

A Quality Rating and Improvement System for Connecticut

Recommendations from the QRIS Workgroup of the Early Childhood Education Cabinet.

Workgroup Membership

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References & Acknowledgements

- Office of Child Care Training & Technical Assistance Team (Barbara Wall, Shireen Riley)
- Connecticut Race to the Top-Early Learning Challenge, 2011 Application
- CT QRIS Draft Recommendations, 2008
- A Count for Quality: Child Care Center Directors on Rating and Improvement Systems, NWLC & CLASP.
- Quality in Early Childhood Care and Education Settings: A Compendium of Measures, Second Edition. Child Trends.

GOAL

Connecticut's Quality Rating and Improvement System

- Gives families the information they need to make informed choices and
 - Provides programs with the tools needed to improve quality,
- so that ***all*** children have the opportunity to thrive.

GUIDING PRINCIPLES

With regard to ***Children and Families***, CT's Quality Rating and Improvement System will

- Provide families with tools and resources to make informed decisions when choosing early care and education programs;
- Assist families to choose high quality programs.

Guiding Principles

With regard to ***Early Care and Education Programs and Settings***, CT's Quality Rating and Improvement System will

- Rate programs using comparable standards that demonstrate high quality across all settings.
- Reflect the diversity of settings while also holding programs accountable to the process and standards of the system.

Guiding Principles

With regard to ***systems***, CT's Quality Rating and Improvement System will

- Simplify and reduce duplication in reporting, and respond efficiently to the provider community.
- Provide incentives in many forms, not just financial.
- Separate technical assistance/support from monitoring/enforcement
- Define and promote quality using clearly articulated standards, criteria and indicators. Coordinate all systems to avoid redundancy in performance expectations and reporting requirements.
- Make use of local community organizations to develop relationships for quality.
- Establish and maintain a system that can be sustained over time.

The Process

The recommendations of the workgroup were developed over a period of four meetings: two half day and two full day meetings, with Tropical Storm Sandy in between.

At the outset the group agreed to a decision making process that required a quorum of 2/3 of the membership with the majority vote carrying.

Recommendations

Establish 5 QRIS Standards



Examples of the complexity of standards, criteria and indicators are available from other states.

Recommendations

- Develop the criteria and indicators that define CT's five standards of the QRIS.
 - Contract a consultant to direct and facilitate this process.
 - Represent the criteria and indicators progressively within the tiers.
 - Be inclusive of different settings, populations, abilities, socio-economic status, and cultures.
 - Family engagement should be explicitly embedded as a priority in the standards, criteria and indicators.
- Utilize a block system for rating and improvement.
 - The criteria and indicators within each block must be achieved prior to ascending to the next level.
 - Participants at each level are eligible to receive targeted training and technical assistance to assist in on-going quality improvement.

Recommendations

- Include licensed and license-exempt, center and family-based providers as outlined in the Levels and Phases to
 - incorporate all of the settings where children are served, and
 - make clear to families and other stakeholders that program quality is important for all children in all settings.

Recommendations

- Conduct an assessment of the ability of license-exempt programs to achieve regulatory compliance to clarify perceived barriers and build understanding of licensing regulations;
 - Establish licensing as a baseline standard of program quality which provides external, reliable statewide monitoring of programs;
 - Communicate to families that a threshold level of quality exists to define basic health and safety.
- Study the feasibility of the current child day care licensing system to act as mechanism for communication to all licensed programs regarding the QRIS.

Recommendations

- Establish separate entities to
 1. monitor (assess and rate) and
 2. provide technical assistance (plan and implement program improvement) in the QRIS.
 - As part of the technical assistance provided, consideration should be given to how the role of consultants can be strengthened to support the monitoring process.
 - Consultant reporting should be made directly to programs and linked to the reporting mechanisms within the QRIS, to allow for documentation of findings and building of quality improvement plans.
 - Include an approval process for technical assistance providers (consultants, trainers, coaches and organizations).
 - The QRIS will bear the cost of monitoring and compliance.

Recommendations

- Determine the threshold for classifying “non-publicly funded” center and family child care providers that enroll children receiving Care4Kids funding.
 - Specifically, how many children receiving Care4Kids could a center or home enroll before they are considered “publicly-funded.” Is it a number or a percentage of their enrollment?
 - Create a formula for financial incentives by levels, aligned with the cost of implementing standards, starting at Level One.
- Review and update reimbursements of all public funding streams to increase base rate of subsidy to 75% of the current market rate, as defined by the Child Care Development Fund (CCDF).

Recommendations

- To effectively integrate the child care subsidy system into the QRIS, a subgroup with acute knowledge of the federal and state mandates related to these subsidies, must be established, taking into account pending collective bargaining agreements.

Recommendations

- Establish a process for review and approval of accreditation bodies, with coordination of recognized accreditation systems by Commissioners statewide.
 - Acknowledge and incorporate Head Start into this review.

Recommendations

- Fund the build-out of entities required to address the data, monitoring and technical assistance needs of a successful QRIS (e.g. data systems that will need to accommodate registration of providers currently not in the system).
 - There is limited infrastructure currently in place to meet the capacity of a QRIS in CT. The need for technology to support efficiency in the QRIS will demand the integration of monitoring information into TA and vice versa.

Structure: Levels

Tiers

- **Level Four:**
- Performance across 5 standards and associated criteria.
 - Head Start/Early Head Starts with no federally defined deficiencies or non-compliances.
 - Accredited programs (e.g. NAEYC, NAFCC).
- A formalized process to review accreditation entities.

Program Improvement & Incentives

- Participants at this level are eligible for the following Financial Incentives
- Tax credits,
- Longevity bonus,
- Loan forgiveness
- Tiered reimbursement and/or incentives

Levels

Tiers

- **Level Three:**
- Performance across 5 standards and associated criteria.
 - Program must achieve established scores on ERS and document progress on improvement plans.
 - Staff education plans have defined course of study and professional development plans.
 - Accreditation applicants with a deadline set for submission of accreditation materials within one year.
- Program assessment completed by an external, reliable assessor.

Program Improvement & Incentives

- **Levels Two & Three:** Participants at these levels are eligible for the following *Financial Incentives*
 - accreditation fees.
 - Family Child Care providers will be eligible for modest financial incentive cash payment when new levels are achieved from Level Two and above to motivate, retain and acknowledge advancement.
 - Tiered reimbursement and/or incentives
- Application to Accreditation Facilitation Project, utilization of ECCP. Head Start programs utilization of Training and Technical Assistance System.

Levels

Tiers

- **Level Two:**
- Performance across 5 standards and associated criteria.
- Programs at this level will be involved in accreditation self-study and formal action plans.
- Self-assessment and improvement plans from an approved tool kit. A comparable self-assessment process to be defined for family child care providers.

Program Improvement & Incentives

- See previous slide
- This level will reflect distributed trainings defined by content areas, age and setting.

Levels

Tiers

- **Level One:**
- Licensed programs
- Automatically enrolled in QRIS data system, by linking existing data bases.
- Enrollment in the workforce data system will be required. (e.g. the Registry).
- Scholarship eligibility dependent on a planned course of study.
- Performance across 5 standards and associated criteria.

Program Improvement & Incentives

- Utilization of and approved consultants, based on program improvement plan generated from a self-assessment from a tool identified in the QRIS tool box.
- Tiered reimbursement

Levels

Tiers

- **Entry Level:** Register in the QRIS data system.
- Performance across 5 standards and associated criteria.

Program Improvement & Incentives

- Participants at this level are eligible for Financial Incentives
 - Background checks and fingerprinting,
 - First aid and CPR, medication administration trainings,
 - DPH Licensing application fees,
 - Physical improvement costs to achieve licensing,
 - Fire extinguishers, carbon monoxide detectors and cribs.
- *Training and/or technical assistance* in the specific areas,
- Utilization of Early Childhood Consultation Project (ECCP), B-3 and LEA for children with special needs, and expanded modes to support programs and providers seeking licensing.

All Levels will be eligible for *training and/or technical assistance* from a menu designed to facilitate implementation of standards, criteria and on-going improvement.

- Degree attainment,
- Scholarship options;
- Coaches,
- Evidenced-based curriculum/assessments,
- Interagency partnerships,
- Program assessments-related support,
- Strengthening Families, Parent Leadership & Advocacy,
- Organizational health,
- Intensive mental health consultation,
- Training on Early Learning Standards, developmentally appropriate practice and school readiness,
- Playground safety,
- Infant Toddler Modules,
- Accreditation supports,
- Inclusive practices and special populations,
- Social emotional/Center on Social Emotional Foundation for Early Learning,
- Access to a statewide training calendar, including Cooperative Extension (UCONN)
- Emergency planning.

On-Going Improvement Opportunities

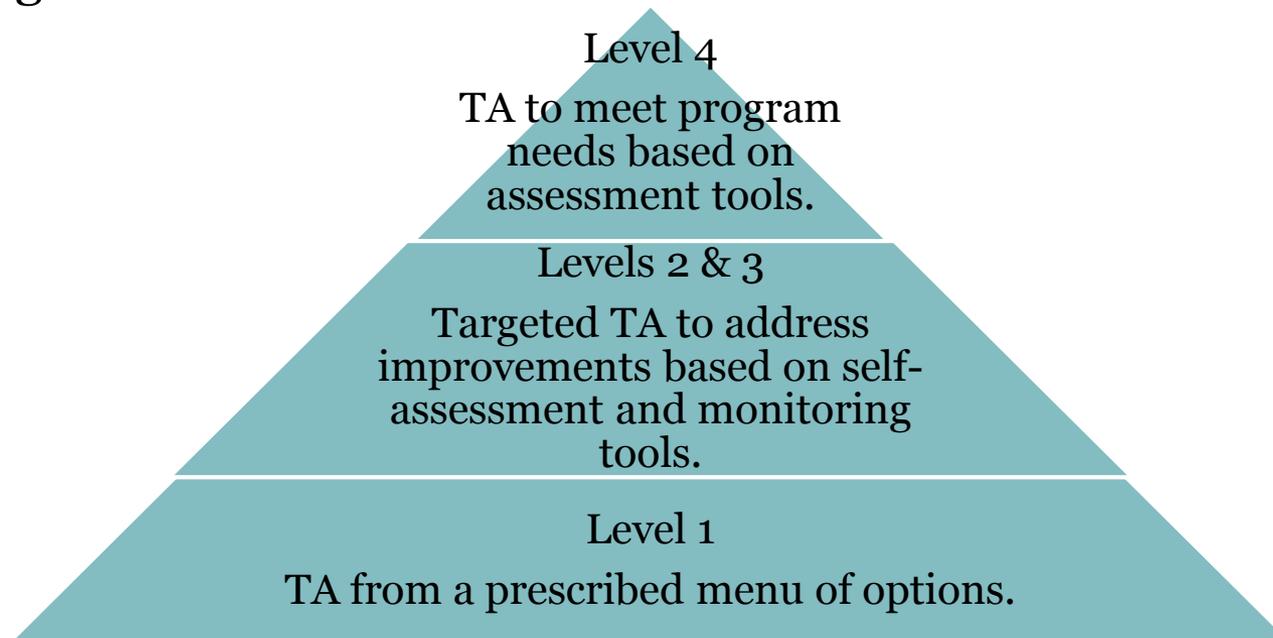
- The QRIS will incent providers of all care settings to provide high quality early learning experiences to all children.
- Publicly-funded providers = training + technical assistance + financial incentives (base rate of reimbursement + incentive package based upon an established formula).
- Non-publicly funded providers = training + technical assistance + incentives to promote on-going increase in quality.

On-Going Improvement Opportunities

- In support of program improvement efforts, develop a Tool Kit of tools, resources and sample documents.
Examples not limited to:
- **Tools** -- Program Administration Scale (PAS); Business Administration Scale (BAS); Strengthening Families; NAEYC Cultural Competency Tool; NAEYC tools for accreditation; CLASS; NAPSACC;
- **Resources** – websites/links; bibliography/book lists
- **Sample documents** – staff/family handbooks, policies, legal documents

On-Going Improvement Opportunities

- The intensity of training, technical assistance, and professional development opportunities will vary at each level, with training and technical assistance at greater intensity at the lower levels and heightened incentives as levels increase.



Monitoring & Rating

The monitoring system to reflect the following:

- All licensed programs come into QRIS at Level One and are then monitored by an external entity to advance into other levels;
- An integrated data system needs to inform and flag non-compliances, with a mechanism to evaluate significance of non-compliance and inform the QRIS levels.
- Streamlined number of tools used to assess programs for the purpose of monitoring and rating programs at QRIS levels:
 - The group recommends the use of Environment Rating Scales: ITERS, ECERS, FCCERS, SACERS;
 - Tools should be utilized in their entirety, rather than by subscale.

Monitoring & Rating

- Every criterion will be monitored through a self-report or assessment tool.
 - Levels One and Two utilize a process of self-report, with random quality audits.
 - Levels Three and Four utilize existing accreditation and Head Start approval systems;
 - A rubric to be developed to assess Accreditation and Head Start reports;
 - Program improvement plans to include recommendations from accreditation, Head Start and approval system reports.
- The monitoring system is informed by the Department of Health, Department of Children and Families, national accrediting bodies and Head Start monitoring;
- Increase the frequency and establish reliability of DPH inspections.

Implementation Phases

The QRIS will be implemented in phases to establish baseline data on Connecticut's early care settings, drive quality improvements, and promote parental choice.

Phase 1: The projects of the initial phase will include

- Establish workgroup to participate in the development of criteria and indicators for standards;
- Development of data systems,
- Train raters and develop assessment systems,
- Evaluate capacity of existing systems and plan for expansion, as needed: ECCP, AFP, Licensing, Consultants,

Implementation Phases

- Validate system and criteria,
- Establish the subsidy workgroup,
- Assess existing monitoring systems (state and local) to determine their ability to contribute to monitoring of QRIS.
- A Request for Proposal for an evaluator of the Pilot should precede the implementation.

Implementation Phases

The QRIS Workgroup recommends a QRIS Pilot of the system that

- Includes a targeted number of participants and a diverse population of providers, children and settings. The diversity of the group should be inclusive of urban, rural and suburban geographic areas.
- Is voluntary, by invitation according to criteria to meet the research needs.
- Provides incentives to participants upon completion of the pilot and completion of an evaluation to gather participant feedback of their experience in the Pilot.

Implementation: Key Role of a Researcher

The Pilot implementation process should be guided by a researcher in order to

- Evaluate the validity and effectiveness of monitoring and program improvement tools;
- Capture provider needs in relation to their participation in the QRIS;
- Gauge the needs of providers for incentives to motivate advancement in system;
- Determine if the selected increments of the QRIS levels are appropriate to effectively differentiate quality;
- Monitor if fiscal incentives are sufficient based on provider type and level to advance and sustain program quality;
- Complete an evaluation report that offers recommendations for revisions to the system that informs the launch of the next phase.

Implementation Phases

Phase 2:

- The second phase of the QRIS will be mandatory for all licensed centers and family child care providers for Levels One to Level Four.
- Participation will also be mandatory for license-exempt programs that are publicly-funded, with enrollment beginning at entry level. The system will be voluntary for all other providers during this phase.

Implementation Phases

Phase 3:

- This phase will be mandatory for all license-exempt programs and all Family Friend and Neighbor providers.
- Incorporation of early childhood services such as home visiting and Birth to Three.

Outreach & Public Awareness

- The plans for outreach and public awareness will be developed in conjunction with the Public Private Partnership Workgroup, Family Involvement/Home Visitation Workgroup and additional stakeholders.

QRIS Workgroup Recommendations

- A framework for the development of
 - Standards, criteria & indicators;
 - A block system using tools and existing systems to rate and monitor programs;
 - A package of technical assistance using tools, resources and incentives.
- To achieve the goal of the system:
 - Give families the information they need to make informed choices and
 - Provide programs with the tools needed to improve quality,so that ***all*** children have the opportunity to thrive.