of Public Health Prevention
Bureau of Nutrition and Physical Activity
Office of Research and Development

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EXECUTIVE SUMMARY

The Arizona Department of Health Services implements the Empower Program for children in Arizona's licensed child care facilities to promote healthy environments and behaviors. Facilities who enroll in the program receive discounted annual licensing fees for implementing ten standards focusing on physical activity, sun safety, breastfeeding-friendly environments, Child and Adult Care Food Program (CACFP), fruit juice, family-style meals, oral health, staff training, smokers' helpline (ASHLine), and smoke-free campuses.

From 2014 to 2019, the percentage of Empower facilities implementing all components of all standards increased. In the sixth year, standards with the highest levels of implementation of all standards included staff training (88 percent), smoke-free campus (80 percent), and fruit juice (75 percent). Standards with the lowest levels of implementation of all components are breastfeeding (54 percent), oral health (57 percent), and CACFP (63 percent).

From 2014 to 2019, of all standards, physical activity and oral health showed the highest increase in full implementation and decrease in partial implementation. Specifically, full implementation of physical activity increased by 31 percent and oral health by 28 percent. In addition, partial implementation of physical activity components decreased by 31 percent and oral health by 28 percent. The CACFP showed the least change in full and partial implementation (1 percent).

In Year 6, the components with 95 percent or more implementation levels include: six components of the physical activity standard (includes indoor and outdoor physical activity (97 percent), includes moderate physical activity (97 percent), includes free play opportunities (96 percent), not using physical activity as punishment (96 percent), provides 60 minutes or more of physical activity per day (95 percent), and limits sedentary activity to ≤ 60 min (95 percent)); one component in the sun safety standard (follows the age-specific sun recommendations to limit sun exposure (96 percent)); two components of the fruit juice standard (provides water as the first choice for thirst (99 percent) and provides water throughout the day (98 percent)); and one component of the family-style meals standard (not using food as punishment or reward (95 percent)).

In Year 6, the components with implementation levels less than 75 percent include: three components of the breastfeeding standard (provides a place in refrigerator for milk storage (73 percent), displays breastfeeding promotion information (61 percent), and provides breastfeeding information to families annually (61 percent)); the single component of the CACFP standard (determines eligibility status for CACFP annually (63 percent)); one component in the oral health standard (Provide monthly oral health education and/or implement a daily tooth brushing program (66 percent)); and one component of the ASHline standard (provides ASHline education materials to families at least annually (74 percent)).

In Year 6, 68 comments were collected from facilities related to the standards. Of those, the standard with the greatest proportion of comments was breastfeeding at 31 percent. This standard has consistently presented a challenge to facilities who do not serve infants because they do not think it applies to them. Twenty-two percent of the comments pertained to the family-style meals standard. Many facilities do not serve meals, making this standard and the CACFP standard a challenge to fully implement.

BACKGROUND

The Arizona Department of Health Services developed the Empower Program to promote healthy environments and behaviors for children in Arizona’s licensed child care facilities.¹ First implemented in January 2010, the program provides discounted annual licensing fees to facilities agreeing to implement the ten standards below:

1. Provide at least 60 minutes of daily physical activity (teacher-led and free play) and do not allow more than 60 minutes of sedentary activity at a time, or more than three hours of screen time per week.
2. Practice “sun safety.”
3. Provide a breastfeeding-friendly environment.
4. Determine whether site is eligible for the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP) and participate if eligible.
5. Limit serving fruit juice to no more than two times per week.
6. Serve meals family style and do not use food as a reward.
7. Provide monthly oral healthcare education or implement a tooth brushing program.
8. Ensure that staff members receive three hours of training annually on Empower topics.
9. Make Arizona Smokers’ Helpline (ASHLine) education materials available at all times.
10. Maintain a smoke-free campus.

An initial study of the program, which focused on 112 centers, indicated that the program held promise, but that the first instrument used to assess practices needed to be improved. The early tool used a rating of whether the facility was in or out of compliance with each standard and provided no further detail. During a review of the survey process in December 2011, it was determined that more detailed measures were needed to evaluate the thoroughness and levels of implementation. On July 1, 2013, updated Administrative Rules went into effect, which required that updated standards be reflected in written policies. This provided a point in time when a new assessment methodology could be implemented that would provide more information on implementation progress, as well as barriers and opportunities for technical assistance and education.

¹ To learn more about the program, please see the Empower Guidebook, Third Edition: Ten Ways to Empower Children to Live Healthy Lives, Standards for Empower Child Care Facilities in Arizona, <https://azdhs.gov/prevention/nutrition-physical-activity/empower/index.php#guidebook>.

The new survey tool, developed in 2013, isolated key components of each standard, including an explicit requirement to provide family education for most standards. Components were clarified and operationalized, replacing words like “encourage” or “promote” with words like “provide” or “practice.” Key components of each standard were further developed and self-reports of progress implementing the component were defined (i.e., full, partial, or none). The tool also provided an opportunity for comments or feedback from child care facility and Licensing staff. Licensing staff incorporated the new monitoring tool into their regular site reviews concurrently with the date of the rules change effective July 1, 2013.

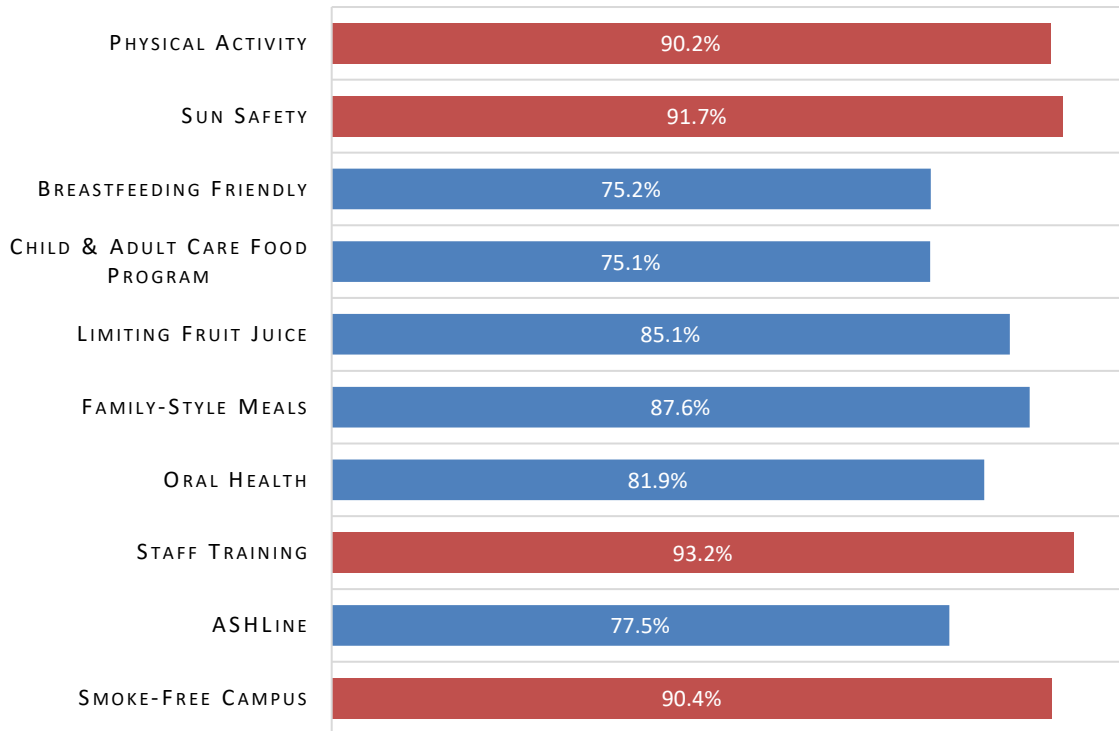
Experience from the first few years gathering data on the new tool demonstrated that the detailed questions focused on policy were not yielding meaningful data. At the same time, comments from the field indicated that wording on some of the components was unclear to some survey respondents. Consequently, changes were again made to the tool. Some of the components were discontinued, some were added, and some were modified for clarification. These revisions, implemented on August 15, 2016, affect comparability of results in some standards. Each change is described within this report and appendix.

This report summarizes results from Years 1 through 6 of six state fiscal years of data using the new methodology and survey tool. For facilities reviewed more than once per year, only the first evaluation of each year is included. See Table 1 for a summary of the number of surveys analyzed each year. Surveys collected from July 1, 2018, through June 30, 2019, are used to report Year 6 findings.

Year	State Fiscal Year	N
1	July 1, 2013 – June 30, 2014	1,527
2	July 1, 2014 – June 30, 2015	1,109
3	July 1, 2015 – June 30, 2016	1,667
4	July 1, 2016 – June 30, 2017	2,100
5	July 1, 2017—June 30, 2018	2,009
6	July 1, 2018 – June 30, 2019	2,050

In Year 6, most facilities reported having written policies on the Empower standards. Over 90 percent of facilities report having policies related to physical activity, sun safety, staff training, and smoke-free campuses. Less than 80 percent of facilities reported having written policies in place for the ASHLine, breastfeeding friendly, and Child and Adult Care Food Program standards. See Figure 1 for the percentage of facilities having written policies by standard in Year 6.

Figure 1: Percentage of facilities reporting having written policies by standard in Year 6. Standards with 90 percent or more implementation are highlighted in red.



The Empower Program continues to make strides in early care and education facilities throughout the state. A standard is rated as fully implemented when a facility reports that they have fully implemented each of the components of the standard. The standard is rated as partially implemented when a facility reports implementing some of the components at least partially.

Ultimately, this six-year summary and future evaluation efforts should lead to a better understanding of how to support sites in their implementation of the Empower Program and identification of best practices and barriers to implementation. The remainder of this evaluation report is focused on self-reported implementation of each component of each of the standards.

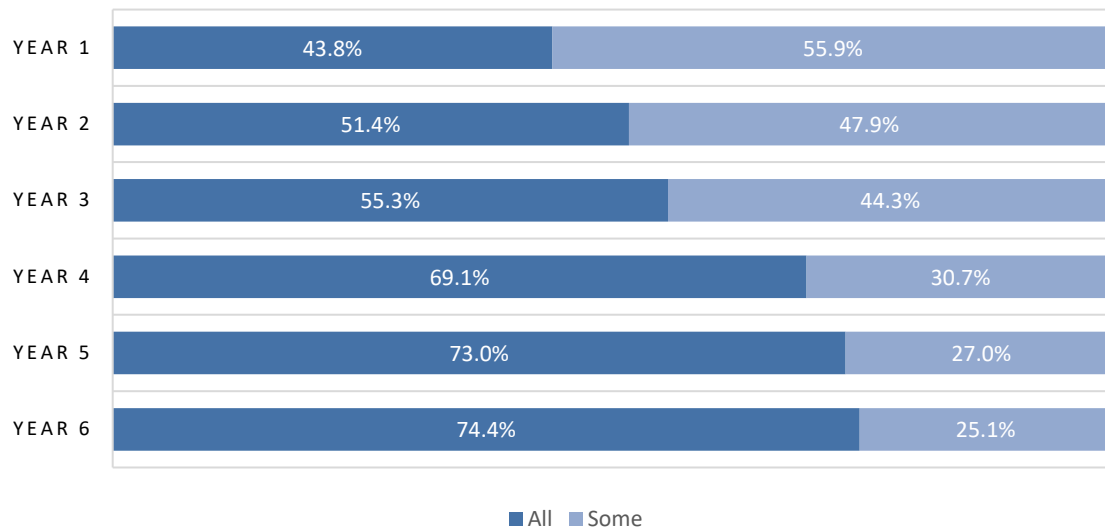
STANDARD 1: PHYSICAL ACTIVITY

The physical activity standard requires planned daily physical activity curricula for children one year and older with the following ten components:

1. Provide at least 60 minutes per day for children one year and older.
2. Include adult-led activities.²
3. Include free play opportunities.
4. Include outdoor and indoor physical activity.²
5. Include moderate physical activity (for example: dancing, bouncing a ball).²
6. Include vigorous physical activity (for example: running, skipping).²
7. Limit sedentary or non-moving activity no more than 60 minutes at a time, except when sleeping.²
8. Limit screen time to three hours or less per week and no screen time for children under age 2.²
9. Do not withhold or use physical activity as punishment.²
10. Provide information on physical activity and screen time to families at least annually.²

The percentage of facilities reporting full implementation of the physical activity components increased from 44 percent in Year 1 to 74 percent in Year 6. This means that the facility indicated they are fully implementing each one of the ten physical activity components listed above. In Year 6, 25 percent (515 facilities) had room for improvement to increase their implementation of the physical activity standard. See Figure 2.

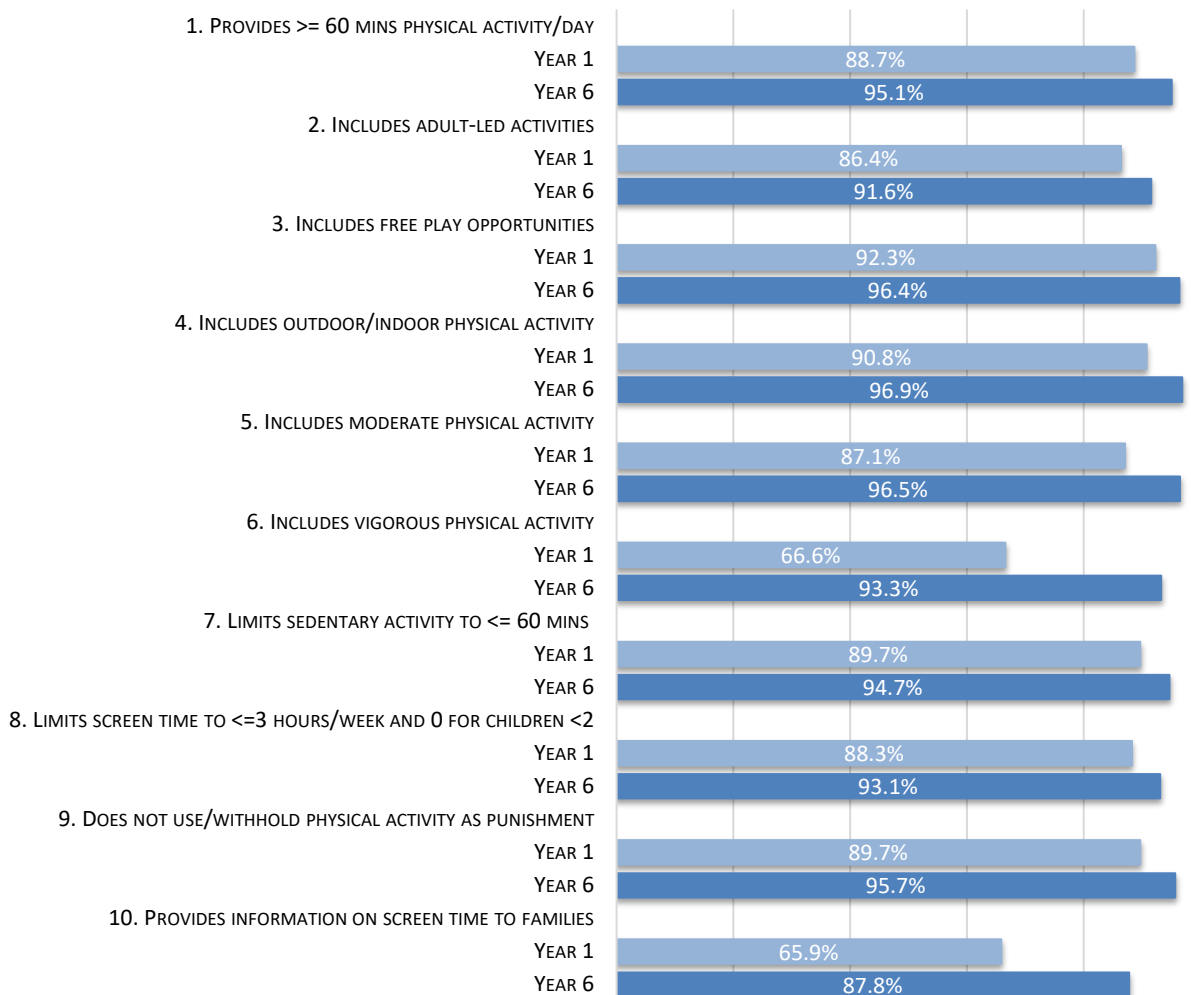
Figure 2: Percentage of facilities reporting all or some implementation of all physical activity components by year.



² Modified in Year 4. See appendix for details.

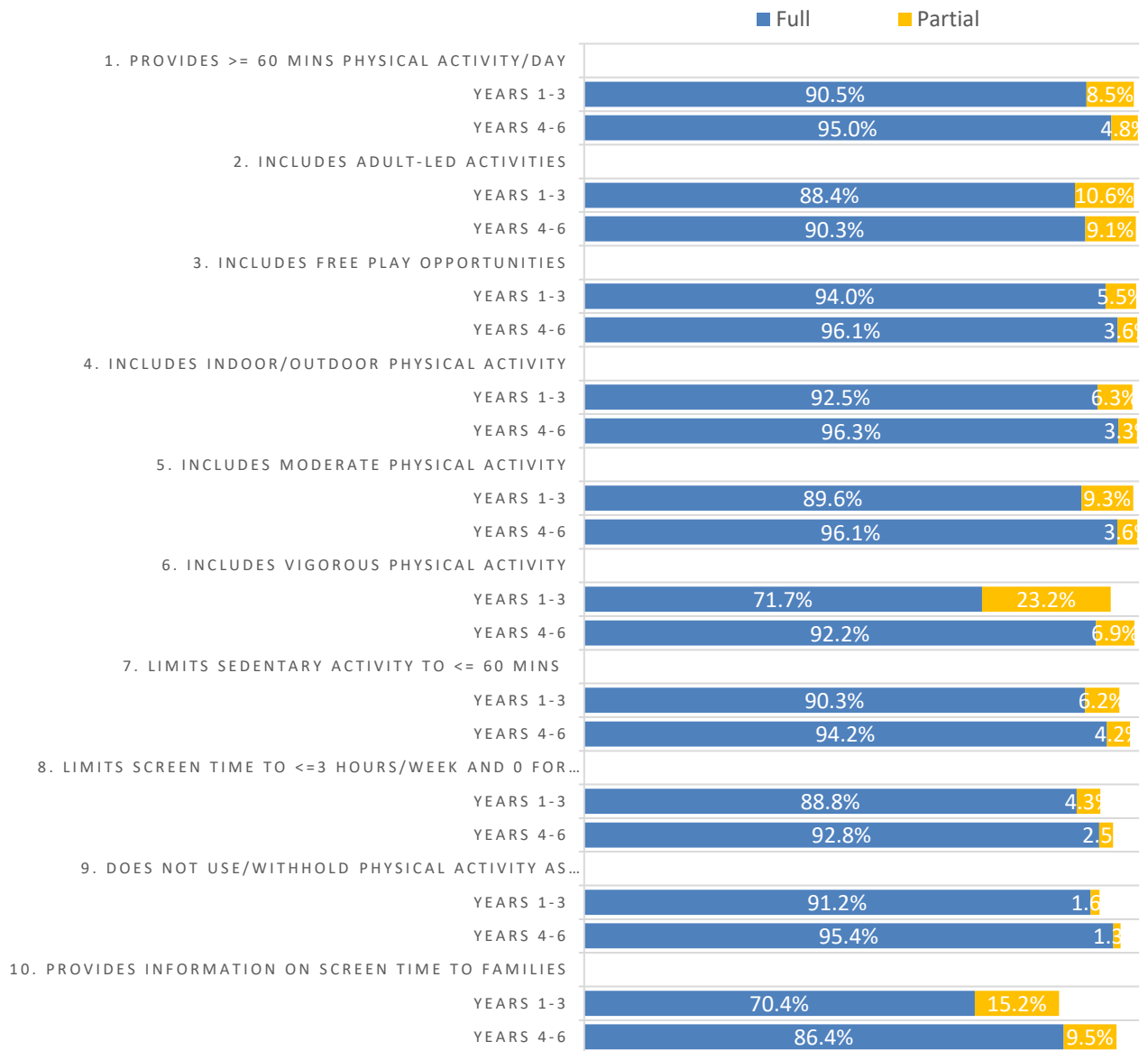
As shown in Figure 3, by Year 6, approximately nine in ten facilities reported fully implementing all ten components of the physical activity standard. Includes outdoor/indoor physical activity and moderate physical activity had the highest rates of full implementation at 97 percent. In Year 4, clarifications to the components relating to screen time, sedentary, moderate, and vigorous activity were made to include examples and language more familiar to the providers. The vigorous activity component saw the greatest increase from 67 percent in the first year to 93 percent in the sixth year. Providing information on screen time also increased significantly from 66 percent in the first year to 88 percent in the sixth year and it remains as the component with the most room for improvement. The number of facilities that include adult-led activities has not increased much over the six-year period, with more than eight percent of facilities still not including them in Year 6.

Figure 3: Percentage of facilities reporting full implementation by component in Year 1 and Year 6.



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 and compared for all components in Figure 4. Over the six-year period, full implementation of all standards increased, whereas partial implementation decreased. Vigorous physical activity showed the highest average increase in full implementation (by 21 percent) followed by providing information on screen time to families (by 16 percent). However, providing information on screen time to families (86 percent) also had the most room for improvement, as shown in Figure 4. See the appendix for a detailed table and graph showing all six years.

Figure 3: Percentage of facilities reporting full implementation of components from Years 1 to 6.



Over the six-year data collection period, feedback from providers related to physical activity included explanations about some barriers to fully implementing some of the components or ways in which they are making progress. For example, some providers have a limited time program, such as half day or after-school program, which can make it difficult to include all the requirements in their day. Some indicated not having a playground for outdoor play. Many commented that they do not allow screen time at all. One provider showed progress toward implementation by sharing that the facility has physical activity scheduled each day, including music and movement from an outside vendor. There were no specific comments related to the physical activity standard in Year 6.

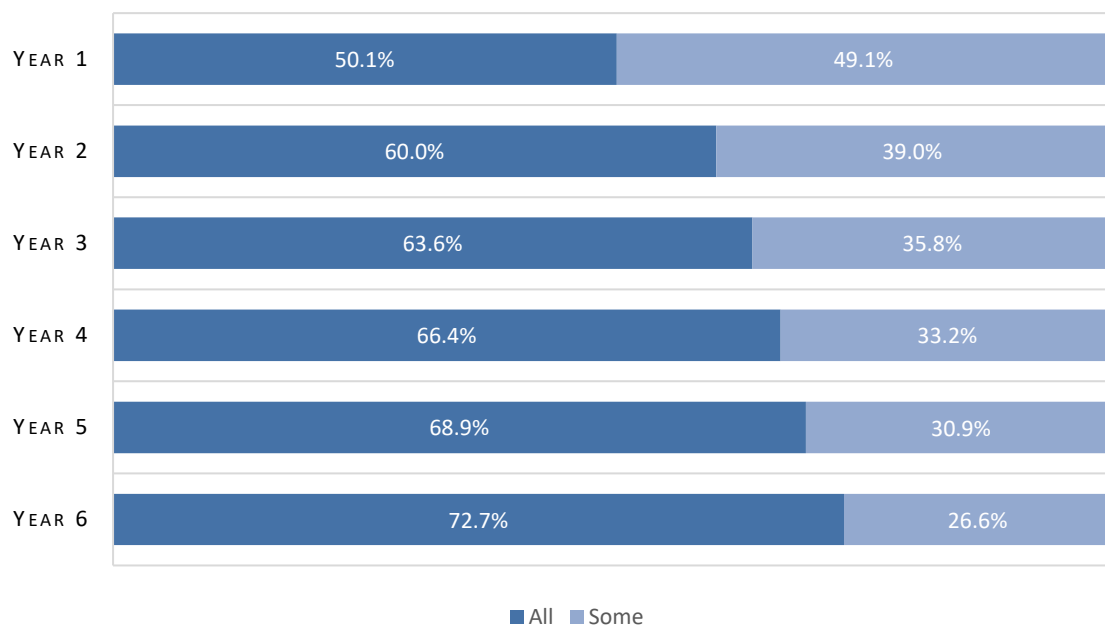
STANDARD 2: SUN SAFETY

The sun safety standard has six components, which require protecting all children from overexposure to the sun during any outdoor session:

1. Follow the age-specific sun recommendations to limit sun exposure.
2. Monitor the intensity of the sun's rays and use the UV index when planning outdoor activities.³
3. Limit sun exposure during peak UV hours from 10 a.m. to 4 p.m.
4. Protect skin from sun exposure during outdoor activities (for example: hat, sunglasses, protective clothing).³
5. Obtain permission from the child's parent(s) before applying sunscreen.³
6. Encourage the child's parent(s) to apply sunscreen to children before they arrive at the facility.³
7. Provide sun safety information to families at least annually.⁴

The percentage of facilities reporting full implementation of the sun safety components increased from 50 percent in Year 1 to 73 percent in Year 6. This means that the facility indicated they are fully implementing each one of the seven sun safety components listed above. In Year 6, 27 percent (546 facilities) have room for improvement to increase their implementation of the sun safety standard. See Figure 5.

Figure 4: Percentage of facilities reporting all or some implementation of all sun safety components by year.

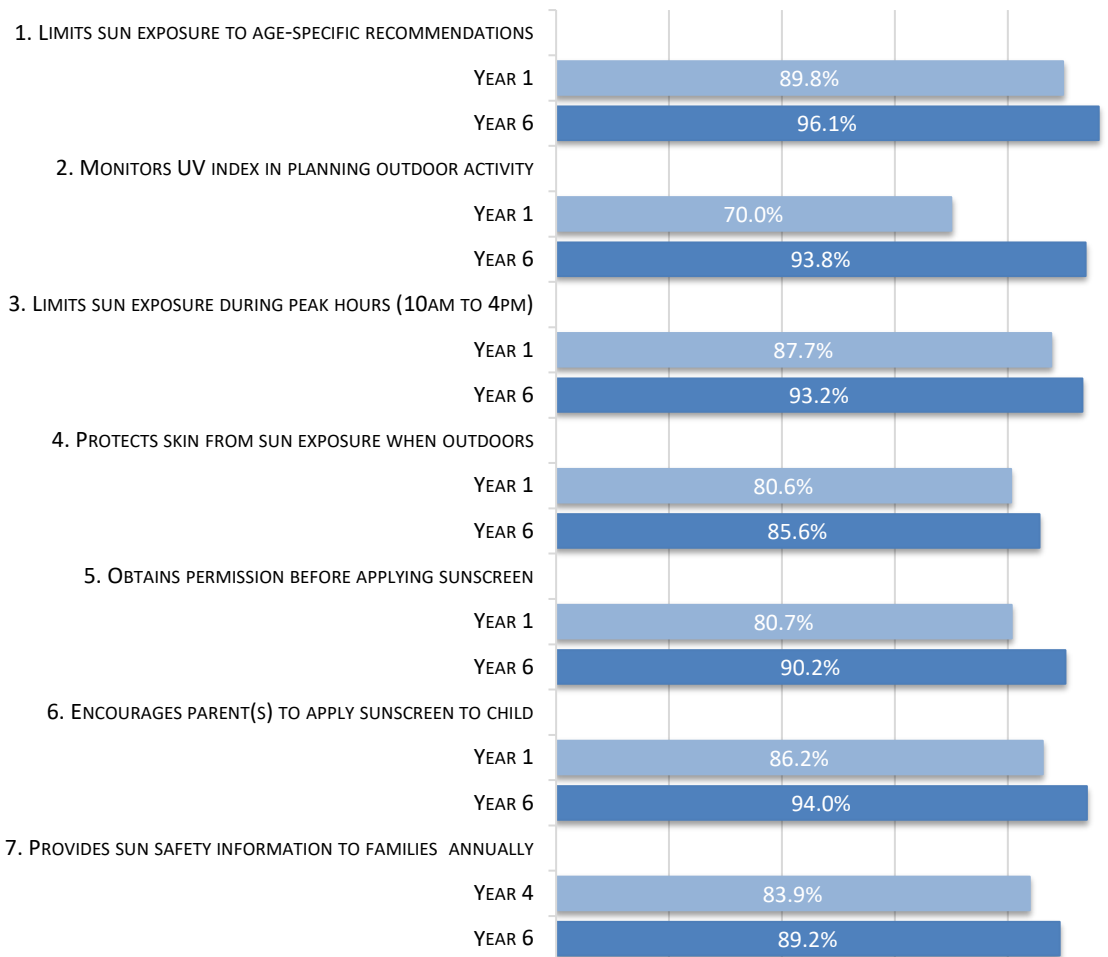


³ Modified in Year 4. See appendix for details.

⁴ Added in Year 4.

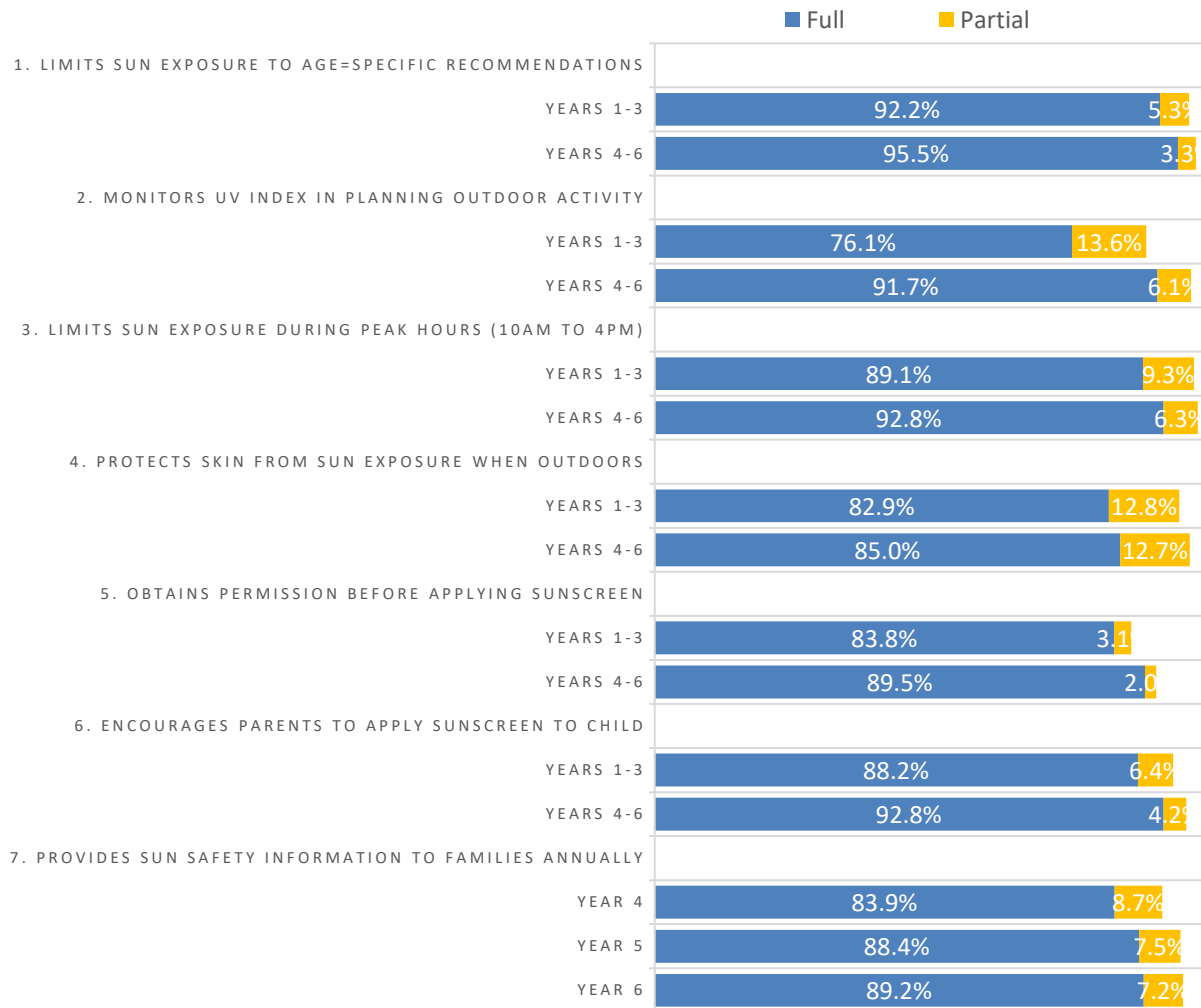
In Year 4, an additional component was added to the sun safety standard related to providing sun safety information to families annually, clarifications were made to define the UV index, and examples of ways to protect skin from sun exposure were added. Figure 6 shows percentage of facilities reporting full implementation of components in Years 1 and 6. Limiting sun exposure based on age-specific recommendations had the highest rate of full implementation at 96 percent. Protecting skin from sun exposure when outdoors had the lowest rate of full implementation at 86 percent and is also the component with the most room for improvement.

Figure 5: Percentage of facilities reporting full implementation by component in Year 1 and Year 6.



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 and compared for all components in Figure 7, except for providing sun safety information to families because it was not included until Year 4. Over the six-year period, full implementation of all standards increased, whereas partial implementation decreased. The component of checking the UV index increased on average by 16 percent between Years 1 to 3 and 4 to 6. See the appendix for a detailed table and graph showing all six years.

Figure 6: Percentage of facilities reporting full implementation of components from Years 1 to 6.



Over the six-year data collection period, feedback from providers related to sun safety referenced having shaded outdoor playgrounds or indoor-only play areas. Several commented on the UV index and planned to start checking it. In Year 4, the Empower packets included ways for providers to use the UV index in planning outdoor activities. Some of the commenters mentioned ways that facilities cope with the summer heat, such as limiting summer sun exposure or encouraging parents to dress children appropriately to protect from the sun. Some facilities reported a district or higher-level policy as a barrier that prohibits their facility from applying sunscreen and others said the parents must apply sunscreen before their children arrive at the facility. Other facilities reported not storing sunscreen on-site or applying it. There were no other specific comments related to sun safety in Year 6.

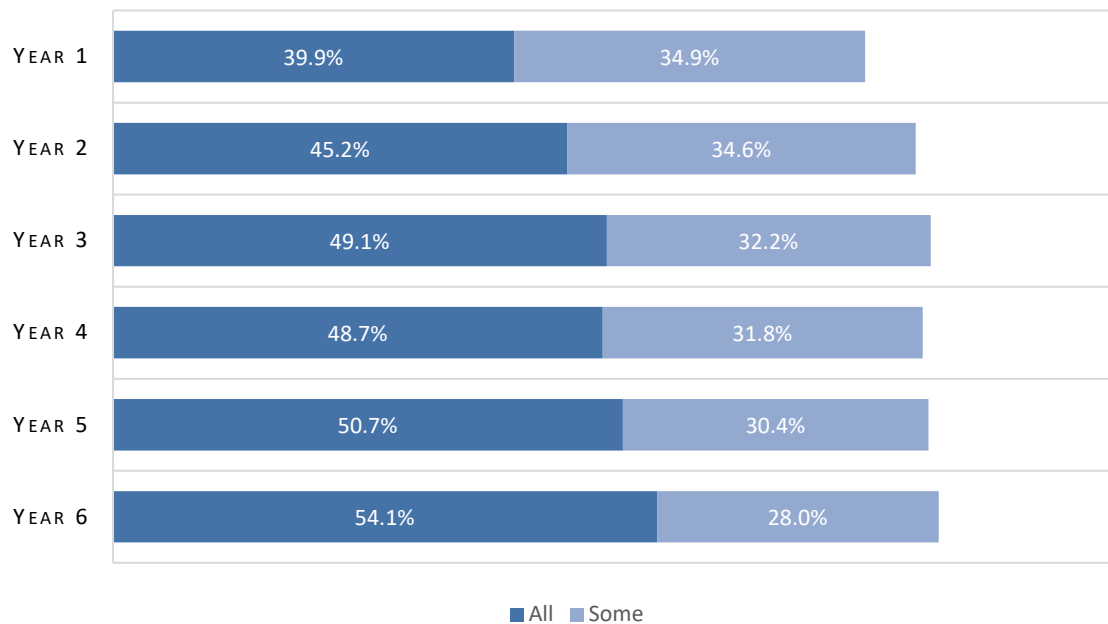
STANDARD 3: BREASTFEEDING

The breastfeeding standard requires provision of ongoing support to breastfeeding mothers with the following four components:

1. Breastfeeding mothers, including employees, shall be provided a private and sanitary place to breastfeed their babies or express milk. A bathroom is not acceptable.
2. Provide a refrigerator or designated space in a refrigerator and/or freezer for breastmilk storage.⁵
3. Display breastfeeding promotion information such as posters.⁵
4. Provide information on breastfeeding to families at least annually.⁵

The percentage of facilities reporting full implementation of the breastfeeding components increased from 40 percent in Year 1 to 54 percent in Year 6. This means that the facility indicated they are fully implementing each one of the four breastfeeding components listed above. In Year 6, 28 percent (575 facilities) have room for improvement to increase their implementation of the breastfeeding standard. See Figure 8.

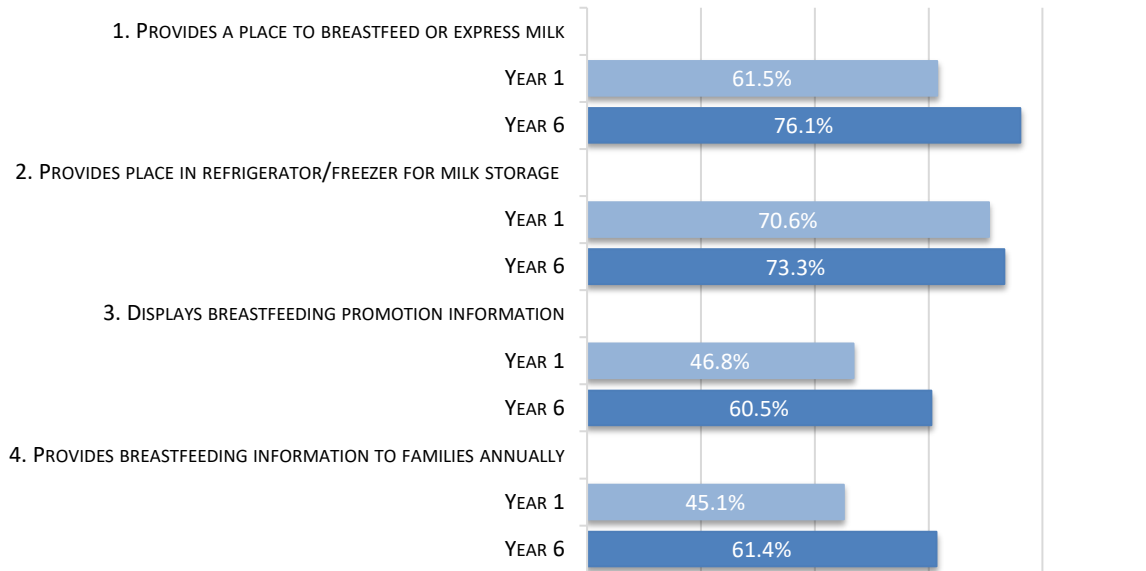
Figure 7: Percentage of facilities reporting all or some implementation of all breastfeeding components by year.



⁵ Modified in Year 4. See appendix for details.

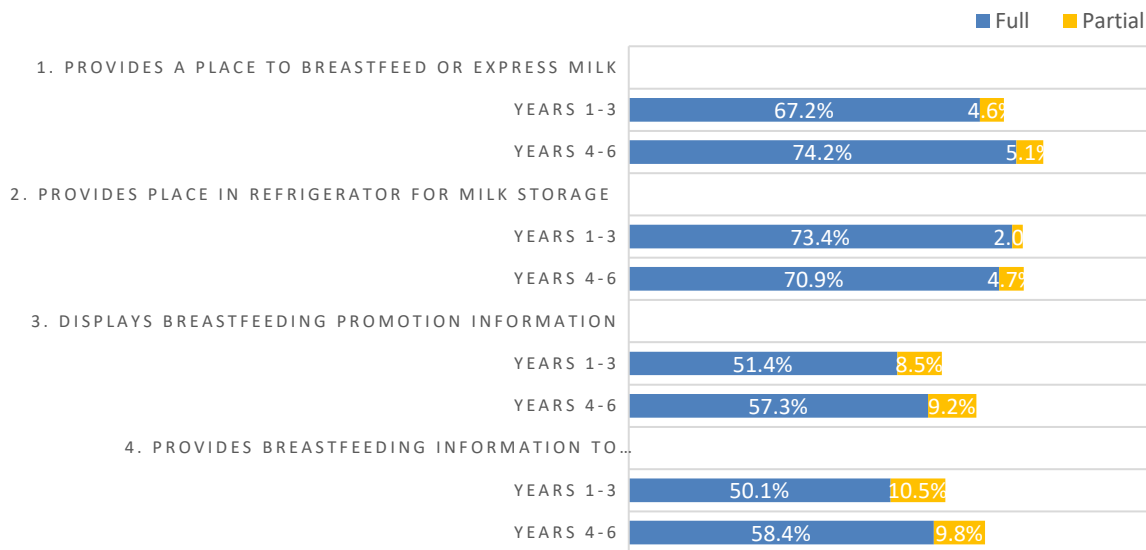
In Year 6, providing a place to breast feed or express milk had the highest rate of full implementation at 76 percent whereas, displaying breastfeeding promotion information and providing breastfeeding information to families had the lowest rate of full implementation, each at 61 percent. The proportion of facilities implementing each of the breastfeeding components has increased from Year 1 to Year 6. Providing breastfeeding information to families increased the most from 45 percent in Year 1 to 61 percent in Year 6, followed by displaying breastfeeding promotion information from 45 percent in Year 1 to 61 percent in Year 6. See Figure 9.

Figure 8: Percentage of facilities reporting full implementation by component in Year 1 and Year 6.



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 and compared for all components in Figure 10. Over the six-year period, full implementation increased and partial implementation decreased for all components. Providing breastfeeding information to families showed the highest average increase (by 7 percent) between Years 1 to 3 and 4 to 6, whereas, providing a place in the refrigerator for milk storage slightly decreased on average (by 3 percent) between Years 1 to 3 and 4 to 6. See the appendix for a detailed table and graph showing all six years.

Figure 9: Percentage of facilities reporting full and partial implementation of components from Years 1 to 6.



Over the six-year data collection period, the main theme emerging from the comments from child care facility staff is related to the perception that the breastfeeding standard does not apply to them. Most of the comments were related to facilities not having infants in their facility. Several facilities provided explanations regarding the ages of children served, such as preschool-aged kids or after-school programs for school-age children. A handful said they did not have infants in their facility but were able to accommodate breastfeeding mothers and store breastmilk, if necessary.

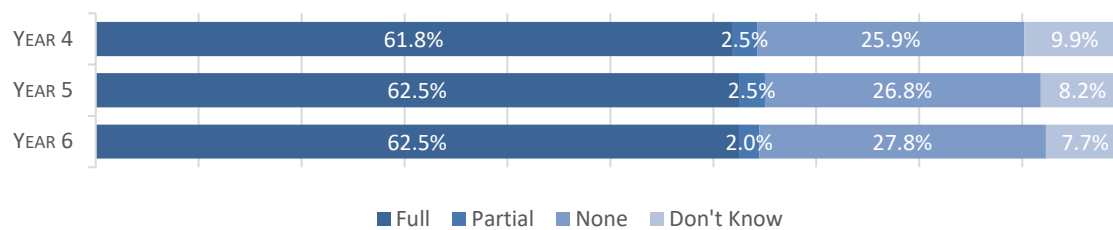
Licensing staff emphasized that facilities do not feel this standard applies to them unless they have infants. They also reported that many of the facilities are public schools enrolling only school-age children, and in these cases, families with infants rarely enter the facility. Licensing staff stressed how important education is for this standard, noting how often they must explain the standard to facility employees in order for them to understand the meaning of breastfeeding-friendly environment. Despite attempts to raise awareness regarding the applicability of this standard to all facilities, this standard remains the one with the lowest levels of full implementation.

In Year 6, 31 percent of the comments addressed the breastfeeding standard. Many of the comments repeated the misperception that the standard does not apply because they have school-aged children only.

STANDARD 4: CHILD AND ADULT CARE FOOD PROGRAM

Prior to August 15, 2016, the CACFP standard was evaluated solely by whether the facility had a written policy on determining eligibility status for CACFP. Beginning with surveys on August 15, 2016, respondents were asked to report their level of implementation of determining eligibility status for CACFP. From Year 4 to Year 6, the percentage of facilities fully implementing the CACFP standard has increased slightly from 62 percent to 63 percent. In Year 6, 28 percent (569 facilities) report no implementation of this standard. See Figure 11. Since Year 4, implementation of the CACFP standard has remained fairly stable.

Figure 10: Percentage of facilities who determine eligibility status for CACFP annually by year.



Over the six-year period, some themes emerged from comments on the CACFP standard. Several respondents reported not participating in the program and some of them said it was because their families were ineligible. A few facilities stated that some of their children received free or reduced lunch, which does not qualify the entire facility to receive CACFP.

Licensing staff reported that this standard is typically dealt with by program administrators. Classroom directors and their staff are rarely aware of these answers. Licensing staff noted that not all programs are eligible to participate in CACFP. As a result, they have suggested not having CACFP as a stand-alone standard, but instead including it as a component of another standard such as family-style meals. All licensed programs must comply with the Licensing rule requirement of having a meal chart and serving food based on CACFP requirements within their facilities, even if they are not a CACFP-eligible facility.

In Year 6, 3 percent of the comments pertain to the CACFP standard. Most mentioned not participating in the program and the most common reason cited is that the facility does not provide food. Many of the facilities are partial-day programs. In some cases, the parents provide meals and snacks. One mentioned that the district handles CACFP eligibility.

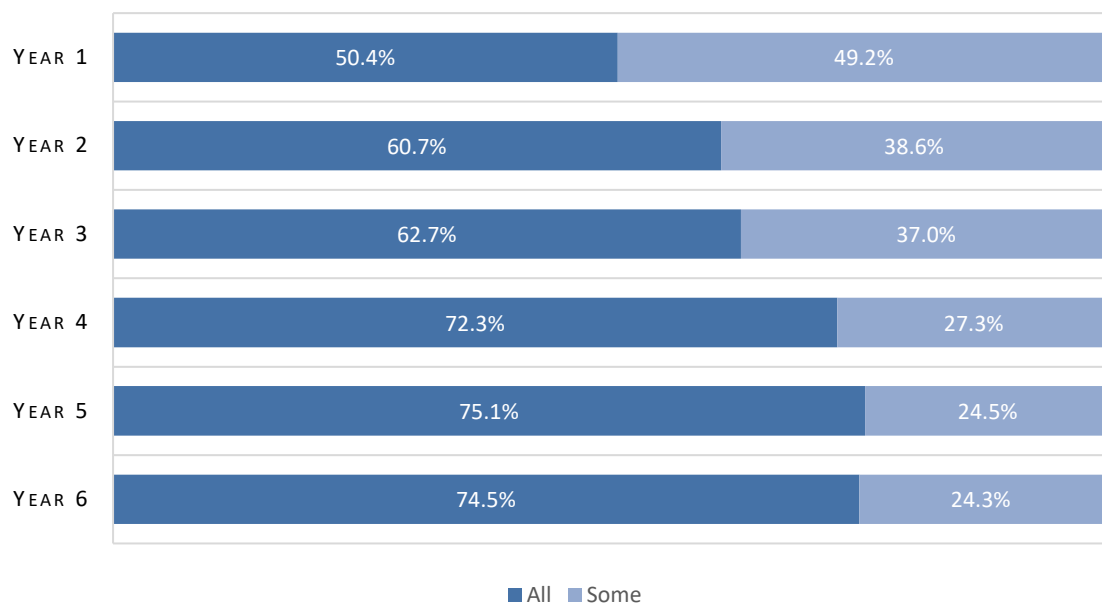
STANDARD 5: FRUIT JUICE

The fruit juice standard requires a commitment to supporting children in establishing lifelong healthy eating and drinking habits with the following seven components:

1. Provide water throughout the day both inside and outside.⁶
2. Provide water as the first choice for thirst.
3. Do not serve fruit juice more than two times per week to children one year or older.⁶
4. Limit serving more than a half-cup (or four ounces) of fruit juice at one time for children one year to less than six years of age.
5. Serve only 100 percent fruit juice with no added sugar or never serve juice.⁶
6. Serve fruit juice only during meal or snack time.⁶
7. Provide information about limiting fruit juice to families at least annually.⁶

The percentage of facilities reporting full implementation of the fruit juice components increased from 50 percent in Year 1 to 75 percent in Year 6. This means that the facility indicated they are fully implementing each one of the seven fruit juice components listed above. In Year 6, 24 percent (499 facilities) have room for improvement to increase their implementation of the fruit juice standard. See Figure 12.

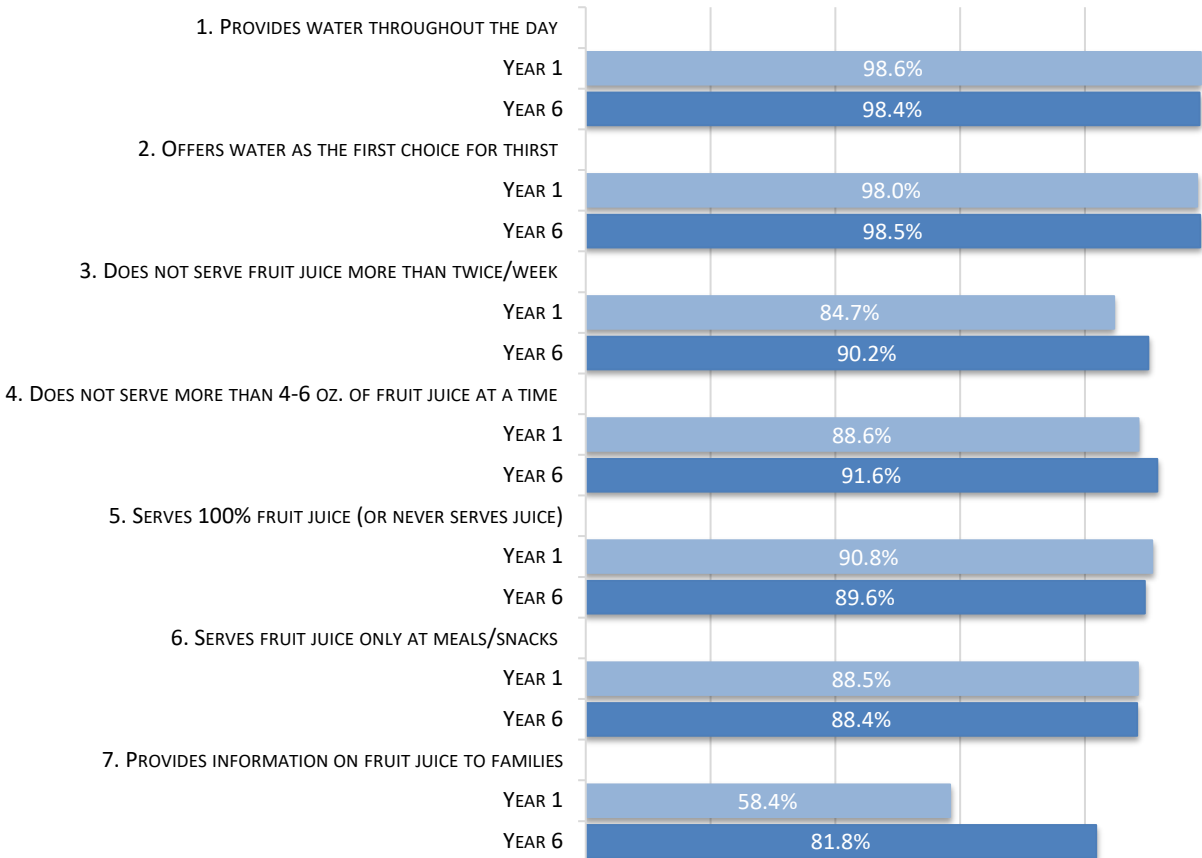
Figure 12: Percentage of facilities reporting all or some implementation of all fruit juice components by year.



⁶ Modified in Year 4. See Appendix for details.

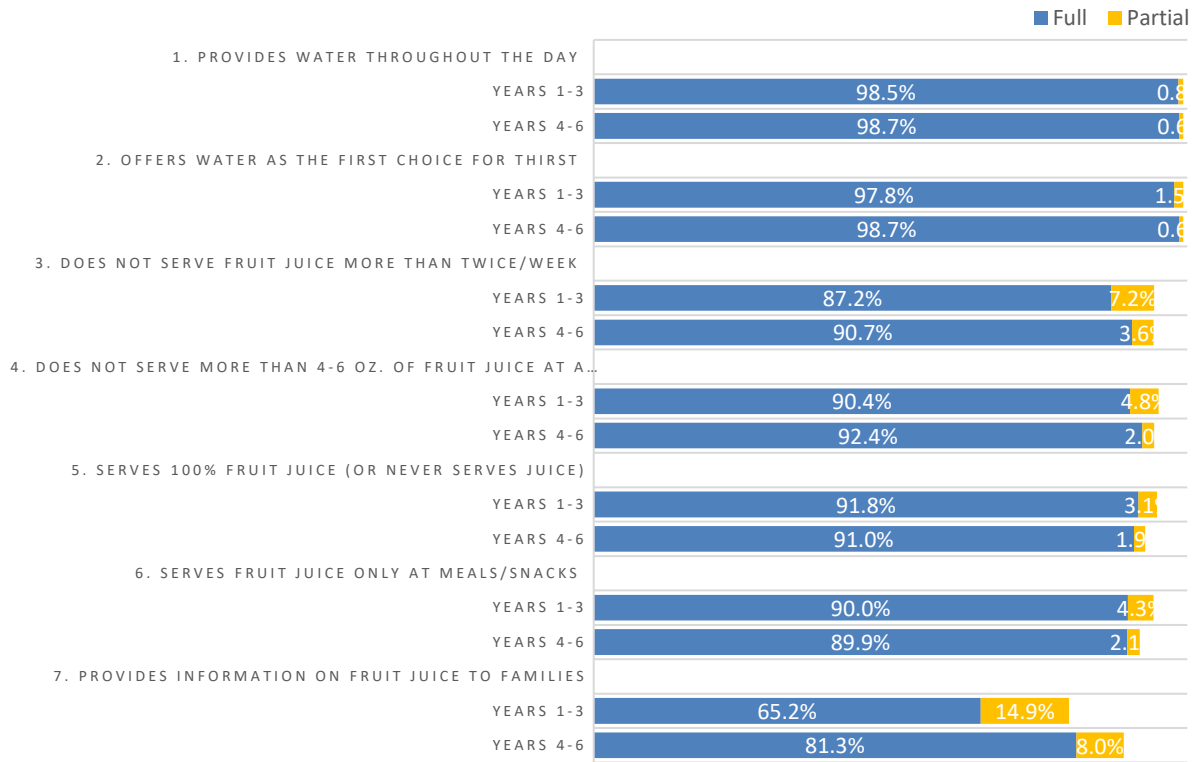
In Year 6, the two components relating to drinking water, providing water throughout the day and providing water as the first choice for thirst, had the highest levels of full implementation, with each at approximately 99 percent. For the fruit juice standard, the percentage of facilities reporting full implementation of the components stayed relatively stable from Year 1 to Year 6 with only slight increases. Providing information on fruit juice to families had the greatest increase from 58 percent in Year 1 to 82 percent in Year 6, yet it still has the lowest implementation level. Not serving fruit juice more than twice a week had an increase from 85 percent in Year 1 to 90 percent in Year 6. See Figure 13.

Figure 13: Percentage of facilities reporting full implementation by component in Year 1 and Year 6.



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 and compared for all components in Figure 14. Providing information on fruit juice to families showed the highest average increase in full implementation (by 16 percent) and decrease in partial implementation (by 7 percent) between Years 1 to 3 and 4 to 6. See the appendix for a detailed table and graph showing all six years.

Figure 14: Percentage of facilities reporting full implementation of components from Years 1 to 6.



Over the six years of data collection, child care facility staff commented that the facility does not serve juice at all, and many mentioned not serving juice because it was not allowed. Several noted that parents sometimes give the child juice for lunch or snack. Some mentioned that parents provide all drinks and food. A few respondents only provide milk or water at their facility. Feedback from Licensing staff related to terms used on the assessment tool led to revisions in Year 4.

In Year 6, 9 percent of the comments referenced the fruit juice standard. Most of them stated that the facility did not serve juice.

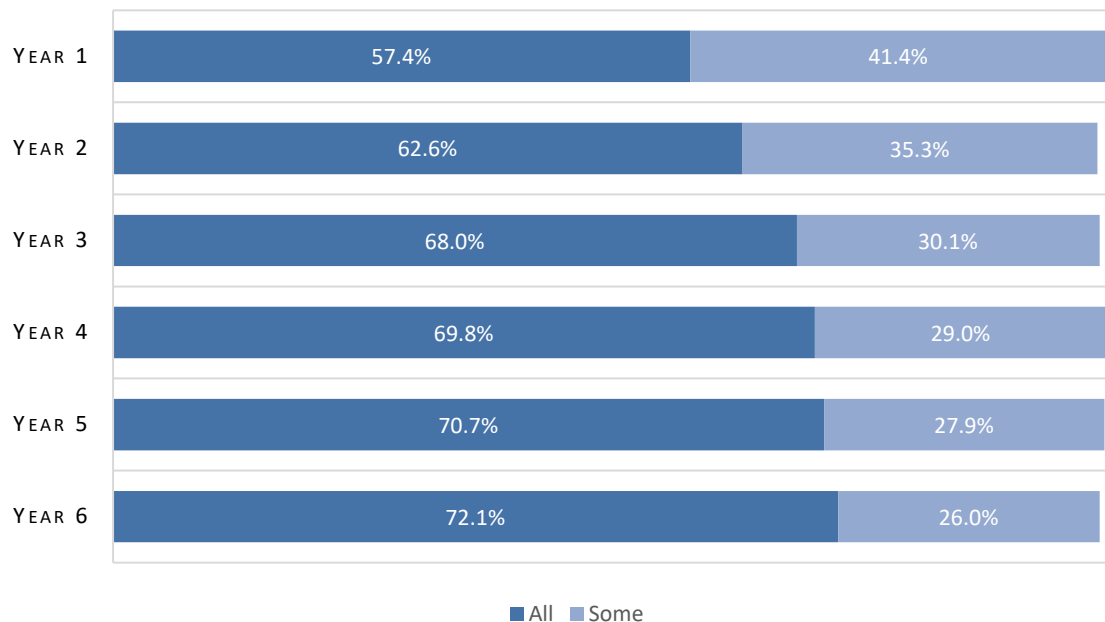
STANDARD 6: FAMILY-STYLE MEALS

The family-style meal standard requires a commitment to supporting children in establishing lifelong healthy eating and drinking habits with the following six components:

1. Serve meals family style whenever possible.
2. Use child-sized serving utensils and containers.⁷
3. Require staff to sit, participate, and interact with children during mealtime.⁷
4. Allow children to serve themselves so they may choose what to put on their plates and how much to eat.
5. Do not use food as a reward or punishment.
6. Provide information on healthy eating to families at least annually.⁷

The percentage of facilities reporting full implementation of the family-style meals components increased from 57 percent in Year 1 to 72 percent in Year 6. This means that the facility indicated they are fully implementing each one of the six family-style meals components listed above. In Year 6, 26 percent (534 facilities) have room for improvement to increase their implementation of the family-style meals standard. See Figure 15.

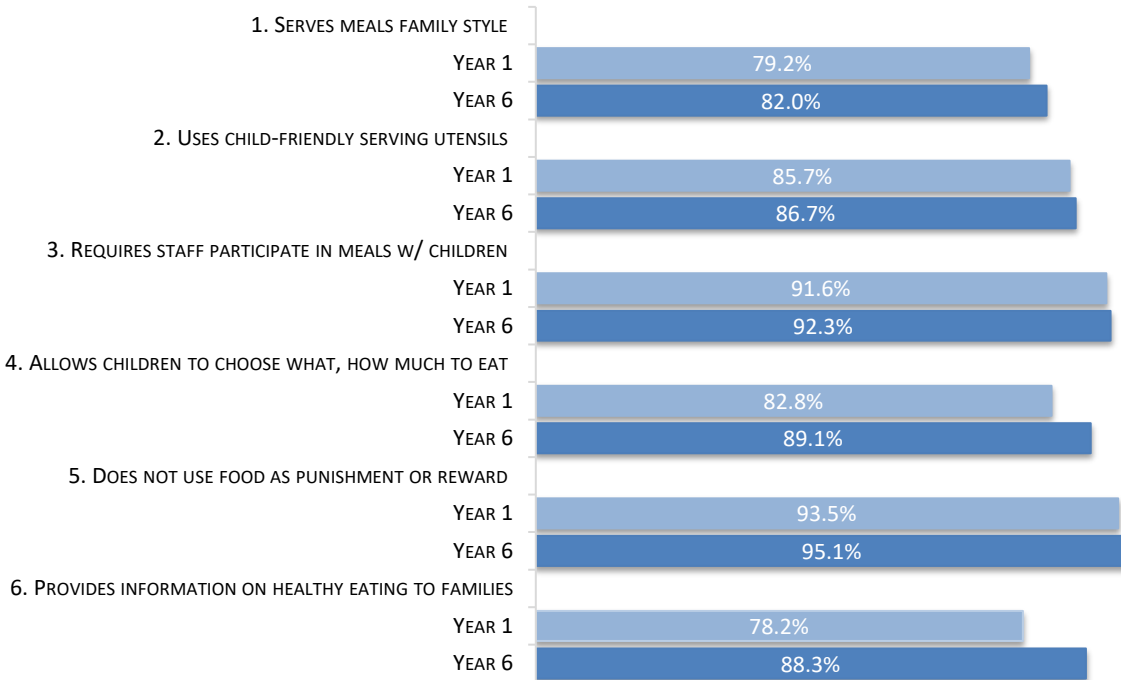
Figure 15: Percentage of facilities reporting all or some implementation of all family-style meals components by year.



⁷ Modified in Year 4. See Appendix for details.

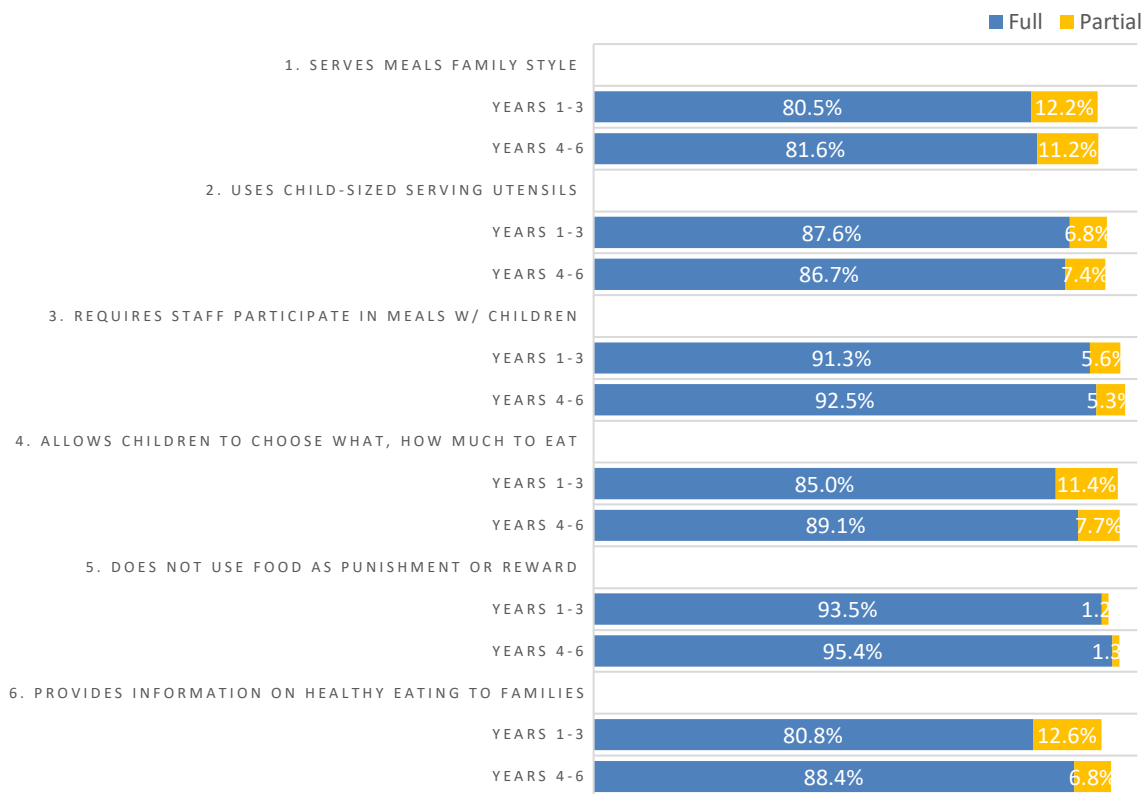
In Year 6, not using food as punishment or reward had the highest rate of full implementation at 95 percent whereas, serving meals family-style had the lowest at 82 percent. The percentage of facilities reporting full implementation of the components held stable from Year 1 to Year 6 with only slight increases. Providing information on healthy eating to families had the greatest increase from 78 percent in Year 1 to 88 percent in Year 6. While the serving meals family style component has increased from 79 percent in Year 1 to 82 percent in Year 6, it still has the most room for improvement. See Figure 16.

Figure 16: Percentage of facilities reporting full implementation by component in Year 1 and Year 6



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 and compared for all components in Figure 17. Between Years 1 to 3 and 4 to 6, providing information on healthy eating to families showed the highest average increase in full implementation (by 8 percent) and decrease in partial implementation (by 6 percent). See the appendix for a detailed table and graph showing all six years.

Figure 17: Percentage of facilities reporting full and partial implementation of components from Years 1 to 6.



Over the six-year reporting period, most of the comments from child care facility staff identified the greatest barrier to meeting the components of the family-style meal standard is their facility not serving meals. Many mentioned that children bring their own lunch and snacks. Some discussed limitations regarding food allergies. A few mentioned the use of prepackaged foods and no need for utensils. One director said that information for families on healthy eating was provided upon request, and one said that children receive required servings, but can choose how much to eat. The assessment tool was modified in Year 4 based on feedback from Licensing. Like other components of standards, the word “prohibit” was problematic and confusing to respondents so it was changed.

In Year 6, 22 percent of the comments referenced family-style meals. Most of the comments noted that the facility does not serve food because the facility is not a full-day program or it only provides snacks. One facility commented that family-style meals were served to children in their preschool program, and not to children in their after-school program.

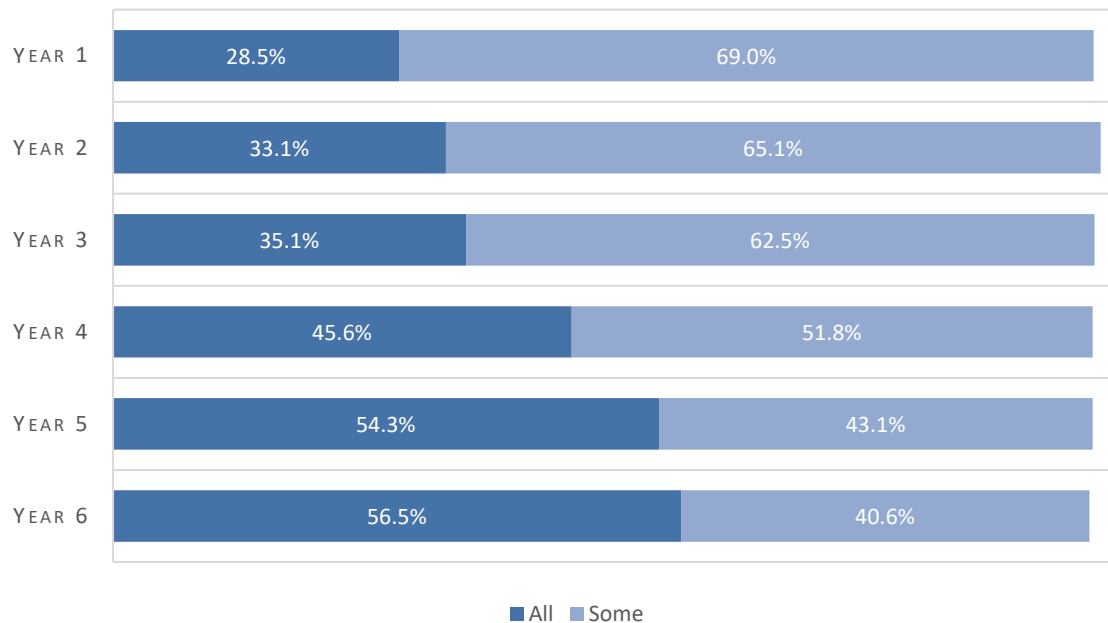
STANDARD 7: ORAL HEALTH

The oral health standard requires facilities to protect the health of their students concerning tooth decay by following these components:

1. Provide monthly oral health education and/or implement a daily tooth brushing program.⁸
2. Do not allow children to carry a bottle or sippy cup during the day unless it is water.⁹
3. Educate parents on the importance of a dental visit by their child’s first birthday.⁹
4. Do not put children to sleep with a bottle.⁸
5. Limit serving of meals and snacks to scheduled times.⁸
6. Educate parents about cleaning teeth and oral hygiene at home.
7. Provide information on tooth decay to families at least annually.

The percentage of facilities reporting full implementation of the oral health components increased from 29 percent in Year 1 to 57 percent in Year 6. In the first three years, facilities reporting full implementation of all of the original nine components are included in the category “All.” Beginning with Year 4, facilities reporting implementation of those components that were continued, plus the two new components that were added on August 15th, 2016, are included in the category “All” (some components were reworded or eliminated). In Year 6, 41 percent (833 facilities) have room for improvement to increase their implementation of the oral health standard. See Figure 18.

Figure 18: Percentage of facilities reporting all or some implementation of all oral health components by year.

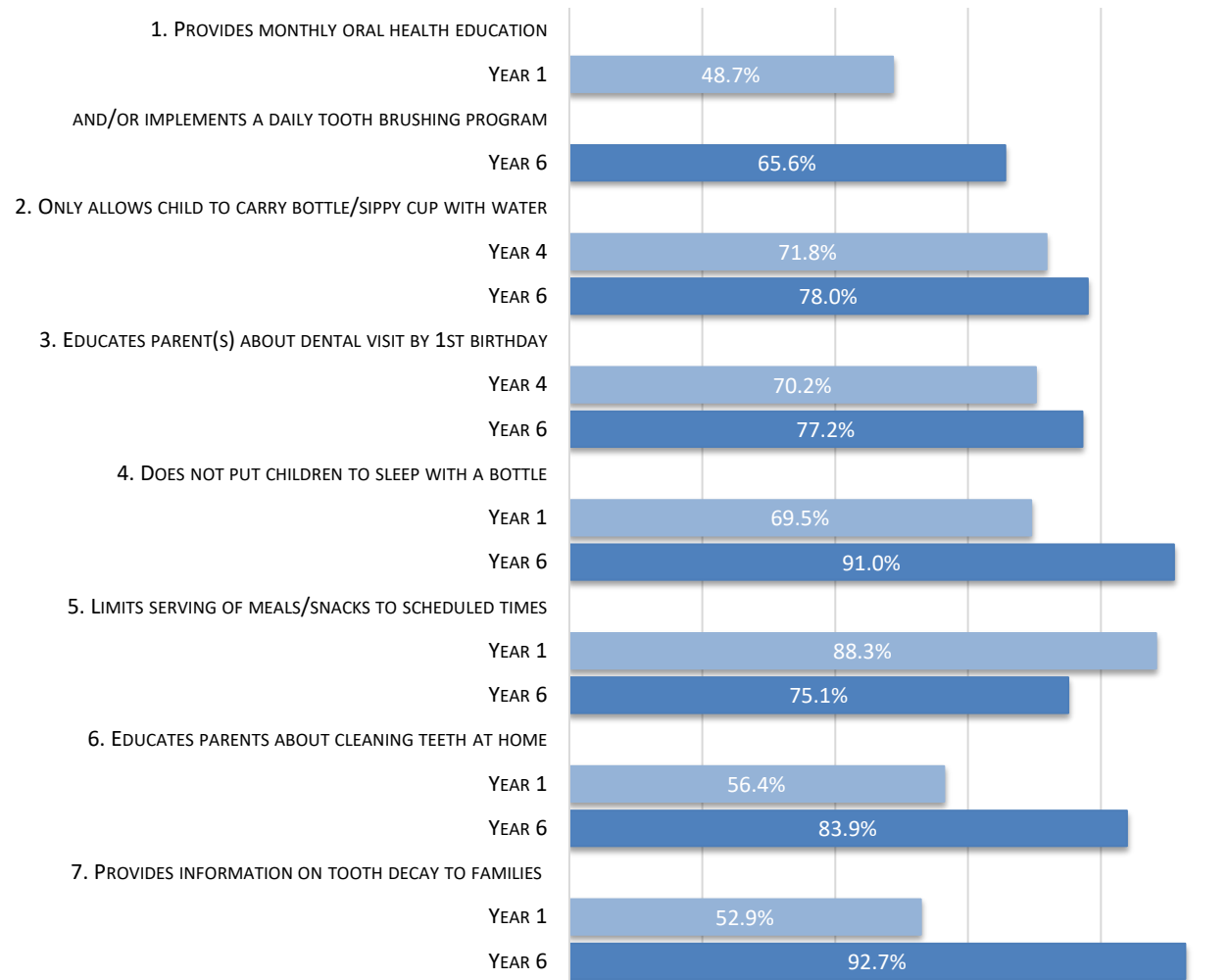


⁸ Modified in Year 4. See appendix for details.

⁹ Added in Year 4.

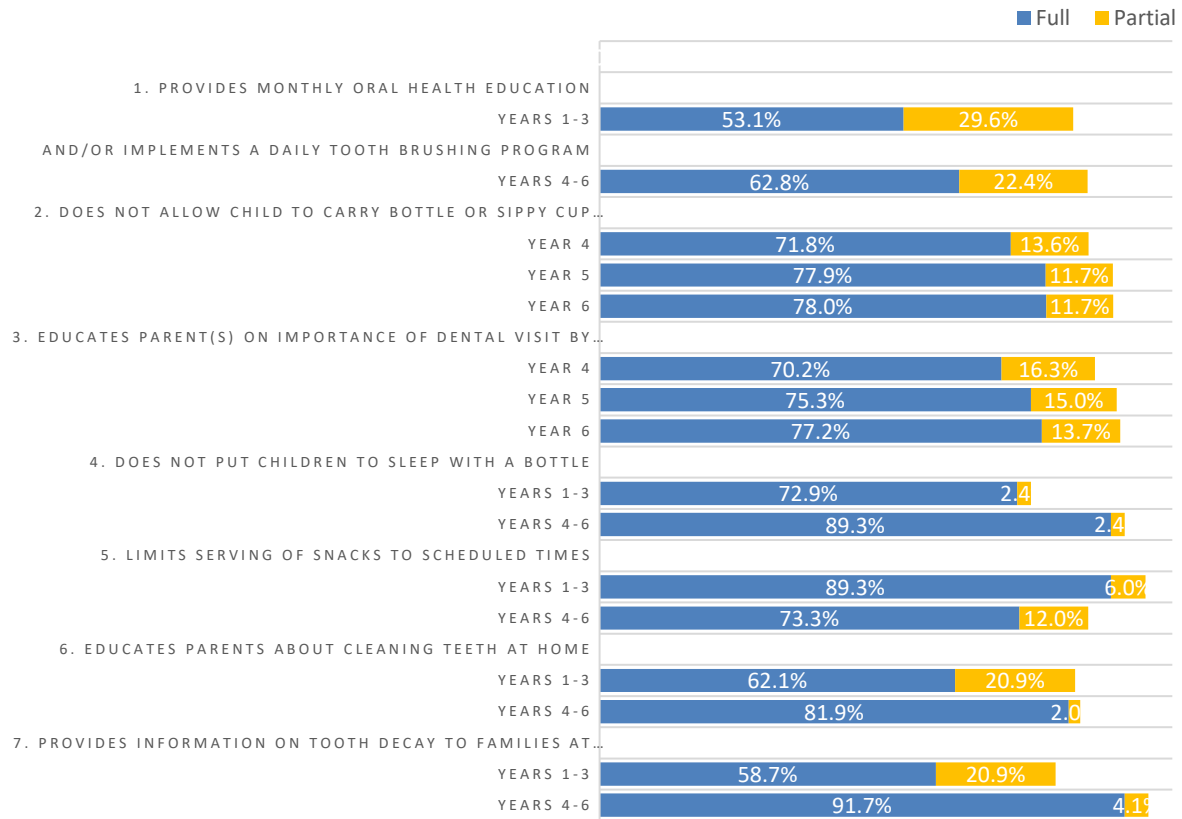
For the oral health standard, the percentage of facilities reporting full implementation of each component increased except for limiting serving of snack to scheduled times, which has decreased from 88 percent in Year 1 to 75 percent in Year 6. Providing information on tooth decay to families had the highest level of implementation and the greatest increase from 53 percent in Year 1 to 93 percent in Year 6. In Year 4, the component on providing monthly oral health education was modified to include ‘and/or implementing a daily tooth brushing program.’ In Year 6, it remained the component with the lowest implementation level at 66 percent. See Figure 19.

Figure 19: Percentage of facilities reporting full implementation by component in Year 1 and Year 6



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 and compared for all components in Figure 20, except for does not allow child to carry bottle or sippy cup and educates parents on the importance of dental visits. Between Years 1 to 3 and 4 to 6, providing information on tooth decay to families showed the highest average increase in full implementation (by 33 percent) and educates parents about cleaning teeth at home showed the highest decrease in partial implementation (by 19 percent). See the appendix for a detailed table and graph showing all six years.

Figure 20: Percentage of facilities reporting full and partial implementation of components from Years 1 to 6.



In the six-year data collection period, many child care facility staff commented that their facility did not serve children that used pacifiers or bottles or did not allow the practice at their site. Some mentioned that their facility does not have nap time. A few said that their center was only utilized as a before- or after-school program so they did not offer the components of the oral health standard. One comment said that a dentist comes twice each year to provide education to the children. Another said that they are still working to develop a tooth brushing program.

In Year 4, updates were made to the assessment due to feedback from providers and Licensing staff. In the previous version, there were components related to sharing utensils and licking a pacifier to clean it that were discontinued because there were no longer any issues with facilities allowing those activities. In Year 6, there were no specific comments related to the oral health standard.

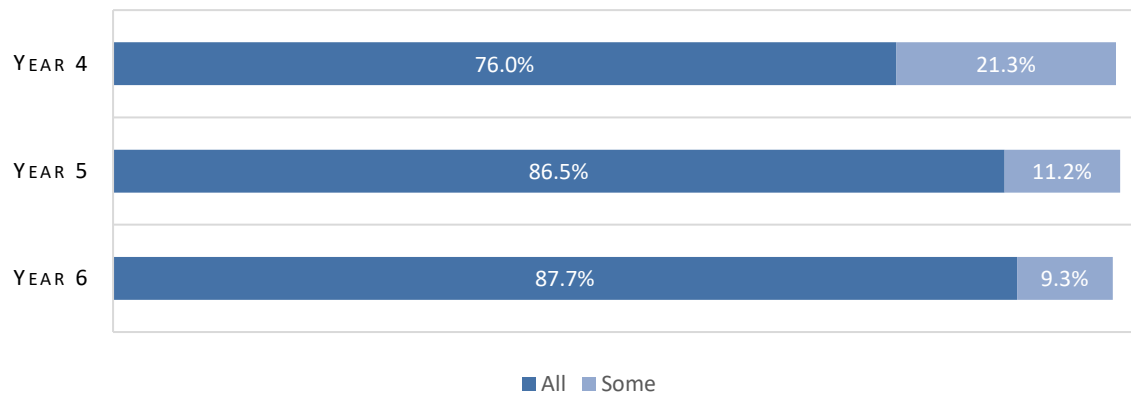
STANDARD 8: STAFF TRAINING

The staff training standard requires facilities to commit to furthering staff education on the Empower Program and topics by following these components:

1. Staff required to receive three hours of training on Empower topics annually.
2. Program directors required to provide training opportunities to staff members.¹⁰

The percentage of facilities reporting full implementation of the staff training components increased from 76 percent in Year 4 to 88 percent in Year 6. The second component was added in Year 4 to require program directors to provide training opportunities. In Year 6, 9 percent (190 facilities) have room for improvement to increase their implementation of the staff training standard. See Figure 21.

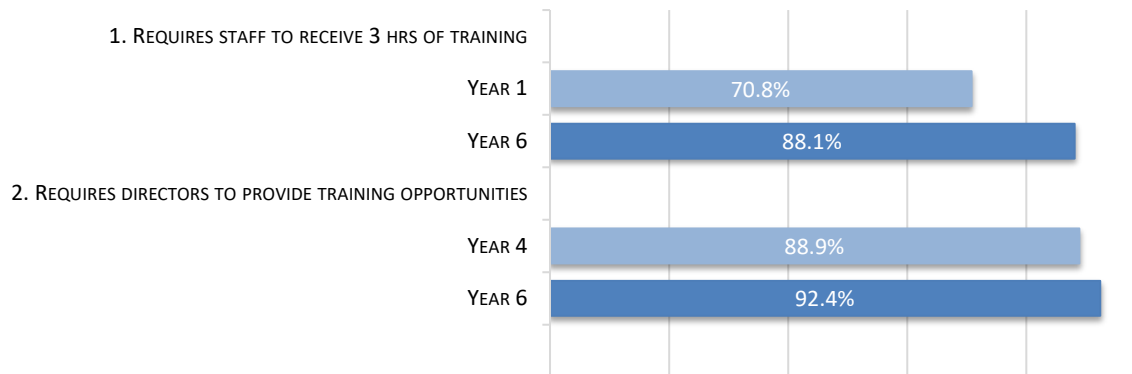
Figure 21: Percentage of facilities reporting all or some implementation of all staff training components by year.



¹⁰ Added in Year 4.

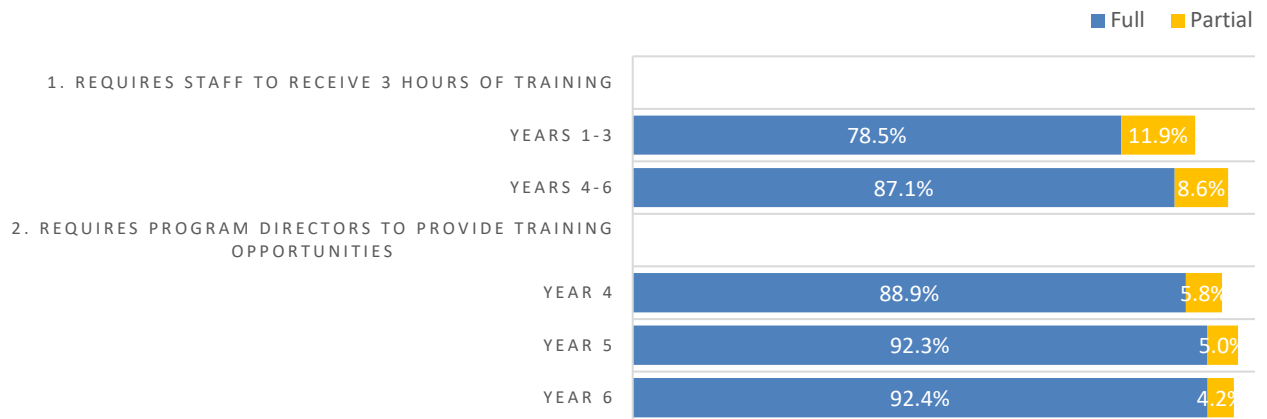
In Year 6, requiring directors to provide training opportunities had the highest rate of full implementation at 92 percent and requires staff to receive 3 hours of training had the lowest rate of full implementation at 88 percent. Approximately 71 percent of facilities reported full implementation of the staff training component in the first year, increasing to 88 percent by the sixth year. An additional component was added in Year 4 to require program directors to provide training opportunities, which increased from 89 percent to 92 percent of facilities fully implementing from Year 4 to Year 6. See Figure 22.

Figure 22: Percentage of facilities reporting full implementation by component and year



Full and partial implementation rates were averaged separately for Years 1 to 3 and 4 to 6 only for the requires staff to receive 3 hours of training component in Figure 23. Between Years 1 to 3 and 4 to 6, average full implementation of this component increased by 9 percent and partial implementation decreased by 3 percent. See the appendix for a detailed table and graph showing all six years.

Figure 23: Percentage of facilities reporting full and partial implementation from Years 1-6



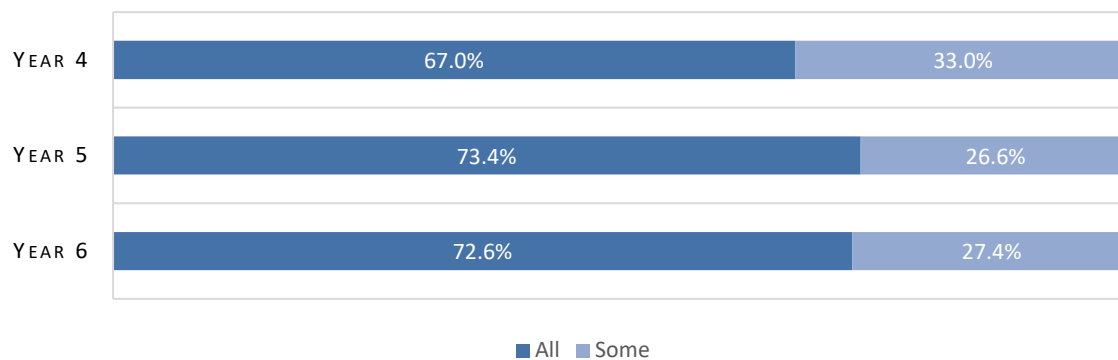
STANDARD 9: ASHLINE

The ASHLine standard requires facilities to help staff and families quit tobacco by following these components.

1. Provide information on the dangers of second- and third-hand smoke to families.
2. Provide ASHLine education materials to families at least annually.¹¹

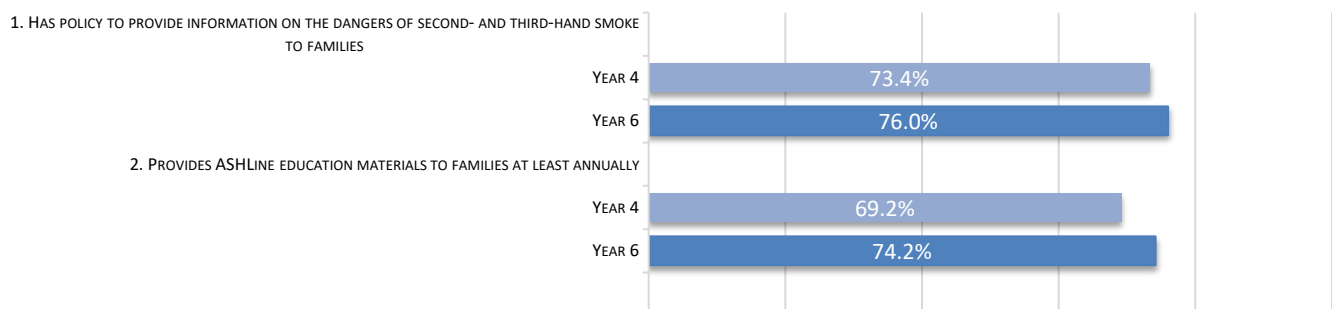
The percentage of facilities reporting full implementation of the ASHLine components increased from 67 percent in Year 4 to 73 percent in Year 6. This means that the facility indicated they are fully implementing each one of the two components listed above. In Year 6, 27 percent (561 facilities) have room for improvement to increase their implementation of the ASHLine standard. See Figure 24.

Figure 24: Percentage of facilities reporting all or some implementation of all ASHLine components by year.



In Year 6, providing information on the dangers of second and third-hand smoke had the highest rate of full implementation at 76 percent. The percentage of facilities that provided ASHLine education materials to families at least annually had the greatest increase from 69 percent in Year 4 to 74 percent in Year 6. The percentage of facilities that provide information on the dangers of second- and third-hand smoke to families increased from 73 percent to 76 percent. See Figure 25.

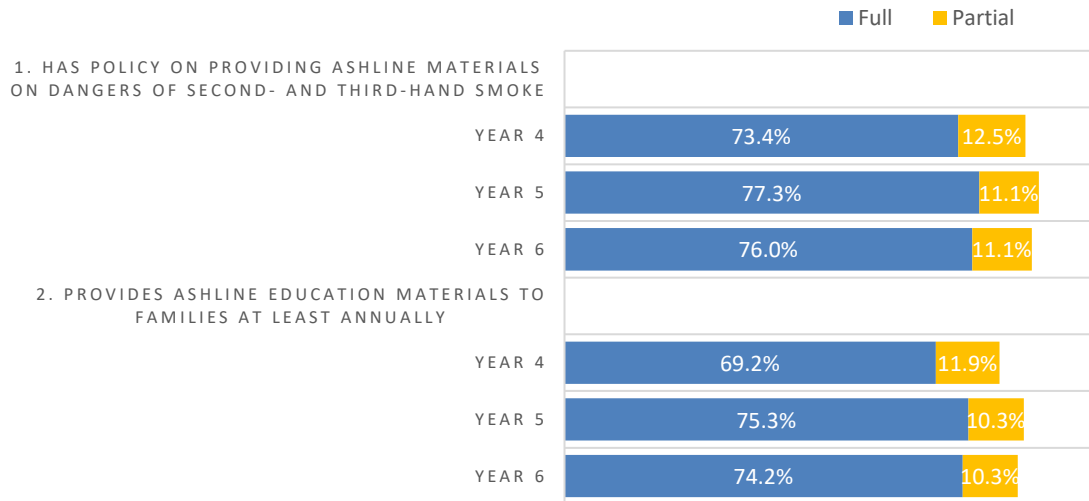
Figure 25: Percentage of facilities reporting full implementation by component and year



¹¹ Added in Year 4.

Over the three-year period, full implementation of providing ashline education materials to families increased the most (by 5 percent) as shown in Figure 26. Partial implementation has slightly decreased but remained fairly stable for all components. See the appendix for a detailed table and graph showing all three years. See the appendix for a detailed table and graph showing all six years.

Figure 26: Percentage of facilities reporting full implementation from Years 4 to 6.**



Before the survey tool was revised in Year 4, there were components in the ASHLine standard related to participation in an ASHLine pilot program. Many of the comments through Year 3 referenced those components such as not knowing whether they participate in the pilot. A few said they were not familiar with the program but were interested in participating. Others reported calling ADHS and receiving no response. These respondents tended to also mention that they needed more information about the program and the materials. Licensing staff mentioned that ASHLine is generally handled by program administrative staff and classroom staff is rarely aware of this standard. One comment unrelated to the pilot was that “no one smokes.” In Year 6, only one respondent commented that they wanted more ASHLine materials.

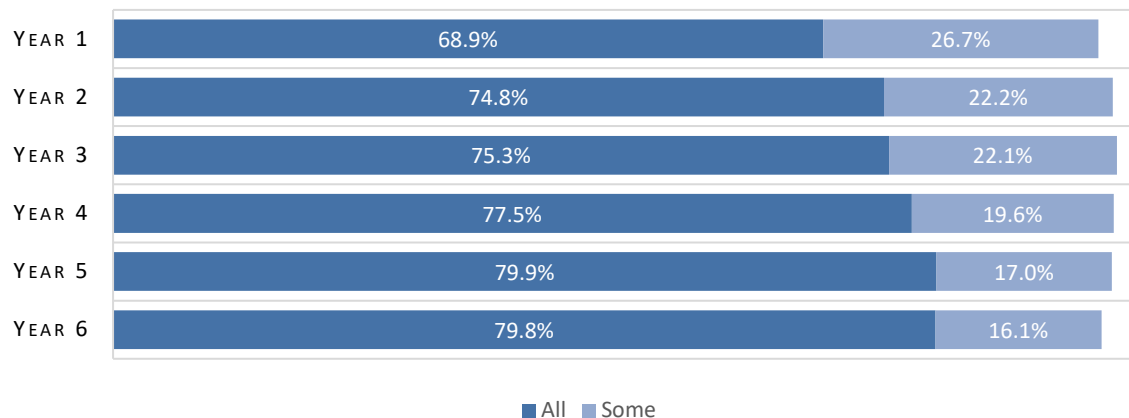
STANDARD 10: SMOKE-FREE CAMPUS

The smoke-free campus standard requires facilities to commit to providing a smoke-free environment for children and staff by following these four components:

1. Create and display a smoke-free policy for the facility.
2. Provide written guidelines about the smoke-free policy to families.
3. Provide written guidelines about the smoke-free policy to staff members.
4. Post the provided Smoke-Free Arizona Act (A.R.S. §36-601.01) sign at the entrance of the facility.

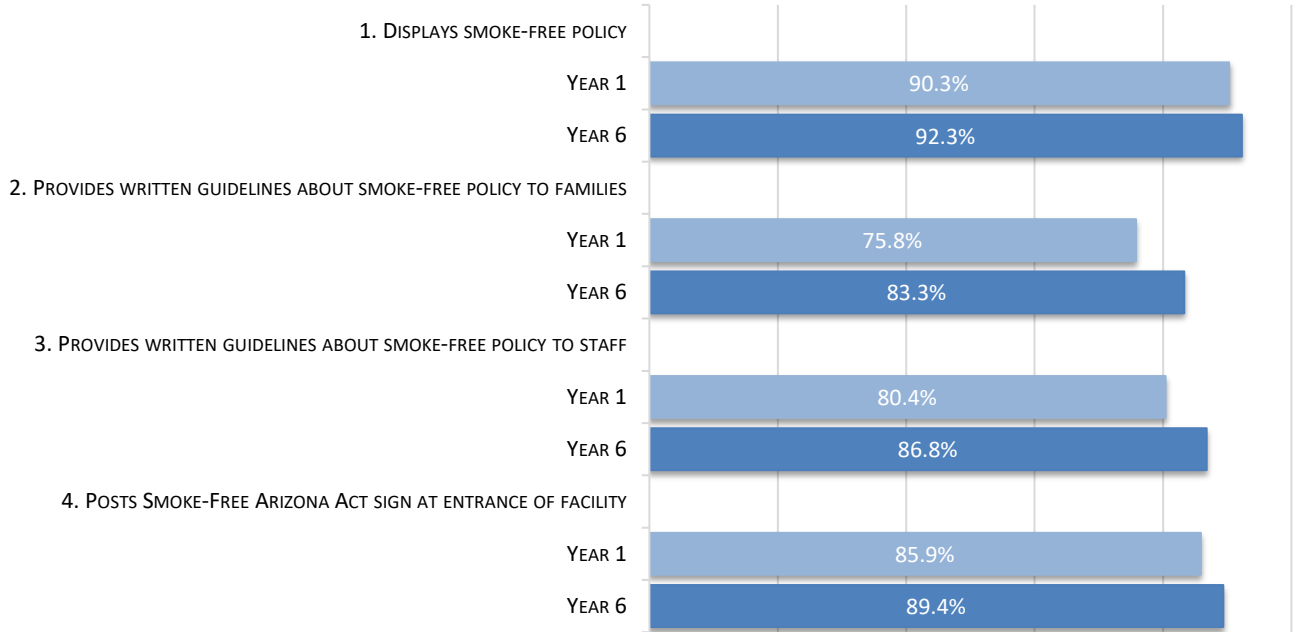
The percentage of facilities reporting full implementation of the smoke-free campus components increased from 69 percent in Year 1 to 80 percent in Year 6. This means that the facility indicated they are fully implementing each one of the four smoke-free campus components listed above. In Year 6, 16 percent (331 facilities) have room for improvement to increase their implementation of the smoke-free campus standard. See Figure 27.

Figure 27: Percentage of facilities reporting all or some implementation of all smoke-free campus components by year.



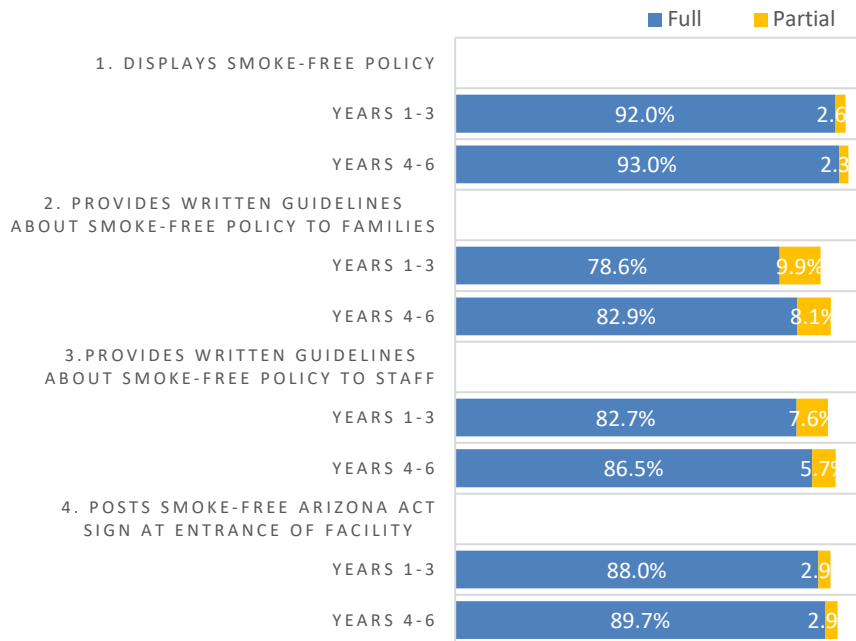
For the smoke-free campus standard, the percentage of facilities reporting full implementation of each component increased from Year 1 to Year 6. Providing written guidelines about a smoke-free policy to families had the greatest increase from 76 percent in Year 1 to 83 percent in Year 6; however, it remains the component with the lowest implementation level. Displaying a smoke-free policy had the highest level of full implementation in Year 6 at 92 percent. See Figure 28 for the percentage of facilities reporting full implementation by component with a comparison of Year 1 and Year 6.

Figure 28: Percentage of facilities reporting full implementation by component in Year 1 and Year 6



Full and partial implementation rates of all components were averaged separately for Years 1 to 3 and 4 to 6 and compared in Figure 29. Between Years 1 to 3 and 4 to 6, provides written guidelines about the smoke-free policy to families had the highest average increase in full implementation (by 4 percent) and provides written guidelines about the smoke-free policy to staff had the most decrease in partial implementation (by 2 percent). See the appendix for a detailed table and graph showing all six years.

Figure 29: Percentage of facilities reporting full implementation of components from Years 1-5



In the six-year reporting period, few comments have referenced the smoke-free campus standard. One facility mentioned losing their Smoke-Free Arizona Act sign and said they would repost it. However, Licensing staff reported that some facilities choose not to enroll in Empower due to this standard, particularly in group homes, because staff members wanted to be able to smoke at the site. In Year 6, there were no specific comments on this standard.

CONCLUSION

The Arizona Department of Health Services began evaluating the Empower Program using the current method in State Fiscal Year 2014. In 2016, the evaluation tool was updated as a result of feedback from surveyors in the field and from staff at Empower facilities with modifications to clarify components for better evaluation.

From the first year of implementation through the sixth year, there has been an increase in implementation levels of most standards. There has also been an increase in the level of implementation overall in each subcomponent of each standard. The standards that need the most improvement include breastfeeding, oral health, and CACFP.

APPENDIX: EMPOWER YEARS 1-6 IMPLEMENTATION REPORT

STANDARD 1: PHYSICAL ACTIVITY

Years 1-3	Years 4-6
Includes <u>teacher</u> -led activities	Includes <u>adult</u> -led activities
Includes <u>outdoor</u> physical activity	Includes <u>outdoor and indoor</u> physical activity
Includes moderate physical activity	Includes moderate physical activity (<u>for example: dancing, bouncing a ball</u>)
Includes vigorous physical activity	Includes vigorous physical activity (<u>for example: running, skipping</u>)
Limits sedentary activity to no more than 60 minutes at a time not including nap time	Limits sedentary <u>or non-moving</u> activity to no more than 60 minutes at a time not including nap time
Limits screen time to 3 hours or less per week	Limits screen time to 3 hours or less per week <u>and no screen time for children under age 2</u>
<u>Prohibits use of</u> physical activity as punishment	<u>Does not withhold or use</u> physical activity as punishment
Provides information on screen time to families	Provides information on <u>physical activity and screen time to families at least annually</u>

	ALL	SOME
PHYSICAL ACTIVITY		
YEAR 1	43.8%	55.9%
YEAR 2	51.4%	47.9%
YEAR 3	55.3%	44.3%
YEAR 4	69.1%	30.7%
YEAR 5	73.0%	27.0%
YEAR 6	74.4%	25.1%

	FULL	PARTIAL	NONE	DON'T KNOW
1. PROVIDES >= 60 MINS PHYSICAL ACTIVITY/DAY				
YEAR 1	88.7%	10.1%	0.3%	0.9%
YEAR 2	91.2%	7.8%	0.3%	0.7%
YEAR 3	91.7%	7.7%	0.2%	0.4%
YEAR 4	94.4%	5.3%	0.0%	0.2%
YEAR 5	95.5%	4.7%	0.1%	0.1%
YEAR 6	95.1%	4.3%	0.0%	0.5%
2. INCLUDES ADULT-LED ACTIVITIES				
YEAR 1	86.4%	12.5%	0.5%	0.7%
YEAR 2	89.4%	9.6%	0.2%	0.8%
YEAR 3	89.5%	9.8%	0.2%	0.5%
YEAR 4	90.0%	9.7%	0.1%	0.3%
YEAR 5	89.3%	10.2%	0.1%	0.4%
YEAR 6	91.6%	7.4%	0.4%	0.6%
3. INCLUDES FREE PLAY OPPORTUNITIES				
YEAR 1	92.3%	7.2%	0.1%	0.5%
YEAR 2	95.0%	4.2%	0.1%	0.6%
YEAR 3	94.6%	5.1%	0.1%	0.3%
YEAR 4	95.9%	3.8%	0.1%	0.2%
YEAR 5	96.1%	3.8%	0.0%	0.0%
YEAR 6	96.4%	3.1%	0.0%	0.5%
4. INCLUDES INDOOR/OUTDOOR PHYSICAL ACTIVITY				
YEAR 1	90.8%	7.9%	0.9%	0.3%
YEAR 2	93.6%	4.8%	0.9%	0.7%
YEAR 3	93.1%	6.1%	0.4%	0.4%
YEAR 4	95.6%	4.1%	0.1%	0.2%
YEAR 5	96.4%	3.4%	0.1%	0.0%
YEAR 6	96.9%	2.5%	0.0%	0.5%
5. INCLUDES MODERATE PHYSICAL ACTIVITY				
YEAR 1	87.1%	11.9%	0.3%	0.7%
YEAR 2	90.5%	8.2%	0.3%	1.0%
YEAR 3	91.3%	7.9%	0.1%	0.7%
YEAR 4	95.3%	4.5%	0.0%	0.2%
YEAR 5	96.5%	3.4%	0.1%	0.0%
YEAR 6	96.5%	2.9%	0.0%	0.5%
6. INCLUDES VIGOROUS PHYSICAL ACTIVITY				
YEAR 1	66.6%	27.3%	4.5%	1.6%
YEAR 2	73.0%	22.1%	2.9%	2.0%
YEAR 3	75.4%	20.3%	3.0%	1.3%
YEAR 4	90.4%	8.4%	0.8%	0.3%
YEAR 5	93.0%	6.5%	0.4%	0.1%
YEAR 6	93.3%	5.9%	0.3%	0.5%

	FULL	PARTIAL	NONE	DON'T KNOW
7. LIMITS SEDENTARY ACTIVITY TO <= 60 MINS				
YEAR 1	89.7%	6.1%	2.3%	2.0%
YEAR 2	90.5%	6.0%	2.1%	1.4%
YEAR 3	90.6%	6.4%	2.2%	0.8%
YEAR 4	93.6%	5.0%	1.0%	0.4%
YEAR 5	94.3%	3.8%	1.3%	0.4%
YEAR 6	94.7%	3.8%	0.8%	0.7%
8. LIMITS SCREEN TIME TO <=3 HOURS/WEEK AND 0 FOR CHILDREN <2				
YEAR 1	88.3%	4.1%	6.5%	1.0%
YEAR 2	90.2%	3.8%	4.5%	1.5%
YEAR 3	87.8%	4.9%	4.4%	2.9%
YEAR 4	92.5%	3.0%	3.9%	0.6%
YEAR 5	92.9%	2.3%	4.3%	0.5%
YEAR 6	93.1%	2.1%	4.0%	0.8%
9. DOES NOT USE/WITHHOLD PHYSICAL ACTIVITY AS PUNISHMENT				
YEAR 1	89.7%	1.5%	8.2%	0.6%
YEAR 2	91.3%	1.2%	6.7%	0.9%
YEAR 3	92.7%	2.2%	4.6%	0.5%
YEAR 4	95.2%	1.6%	2.9%	0.3%
YEAR 5	95.2%	1.1%	3.3%	0.3%
YEAR 6	95.7%	1.2%	2.6%	0.5%
10. PROVIDES INFORMATION ON SCREEN TIME TO FAMILIES				
YEAR 1	65.9%	16.2%	14.5%	3.3%
YEAR 2	71.5%	15.2%	10.2%	3.1%
YEAR 3	73.8%	14.2%	9.9%	2.2%
YEAR 4	84.4%	10.8%	3.3%	1.6%
YEAR 5	87.0%	9.8%	2.0%	1.2%
YEAR 6	87.8%	8.0%	2.5%	1.7%

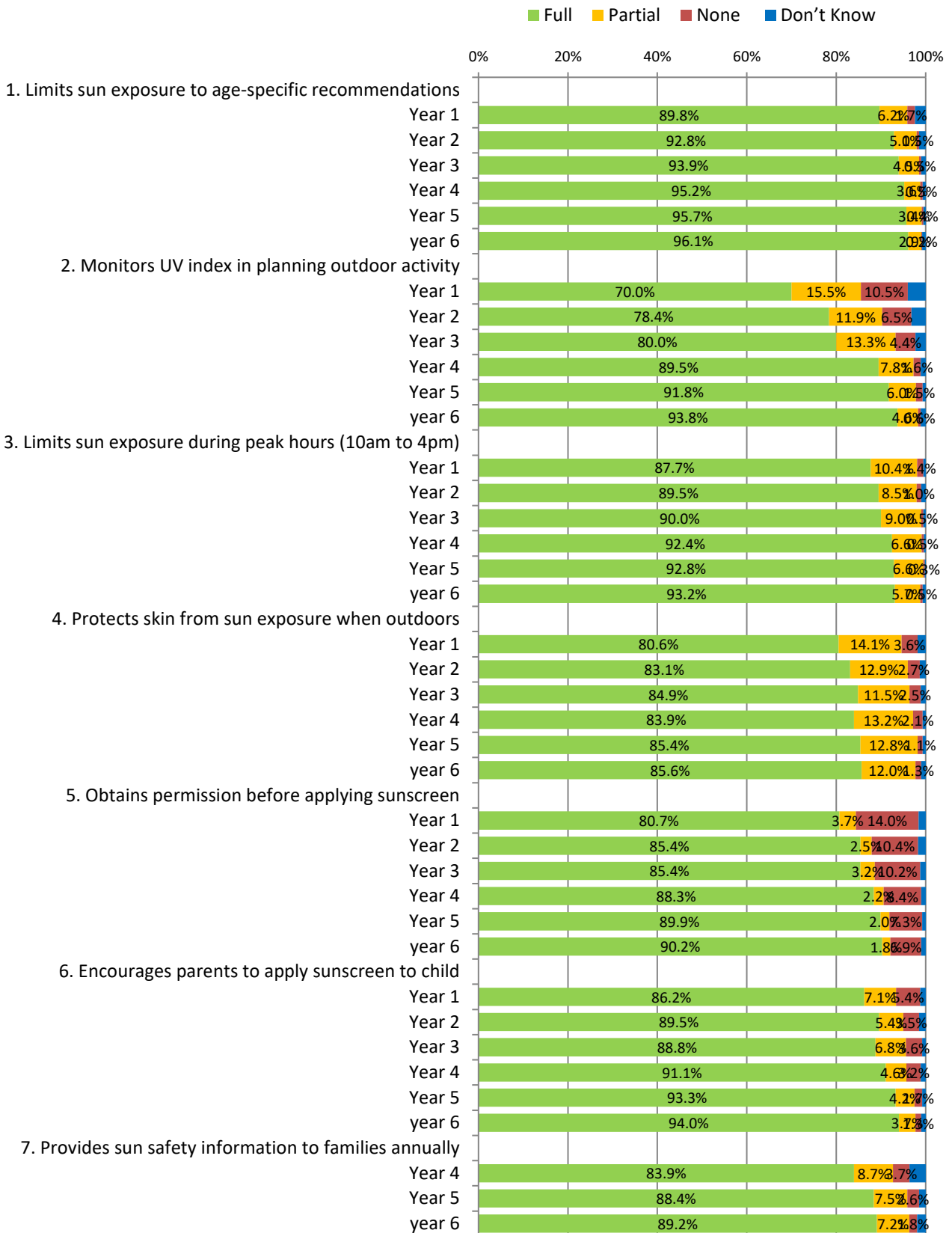


STANDARD 2: SUN SAFETY

Years 1-3	Years 4-6
Checks intensity of sun's rays (UV index) in planning outdoor activity	Monitors intensity of sun's rays (UV Index) in planning outdoor activity
Limits sun exposure <u>in</u> peak hours (10am to 4pm)	Limits sun exposure <u>during</u> peak hours (10am to 4pm)
Protects skin from sun exposure during outdoor activities.	Protects skin from sun exposure during outdoor activities (<u>for example: hat, sunglasses, protective clothing</u>)
Obtains permission from <u>families</u> before applying sunscreen	Obtains permission from <u>parent(s)</u> before applying sunscreen
Encourages <u>families</u> to apply sunscreen to children prior to arrival at <u>site</u>	Encourages <u>parent(s)</u> to apply sunscreen to children prior to arrival at <u>facility</u>
<i>Added component</i>	<u>Provides sun safety information to families at least annually</u>

SUN SAFETY	ALL	SOME		
YEAR 1	50.1%	49.1%		
YEAR 2	60.0%	39.0%		
YEAR 3	63.6%	35.8%		
YEAR 4	66.4%	33.2%		
YEAR 5	68.9%	30.9%		
YEAR 6	72.7%	26.6%		
	FULL	PARTIAL	NONE	DON'T KNOW
1. LIMITS SUN EXPOSURE TO AGE-SPECIFIC RECOMMENDATIONS				
YEAR 1	89.8%	6.2%	1.7%	2.4%
YEAR 2	92.8%	5.1%	0.5%	1.5%
YEAR 3	93.9%	4.5%	0.5%	1.0%
YEAR 4	95.2%	3.6%	0.5%	0.7%
YEAR 5	95.7%	3.4%	0.4%	0.5%
YEAR 6	96.1%	2.9%	0.2%	0.8%
2. MONITORS UV INDEX IN PLANNING OUTDOOR ACTIVITY				
YEAR 1	70.0%	15.5%	10.5%	4.0%
YEAR 2	78.4%	11.9%	6.5%	3.2%
YEAR 3	80.0%	13.3%	4.4%	2.3%
YEAR 4	89.5%	7.8%	1.6%	1.1%
YEAR 5	91.8%	6.0%	1.5%	0.7%
YEAR 6	93.8%	4.6%	0.6%	1.1%

	FULL	PARTIAL	NONE	DON'T KNOW
3. LIMITS SUN EXPOSURE DURING PEAK HOURS (10AM TO 4PM)				
YEAR 1	87.7%	10.4%	1.4%	0.5%
YEAR 2	89.5%	8.5%	1.0%	1.0%
YEAR 3	90.0%	9.0%	0.5%	0.5%
YEAR 4	92.4%	6.6%	0.5%	0.4%
YEAR 5	92.8%	6.6%	0.3%	0.2%
YEAR 6	93.2%	5.7%	0.5%	0.7%
4. PROTECTS SKIN FROM SUN EXPOSURE WHEN OUTDOORS				
YEAR 1	80.6%	14.1%	3.6%	1.8%
YEAR 2	83.1%	12.9%	2.7%	1.3%
YEAR 3	84.9%	11.5%	2.5%	1.1%
YEAR 4	83.9%	13.2%	2.1%	0.7%
YEAR 5	85.4%	12.8%	1.1%	0.7%
YEAR 6	85.6%	12.0%	1.3%	1.0%
5. OBTAINS PERMISSION BEFORE APPLYING SUNSCREEN				
YEAR 1	80.7%	3.7%	14.0%	1.6%
YEAR 2	85.4%	2.5%	10.4%	1.7%
YEAR 3	85.4%	3.2%	10.2%	1.2%
YEAR 4	88.3%	2.2%	8.4%	1.0%
YEAR 5	89.9%	2.0%	7.3%	0.8%
YEAR 6	90.2%	1.8%	6.9%	1.0%
6. ENCOURAGES PARENTS TO APPLY SUNSCREEN TO CHILD				
YEAR 1	86.2%	7.1%	5.4%	1.2%
YEAR 2	89.5%	5.4%	3.5%	1.5%
YEAR 3	88.8%	6.8%	3.6%	0.8%
YEAR 4	91.1%	4.6%	3.2%	1.1%
YEAR 5	93.3%	4.2%	1.7%	0.8%
YEAR 6	94.0%	3.7%	1.3%	1.0%
7. PROVIDES SUN SAFETY INFORMATION TO FAMILIES ANNUALLY				
YEAR 4	83.9%	8.7%	3.7%	3.6%
YEAR 5	88.4%	7.5%	2.6%	1.5%
YEAR 6	89.2%	7.2%	1.8%	1.9%

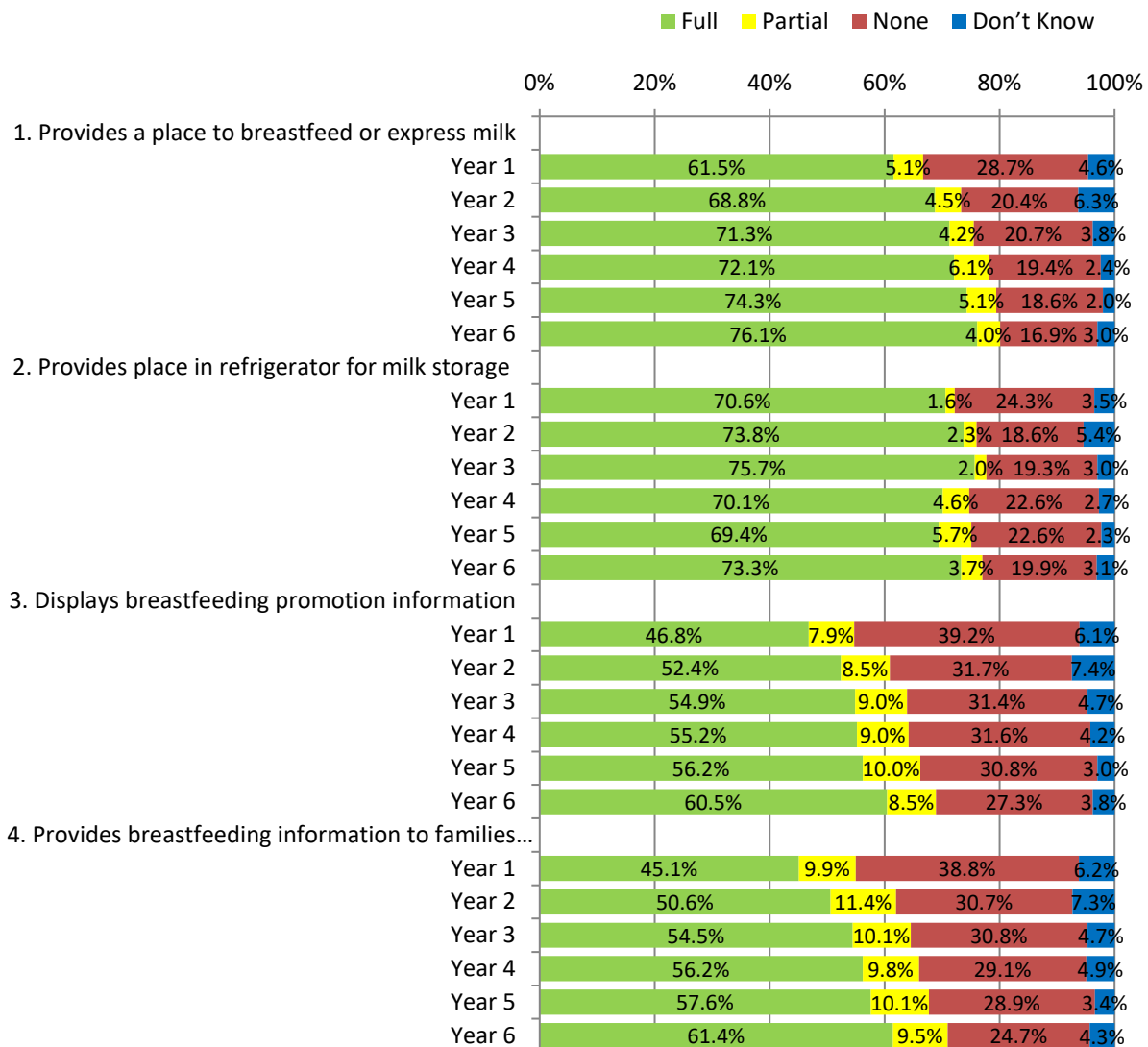


STANDARD 3: BREASTFEEDING

Table 3. Wording Changes to Breastfeeding Components	
Years 1-3	Years 4-6
Provides a refrigerator for milk storage	Provides a <u>designated space in refrigerator or freezer</u> for <u>breastmilk</u> storage
Displays breastfeeding <u>promotion information</u>	Displays breastfeeding <u>promotional materials such as posters</u>
Provides breastfeeding information to families	Provides breastfeeding information to families <u>at least annually</u>

BREASTFEEDING	ALL	SOME				
YEAR 1	39.9%	34.9%				
YEAR 2	45.2%	34.6%				
YEAR 3	49.1%	32.1%				
YEAR 4	48.7%	31.8%				
YEAR 5	50.7%	30.4%				
YEAR 6	54.1%	28.0%				
			FULL	PARTIAL	NONE	DON'T KNOW
1. PROVIDES A PLACE TO BREASTFEED OR EXPRESS MILK						
YEAR 1	61.5%	5.1%	28.7%	4.6%		
YEAR 2	68.8%	4.5%	20.4%	6.3%		
YEAR 3	71.3%	4.2%	20.7%	3.8%		
YEAR 4	72.1%	6.1%	19.4%	2.4%		
YEAR 5	74.3%	5.1%	18.6%	2.0%		
YEAR 6	76.1%	4.0%	16.9%	3.0%		
2. PROVIDES PLACE IN REFRIGERATOR FOR MILK STORAGE						
YEAR 1	70.6%	1.6%	24.3%	3.5%		
YEAR 2	73.8%	2.3%	18.6%	5.4%		
YEAR 3	75.7%	2.0%	19.3%	3.0%		
YEAR 4	70.1%	4.6%	22.6%	2.7%		
YEAR 5	69.4%	5.7%	22.6%	2.3%		
YEAR 6	73.3%	3.7%	19.9%	3.1%		
3. DISPLAYS BREASTFEEDING PROMOTION INFORMATION						
YEAR 1	46.8%	7.9%	39.2%	6.1%		
YEAR 2	52.4%	8.5%	31.7%	7.4%		
YEAR 3	54.9%	9.0%	31.4%	4.7%		
YEAR 4	55.2%	9.0%	31.6%	4.2%		
YEAR 5	56.2%	10.0%	30.8%	3.0%		
YEAR 6	60.5%	8.5%	27.3%	3.8%		

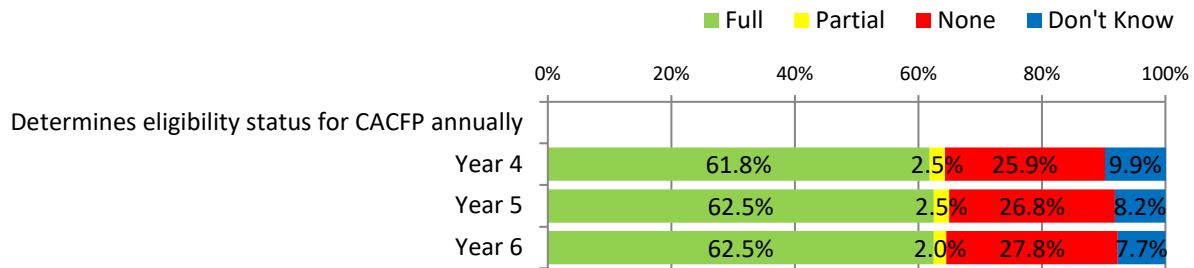
	FULL	PARTIAL	NONE	DON'T KNOW
4. PROVIDES BREASTFEEDING INFORMATION TO FAMILIES ANNUALLY				
YEAR 1	45.1%	9.9%	38.8%	6.2%
YEAR 2	50.6%	11.4%	30.7%	7.3%
YEAR 3	54.5%	10.1%	30.8%	4.7%
YEAR 4	56.2%	9.8%	29.1%	4.9%
YEAR 5	57.6%	10.1%	28.9%	3.4%
YEAR 6	61.4%	9.5%	24.7%	4.3%



STANDARD 4: CHILD AND ADULT CARE FOOD PROGRAM

CHILD AND ADULT CARE FOOD PROGRAM	FULL	PARTIAL
YEAR 4	61.8%	2.5%
YEAR 5	62.5%	2.5%
YEAR 6	62.5%	2.0%

	FULL	PARTIAL	NONE	DON'T KNOW
DETERMINES ELIGIBILITY STATUS FOR CACFP ANNUALLY				
YEAR 4	61.8%	2.5%	25.9%	9.9%
YEAR 5	62.5%	2.5%	26.8%	8.2%
YEAR 6	62.5%	2.0%	27.8%	7.7%



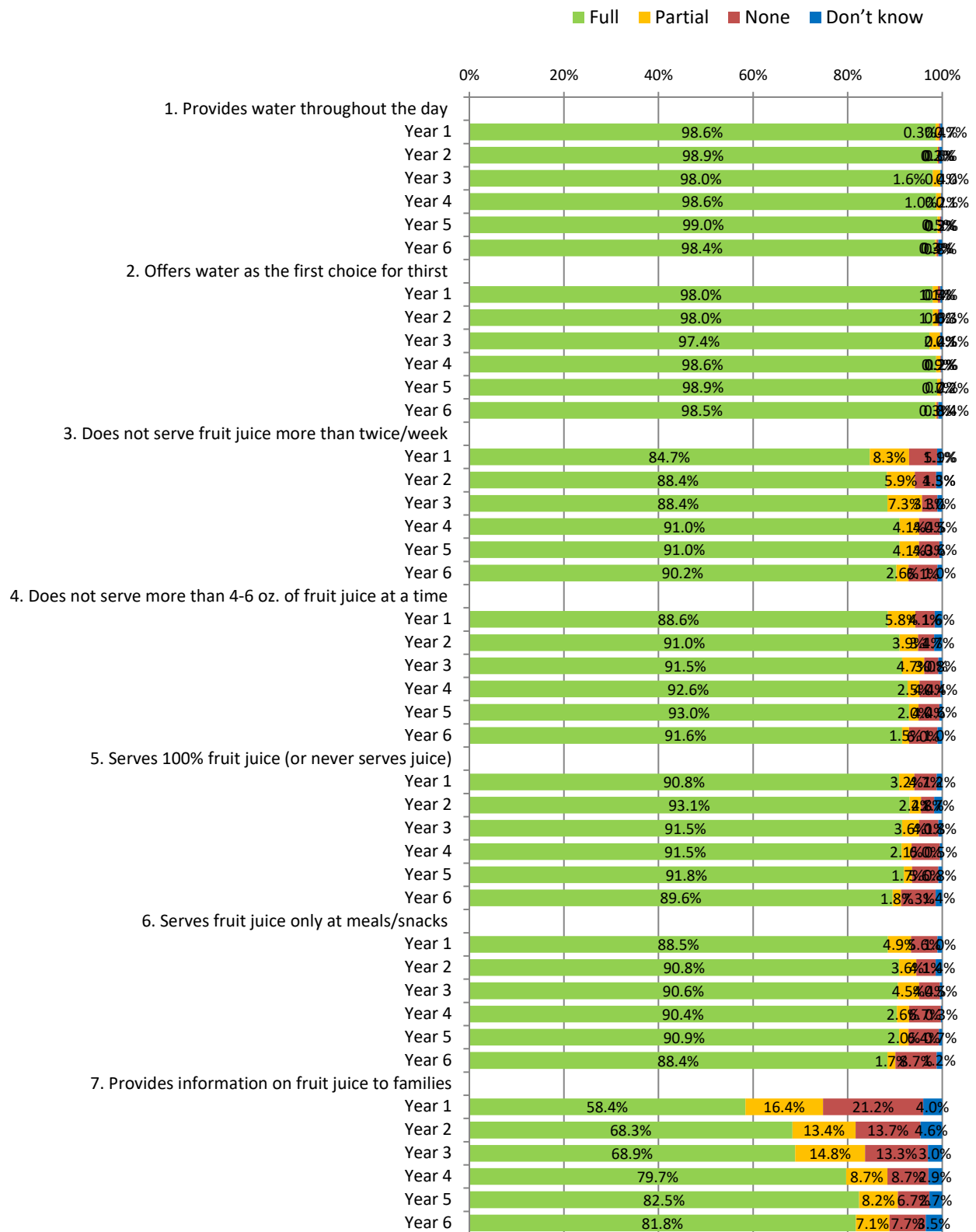
STANDARD 5: FRUIT JUICE

Years 1-3	Years 4-6
Offers water throughout the day	Offers water throughout the day <u>both inside and outside</u>
<u>Prohibits serving</u> fruit juice more than twice/week for <u>1 year</u> and older <u>(or never serves fruit juice)</u>	<u>Does not serve</u> fruit juice more than twice per week for children <u>1 year</u> and older
<u>Prohibits</u> serving more than 4-6 ounces of fruit juice at one time <u>(or never serves fruit juice)</u>	Limits serving more than 4-6 ounces of fruit juice at one time
Serves juice that is only <u>100% fruit juice</u> with no added sugar <u>(or never serves fruit juice)</u>	Serves <u>only 100% fruit juice</u> with no added sugar
Serves fruit juice only at meal or snack times <u>(or never serves fruit juice)</u>	Serves fruit juice only at meal or snack times
Provides information on fruit juice to families	Provides information <u>about limiting</u> fruit juice to families <u>at least annually</u>

FRUIT JUICE	ALL	SOME
YEAR 1	50.4%	49.2%
YEAR 2	60.7%	38.6%
YEAR 3	62.7%	37.0%
YEAR 4	72.3%	27.3%
YEAR 5	75.1%	24.5%
YEAR 6	74.5%	24.3%

	FULL	PARTIAL	NONE	DON'T KNOW
1. PROVIDES WATER THROUGHOUT THE DAY				
YEAR 1	98.6%	0.7%	0.3%	0.4%
YEAR 2	98.9%	0.2%	0.3%	0.6%
YEAR 3	98.0%	1.6%	0.0%	0.4%
YEAR 4	98.6%	1.0%	0.1%	0.2%
YEAR 5	99.0%	0.5%	0.3%	0.2%
YEAR 6	98.4%	0.3%	0.4%	0.8%
2. OFFERS WATER AS THE FIRST CHOICE FOR THIRST				
YEAR 1	98.0%	1.1%	0.5%	0.4%
YEAR 2	98.0%	1.1%	0.3%	0.6%
YEAR 3	97.4%	2.2%	0.1%	0.4%
YEAR 4	98.6%	0.9%	0.2%	0.2%
YEAR 5	98.9%	0.7%	0.2%	0.2%
YEAR 6	98.5%	0.3%	0.4%	0.8%

	FULL	PARTIAL	NONE	DON'T KNOW
3. DOES NOT SERVE FRUIT JUICE MORE THAN TWICE/WEEK				
YEAR 1	84.7%	8.3%	5.9%	1.1%
YEAR 2	88.4%	5.9%	4.5%	1.3%
YEAR 3	88.4%	7.3%	3.3%	1.0%
YEAR 4	91.0%	4.1%	4.4%	0.5%
YEAR 5	91.0%	4.1%	4.3%	0.6%
YEAR 6	90.2%	2.6%	6.1%	1.0%
4. DOES NOT SERVE MORE THAN 4-6 OZ. OF FRUIT JUICE AT A TIME				
YEAR 1	88.6%	5.8%	4.1%	1.6%
YEAR 2	91.0%	3.9%	3.4%	1.7%
YEAR 3	91.5%	4.7%	3.0%	0.8%
YEAR 4	92.6%	2.5%	4.4%	0.4%
YEAR 5	93.0%	2.0%	4.4%	0.6%
YEAR 6	91.6%	1.5%	6.0%	1.0%
5. SERVES 100% FRUIT JUICE (OR NEVER SERVES JUICE)				
YEAR 1	90.8%	3.2%	4.7%	1.2%
YEAR 2	93.1%	2.4%	2.8%	1.7%
YEAR 3	91.5%	3.6%	4.1%	0.8%
YEAR 4	91.5%	2.1%	6.0%	0.5%
YEAR 5	91.8%	1.7%	5.6%	0.8%
YEAR 6	89.6%	1.8%	7.3%	1.4%
6. SERVES FRUIT JUICE ONLY AT MEALS/SNACKS				
YEAR 1	88.5%	4.9%	5.6%	1.0%
YEAR 2	90.8%	3.6%	4.1%	1.4%
YEAR 3	90.6%	4.5%	4.4%	0.5%
YEAR 4	90.4%	2.6%	6.7%	0.3%
YEAR 5	90.9%	2.0%	6.4%	0.7%
YEAR 6	88.4%	1.7%	8.7%	1.2%
7. PROVIDES INFORMATION ON FRUIT JUICE TO FAMILIES				
YEAR 1	58.4%	16.4%	21.2%	4.0%
YEAR 2	68.3%	13.4%	13.7%	4.6%
YEAR 3	68.9%	14.8%	13.3%	3.0%
YEAR 4	79.7%	8.7%	8.7%	2.9%
YEAR 5	82.5%	8.2%	6.7%	2.7%
YEAR 6	81.8%	7.1%	7.7%	3.5%

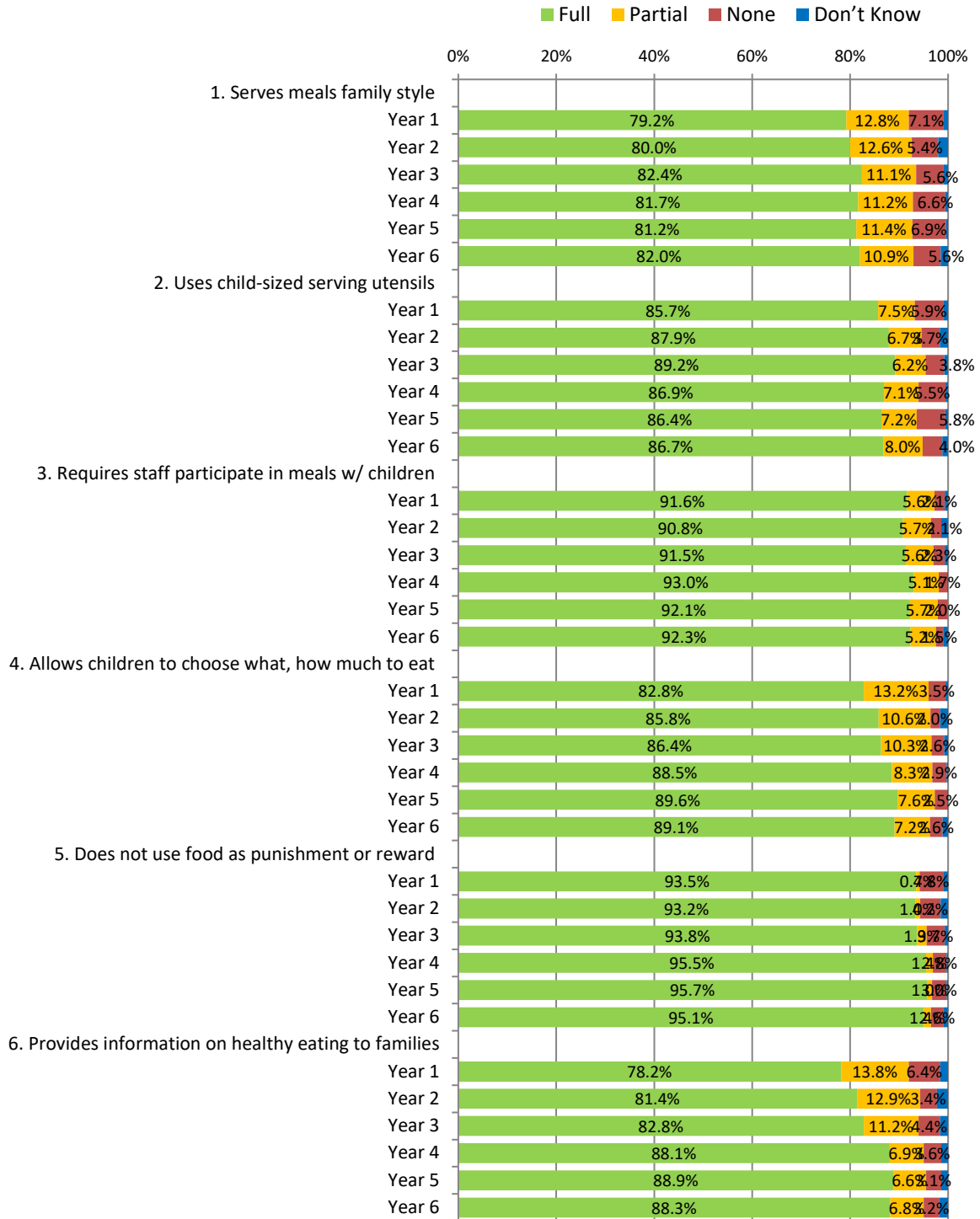


STANDARD 6: FAMILY-STYLE MEALS

Years 1-3	Years 4-6
Uses child-friendly serving utensils	Uses child- <u>sized</u> serving utensils
Requires staff <u>participation</u> in mealtime with children	Requires staff <u>to sit, participate, and interact with children during mealtime</u>
<u>Prohibits using</u> food as a punishment or reward	<u>Does not use</u> food as a punishment or reward
Provides information <u>on</u> healthy eating to families	Provides information <u>about</u> healthy eating to families <u>at least annually</u>

FAMILY-STYLE MEALS	ALL	SOME				
YEAR 1	57.4%	41.4%				
YEAR 2	62.6%	35.3%				
YEAR 3	68.0%	30.1%				
YEAR 4	69.8%	29.0%				
YEAR 5	70.7%	27.9%				
YEAR 6	72.1%	26.0%				
			FULL	PARTIAL	NONE	DON'T KNOW
1. SERVES MEALS FAMILY STYLE						
YEAR 1	79.2%	12.8%	7.1%	0.9%		
YEAR 2	80.0%	12.6%	5.4%	2.0%		
YEAR 3	82.4%	11.1%	5.6%	0.9%		
YEAR 4	81.7%	11.2%	6.6%	0.6%		
YEAR 5	81.2%	11.4%	6.9%	0.4%		
YEAR 6	82.0%	10.9%	5.6%	1.5%		
2. USES CHILD-SIZED SERVING UTENSILS						
YEAR 1	85.7%	7.5%	5.9%	0.9%		
YEAR 2	87.9%	6.7%	3.7%	1.7%		
YEAR 3	89.2%	6.2%	3.8%	0.8%		
YEAR 4	86.9%	7.1%	5.5%	0.5%		
YEAR 5	86.4%	7.2%	5.8%	0.6%		
YEAR 6	86.7%	8.0%	4.0%	1.2%		
3. REQUIRES STAFF PARTICIPATE IN MEALS W/ CHILDREN						
YEAR 1	91.6%	5.6%	2.1%	0.7%		
YEAR 2	90.8%	5.7%	2.1%	1.4%		
YEAR 3	91.5%	5.6%	2.3%	0.7%		
YEAR 4	93.0%	5.1%	1.7%	0.2%		
YEAR 5	92.1%	5.7%	2.0%	0.1%		
YEAR 6	92.3%	5.2%	1.5%	1.0%		

	FULL	PARTIAL	NONE	DON'T KNOW
4. ALLOWS CHILDREN TO CHOOSE WHAT, HOW MUCH TO EAT				
YEAR 1	82.8%	13.2%	3.5%	0.5%
YEAR 2	85.8%	10.6%	2.0%	1.6%
YEAR 3	86.4%	10.3%	2.6%	0.8%
YEAR 4	88.5%	8.3%	2.9%	0.3%
YEAR 5	89.6%	7.6%	2.5%	0.2%
YEAR 6	89.1%	7.2%	2.6%	1.1%
5. DOES NOT USE FOOD AS PUNISHMENT OR REWARD				
YEAR 1	93.5%	0.7%	4.8%	1.0%
YEAR 2	93.2%	1.0%	4.2%	1.5%
YEAR 3	93.8%	1.9%	3.7%	0.7%
YEAR 4	95.5%	1.4%	2.8%	0.3%
YEAR 5	95.7%	1.0%	3.0%	0.3%
YEAR 6	95.1%	1.4%	2.6%	0.9%
6. PROVIDES INFORMATION ON HEALTHY EATING TO FAMILIES				
YEAR 1	78.2%	13.8%	6.4%	1.6%
YEAR 2	81.4%	12.9%	3.4%	2.3%
YEAR 3	82.8%	11.2%	4.4%	1.6%
YEAR 4	88.1%	6.9%	3.6%	1.4%
YEAR 5	88.9%	6.6%	3.1%	1.4%
YEAR 6	88.3%	6.8%	3.2%	1.8%



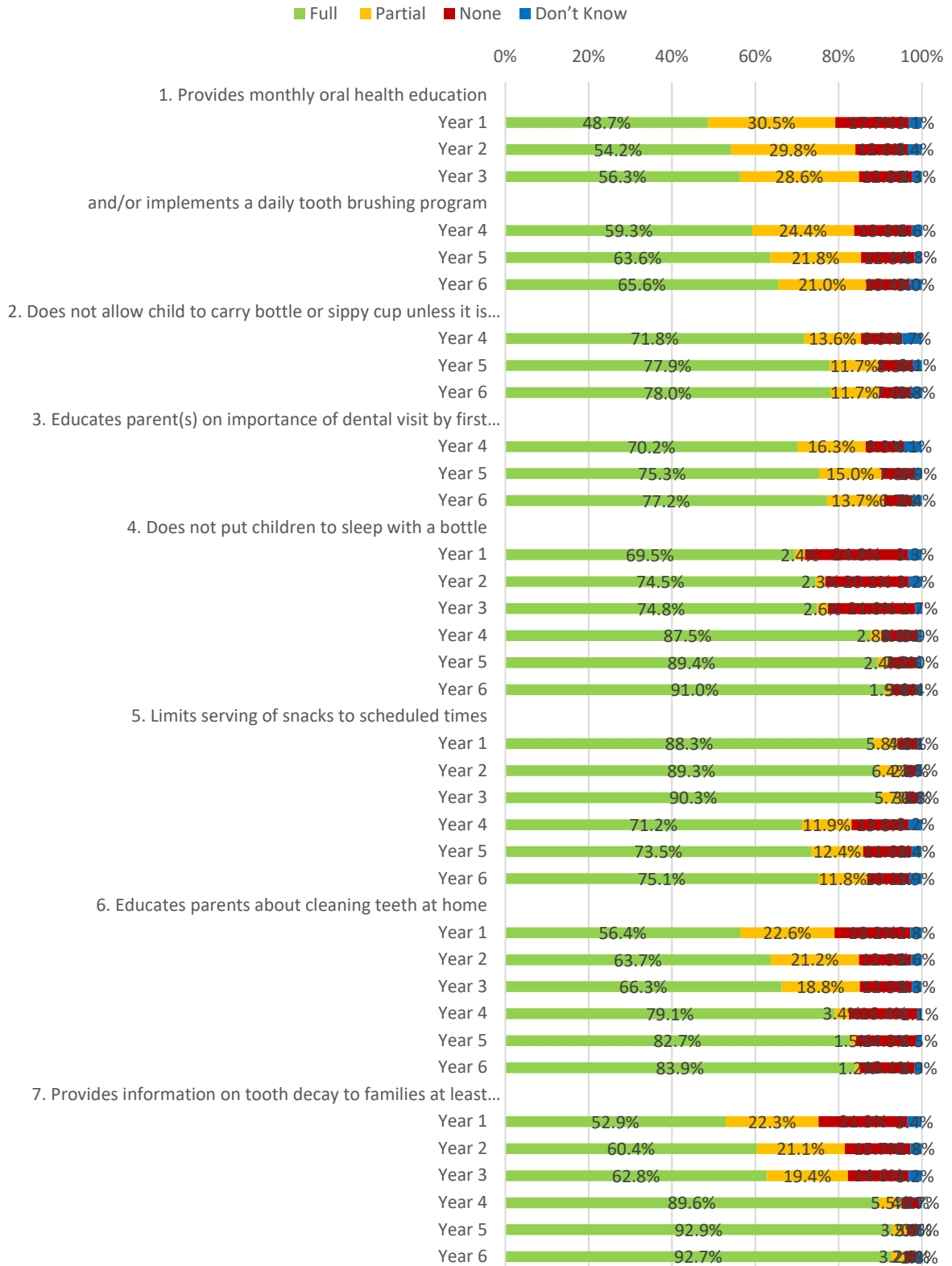
STANDARD 7: ORAL HEALTH

Years 1-3	Years 4-6
Provides monthly oral health education	Provides monthly oral health education <u>and/or implements a daily tooth brushing program</u>
<u>Prohibits putting</u> children to sleep with a bottle	<u>Does not put</u> children to sleep with a bottle
Limits serving of snacks to scheduled times	Limits serving of <u>meals and</u> snacks to scheduled times
Informs parents about cleaning teeth at home	<u>Educates</u> parents about cleaning teeth <u>and oral hygiene</u> at home
Includes a tooth brushing program	<i>Discontinued</i>
Prohibits sharing utensils with a child	<i>Discontinued</i>
Prohibits licking a pacifier to 'clean' it	<i>Discontinued</i>
Educates parents on oral hygiene	<i>Discontinued</i>
<i>Added component</i>	Educates parents on the importance of a dental visit by their child's first birthday
<i>Added component</i>	Does not allow children to carry a bottle or sippy cup during the day unless it is water

ORAL HEALTH	ALL	SOME
YEAR 1	28.5%	69.0%
YEAR 2	33.1%	65.1%
YEAR 3	35.1%	62.5%
YEAR 4	45.6%	51.8%
YEAR 5	54.3%	43.1%
YEAR 6	56.5%	40.6%

	FULL	PARTIAL	NONE	DON'T KNOW
1. PROVIDES MONTHLY ORAL HEALTH EDUCATION				
YEAR 1	48.7%	30.5%	17.7%	3.1%
YEAR 2	54.2%	29.8%	12.6%	3.4%
YEAR 3	56.3%	28.6%	12.8%	2.3%
AND/OR IMPLEMENTS A DAILY TOOTH BRUSHING PROGRAM				
YEAR 4	59.3%	24.4%	13.8%	2.6%
YEAR 5	63.6%	21.8%	12.8%	1.8%
YEAR 6	65.6%	21.0%	10.4%	3.0%

	FULL	PARTIAL	NONE	DON'T KNOW
2. DOES NOT ALLOW CHILD TO CARRY BOTTLE OR SIPPY CUP UNLESS IT IS WATER				
YEAR 4	71.8%	13.6%	9.9%	4.7%
YEAR 5	77.9%	11.7%	8.3%	2.1%
YEAR 6	78.0%	11.7%	7.6%	2.8%
3. EDUCATES PARENT(S) ON IMPORTANCE OF DENTAL VISIT BY FIRST BIRTHDAY				
YEAR 4	70.2%	16.3%	9.3%	4.1%
YEAR 5	75.3%	15.0%	7.8%	1.9%
YEAR 6	77.2%	13.7%	6.7%	2.4%
4. DOES NOT PUT CHILDREN TO SLEEP WITH A BOTTLE				
YEAR 1	69.5%	2.4%	24.8%	3.3%
YEAR 2	74.5%	2.3%	20.1%	3.2%
YEAR 3	74.8%	2.6%	21.0%	1.7%
YEAR 4	87.5%	2.8%	8.8%	0.9%
YEAR 5	89.4%	2.4%	7.2%	1.0%
YEAR 6	91.0%	1.9%	5.8%	1.4%
5. LIMITS SERVING OF SNACKS TO SCHEDULED TIMES				
YEAR 1	88.3%	5.8%	4.8%	1.1%
YEAR 2	89.3%	6.4%	2.8%	1.5%
YEAR 3	90.3%	5.7%	3.2%	0.8%
YEAR 4	71.2%	11.9%	13.8%	3.2%
YEAR 5	73.5%	12.4%	11.6%	2.4%
YEAR 6	75.1%	11.8%	10.2%	2.9%
6. EDUCATES PARENTS ABOUT CLEANING TEETH AT HOME				
YEAR 1	56.4%	22.6%	18.2%	2.8%
YEAR 2	63.7%	21.2%	12.5%	2.6%
YEAR 3	66.3%	18.8%	12.5%	2.3%
YEAR 4	79.1%	3.4%	16.4%	1.1%
YEAR 5	82.7%	1.5%	14.3%	1.5%
YEAR 6	83.9%	1.2%	13.1%	1.9%
7. PROVIDES INFORMATION ON TOOTH DECAY TO FAMILIES AT LEAST ANNUALLY				
YEAR 1	52.9%	22.3%	21.3%	3.4%
YEAR 2	60.4%	21.1%	15.7%	2.8%
YEAR 3	62.8%	19.4%	14.6%	3.2%
YEAR 4	89.6%	5.5%	4.2%	0.7%
YEAR 5	92.9%	3.5%	2.9%	0.6%
YEAR 6	92.7%	3.2%	2.8%	1.3%

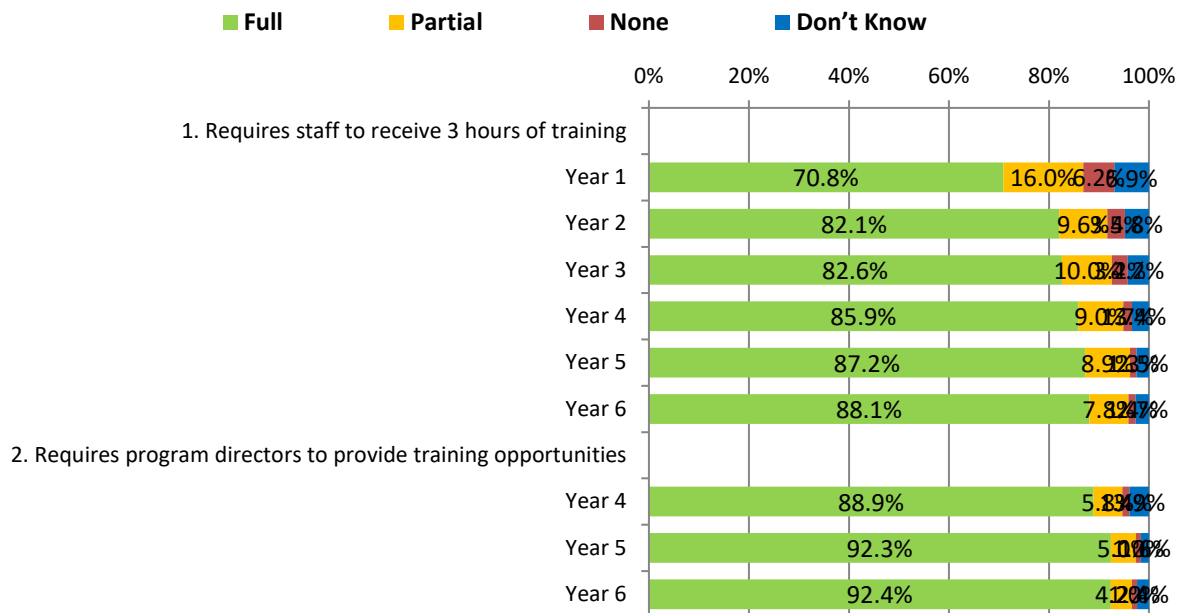


STANDARD 8: STAFF TRAINING

Table 7. Wording Changes to Staff Training Components	
Years 1-3	Years 4-6
<i>Added component</i>	Program directors required to provide training opportunities to staff members

STAFF TRAINING	ALL	SOME
YEAR 4	76.0%	21.3%
YEAR 5	86.5%	11.2%
YEAR 6	87.7%	9.3%

	FULL	PARTIAL	NONE	DON'T KNOW
1. REQUIRES STAFF TO RECEIVE 3 HOURS OF TRAINING				
YEAR 1	70.8%	16.0%	6.2%	6.9%
YEAR 2	82.1%	9.6%	3.5%	4.8%
YEAR 3	82.6%	10.0%	3.2%	4.2%
YEAR 4	85.9%	9.0%	1.7%	3.4%
YEAR 5	87.2%	8.9%	1.3%	2.5%
YEAR 6	88.1%	7.8%	1.4%	2.7%
2. REQUIRES PROGRAM DIRECTORS TO PROVIDE TRAINING OPPORTUNITIES				
YEAR 4	88.9%	5.8%	1.4%	3.9%
YEAR 5	92.3%	5.0%	1.0%	1.6%
YEAR 6	92.4%	4.2%	1.0%	2.4%

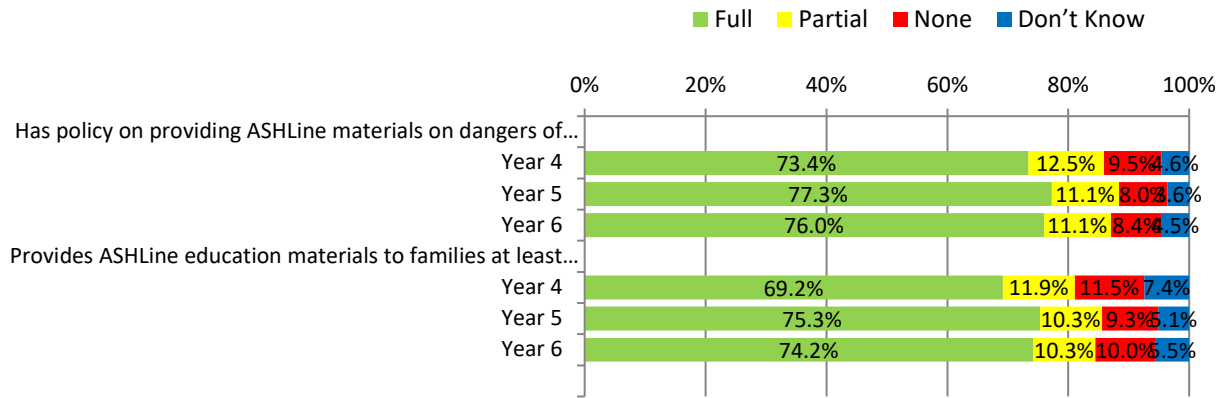


STANDARD 9: ASHLINE

Table 8. Wording Changes to ASHLine Components	
Years 1-3	Years 4-6
Does facility have a policy on providing ASHLine materials on dangers of second- and third-hand smoke?	Provides information on the dangers of second- and third-hand smoke to families
Does facility participate in ASHLine Referral Training pilot?	Discontinued
If yes, was any staff trained by ASHLine Referral Coordinator?	Discontinued
Added component	Provides ASHLine education materials to families at least annually

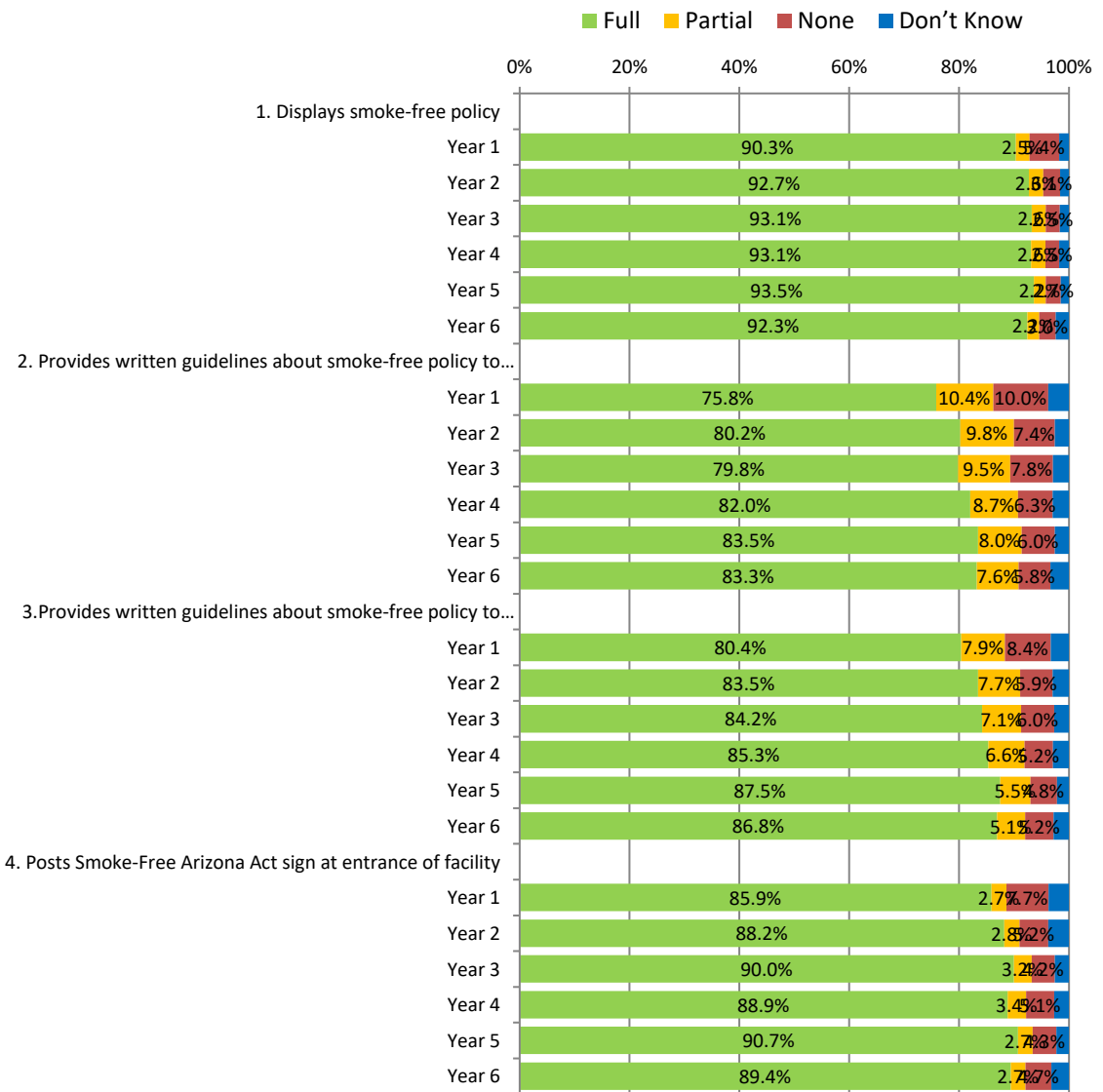
ASHLINE	ALL	SOME
YEAR 4	67.1%	24.4%
YEAR 5	72.9%	19.8%
YEAR 6	72.6%	27.4%

	FULL	PARTIAL	NONE	DON'T KNOW
1. HAS POLICY ON PROVIDING ASHLINE MATERIALS ON DANGERS OF SECOND- AND THIRD-HAND SMOKE				
YEAR 4	73.4%	12.5%	9.5%	4.6%
YEAR 5	77.3%	11.1%	8.0%	3.6%
YEAR 6	76.0%	11.1%	8.4%	4.5%
2. PROVIDES ASHLINE EDUCATION MATERIALS TO FAMILIES AT LEAST ANNUALLY				
YEAR 4	69.2%	11.9%	11.5%	7.4%
YEAR 5	75.3%	10.3%	9.3%	5.1%
YEAR 6	74.2%	10.3%	10.0%	5.5%



STANDARD 10: SMOKE-FREE CAMPUS

SMOKE-FREE CAMPUS	ALL	SOME		
YEAR 1	68.9%	26.7%		
YEAR 2	74.8%	22.2%		
YEAR 3	75.3%	22.2%		
YEAR 4	77.4%	19.6%		
YEAR 5	79.9%	16.8%		
YEAR 6	79.8%	16.1%		
	FULL	PARTIAL	NONE	DON'T KNOW
1. DISPLAYS SMOKE-FREE POLICY				
YEAR 1	90.3%	2.5%	5.4%	1.8%
YEAR 2	92.7%	2.6%	3.1%	1.6%
YEAR 3	93.1%	2.6%	2.5%	1.7%
YEAR 4	93.1%	2.6%	2.5%	1.8%
YEAR 5	93.5%	2.2%	2.7%	1.5%
YEAR 6	92.3%	2.2%	3.0%	2.4%
2. PROVIDES WRITTEN GUIDELINES ABOUT SMOKE-FREE POLICY TO FAMILIES				
YEAR 1	75.8%	10.4%	10.0%	3.8%
YEAR 2	80.2%	9.8%	7.4%	2.6%
YEAR 3	79.8%	9.5%	7.8%	2.9%
YEAR 4	82.0%	8.7%	6.3%	3.0%
YEAR 5	83.5%	8.0%	6.0%	2.6%
YEAR 6	83.3%	7.6%	5.8%	3.4%
3. PROVIDES WRITTEN GUIDELINES ABOUT SMOKE-FREE POLICY TO STAFF				
YEAR 1	80.4%	7.9%	8.4%	3.3%
YEAR 2	83.5%	7.7%	5.9%	3.0%
YEAR 3	84.2%	7.1%	6.0%	2.7%
YEAR 4	85.3%	6.6%	5.2%	2.9%
YEAR 5	87.5%	5.5%	4.8%	2.2%
YEAR 6	86.8%	5.1%	5.2%	2.8%
4. POSTS SMOKE-FREE ARIZONA ACT SIGN AT ENTRANCE OF FACILITY				
YEAR 1	85.9%	2.7%	7.7%	3.7%
YEAR 2	88.2%	2.8%	5.2%	3.8%
YEAR 3	90.0%	3.2%	4.2%	2.6%
YEAR 4	88.9%	3.4%	5.1%	2.7%
YEAR 5	90.7%	2.7%	4.3%	2.3%
YEAR 6	89.4%	2.7%	4.7%	3.2%



FULL AND PARTIAL IMPLEMENTATION OF ALL STANDARDS

