Quality Improvement rating System (QIrS) for Licensed Center-based and Home-based Child Care Programs: A Design Proposal

Submitted to: The State of Hawai'i Department of Human Services

> By: The Center on the Family University of Hawai'i at Mānoa

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We would like to thank the many people who assisted throughout our design process. Abby Cohen, our NCCIC Region IX State Technical Assistance Specialist, was an excellent resource and she also directed us to those who have a wealth of experience and expertise in designing, developing, piloting and implementing QRISs in other states (and Washington, DC). We consulted all of them, some via the listed websites in the reference section, and had many personal contacts with QRIS administrators, consultants, and practitioners during conferences, and via emails and phone conversations. We also express our appreciation to the many stakeholders who provided candid and valuable feedback regarding the preliminary QIrS design.

Quality Care Program Partners

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Background

The Quality Care Program (QCP) is funded by the Hawai'i State Department of Human Services (DHS) and administered by the Center on the Family at the University of Hawai'i. The QCP is a partnership of the Center on the Family (COF), the Hawai'i Association for the Education of Young Children (HAEYC), Honolulu Community College (HCC), and People Attentive to Children (PATCH).

In June 2009, DHS's Child Care Program Administrator requested that QCP review Quality Rating Improvement Systems (QRIS) implemented by other states in order to make recommendations regarding development of a QRIS for Hawai'i. In March 2010, QCP was asked to design a QRIS for licensed child care programs in Hawai'i incorporating stakeholder input and to submit this design proposal by June 30, 2011. An Early Childhood Research Specialist was hired in January 2011 to facilitate the QRIS design process.

One of QCP's initial tasks in this design process was to identify the QRIS mission and vision (Mitchell, 2005; NCCIC, 2010a). It was decided that Hawai'i 's QRIS will focus on quality improvement more so than ratings, and thus, the system being developed will be called the Quality Improvement rating System (QIrS).

The following parameters guided the QIrS design:

- The QIrS is limited to DHS-licensed programs which include family child care homes (FCC), infant-toddler centers (IT), and group child care centers (GCCC).
- All types of licensed programs are eligible, including faith-based programs, Head Start programs, private preschools, and for-profit programs.
- The focus is quality improvement.
- Participation is voluntary.

The goals of the QIrS are:

- Improved quality of early childhood programs.
- Increased consumer awareness of the quality of early childhood programs.
- Continuous quality improvement.

An implementation goal of QCP's in developing the QIrS is to connect the many early childhood efforts underway in the state in order to avoid overlap and duplication of services and resources. One of the actions QCP took to facilitate this effort in the design process was the inclusion of a representative from the State's Early Learning Council (ELC) who was able to (a)

provide insights as to how the ELC's work intersects with that of QCP, and (b) serve as a facilitator in weaving together the two initiatives.

Provisions for Stakeholder Feedback

A stakeholder Power Point presentation was developed to accomplish the following: explain Quality Rating Improvement Systems (QRIS) nationally, describe QIrS work locally, share QIrS design, and collect feedback. This presentation was made fourteen times to early childhood policy groups, director associations, and FCC provider groups between April and June 2011, with a few modifications based on feedback from earlier presentations that indicated audience confusion. The presentations were made throughout the state—Honolulu, Kailua, and Wahiawa on O'ahu; Hilo, Kona, and Waimea on the Big Island; Kaua'i; and Maui. Representatives from Lāna'i and Moloka'i were invited to attend meetings scheduled on Maui. More than 150 people participated, and of these, at least 15 people attended multiple times.

After each presentation, feedback was solicited in two ways: (1) Feedback Forms were distributed to all attendees with contact information optional and (2) all comments from the group were recorded, usually on chart paper by another QCP member. Some of the feedback forms were returned immediately following the presentations, others were mailed to COF. Feedback was also received via emails to the project Research Specialist. In total, 48 Feedback Forms were returned. A content analysis of all of the feedback was conducted and the comments were grouped according to the QIrS design components. They are included under the heading *"Stakeholder Feedback"* in the QIrS Design discussion in the next section of this document. Some of the comments did not directly apply to the design but rather to the process of creating the design and have been included in the Infrastructure Building or Pilot Study sections.

QIrS Design

The QIrS consists of six components:

- Standards and Indicators
- Assessment Measures
- Rating
- Process
- Improvement
- Incentives

To inform design decisions regarding each of these components, QRIS designs from all of the states or counties (such as Florida which implements on a county basis, not state-wide) that have them in place were reviewed, with special attention paid to those states that have had their QRIS evaluated or have state-wide implementation. Research studies evaluating these systems and their components were also reviewed. The criteria used for selecting the research studies included:

- Scope of the study (large sample, examined global quality)
- Date of the publication (within the last 10 years, with the exception of older nationally known studies)
- Source of the report or study (government-funded or peer review studies)
- Related to topics: Quality Rating System impact studies, defining quality in early childhood education, validity and reliability of standardized assessments, impact of professional development, licensing standards

Each of the six components of the QIrS design is discussed below, with the following information presented (see Attachment A for a summary of the QIrS design):

- Background research and information reviewed
- Description of the design and elements within that component
- Stakeholder feedback related to the design

Quality Standards

Background Research: Quality Standards

Research has shown that there are certain variables or items that are associated with centers' and FCC homes' ability to produce positive child outcomes (e.g. Barnett, 2008; Burchinal, Kainz, & Cai, 2011; Feine, 2002; Forry, Vick, & Halle, 2009; Halle, Forry, Hair, Perper, Wandner, Wessel, & Vick, 2009; Puma, Bell, Cook, Heid, Lopez, Zill, Shapiro, Broene, Mekos, Rohacek, Quinn, Adams, Friedman & Bernstein, 2005; Sandstrom, Moodie, & Halle, 2011; Schweinhart, Montie, Xiang, Barnett, Belfield, & Nores et al, 2005; Vandell, Belsky, Burchinal, Steinberg & Vandergrift, 2010). These variables need to be clearly identified in order to improve programs' quality. The guiding research question was: "What standards have been proven to predict quality outcomes for children?"

The early childhood field lacks consensus on a single approach for categorizing factors that define program quality, however there are two broad dimensions commonly associated with

promoting higher rates of learning and development in children: structural aspects (such as physical environment, child-caregiver ratios, group size, caregiver qualifications, and caregiver compensation) and the quality of curriculum and intentional teaching (Murphey, 2010; Schilder, Young, Anastasopoulos, Kimura, Rivera, 2011; Tout, Zaslow, Halle, & Forry, 2009). A review of the categorizations of quality standards used by the 26 states that had implemented a state-wide QRIS as of December 2010 (NCCIC, 2011a) revealed that there were 13 different categories of quality categories used; however, none of the states used all 13.

The following summarizes the standards used by center-based programs (n=26):

Most common:

- licensing compliance (26)
- staff qualifications (26)
- environment (24)
- family partnership (24)
- administration and management (23)
- accreditation (21)

Half of the QRIS include:

- curriculum (14)
- ratio and group size (13)
- child assessment (12)

Least common:

- health and safety (4)
- cultural and linguistic diversity (8)
- provisions for children with special needs (9)
- community involvement (7)

Categories of home-based standards were very similar to center-based ones.

The following summarizes research relevant to the standard categories selected for the QIrS.

Early Childhood Care & Education. There is substantial evidence that children who attend early childhood education programs are significantly affected by their interactions with teachers/caregivers, the responsiveness of the teachers/caregivers, the quality of the environment, and being in a program that implements a developmentally appropriate curriculum (e.g. Goffin, 2010; Hyson, Vick Whittaker, Zaslow, Leong, Bodrova, Hamre, & Smith, 2011). A high quality curriculum uses on-going authentic child assessments to individualize its implementation and is both intellectually rich and broad enough to meet children's social and emotional development needs. Research has shown that children's emotional and behavioral adjustment is critical for their chances of early school success (Barrera, Corso, & McPherson, 2003; Daily, Burkhauser & Halle, 2010).

Family Partnerships. Research has demonstrated that quality programs both involve parents and communicate with parents on an on-going basis (e.g. ACF, 2010; NICHD, 1996). There is substantial evidence that programs that support parents in their own educational attainment have a positive outcome on children's early and long-term success (e.g. Harvard Family Research Project, 2006; Puma et al, 2005; Reynolds, 2000).

Diversity and Inclusion. Research has shown that the family's culture directly affects the child's social, cognitive and language outcomes (Bruner, Ray, Stover Wright & Copeman, 2008; Maschinot, 2008; Sparks, 1994). It is also substantiated that the more teachers can understand and connect to children and their identities as individuals, the more likely the children are able to develop social skills and to improve their behavior in the classroom (NCCIC, 2009; 2010). Individualization, as a measure of the quality of inclusion, appears to have a positive effect on child outcomes in the cognitive, communication, and motor domains.

Staff Qualifications. One of the key predictors of a program's quality is the formal education and specialized training of the teachers and administrators (e.g. Fowler, Bloom, Talan, Beneke, & Kelton, 2008; Whitebook, 2003). Research has substantiated that better-educated early childhood teachers with specialized training are more effective (Whitebook, Gomby, Bellm, Sakai, & Kipnis, 2009).

Program Design and Management. There is substantial evidence that classrooms with smaller groups and higher staff/child ratios, lower teacher turnover, and adequately paid teachers significantly improve the program's quality (e.g. Barnett 2003; Barnett, Schulman & Shore, 2004; Schumacher, 2008). Studies have also shown that class size and staff/child ratios not only have an impact on the quality of the environment but also on children's outcomes. There is some evidence that the implementation of program policies relates to child development outcomes. There is increasing evidence that professional development that is well-defined, aligned with instructional goals and learning standards, and is intensive and sustained over time is most effective.

QIrS Design: Quality Standards

The QIrS contains five Standard Areas:

- Early Childhood Care & Education
- Family Partnerships
- Diversity and Inclusion
- Staff Qualifications
- Program Design and Management

These Standard Areas are a consolidation of the nine Standard Areas endorsed by the Hawai'i Early Learning Council in Fall 2010. The consolidation reflects the following decisions, based on the research reviewed:

- Elimination of what is already required for licensing (Transportation, Health & Safety, Nutrition)
- Re-categorization of indoor space, outdoor space, materials into the Environment indicator (within Early Childhood Care and Education Standard)
- Re-categorization of Mental Health into the Early Childhood Care and Education Standard
- Expansion of "Children with Disabilities" Standard to include cultural diversity

The definition of each Standard Area and a listing of the elements that it includes are presented below.

Early Childhood Care & Education. A quality early childhood program has a written curriculum that describes plans for using materials in developmentally-appropriate activities in a stimulating environment. The implementation of this plan is evident through the child-teacher interactions and the ability of the program to utilize child observations and assessments to provide curriculum that supports children's learning and development in all domains, including social and emotional.

Elements:

- Child/Teacher Interactions
- Curriculum
- Child Assessment
- Mental Health
- Environment

Family Partnerships. Quality early childhood programs view family involvement as a continuing process and partnership. Programs can enhance this relationship through carefully-developed policies that ensure communication with families, opportunities for involvement, and provision of resources or referrals.

Elements:

- Policies
- Resources & Education
- Communication
- Involvement
- Outside Family Support Resources

Diversity and Inclusion. Quality early childhood education programs support the full inclusion and acceptance and appreciation of children who are from various cultural backgrounds, are English language learners, and/or have disabilities. Well-trained teachers do this through intentional teaching and purposeful choice of materials while viewing children within the context of family.

Elements:

- Materials
- Activities
- Child/Teacher Interactions
- Staff Training
- Family Involvement

Staff Qualifications. Quality early childhood programs employ teachers and directors who understand the developmental needs of young children and the curriculum that is best suited to meet those needs. They have studied early childhood education both formally and informally and believe learning is a continuum for them as well as the children they serve.

Elements:

- Teacher Qualifications
- Director Qualifications
- Individual Professional Development Opportunities

Program Design and Management. High-quality early childhood education programs have written plans that explain the human resource policies, such as staff orientation, performance evaluation, and staff compensation. The management design should also detail facilities management, budget planning, and mechanisms for self-assessment of the program. This information is used to develop staff training plans and determine the classroom sizes and child/teacher ratios.

Elements:

- Classroom Size and Ratios
- Staff Compensation
- Self-assessment Mechanisms
- Staff Development Plan
- Policies and Procedures

Stakeholder Feedback: Quality Standards

There were no comments in this area.

Assessment Measures

Background Research: Assessment Measures

Standardized tools. The most commonly used standardized tools in QRIS and the most recent edition of the *Quality in Early Childhood Care and Education Settings: A Compendium of Measures* (Halle, Vick Whittaker & Anderson, 2010) were reviewed. The most commonly used tools in QRIS are the Environmental Rating Scales (ERS) instruments—the Early Childhood Environment Rating Scale (ECERS), the Infant Toddler Environment Rating Scale (ITERS), and the Family Childcare Environment Rating Scale (FCCERS). These tools have been in use for over 30 years and have become the most widely used quality measures in ECE practice and research (Halle, Vick Whittaker, & Anderson, 2010; Harms, Cryer, & Clifford, 2006, 2007; Harms, Clifford, & Cryer, 2005). Empirical evidence has validated the relationship of ERS quality to child outcomes in child care research not just in the United States but also around the world.

Even though many QRIS are using the ERS instruments, there is great variation in how they are used. In nine states (Delaware, District of Columbia, Idaho, Kentucky, Maryland, Mississippi, New Mexico, Pennsylvania, and Tennessee), ERS scores are used to determine rating levels. In four states (Colorado, Iowa, Louisiana, and North Carolina), programs can earn points for ERS scores. The points contribute to the overall rating. Two states (New Hampshire and Oklahoma) require programs to be assessed with the ERS, but do not tie particular scores to the ratings. Oklahoma also recognizes the Child and Caregiver Interaction Scale, the Arnett Caregiver Interaction Scale, and the Early Language and Literacy Classroom Observation Tool (ELLCO) in lieu of the ERS. In Ohio, self-assessments are required, but programs can use an ERS or ELLCO, and scores are not tied to ratings. The RAND (Zellman & Perlman, 2008) study of the five pioneer QRIS states recommends using the ERS and furthers its recommendation by suggesting that a substantial amount of money can be saved if it is administered only after a program shows evidence in other ways that it is likely to be highly rated, which has been done in Pennsylvania and North Carolina.

A newer tool that has been gaining popularity is the Classroom Assessment Scoring System (CLASS) which is currently in use in Virginia, Louisiana, and Ohio, and being piloted by several other states (Pianta, La Paro, & Hamre, 2007). The CLASS is an observational instrument developed to assess classroom quality by looking at three domains of interaction (Emotional Support, Classroom Organization, and Instructional Support) within a classroom. The ten CLASS dimensions are based on observed interactions among teachers and children in the classrooms. In 2008, Head Start began using the CLASS as part of its federal monitoring process in preschool classrooms (ACF, 2008).

There is no single reliable or valid tool that assesses family partnerships or cultural competency (Bromer, Paulsen, Porter, Henly, Ramsburg, Weber et al, 2011; Shivers & Sanders, 2011; Zellman & Perlman, 2006). However, the Program Administration Scale (PAS) for child care centers and the Business Administration Scale (BAS) for family child care homes were designed to serve as reliable and easy-to-administer tools for measuring the overall quality of

administrative practices of early care and education programs. In addition to business administration, they also assess policies related to family partnerships, working with children with special needs, and the program's ability to be culturally sensitive (Talan & Bloom, 2004, 2009). These tools were designed to complement the ERS instruments. Currently, three states (Illinois, Arkansas, and Montana) are using PAS/BAS in their QRIS and several others are in discussions with the developers to implement the tools.

National Accreditation. Different uses of national accreditation in QRIS were examined. Of the 23 states and Washington, DC with fully implemented QRIS, 16 use a building blocks system to rate their programs¹. All but one (94%) include accreditation as a measure of quality for ratings, although how they include it varies from state to state. All of the block system states (and DC) that use accreditation in their QRIS designs accept National Association for the Education of Young Children (NAEYC) and National Association for Family Child Care (NAFCC). However, almost three-fourths (73%) of these states (and DC) accept other accreditations in addition to NAEYC and NAFCC for their childcare programs (n=15). Note: Many states accept Council on Accreditation (COA) after school accreditation. Hawai'i 's initial model will not include after school programs but those states that recognize only COA in addition to NAEYC and NAFCC are included in the 5 that do not recognize multiple accreditations. Only two of these states recognize accreditation alone (New Hampshire and Montana). The other three— Delaware, Pennsylvania and Rhode Island—have additional requirements.

The following is a summary of how states using the block design use accreditation (n=15):

- "Bypasses" the other indicators in the QRIS and sites achieve the highest rating (13%)
- Is an option for "bypassing" the other indicators in the QRIS and sites achieve the highest rating (7%)
- Required as a component to achieve the highest rating (53%)
- Is an option for meeting certain standards, but not all (27%)

There are several factors as to why states do not use accreditation as the sole measure of quality, including the need for more flexibility. Some states wanted to include other indicators of quality not addressed in accreditation. Other reasons included giving providers some alternative pathways to reach the top level, which may be a reflection of some concerns about the affordability and availability of assistance around attaining accreditation. In some other cases it may be because the QRIS implementing agency wanted full control over the process.

¹ In a building block system, all of the criteria within each category of standards must be met before receiving that rating.

Another issue is the selection of which accreditations should be accepted for QRIS. The following accreditations (with rates of use provided) are accepted in the states and DC that have fully implemented QRIS and incorporated it in their system designs (n=18) (NCCIC, 2011b):

- ACSI = Association for Christian Schools International (22%)
- AMS = American Montessori Society (5%)
- CARF = Commission on Accreditation of Rehabilitation Facilities: Child and Youth Services Standards (5%)
- COA = Council on Accreditation (22%)
- COA (After School) = Council on Accreditation, After School Programs (formerly the National After School Association) (78%)
- NAC = National Accreditation Commission for Early Care and Education Programs (22%)
- NAEYC = National Association for the Education of Young Children, Academy for Early Childhood Program Accreditation (100%)
- NAFCC = National Association for Family Child Care (100%)
- NECPA = National Early Childhood Program Accreditation (45%)
- SACS = Southern Association of Colleges and Schools (5%)

Additionally, lesser known and local accreditations are accepted in Colorado, Maryland, Pennsylvania, and Tennessee.

Pennsylvania established an accreditation committee to select which accreditation(s) to use. This committee is a three-member review panel with representatives from the government licensing body, the QRIS group, and a community agency or higher education organization. The committee's role is to review applications from accrediting institutions and make a recommendation to the licensing agency. The panel of evaluators examines documents and information and ensures that the organization has "viable accrediting systems and includes both process and program content leading to accurate assessments of program quality. Criteria must ensure the integrity of the accrediting institution and the validity and reliability of its decisions" (Pennsylvania Keystone STARS, 2010, pp. 2-3). In 2009, this committee decided that NECPA-accredited programs no longer qualified for the highest rating (STARS advisory committee 2009).

QIrS Design: Assessment Measures

The assessment instruments to be used in QIrS are:

- Classroom Assessment Scoring System (CLASS)
- Early Childhood Environment Rating Scale-Revised (ECERS-R)
- Infant Toddler Environment Rating Scale-Revised (ITERS-R)

- Family Childcare Environment Rating Scale (FCCERS-R)
- Program Administration Scale (PAS)
- Business Administration Scale for Family Child Care (BAS)

Each of these standardized tools is able to measure the elements identified in the quality Standard Areas (see Table 1). In addition, NAEYC or NAFCC accreditation is required in order to achieve the highest quality rating level.

The tools were selected using the following criteria:

- Ability of tool to measure identified indicators of quality
- Use of tool in established QRISs
- Ease of use
- Validity (reviewed studies that demonstrate high levels of construct validity, concurrent validity, predictive validity, and content validity)
- Reliability (reviewed research that shows evidence of inter-rater reliability)
- Cost and time to administer
- Availability of trained assessors in Hawai'i

Hawai'i 's Voluntary Registry will be used to assess staff qualifications. The Registry's Framework has a structure that is similar to the one being suggested for QIrS (block design, all items must be met before proceeding to the next level); is applicable to all practitioners (teachers, directors, assistants); is applicable to both home- and center-based settings; connects to the Attitudes, Skills and Knowledge (ASK) Core Areas ²of the Practitioner Core Competencies³; has steps within levels which allows for people to progress more quickly and easily; is familiar to practitioners in the state; and is already being used by the Registry when verifying the credentials of center-based staff.

Stakeholder Feedback: Assessment Tools

There were several positive comments regarding the selection of tools used for assessment. There were also some concerns about using all three (CLASS, ERS, PAS/BAS). While many

² The *Attitudes, Skills and Knowledge (ASK) Core Areas* describe what early childhood practitioners need to know and be able to do in order to meet the needs of young children and their families.

³ The Practitioner Core Competencies provides a framework and foundation for all ECE practitioners in Hawai'i.

participants expressed interest in using the CLASS, one pointed out the lack of the infant/toddler measure. [CLASS anticipates releasing the toddler tool in September 2011]. One director summed up concerns that seemed also to be held by others in relation to the proposed use of assessments for accredited programs: "Using all three standardized assessment tools (CLASS, PAS, and ERS) for the programs that have already achieved national accreditation is too much. The use of all three tools for programs that have already gone through the many steps required for accreditation is very stressful to the teachers and program directors."

There were many comments about accreditation: some liked that it was required for obtaining QIrS Level 5 (the highest level), some thought it was unattainable for many programs, and some wanted other accreditations to be accepted. Those who did not have an issue about the requirement of being NAEYC or NAFCC accredited in order to reach level 5 had either obtained NAEYC accreditation or were satisfied that reaching Level 4 (the second highest level) would be sufficient.

Those who did not think accreditation should be a requirement for Level 5 were concerned about costs, especially for small programs and the availability of Hawai'i Early Childhood Accreditation Project (HECAP) facilitators on the Big Island⁴. There were many questions about why only two national accreditations were accepted.

One of the arguments was that since DHS recognizes two national accreditations for centerbased programs, NECPA and NAEYC, as measures of the highest level of quality, a DHSsponsored QIrS system should too. Some were concerned about the institutional affiliations of the QCP partners and questioned if that was an influencing factor in the accreditation selection.

The Head Start directors wondered if the results of their required triennial review could be tied to the QIrS, possibly as alternatives to meeting some of the requirements⁵.

⁴ HECAP is a program that is administered through HAEYC that offers free support, guidance, assistance, and suggestions for programs as they work toward NAEYC Accreditation.

⁵ The Head Start Act requires that Head Start programs be subject to a comprehensive on-site review every 3 years to ensure the quality of the program and compliance with government standards.

I able 1. The Look (dimension or subscale) and Assessments that Measure Identified ()IrS ()uality Fig	
Table 1. The Tools (dimension or subscale) and Assessments that Measure Identified QIrS Quality Ele	ments

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Early Childhood Ca	re and Education				
Child/Teacher Interactions	Language-Reasoning/ Listening and Talking Interaction	Behavior Management Productivity Quality of Feedback Language Modeling		Teaching (3)	Relationships (Provider with Children)
Curriculum	Personal Care Routines Activities Program Structure	Concept Development		Curriculum (2)	Developmental Learning Activities
Child Assessment			Child Assessment (PAS)	Assessment of Child Progress (4)	Developmental Learning Activities
Mental Health		Positive Climate Negative Climate Teacher Sensitivity Regard for Student Perspectives		Relationships (1)	Developmental Learning Activities

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Environment	Space & Furnishing	Instructional Learning Formats		Physical Environment (9)	Environment
Family Partners	hips	I			I
Policies	Parents & Staff/ Parents & Provider			Families (7)	Relationships (Provider with Parents & Families)
Resources & Education	Parents & Staff/ Parents & Provider			Families (7)	Relationships (Provider with Parents & Families)
Communication	Parents & Staff/ Parents & Provider		Family Partnerships (PAS) Provider-Parent Communication (BAS)	Families (7)	Relationships (Provider with Parents & Families)
Involvement	Parents & Staff/ Parents & Provider		Family Partnerships (PAS)	Families (7)	Relationships (Provider with Parents & Families)
Outside Family Support Resources	Parents & Staff/ Parents & Provider		<i>Community Resources (BAS)</i>	Community Relationships (8)	

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Diversity and Inc	lusion				
Materials	Space & Furnishing		Child Assessment (PAS)	Physical Environment (9)	Relationships
Activities	Activities			Teaching (3)	Relationships
Child/Teacher Interactions	Program Structure Interaction			Relationships (1)	Relationships
Staff Training	Parents & Staff/ Parents & Provider			Teachers (6)	Professional & Business Practices
Family Involvement	Program Structure		Family Partnerships (PAS)	Families (7)	Relationships
Staff Qualificatio	ns				
Teacher Qualifications			Staff Qualifications (PAS) Qualifications & Professional Development (BAS)	Teachers (6)	
Director Qualifications			Staff Qualifications (PAS)	Teachers (6)	

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Director Qualifications (continued)			Qualifications & Professional Development (BAS)		
Individual Professional Development Opportunities Program Design a	Parents & Staff/ Parents & Provider and Management		Human Resource Development (PAS)	Teachers (6)	
Classroom Size and Ratios			Personnel Cost & Allocation (PAS) Work Environment (BAS)	Leadership & Management (10)	
Staff Compensation	Parents & Staff/ Parents & Provider		Human Resource Development (PAS) Income & Benefits (BAS)	Leadership & Management (10)	
Self-Assessment Mechanisms			Program Planning & Evaluation (PAS)	Leadership & Management (10)	Professional & Business Practices

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Staff Development Plan	Parents & Staff/ Parents & Provider		Human Resource Development (PAS) Provider as Employer (BAS	Leadership & Management (10)	Professional & Business Practices
Policies and Procedures			Human Resource Development (PAS) Center Operations (PAS) Fiscal Management (BAS/PAS) Record Keeping (BAS) Risk Management (BAS) Marketing & Public Relations (BAS/PAS)	Leadership & Management (10)	Professional & Business Practices

Rating

Background Research: Rating

There are four different rating systems used in QRIS: building block design, points system, combination system, and no rating.

In a building block design, all of the standards in one level must be met before moving on to the next higher level. This is the most common method used in QRIS. The block design ensures a similar quality standard across system elements and reduces provider discretion. This method can be a problem if certain standards are challenging to achieve, thus limiting the ease of a program's ability to move up in the system.

In a points system, points are earned for each standard and are then added together. Each rating level represents a range of possible total scores. This method allows providers discretion in choosing where to target limited funds for improvement—for example avoiding more costly changes such as reduced ratios. This system may be appropriate in a QRIS with limited incentives. It can result in quality variations across system elements, however. One of the concerns about this type of system is that "4 stars" might not look the same across programs (e.g., one might be weak in environment/curriculum, where another is weak in staffing).

Some states address concerns associated with using either the block or point system by combining them into one system. For example, in Miami-Dade, Florida, a points system is used but programs must also meet all of the requirements of one level before they can move on to the next higher level.

Some states such as New Hampshire do not use ratings in their QRIS. Instead, there are two tiers above licensing (Licensed Plus or Accreditation), and programs must meet certain standards to reach each level.

There is a range in the number of levels used by states that rate the programs in their QRIS. Half of the states with fully implemented QRIS use five levels (n=13). This practice is consistent with the recommendation from the RAND study (Zellman & Perlman, 2008) of the five pioneer states that the rating system should have multiple levels to allow for more progress to be made at the low end and thus creating higher provider engagement. More levels also allow for improvement at the higher end, preventing "maintenance mode" in which programs no longer strive to improve.

QIrS Design: Rating

The QIrS will implement a five-level building block rating system to ensure similar quality across system elements and to encourage progressive quality improvement efforts from one level to the next. Meeting DHS-licensing standards is a prerequisite to participation in the QIrS. In order to be placed at a certain level, all criteria associated with standard areas of that level

must be met. This includes having a specific "score" on the assessment tool(s), such as CLASS, ERS, and PAS/BAS, and staff obtaining a specified level on the Voluntary Registry Framework (see Table 2). In order to achieve the highest level of quality, a program MUST have obtained NAEYC or NAFCC accreditation. Tables 3, 4, and 5 detail the staffing requirements for those in a center-based preschool, a home-based program, or a center-based infant/toddler program, based on the different DHS-licensing requirements.

Stakeholder Feedback: Rating

A few people commented they would prefer a point system to block levels because they are a quality program and would like to be recognized as one even though there are some things they might not be able to change, such as environment. There was also a concern that if they had to meet higher teacher qualifications, it would be expensive and time-consuming. In addition, some directors were concerned that once the teachers met the higher requirements, they would not be able to afford to pay them more.

Standard Area	QIrS Level 1	QIrS Level 2	QIrS Level 3	QirS Level 4	QIrS Level 5
					NAEYC or NAFCC Accredited
Early Childhood Care & Education/ Diversity & Inclusion	ERS Baseline Score	ERS Score: 3.0	CLASS score: 3.0 ERS Score: 3.5	CLASS score: 4.0 ERS Score: 4.25	CLASS score: 5.0 ERS Score: 5.0
Family Partnerships/ Program Design & Management	Attend Training on PAS/BAS	Complete PAS/BAS Self- Assessment; Collect Required Documents	PAS/BAS score: 3.5	PAS/BAS score: 4.25	PAS/BAS score: 5.0
Staff Qualifications Center-based	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5
Staff Qualifications Home-based	See Table 4				

Table 2. Assessment Scores/Measures by QIrS Level

DHS Licensed Position	QIrS Level 1*	QIrS Level 2*	QIrS Level 3*	QIrS Level 4*	QIrS Level 5*
	FW: 2.3	FW: 4.1	FW: 4.3	FW: 4.3	FW: 5.3
Director	<i>and</i> 3 Credit Hours** ±	and 3 Credit Hours**	and 3 Credit Hours**	<i>and</i> 6 Credit Hours**	<i>and</i> 9 Credit Hours**
	FW: 2.3	FW: 4.1	FW: 4.3	FW: 4.3	FW: 5.3
Teacher	100% of Teachers	100% of Teachers	50% of Teachers	100% of Teachers	50% of Teachers
	FW: 2.3	FW: 4.1	FW: 4.1	FW: 4.2	FW: 4.2
Assistant					
Teacher	50% of Asst.	50% of Asst.	100% of Asst.	50% of Asst.	100% of Asst.
	Teachers	Teachers	Teachers	Teachers	Teachers
Aide	FW: 1.1	FW: 1.2	FW: 1.3	FW: 1.3	FW: 2.1
	100% of Aides	100% of Aides	50% of Aides	100% of Aides	50% of Aides

Table 3. QIrS Staffing Qualifications by Position for Center-based Preschool Programs

*Levels are based on the HCYC Framework (FW) for Early Care & Education Practitioners (April 2001). In order to be on a specific QIrS level, the stated *minimum* FW Level (or higher) for all positions in the licensed center must be met.

** Credit hours must come from courses in educational leadership, management, or a related field (human services administration, business administration, organizational development, public administration).

± Castle Colleagues Certificate is acceptable at Level 1.

Table 4. QIrS Staffing Qualifications for Family Child Care Homes

DHS-Licensed Position	QIrS Level 1*	QIrS Level 2*	QIrS Level 3*	QIrS Level 4*	QIrS Level 5*
Family Child	FW: 1.1	FW: 1.4	FW: 3.1	FW: 4.3	FW: 5.3
Care (FCC) Provider	Enrollment in QCP			<i>and</i> 5 Clock Hours **	<i>and</i> 10 Clock Hours **

* Levels are based on the HCYC Framework (FW) for Early Care & Education Practitioners (April 2001). In order to be on a specific QIrS level, the stated *minimum* FW Level (or higher) must be met.

**Clock Hours of training in business, which may include: small business practices, contracts and policies, record keeping, tax planning, legal, and insurance issues, technology applications, accounting, marketing, money management and retirement, and grant writing.

DHS Licensed Position	QIrS Level 1*	QIrS Level 2*	QIrS Level 3*	QIrS Level 4*	QIrS Level 5*
Director®	FW: 4.1	FW: 4.2	FW: 4.3	FW: 4.3	FW: 5.3
	and 45 hours course-	and 45 hours course -	and 45 hours course-	<i>and</i> 45 hours course-	<i>and</i> 45 hours course-
	work in I/T	work in I/T	work in I/T	work in I/T	work in I/T
	development Ω	development Ω	development Ω	development Ω	development Ω
	and 3 Credit Hours** ±	and 3 Credit Hours**	and 3 Credit Hours**	<i>and</i> 6 Credit Hours**	<i>and</i> 9 Credit Hours**
Lead Caregiver [®]	FW: 3.2 and 45 hours course- work in I/T development Ω 100% of Lead Caregivers	FW: 3.3 and 45 hours course- work in I/T development Ω 100% of Lead Caregivers	FW: 4.3 and 45 hours course- work in I/T development Ω 50% of Lead Caregivers	FW: 4.3 and 45 hours course - work in I/T development Ω 100% of Lead Caregivers	 FW: 5.3 and 45 hours course- work in I/T development Ω 50% of Lead Caregivers
Caregiver®	FW: 3.1	FW: 3.1	FW: 3.2	FW: 3.2	FW: 4.2
	and 30 hours course-	and 30 hours course-	and 30 hours course-	and 30 hours course-	<i>and</i> 30 hours course-
	work in I/T	work in I/T	work in I/T	work in I/T	work in I/T
	development Ω	development Ω	development Ω	development Ω	development Ω
	50% of Caregivers	100% of Caregivers	50% of Caregivers	100% of Caregivers	50% of Caregivers
Aide	FW: 1.1	FW: 1.2	FW: 1.3	FW: 1.3	FW: 2.1
	100% of Aides	100% of Aides	50% of Aides	100% of Aides	50% of Aides

Table 5. QIrS Staffing Qualifications by Position for Center-based Infant and Toddler Programs
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*Levels are based on the HCYC Framework (FW) for Early Care & Education Practitioners (April 2001). In order to be on a specific QIrS level, the stated *minimum* FW Level (or higher) for all positions in the licensed center must be met.

**Credit hours must come from courses in educational leadership, management, or a related field (human services administration, business administration,

organizational development, public administration). ± Castle Colleagues Certificate is acceptable at Level 1.

[®] Must meet DHS Licensing Experience and Coursework Requirement (see http://patchhawaii.org/providers/center/early).

 Ω This may be met in college credit hours and/or DHS-approved community based training requirements.

Process

Background Research: Process

In some QRIS, such as Colorado and Florida (Miami-Dade & Palm Springs, respectively). when a program enters the QRIS a level is assigned to the program based on supporting data. In other words, the program does not apply for a specific level. Other states such as Ohio, Virginia, Missouri and Iowa leave the application for a particular level up to the program. In this situation, the program decides what level to apply for (based on self-study) and then it is verified by QRIS assessments.

Most states that have fully implemented QRIS monitor compliance annually (NCCIC, 2011). Some states such as Tennessee and Arkansas do this through periodic unannounced monitoring visits. North Carolina assigns ratings every three years, but monitors annually for maintenance of ratings. Oklahoma's QRIS rating does not expire, but monitoring visits do occur three times a year. Most states do not set a time limit on how long a program can be at one rating level, but they do require participating providers to go through renewal processes periodically. This timeframe ranges from one year (e.g. Ohio, Vermont) to two (e.g., Pennsylvania, Oklahoma) to three (e.g., Delaware, Rhode Island).

Many QRIS require a program improvement plan. This plan is developed based on information gathered from a provider's self-assessment, external observations, or assessment rating (which often includes ERS scores). The plan identifies the program's strengths and weaknesses and is used to identify ways to make improvements. Some states only require certain programs to complete a plan, for example, Pennsylvania requires a plan if the ERS scores fall below a certain level.

Almost all states require on-going professional development for early childhood practitioners as part of the center's child care licensing requirements (NACCRRA, 2010; 2011). Hawai'i is one of only two states that does not. NECPA (2011) stipulates that during the first year of employment all teachers, assistants, and aides must have at least 30 clock hours per year of "job-related continuing education" during their first year of employment and 24 hours each year thereafter. Most states do not include this element in their QRIS since it is part of their licensing requirement. The requirements to renew a CDA Credential include "at least 4.5 CEUs or a 3-credit-hour course in early childhood education/child development, principles of adult learning, mental health counseling, etc." (Center for Professional Recognition, n.d.)

QIrS Design: Process

The following are the steps in the QIrS process, which vary somewhat depending on whether a program is NAEYC or NAFCC accredited or not (see Figures 1 and 2 for visual summaries of the processes).

Step 1: Pre-Enrollment Meeting

Representatives from centers and FCC homes begin the process by attending an informational meeting about QIrS. During this meeting, QIrS applications will be distributed (due one month following meeting). These meetings will occur twice a year.

Step 2: QIrS Application

The application must be received within one month after attending the pre-enrollment meeting. Copies of the following items must be attached to the application: DHS license; any national program accreditation certificates; registry cards for each staff member.

Step 3: QIrS Acceptance

Within two weeks of applying, programs will be notified of acceptance into the QIrS.

Step 4: Enrollment Orientation

Within two weeks after the acceptance letter is sent, a QIrS orientation session will be scheduled. During this meeting, the assessment process and the Quality Improvement (QI) support available will be explained.

Step 5: ERS Assessment

Within the next six weeks, an ERS assessment will be conducted. If a program has NAEYC or NAFCC accreditation, then the CLASS and PAS/BAS assessments will occur as well.

Step 6: Quality Assessment Report

Within one month after the ERS assessment (and CLASS and PAS/BAS if applicable), a program will receive its Quality Assessment Report, which includes its Quality Rating. A Quality Coach will be assigned to the program.

Step 7: Quality Improvement Plan Creation

Within 30 business days after the Quality Assessment Report is received, a program representative will meet with the Quality Coach to collaboratively create and submit a Quality Improvement Plan (QI Plan). They may also decide to submit a Quality Improvement Grant Application. The QI Plan must include provisions for how staff will fulfill the annual requirement for 16-24 hours of professional development, the PAS/BAS self-assessment, and how it will address the findings of the Quality Assessment Report (see the *Renewal Steps* section for more details).

Step 8: Improvement

After the Quality Improvement Plan is received by QIrS, the program has one year to implement its plan and apply for the QIrS Level Advancement, a process which will includes another QIrS assessment to determine movement to a higher level. (Subsequent renewals will have a 2-year time frame). During this period, the program's improvement efforts will be regularly supported by a QIrS Quality Coach. If a program

chooses not to seek level advancement, see *Renewal Steps* for how to maintain the current QIrS level.

Step 9: Decision: QIrS Level Advancement or Renewal?
Within two months to one year (up to two years after first renewal or advancement) after receiving its QIrS rating, a program may submit either an application for the next QIrS level (see *QIrS Level Advancement Steps or* Table 7) or it must renew its current level (see *Renewal Steps*).

Step 10: CLASS and PAS/BAS Assessments

Within one month after the QIrS Level Advancement Application is received, a program is assessed on the ERS, CLASS and PAS/BAS; and staff registry level and accreditation status are reviewed to determine the level it has attained.

Step 11: The assessment and improvement process repeats, starting with Step 6. This process continues until a program achieves a level 5 rating or the highest rating it chooses to work toward.

The time frame for this process is illustrated in Table 6. During the pilot, the times allowed for assessments and producing of reports will be evaluated. If necessary, a Quality Improvement Plan extension may be created.

Figure 1. QIrS Process for Programs Not Accredited by NAEYC or NAFCC



Figure 2. QIrS Process for NAEYC or NAFCC Accredited Programs



Pre-enrollment Meeting & QIrS Application	QIrS Acceptance & Enrollment Orientation	1 st ERS Assessment	Quality Assessment Report	Quality Improvement	Decision: QIrS Level Advancement or Renewal?	1 st CLASS Assessment* and 1 st PAS/BAS Assessment*
Steps 1 & 2	Steps 3 & 4	Step 5	Step 6	Steps 7 & 8	Step 9	Step 10
During this meeting held twice a year QIrS applications will be distributed. The application is due one month following the meeting.	Within two weeks, programs will be notified of acceptance. Two weeks after acceptance letter a QIrS orientation will occur.	Within the next six weeks, an ERS Assessment will occur.	Within one month after ERS Assessment, program will receive its Quality Assessment Report. Programs will be assigned a Quality Coach within a month.	Within 30 business days after QA Report is received, Quality Coach will meet with program to create & submit a Quality Improvement Plan (which includes the PAS/BAS self- assessment) and may submit a Quality Improvement Grant Application.	Within two months to one year after receiving a QIrS rating, a program may submit either an application for <i>QIrS Level</i> <i>Advancement</i> (See Table 7) or it must renew its current level (see <i>Renewal</i> <i>Steps</i>).	One month after the QIrS Level Advancement Application is received, a program is assessed on the CLASS and PAS/BAS to determine the level it has attained.

*For programs that are currently accredited through NAEYC or NAFCC, the 1st CLASS and PAS/BAS assessments will occur in Step 5.

QIrS Level Advancement Steps. Within two months to one year after a program receives its initial rating, it may submit an application for advancement to a higher level. These steps, illustrated in Table 7, include:

- QIrS Level Advancement Application submitted
- CLASS, ERS, and PAS/BAS assessments administered by QIrS assessors if applying for Levels 3 or higher
- Revised Quality Assessment Report received
- New Quality Improvement Plan developed

The program receives on-going QIrS coaching support during this entire process.

Advancement	ERS, CLASS, PAS/BAS	Quality Assessment	Quality Improvement
Application	Assessments	Report	
Two months to one year after receiving an initial QIrS Level rating, a program may apply for Level Advancement.	Within the next six weeks, ERS, CLASS, and PAS/BAS assessments will occur.	Within one month after assessments are conducted, a program will receive a revised Quality Assessment Report that states achieved QIrS Level.	Within 30 business days after QA Report is received, Quality Coach will meet with program to create & submit a Quality Improvement Plan and may submit a Quality Improvement Grant Application.

Table 7. Steps for QIrS Level Advancement

Renewal Steps. Some programs may choose not to apply for a QIrS Level Advancement, but prefer to remain at the level they have currently achieved. In order to maintain the current level, certain annual steps must be completed. During the first year of participation in QIrS, renewal-related documents are submitted 11 months after receiving the initial QIrS certificate, or one month before its expiration. (In subsequent years, these items are submitted every two years, one month prior to QIrS certificate expiration date.) In order to renew a certificate, the following items must be submitted:

- Renewal Application Form
- Proof that FCC providers, teaching staff, and directors (as identified by DHS) have met the annual on-going professional development (PD) requirements:

- 16-24 clock hours of approved training⁶ in ASK Content areas of the Practitioner Core Competencies and a completed reflection sheet for each training attended
- o Current first aid/CPR certificate
- Evidence of attendance such as a copy of the training agenda and sign-in sheet, certificate of attendance, or transcript
- NAEYC or NAFCC accreditation certificate, if applicable
- DHS license
- Annual Quality Improvement Plan; for the programs that have achieved NAEYC accreditation, a copy of the NAEYC Annual Report is an acceptable alternative

Stakeholder Feedback: Process

There were many comments about the assessors, such as they should be positive and have an "appreciative attitude" and they need to be carefully trained and selected to prevent "rater bias." One person commented that it would be a "conflict of interest as a program rep for PATCH [if] I was asked to assess." Along the same lines, another person commented that the "raters [should be] trained to debrief with participants coming from a strength-based perspective then (sic) looking at areas for raising quality."

Improvement

Background Research: Improvement

Several large studies have been conducted on teacher/professional learning opportunities and the qualities associated with the most effective strategies for making changes in the classroom that directly impact student learning and opportunities have been identified (Wei, Darling-Hammond & Adamson, 2010; Zaslow, Tout, Halle, Vick Whittaker, & Lavelle, 2010). The states that have the most effective professional development (PD) systems establish a common and clearly-articulated vision of PD; create an infrastructure of organizations for facilitating professional development; incorporate a coaching component; monitor quality; and maintain stable resources (Gallacher, 1997; Jaquith, Mindich, Wei & Darling-Hammond, 2010; Mitchell & LeMoine, 2005).

Sheila Smith and colleagues (2010) examined how states were implementing their professional development component in relationship to QRIS and found that most states were utilizing an on-site coaching method. Some of the recommendations for this approach include examining the supports for trainers via the "use of train-the-trainer curricula and ongoing supervision focused on researched-based practices." (Smith et al, p. 12) This is consistent with the

⁶ Approved training may be community-based, in-service approved as part of the Quality Improvement Plan, or a credit-bearing course.

recommendations Ackerman (2008) made in her research that examined challenges coaches face when helping program improve QRIS scores. She concluded that there is a need for more consistent in-service coach training and a method for supporting coach mentoring (i.e., coaching the coaches).

Washington State's field test of their QRIS included studying the feasibility of the coaching component (Boller, Del Grosso, Blair, Jolly, Fortson, Paulsell, Lundquist, Hallgren, & Kovac, 2010). Participants in the QRIS received an average of 6 to 11 hours of coaching per month. The coaching principle was built upon the notion of facilitating quality improvement efforts through trusting relationships. The researchers found that the programs that participated in the QRIS had a very large impact on quality for center-based programs and a large impact for FCC providers as measured by ERS scores. They attribute this change to the intensive coaching and financial incentives.

QIrS Design: Improvement

Participation in PD workshops or classes and coaching are the main improvement-related components of the QIrS. As mentioned in the renewal steps section, practitioners are expected to complete a minimum of 16-24 clock hours annually in one of the ASK content categories and have current certification in first aid/CPR training. See Table 8 for a comparison of the ASK categories in relation to the QIrS Standards and Elements.

The content of the coaching sessions will be data driven, based on the Quality Assessment Report and Quality Improvement Plan. The coach will not be the person who conducts the assessments. The role of the coach is not one of being the "expert," but rather a facilitator assisting practitioners to reflect on how they might improve their practices in the classroom, center, or home. This is done through relationship-building techniques. In order to support the coaches and provide a consistently used approach, coaches will participate in on-going training as well. This is described in the Quality Improvement Assurance (QIA) section.

Stakeholder Feedback: Improvement

Many people liked the QIrS's "emphasis on improvement" and the use of the small r, "because rating system is not as important as Quality." However there were some concerns about people thinking the name has a typo. One of the issues that came up in terms of improvement was that the "professional development infrastructure is minimal to nonexistent on the Big Island." Some of the FCC providers expressed concern about having an extra adult who might distract them from their work of teaching the children. In response to these comments, one FCC provider shared her experience in the QCP of having a "coach," saying that it was a very positive experience.

Table 8. Attitudes Skills and Knowledge (ASK) Categories Compared to QIrS Standard Areas and Elements

ASK Categories	QIrS Standard (elements)			
Growth & Development	Mental Health			
Professionalism	Program Design & Management Area			
Diversity	Diversity Standard Area			
Observation & Assessment	Child Assessment			
Health, Safety & Nutrition	Program Design & Management Area			
Relationships & Guidance	Child/Teacher Interactions			
Learning Environment	Materials Curriculum			
Planning Learning Experiences	Activities			
Working With Families	Families			
Program Management	Program Design & Management Area			
Practitioner's Choice				
	Inclusion			

Incentives

Background Research: Incentives

There are many ways QRISs approach the dissemination of incentives or awards for participation in the system. The 25 QRISs that were fully implemented as of October 2010 all provide financial incentives of some kind. These include subsidy payments at higher rates (i.e., tiered reimbursement), tax credits linked to quality ratings, bonuses tied to quality levels, quality grants to assist in achieving the next level of quality, provider wage initiatives, scholarships, or other professional development initiatives linked to QRIS participation. The most common incentive award is tied to subsidy reimbursement rates: the higher the level the program has achieved, the higher the reimbursement rate. In Louisiana, enhanced tax credits are available to families that enroll children in quality rated centers, to proprietary and nonprofit child care providers that participate in QRIS, to teachers and directors that work in these programs, and to businesses that support child care providers or resource and referral agencies.

Another popular method is the awarding of quality improvement grants for materials, larger equipment such as furniture, and safety improvements. Florida uses their data system to award points that can then be used to purchase items approved through their program's quality improvement plans. Massachusetts uses an RFP process to award these grants. Some states also use quality awards. For example, when a certain level or number of stars is achieved, the program receives a quality award. In Ohio, this award is calculated based on the number of children enrolled at the time of licensing and the size of the program. Ohio also provides a supplemental award based on the number of children in the program receiving subsidies. In Kentucky, this award is not available until a program reaches level 2 or higher. A few states reward programs on an annual basis for maintaining their levels. For example, in Arkansas, once a facility is certified at the highest level, the financial award is given annually, as long as the facility continues to meet the standards.

Some QRIS do not reward programs with financial incentives but treat free access to coaching or workshops as the incentive. Some funds go directly to the programs; others fund teachers directly with wage enhancement or retention bonuses such as in North Carolina where funds are available for scholarships for higher education requirements, wage supplements, and health insurance reimbursements. In Pennsylvania, coaches are given bonuses for positive changes in QRIS levels of programs.

QIrS Design: Incentives

Two types of incentives will be included in the QIrS: quality awards and quality improvement grants.

Quality Awards. Quality Awards will be made to programs based on the QIrS rating they receive. The amount of the awards will vary by level achieved and the size of the program (see Tables 9 and 10 for the proposed rates). In addition to the size of the programs, the number of children who receive DHS subsidies will also be factored into the award. The number of subsidized children a program has enrolled 90 days prior to the QIrS certificate being awarded will be multiplied by a set dollar amount, and this total will be added to the level award.

A program may receive more than one Quality Award if it achieves more than one level during the one- year period that runs from September 1 to August 31. Payments are made in one installment by November 30. If a program has decided to remain at a level or has achieved a Level 5 rating, the Quality Award will be given annually provided the program submits a renewal application as described in the *Renewal Steps*. Quality Awards are guided by the following:

- The program size is based on licensed capacity.
- Subsidized enrollment is based on DHS data 90 days prior to date on Level Rating certificate.
- Paid annually in one installment.
- Participation in QIrS research and evaluation is a requirement for receiving Quality Award.
- Quality Awards are contingent upon the availability of DHS funds.

Table 9. Annual Quality	Award Matrix for Center-based Programs	

Program Size	Level 1	Level 2	Level 3	Level 4	Level 5	Subsidized Enrollment (per child amount)
Small (Up to 49 Children)	\$1800	\$2400	\$3000	\$3600	\$4200	\$50
Medium (50-89 Children)	\$2800	\$3400	\$4000	\$4600	\$5200	\$50
Large (90-159 Children)	\$3800	\$4400	\$5000	\$5600	\$6200	\$50
Very Large (160 or more Children)	\$4800	\$5400	\$6000	\$6600	\$7200	\$50

Table 10. Annual Quality Award Matrix for Home-based Programs

Level 1	Level 2	Level 3	Level 4	Level 5	Subsidized Enrollment (per child amount)
\$900	\$1200	\$1500	\$1800	\$2100	\$50

Quality Improvement Grants. Quality Improvement Grants are a source of supplemental funds that are to be used to support programs' efforts to move from one level to a higher one and/or meeting quality improvement goals. A program that has not yet reached Level 5 may submit a Quality Improvement Grant Application with its Quality Improvement Plan. A program that has received a Level 5 rating may choose to apply for a Quality Improvement Grant. The application must document (a) why the funds are needed with specific evidence from the program's Quality Assessment Report, and (b) how the funds will be used, with reference to specific elements of the program's Quality Improvement Plan. Both types of documentation are necessary to support the application. The goal is for private organizations to administer these grants with funding from private and public funders.

Stakeholder Feedback: Incentives

Many people mentioned the importance of incentives in creating "buy in." One person wrote, "The financial incentives would appeal to FCC providers and encourage improvement." [Note: the specifics and details of how the incentives were being proposed were not shared at the stakeholder meetings.] Some were very concerned that any funds available initially will not last and were concerned about the "sustainability of financial incentives." One person said they were not in support of QIrS if "DHS is not accountable for giving money to sustain care."

Administration of the QIrS

The QIrS will be administered by a designated entity. This entity will serve as the governing body responsible for administering, implementing, monitoring, and evaluating the QIrS for DHS-licensed center-based and home-based child care programs. It will be responsible for overseeing the QIrS assessment process, including hiring/contracting and training QIrS assessors. In addition, it will host, modify, and maintain the QCP/QIrS database. The QIrS Administrator will subcontract or arrange a memorandum of agreement (MOA), as appropriate, for the following components of the QIrS infrastructure: (a) Quality Improvement Assurance, (b) Quality Improvement Support for Center-based providers and (c) Quality Improvement Support for components (a), (b), and (c) (see Figure 3).

Figure 3. QIrS Organizational and Administrative Structure



Quality Improvement Assurance (QIA)

The Quality Improvement Assurance (QIA) entity will provide the following scope of services:

- Develop training for a research-based approach to coaching that (a) is relationshipbased, (b) is culturally sensitive, (c) uses a strengths-based approach, and (d) focuses on supporting coaches of both center-based providers (i.e., early childhood teachers, assistant teachers, aides and directors in DHS-licensed early childhood care and education center-based programs), and home-based early childhood care providers (i.e., licensed family care home providers) who are working toward quality improvement in the QIrS.
- Oversee and deliver on-going training of the QIrS Coaches.

Specific tasks include:

- Develop and deliver the QIrS Coach training for QIrS coaches and their supervisors.
- Develop a coaching manual in consultation with agencies contracted to provide coaching to center- and home-based programs that includes: description of coaching model; essential activities to include in coaching visits or contacts; knowledge and skills of coach; dosage and intensity; support of coaches; documentation of coaching contact in a standardized fashion.
- Develop and implement a plan for supporting QIrS Coaches that may include bi-monthly meetings, phone consultations, and additional training as needs emerge.
- Adapt assessment training for QIrS Coaches where needed.
- Submit Quarterly Reports to the QIrS Administrator, which would include reports on frequency, method, and content of contact with QIrS Coaches; content of training modules, list of attendees, evaluation of trainings; update on progress of coaching manual; and any challenges in implementing QIrS coaching approach.

Quality Improvement Support for Center-based Providers

The Center-based Quality Improvement Support entity will provide the following scope of services:

• Oversee, manage, and document the quality improvement support process and outcomes for center-based participants, incorporating the QIA coaching approach.

• Hire/contract QIrS Coaches; supervise and evaluate the work of QIrS Coaches whose objective is to improve the quality of the center-based programs with whom they are assigned to work on a regular and on-going basis.

Specific tasks include:

- Hire/contract QIrS Coaches who meet QIrS Coach Qualifications.
- Place QIrS Coaches in DHS-licensed settings that have been selected to participate in the pilot.
- Supervise the work of QIrS Coaches and verify the accuracy and timeliness of their paperwork/documentation of the coaching process.
- Develop system to ensure coaching is occurring at expected rate and content is consistent with the QIrS.
- Observe each QIrS Coach quarterly and document observations.
- Work with *Quality Improvement Assurance* entity to support Coaches.
- Provide resources, including travel funds, to facilitate QIrS Coaches' work.
- Submit Quarterly Reports to the QIrS Administrator, which include reports on number of contact hours and content by coach; standardized report on progress of quality improvement plans by centers; and any challenges to implementing QIrS.

Quality Improvement Support for Home-based Providers.

The Home-based Quality Improvement Support entity will provide the following scope of services:

- Oversee, manage, and document the quality improvement support process and outcomes for home-based participants, incorporating the QIA coaching approach.
- Hire/contract QIrS Coaches and QCP Specialists; supervise and evaluate the work of the QIrS Coaches and QCP Specialists whose objective is to improve the quality of the home-based programs with whom they are assigned to work on a regular and on-going basis.

Specific tasks include:

• Hire/contract QIrS Coaches that meet QIrS Coach Qualifications.

- Assign QIrS Coaches to work in DHS-licensed FCC programs that have been selected to participate in the QIrS pilot.
- Supervise the work of the QIrS Coaches and verify the accuracy and timeliness of their paperwork/documentation of the coaching process.
- Develop system to ensure coaching is occurring at expected rate and content is consistent with the QIrS.
- Observe each QIrS Coach quarterly and document observations.
- Work with *Quality Improvement Assurance* entity to support Coaches.
- Provide resources, including travel funds, to facilitate QIrS Coaches' work.
- Submit Quarterly Reports to COF, which include reports on number of contact hours and content by QIrS Coach; standardized report on progress of quality improvement plans by FCC homes; and any challenges to implementing QIrS.
- Engage in similar tasks as above with respect to the QCP Specialists supporting the QCP for Home-based Providers program.

Infrastructure Building

The development of the QIrS infrastructure must precede piloting of the system. During this time, several supporting structures necessary to the success of QIrS will be created. These structures include the administration of the QIrS, the Quality Improvement Assurance system, and the Quality Improvement Supports for both center-based and home-based providers. This development process is anticipated to span at least eight months (July 1, 2011 through February 28, 2012).

Other tasks that need to occur during this period include the following:

- Develop a plan for creating an advisory group for the pilot phase. This will include identifying various groups that need to be represented, the group's mission, tasks that need to be addressed, and meeting structure.
- Present updates of the QIrS progress at early childhood stakeholder meetings during this period.
- Review the CLASS and its ability to assess the infant/toddler centers and family child care homes. Currently, the CLASS is only developed for preschool-level classrooms. The toddler tool is expected to be released in the fall of 2011 following the evaluation of its

field tests. Depending upon the timing of its release, other tools will be evaluated and selected for these populations.

- Develop an appeals process.
- Promote the establishment of a resource for FCC providers seeking NAFCC accreditation, such as that provided by HECAP for center-based providers.
- Refine the renewal steps for the professional development component.
- Refine the questions of the pilot study and identify the program selection variables and a process for recruiting the programs that will participate in the pilot.

Stakeholder Feedback: Infrastructure Building

There were some concerns expressed about the membership of the QCP and expanding it to represent more stakeholder groups as the QIrS development moves forward. Some of the comments include:

"Representation at the QCP meetings should include, at a minimum, one multi-site representative as there are unique challenges in operating multi-sites and one representative from a single-site faith-based preschool. We would hope that the ultimate goal of the design is to encourage participation and believe that input from providers who receive no state or federal subsidy can help to assure that."

"The process of the development of this system does not feel transparent. Please consider expanding the committee membership."

Stakeholders on Maui asked how HECAP monthly reporting requirements could be merged or aligned with QIrS reporting demands.

Pilot Study

The pilot study is necessary to field test all of the research-based assumptions that were made in the design of the QIrS. Findings from the pilot will be used to inform revisions of the system design, with the aim of eventually taking the QIrS to scale as a state-wide program. In order to test the QIrS in a variety of settings, both licensed FCC homes and center-based programs will participate. To address location variations and unique needs, programs will be selected in both rural and urban settings and will include Neighbor Island representation. Programs that will be selected for participation will include those that represent the following groups: accredited (NAEYC, NAFCC, NECPA, ACSI, HAIS); Head Start; faith-based; multi-site; private preschool; preschools that are part of a larger school; family child care homes, and other variables not yet identified. The following is a list of questions organized by the sections of the QIrS design that need to be answered during the pilot study:

<u>Standards</u>

Are more descriptive indicators necessary for programs to understand how to meet the elements within the standards, or would this be too limiting for programs?

Assessment Measures

Are both the ERS and CLASS necessary for measuring a program's quality? If not, which one provides the most information for improvement and is more cost-effective?

Do the assessment measures (CLASS, ERS, PAS/BAS) occur at the optimal times during the QIrS process for informing improvement?

Can the ERS or PAS/BAS be used effectively as self-assessment tools at lower levels and then as QIrS assessment tools (conducted by outside assessors) at higher levels?

Is it necessary to conduct the ERS, CLASS, and PAS/BAS for NAEYC and NAFCC accredited programs?

Can NECPA, ACSI, and/or other accreditations be used as alternatives to meeting some of the QIrS requirements?

Can the Head Start Triennial review be an option for meeting some of the QIrS requirements?

<u>Rating</u>

Does the block system allow for programs to make progress in a timely manner or do alternative systems need to be considered?

Do the assessment score values at each QIrS level accurately reflect quality across the spectrum of programs within the pilot?

Do the registry framework levels assigned to each QIrS level reflect quality across the spectrum of programs in the pilot?

Process

Does the content of the pre-enrollment meeting provide enough information for the programs to understand what is expected of them for participation in QIrS?

Is the application easy to complete and does it provide enough information needed by QIrS?

Are the communication methods between programs and QIrS administration effective and timely?

Does the Quality Assessment Report provide enough easy-to-understand information that can be used for program improvement?

Does the proposed timeframe allow enough time for all programs to complete the necessary steps and for the QIrS to conduct the required assessments and provide the necessary outputs, such as Quality Assessment Reports?

Does the appeals process work?

Are the *QIrS Level Advancement and Renewal* processes easy to understand and can they be implemented in the proposed time frame?

Is the renewal process easy to understand?

Improvement

Do the ASK areas cover practice in all of the QIrS standard areas?

Is there clock hour and credit-bearing training available in all of the standard areas?

Is training accessible in all geographic areas?

What is the dosage of coaching necessary for improving quality as indicated by moving up a QIrS level?

Incentives

Do the incentives entice programs to participate in QIrS and are they fundable by DHS alone?

Does the Quality Improvement Grant process work for administering funds to assist in improving programs?

To what degree does having a Quality Improvement Grant affect a program's ability to advance a QIrS level?

<u>Infrastructure</u>

Does the advisory group membership allow for adequate program representation to assist QIrS Administrator in understanding unique program issues?

Are the goals of the advisory group, as defined during the infrastructure development period, being met?

Stakeholder Feedback: Pilot Study

The following is list of some of the questions that evolved during the Kaulanakilohana (June 24, 2011) stakeholder presentation.

- What are the limitations of using standardized assessments to measure quality?
- What is the impact of who's doing the assessment is it different if it's from the community or the program?
- How do extrinsic motivations impact the overall process? How does it impact access and how does it impact the program? Does that change the program?
- Only quantitative measures are being used? Where is qualitative?
- Should there a piece with self-reporting from the families? Children?
- Who's empowered by the process and who's silenced by the process?
- What about children? Where are the children's voices in this?
- Are other QIrS systems looking at larger measures in the community besides 3rd grade reading scores?
- What about children liking to go to school?

Additional Considerations

The QIrS for licensed center-based and home-based program is the starting point for developing a statewide system that addresses quality improvement in other early childhood settings as well. States that have had success with implementing a statewide QRIS have several key elements in place in their early childhood system, including a governance body such as an Early Learning Council (ELC). The QIrS is a key element in promoting quality in the early childhood care and education system; however, it is important to acknowledge that it is just

one facet. No matter how effective and well-designed a QIrS is, its long-term success as a vehicle for improving the quality of all early childhood programs will be limited without the support of a fully implemented early learning system (Demma, 2010).

The QIrS has the potential to contribute important data that can be used to inform policy decisions and long-range program planning. In order for such data to be most useful, data systems must be coordinated across agencies that share a common interest in children's well-being. Almost every state collects information on early childhood programs, members of the early childhood education (ECE) workforce, and even individual children enrolled in ECE programs. However, these data systems are often not well coordinated and are not used for quality program planning in an efficient and cost-effective way (ECDC, 2011). Coordination of the QIrS data system with any efforts to create a larger longitudinal data system that will monitor child outcomes is essential.

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Alabama: http://www.dhr.alabama.gov/

Alaska: http://www.bestbeginningsalaska.org/what-we-do/quality-rating-system.html

Arizona: http://www.azftf.gov/WhatWeDo/Programs/QualityFirst/Pages/default.aspx

Arkansas: http://www.arkansas.gov/childcare/services/aecc/

California: http://www.cde.ca.gov/sp/cd/re/sb1629committee.asp

Colorado: http://www.qualistar.org/home.html

Connecticut: http://www.ctearlychildhood.org/Content/Education_Cabinet.asp

Delaware: http://www.dieec.udel.edu/delaware-stars-participating

District of Columbia: http://dhs.dc.gov/dhs/lib/dhs/pdfs/ecea/tiered-reimbursement__advance.pdf

Florida:

Broward County: http://www.elcbroward.org/QualityRatingSystem.aspx

Duval County: http://www.elcofduval.org/GSOD_Providers.asp

Hillsborough County: http://www.elchc.org/quality_counts.html

Leon County: http://www.elcbigbend.org/index.php/site/For-Providers/Quality-Support/Quality-Improvement-System

Miami-Dade County: http://www.elcmdm.org/QualityCounts/index.htm

Palm Beach County: http://www.cscpbc.org/bequality

Pinellas County: http://www.jwbpinellas.org/quality-counts

Sarasota County: http://www.earlylearningcoalitionsarasota.org/look_for_the_stars.htm

Georgia: http://www.decal.ga.gov/Default.aspx

Idaho: http://www.idahostars.org/idahostars/Default.aspx

Illinois: http://www.inccrra.org/quality-rating-system

Indiana: http://www.in.gov/fssa/2554.htm

Iowa: http://www.dhs.state.ia.us/iqrs/

Kansas: http://www.ks.childcareaware.org/

Kentucky: http://chfs.ky.gov/dcbs/dcc/stars/default.htm

Louisiana: http://www.qrslouisiana.org/

Maine: http://www.state.me.us/dhhs/ocfs/ec/occhs/qualityforme.htm

Maryland:

http://www.marylandpublicschools.org/MSDE/divisions/child_care/credentials/tiered

Massachusetts:

http://www.mass.gov/?pageID=edusubtopic&L=5&L0=Home&L1=Pre+K+-+Grade+12&L2=Early+Education+and+Care&L3=Provider+and+Program+Administration &L4=Quality+Rating+and+Improvement+System+%28QRIS%29&sid=Eoedu

Michigan: http://www.michigan.gov/dhs/0,1607,7-124-5453_5529---,00.html

Minnesota: http://www.parentawareratings.org/

Mississippi: http://www.earlychildhood.msstate.edu/initiatives/qualitystep.htm

Missouri: https://www.openinitiative.org/content.aspx?file=QRSModels.txt

Montana: http://www.dphhs.mt.gov/programsservices/starqualitychildcare.shtml

Nebraska: http://www.education.ne.gov/oec/ectc.html

Nevada: http://www.nevadaregistry.org/office-of-early-care-and-education/qris.html

New Hampshire: http://www.dhhs.nh.gov/dcyf/cdb/quality.htm

New Jersey: http://www.acnj.org/main.asp?uri=1003&di=1720

New Mexico:

http://www.newmexicokids.org/content/parents_and_families/look_for_the_STARS/

New York: http://www.earlychildhood.org/QSNY/

North Carolina: http://ncchildcare.dhhs.state.nc.us/providers/pv_sn2_ov_sr.asp

North Dakota: http://ndc.ndgrowingfutures.org/ndc.default.aspx

Ohio: http://jfs.ohio.gov/cdc/stepUpQuality.stm

Oklahoma: http://www.okdhs.org/programsandservices/cc/stars/

Oregon:

 $http://www.oregon.gov/EMPLOY/CCD/ccdf_funded.shtml\#Child_Care_Quality_Indicator_s_Project$

Pennsylvania: http://www.pakeys.org/pages/get.aspx?page=home

Rhode Island: http://www.brightstars.org/

South Carolina: http://childcare.sc.gov/main/general/programs/abc/index.aspx

South Dakota: http://dss.sd.gov/childcare/

Tennessee: http://www.tnstarquality.org/html/star-quality.htm

Texas: http://www.twc.state.tx.us/svcs/childcare/provcert.html

Utah: http://earlychildhoodconnections.weber.edu/default.aspx

Vermont: http://dcf.vermont.gov/cdd/stars/

Virginia: http://www.smartbeginnings.org/

Washington: http://www.del.wa.gov/partnerships/qris/

West Virginia: http://www.wvdhhr.org/bcf/ece/default.asp

Wisconsin: http://dcf.wi.gov/youngstar/default.htm

Wyoming: http://wyqualitycounts.org/Default.html

Attachment A.

QIrS Design Summary

Quality Rating and Improvement Systems (QRIS) are systems designed to promote improvement in the quality of care and education provided to young children. The Quality Care Program Partners, under a contract with the Hawai'i Department of Human Services, has designed a system for Hawai'i's DHS-licensed programs serving children 6 weeks to five-yearsold. Given its focus on quality improvement, this system is called the Quality Improvement rating System (QIrS). The goals of the QIrS are:

- Improved quality of early childhood programs.
- Increased consumer awareness of the quality of early childhood programs.
- Continuous quality improvement.

The following parameters guided the QIrS design:

- The QIrS is limited to DHS-licensed programs which include family child care homes (FCC), infant-toddler centers (IT), and group child care centers (GCCC).
- All types of licensed programs are eligible, including faith-based programs, Head Start programs, private preschools, and for-profit programs.
- The focus is on quality improvement.
- Participation is voluntary.

The QIrS identifies standards that are associated with high quality in early childhood programs, and provides a process for assessing the degree to which a program meets these standards. Using reliable and valid assessment tools, the QIrS generates QIrS Quality Assessment Reports for participating programs that provide a basis for targeted quality improvement and financial support to facilitate improvement. A QIrS administrative system supports the assessment and improvement process. The following summarizes each of the QIrS components: Standards, Assessment Measures, Rating, Process, Improvement, Incentives, and Administration (including infrastructure building).

<u>Standards</u>

The QIrS contains five Standard Areas:

• Early Childhood Care & Education

- Family Partnerships
- Diversity and Inclusion
- Staff Qualifications
- Program Design and Management

These Standard Areas are a consolidation of the nine Standard Areas endorsed by the Hawai'i Early Learning Council in Fall 2010. The consolidation reflects the following decisions, based on the research reviewed:

- Elimination of what is already required for licensing (Transportation, Health & Safety, Nutrition)
- Re-categorization of indoor space, outdoor space, materials into the Environment indicator (within Early Childhood Care and Education Standard)
- Re-categorization of Mental Health into the Early Childhood Care and Education Standard
- Expansion of "Children with Disabilities" Standard to include cultural diversity

The definition of each Standard Area and a listing of the elements that it includes are presented below.

 Early Childhood Care & Education. A quality early childhood program has a written curriculum that describes plans for using materials in developmentally appropriate activities in a stimulating environment. The implementation of this plan is evident through the child-teacher interactions and the ability of the program to utilize observations and assessments of children to provide curriculum that supports children's learning and development in all domains, including social and emotional.

Elements:

- Child/Teacher Interactions
- Curriculum
- Child Assessment
- Mental Health
- Environment
- 2. Family Partnerships. Quality early childhood programs view family involvement as a continuing process and partnership. Programs can enhance this relationship through

carefully developed policies that ensure communication with families, opportunities for involvement, and provision of resources or referrals.

Elements:

- Policies
- Resources & Education
- Communication
- Involvement
- Outside Family Support Resources
- 3. Diversity and Inclusion. Quality early childhood education programs support the full inclusion and acceptance and appreciation of children who are from varying cultural backgrounds, are English language learners, and/or have disabilities. Well trained teachers do this through intentional teaching and purposeful choice of materials while viewing children within the context of family.

Elements:

- Materials
- Activities
- Teacher/Child Interactions
- Staff Training
- Family Involvement
- 4. Staff Qualifications. Quality early childhood programs employ teachers and directors who understand the developmental needs of young children and the curriculum that is best suited to meet those needs. They have studied early childhood education both formally and informally and believe learning is a continuum for them as well as the children they serve.

Elements:

- Teacher Qualifications
- Director Qualifications
- Individual Professional Development Opportunities
- 5. Program Design and Management. High quality early childhood education programs have written plans that explain the human resource policies, such as staff orientation, performance evaluation, and staff compensation. The management design should also detail facilities management, budget planning, and mechanisms for self-assessment of the program. This information is used to develop staff training plans and the classroom size and child/teacher ratios.

Elements:

- Classroom Size and Ratios
- Staff Compensation
- Self-assessment Mechanisms
- Staff Development Plan
- Policies and Procedures

Assessment Measures

The assessment measures to be used in the QIrS are:

- Classroom Assessment Scoring System (CLASS)
- Early Childhood Environment Rating Scale-Revised (ECERS-R)
- Infant Toddler Environment Rating Scale-Revised (ITERS-R)
- Family Childcare Environment Rating Scale (FCCERS-R)
- Program Administration Scale (PAS)
- Business Administration Scale for Family Child Care (BAS)

Each of these standardized tools is able to measure the identified elements within the quality Standard Areas, see Table 1. In addition, NAEYC or NAFCC accreditation is required in order to achieve the highest quality rating level.

The tools were selected using the following criteria:

- Ability of tool to measure identified indicators of quality
- Use of tool in established QRISs
- Ease of use
- Validity (reviewed studies that demonstrate high levels of construct validity, concurrent validity, predictive validity, and content validity)
- Reliability (reviewed research that shows evidence of inter-rater reliability)
- Cost and time to administer

• Availability of trained assessors in Hawai'i

Hawai'i 's Voluntary Registry will be used to assess staff qualifications. Thus, participation in the Registry is a requirement. The Registry's Framework has a structure that is similar to the one being suggested for QIrS (block design, all items must be met before proceeding to the next level); is applicable to all practitioners (teachers, directors, assistants); is applicable to both home- and center-based settings; connects to the Attitudes, Skills and Knowledge (ASK) Core Areas ⁷of the Practitioner Core Competencies⁸; has steps within levels which allows for people to progress more quickly and easily; is familiar to practitioners in the state; and is already being used by the Registry when verifying the credentials of center-based staff.

<u>Rating</u>

The QIrS will implement a five-level building block rating system to ensure similar quality across system elements and to encourage progressive quality improvement efforts from one level to the next. Meeting DHS-licensing standards is a prerequisite for participation in the QIrS. In order to be placed on a certain level, all criteria associated with standard areas of that level must be met. This includes having a specific "score" on the assessment tool(s), such as CLASS, ERS, and PAS/BAS, and staff obtaining a specified level on the Voluntary Registry Framework (see Table 2). In order to achieve the highest level of quality, a program MUST have obtained NAEYC or NAFCC accreditation.

Tables 3, 4, and 5 detail the staffing requirements for those in a preschool, infant/toddler, or home-based program, based on the different DHS-licensing requirements.

<u>Process</u>

The following are the steps in the QIrS process, which varies somewhat depending on whether a program is NAEYC or NAFCC accredited or not (see Figures 1 and 2 for visual summaries of the processes).

Step 1: Pre-Enrollment Meeting

Representatives from centers and FCC homes begin the process by attending an informational meeting about QIrS. During this meeting, QIrS applications will be distributed (due one month following meeting). These meetings will occur twice a year.

Step 2: QIrS Application

The application must be received within one month after attending the pre-enrollment meeting. Copies of the following items must be attached to the application: DHS

⁷ The *Attitudes, Skills and Knowledge (ASK) Core Areas* describe what early childhood practitioners need to know and be able to do in order to meet the needs of young children and their families.

⁸ The Practitioner Core Competencies provides a framework and foundation for all ECE practitioners in Hawai'i.

license; any national program accreditation certificates; registry cards for each staff member.

Step 3: QIrS Acceptance

Within two weeks of applying, programs will be notified of acceptance into the QIrS.

Step 4: Enrollment Orientation

Within two weeks after the acceptance letter is sent, a QIrS orientation session will be scheduled. During this meeting, the assessment process and the Quality Improvement (QI) support available will be explained.

Step 5: ERS Assessment

Within the next six weeks, an ERS assessment will be conducted. If a program has NAEYC or NAFCC accreditation, then the CLASS and PAS/BAS assessments will occur as well.

Step 6: Quality Assessment Report

Within one month after the ERS assessment (and CLASS and PAS/BAS if applicable), a program will receive its Quality Assessment Report, which includes its Quality Rating. A Quality Coach will be assigned to the program.

Step 7: Quality Improvement Plan Creation

Within 30 business days after the Quality Assessment Report is received, a program representative will meet with the Quality Coach to collaboratively create and submit a Quality Improvement Plan (QI Plan). They may also decide to submit a Quality Improvement Grant Application. The QI Plan must include provisions for how staff will fulfill the annual requirement for 16-24 hours of professional development, the PAS/BAS self-assessment, and how it will address the findings of the Quality Assessment Report (see the *Renewal Steps* section for more details).

Step 8: Improvement

After the Quality Improvement Plan is received by QIrS, the program has one year to implement its plan and apply for the QIrS Level Advancement, a process which will includes another QIrS assessment to determine movement to a higher level. (Subsequent renewals will have a 2-year time frame). During this period, the program's improvement efforts will be regularly supported by a QIrS Quality Coach. If a program chooses not to seek level advancement, see *Renewal Steps* for how to maintain the current QIrS level.

Step 9: Decision: QIrS Level Advancement or Renewal?

Within two months to one year (up to two years after first renewal or advancement) after receiving its QIrS rating, a program may submit either an application for the next QIrS level (see *QIrS Level Advancement Steps or* Table 7) or it must renew its current level (see *Renewal Steps*).

Step 10: CLASS and PAS/BAS Assessments

Within one month after the QIrS Level Advancement Application is received, a program is assessed on the ERS, CLASS and PAS/BAS; and staff registry level and accreditation status are reviewed to determine the level it has attained.

Step 11: The assessment and improvement process repeats, starting with Step 6. This process continues until a program achieves a level 5 rating or the highest rating it chooses to work toward.

The time frame for this process is illustrated in Table 6. During the pilot, the times allowed for assessments and producing of reports will be evaluated. If necessary, a Quality Improvement Plan extension may be created.

QIrS Level Advancement Steps. Within two months to one year after a program receives its initial rating, it may submit an application for advancement to a higher level. These steps, illustrated in Table 7, include:

- QIrS Level Advancement Application submitted
- CLASS, ERS, and PAS/BAS assessments administered by QIrS assessors if applying for Levels 3 or higher
- Revised Quality Assessment Report received
- New Quality Improvement Plan developed

The program receives on-going QIrS coaching support during this entire process.

Renewal Steps. Some programs may choose not to apply for a QIrS Level Advancement, but prefer to remain at the level they have currently achieved. In order to maintain the current level, certain annual steps must be completed. During the first year of participation in QIrS, renewal-related documents are submitted 11 months after receiving the initial QIrS certificate, or one month before its expiration. (In subsequent years, these items are submitted every two years, one month prior to QIrS certificate expiration date.) In order to renew a certificate, the following items must be submitted:

- Renewal Application Form
- Proof that FCC providers, teaching staff, and directors (as identified by DHS) have met the annual on-going professional development (PD) requirements:

- 16-24 clock hours of approved training⁹ in ASK Content areas of the Practitioner Core Competencies and a completed reflection sheet for each training attended
- o Current first aid/CPR certificate
- Evidence of attendance such as a copy of the training agenda and sign-in sheet, certificate of attendance, or transcript
- NAEYC or NAFCC accreditation certificate, if applicable
- DHS license
- Annual Quality Improvement Plan; for the programs that have achieved NAEYC accreditation, a copy of the NAEYC Annual Report is an acceptable alternative

Improvement

Participation in PD workshops or classes and coaching are the main improvement-related components of the QIrS. As mentioned in the renewal steps section, practitioners are expected to complete a minimum of 16-24 clock hours annually in one of the ASK content categories and have current certification in first aid/CPR training. See Table 8 for a comparison of the ASK categories in relation to the QIrS Standards and Elements.

The content of the coaching sessions will be data driven, based on the Quality Assessment Report and Quality Improvement Plan. The coach will not be the person who conducts the assessments. The role of the coach is not one of being the "expert," but rather a facilitator assisting practitioners to reflect on how they might improve their practices in the classroom, center, or home. This is done through relationship-building techniques. In order to support the coaches and provide a consistently used approach, coaches will participate in on-going training as well. This is described in the Quality Improvement Assurance (QIA) section.

Incentives

Two types of incentives will be included in the QIrS: quality awards and quality improvement grants.

Quality Awards. Quality Awards will be made to programs based on the QIrS rating they receive. The amount of the awards will vary by level achieved and the size of the program (see Tables 9 and 10 for the proposed rates). In addition to the size of the programs, the number of children who receive DHS subsidies will also be factored into the award. The number of subsidized children a program has enrolled 90 days prior to the QIrS certificate being awarded will be multiplied by a set dollar amount, and this total will be added to the level award.

⁹ Approved training may be community-based, in-service approved as part of the Quality Improvement Plan, or a credit-bearing course.

A program may receive more than one Quality Award if it achieves more than one level during the one- year period that runs from September 1 to August 31. Payments are made in one installment by November 30. If a program has decided to remain at a level or has achieved a Level 5 rating, the Quality Award will be given annually provided the program submits a renewal application as described in the *Renewal Steps*. Quality Awards are guided by the following:

- The program size is based on licensed capacity.
- Subsidized enrollment is based on DHS data 90 days prior to date on Level Rating certificate.
- Paid annually in one installment.
- Participation in QIrS research and evaluation is a requirement for receiving Quality Award.
- Quality Awards are contingent upon the availability of DHS funds.

Quality Improvement Grants. Quality Improvement Grants are a source of supplemental funds that are to be used to support programs' efforts to move from one level to a higher one and/or meeting quality improvement goals. A program that has not yet reached Level 5 may submit a Quality Improvement Grant Application with its Quality Improvement Plan. A program that has received a Level 5 rating may choose to apply for a Quality Improvement Grant. The application must document (a) why the funds are needed with specific evidence from the program's Quality Assessment Report, and (b) how the funds will be used, with reference to specific elements of the program's Quality Improvement Plan. Both types of documentation are necessary to support the application. The goal is for private organizations to administer these grants with funding from private and public funders.

Administration of the QIrS

The QIrS will be administered by a designated entity. This entity will serve as the governing body responsible for administering, implementing, monitoring, and evaluating the QIrS for DHS-licensed center-based and home-based child care programs. It will be responsible for overseeing the QIrS assessment process, including hiring/contracting and training QIrS assessors. In addition, it will host, modify, and maintain the QCP/QIrS database. The QIrS Administrator will subcontract or arrange a memorandum of agreement (MOA), as appropriate, for the following components of the QIrS infrastructure: (a) Quality Improvement and Assurance, (b) Quality Improvement Support for Center-based providers and (c) Quality Improvement Support for home-based providers. Alternatively, if it is deemed appropriate, the QIrS Administrator can retain responsibility for components (a), (b), and (c) (see Figure 3).

Quality Improvement Assurance (QIA)

The Quality Improvement Assurance (QIA) entity will provide the following scope of services:

- Develop training for a research-based approach to coaching that (a) is relationshipbased, (b) is culturally sensitive, (c) uses a strengths-based approach, and (d) focuses on supporting coaches of both center-based providers (i.e., early childhood teachers, assistant teachers, aides and directors in DHS licensed early childhood care and education center-based programs), and home-based early childhood care providers (i.e., licensed family care home providers) who are working toward quality improvement in the QIrS.
- Oversee and deliver on-going training of the QIrS Coaches.

Specific tasks include:

- Develop and deliver the QIrS Coach training for QIrS coaches and their supervisors.
- Develop a coaching manual in consultation with agencies contracted to provide coaching to center- and home-based programs that includes: description of coaching model; essential activities to include in coaching visits; knowledge and skills of coach; dosage and intensity; support of coaches; documentation of coaching contact in a standardized fashion.
- Develop and implement a plan for supporting QIrS Coaches that may include bi-monthly meetings, phone consultations, and additional training as needs emerge.
- Adapt assessment training for QIrS Coaches where needed.
- Submit Quarterly Reports to the QIrS Administrator, which would include reports on frequency, method, and content of contact with QIrS Coaches; content of training modules, list of attendees, evaluation of trainings; update on progress of coaching manual; and any challenges to implementing QIrS coaching approach.

Quality Improvement Support for Center-based Providers

The Center-based Quality Improvement Support entity will provide the following scope of services:

• Oversee, manage, and document the quality improvement support process and outcomes for center-based participants, incorporating the QIA coaching approach.

• Hire/contract QIrS Coaches; supervise and evaluate the work of QIrS Coaches whose objective is to improve the quality of the center-based programs with whom they are assigned to work on a regular and on-going basis.

Specific tasks include:

- Hire/contract QIrS Coaches who meet QIrS Coach Qualifications.
- Place QIrS Coaches in DHS-licensed settings that have been selected to participate in the pilot.
- Supervise the work of QIrS Coaches and verify the accuracy and timeliness of their paperwork/documentation of the coaching process.
- Develop system to ensure coaching is occurring at expected rate and content is consistent with the QIrS.
- Observe each QIrS Coach quarterly and document observations.
- Work with *Quality Improvement Assurance* entity to support Coaches.
- Provide resources, including travel funds, to facilitate QIrS Coaches' work.
- Submit Quarterly Reports to the QIrS Administrator, which include reports on number of contact hours and content by coach; standardized report on progress of quality improvement plans by centers; and any challenges in implementing QIrS.

Quality Improvement Support for Home-based Providers.

The Home-based Quality Improvement Support entity will provide the following scope of services:

- Oversee, manage, and document the quality improvement support process and outcomes for home-based participants, incorporating the QIA coaching approach.
- Hire/contract QIrS Coaches and QCP Specialists; supervise and evaluate the work of the QIrS Coaches and QCP Specialists whose objective is to improve the quality of the home-based programs with whom they are assigned to work on a regular and on-going basis.

Specific tasks include:

• Hire/contract QIrS Coaches that meet QIrS Coach Qualifications.

- Assign QIrS Coaches to work in DHS-licensed FCC programs that have been selected to participate in the QIrS pilot.
- Supervise the work of the QIrS Coaches and verify the accuracy and timeliness of their paperwork/documentation of the coaching process.
- Develop system to ensure coaching is occurring at expected rate and content is consistent with the QIrS.
- Observe each QIrS Coach quarterly and document observations.
- Work with *Quality Improvement Assurance* entity to support Coaches.
- Provide resources, including travel funds, to facilitate QIrS Coaches' work.
- Submit Quarterly Reports to the QIrS Administrator, which include reports on number of contact hours and content by QIrS Coach; standardized report on progress of quality improvement plans by FCC homes; and any challenges to implementing QIrS.
- Engage in similar tasks as above with respect to the QCP Specialists supporting the QCP for Home-based Providers program.

Infrastructure Building

The development of the QIrS infrastructure must precede piloting of the system. During this time, several supporting structures necessary to the success of QIrS will be created. These structures include the administration of the QIrS, the Quality Improvement Assurance system, and the Quality Improvement Supports for both center-based and home-based providers. This development process is anticipated to span at least eight months (July 1, 2011 through February 28, 2012).

Other tasks that need to occur during this period include the following:

- Develop a plan for creating an advisory group for the pilot phase. This will include identifying various groups that need to be represented, the group's mission, tasks that need to be addressed, and meeting structure.
- Present updates of the QIrS progress at early childhood stakeholder meetings during this period.
- Review the CLASS and its ability to assess the infant/toddler centers and family child care homes. Currently, the CLASS is only developed for preschool-level classrooms. The toddler tool is expected to be released in the fall of 2011 following the evaluation of its

field tests. Depending upon the timing of its release, other tools will be evaluated and selected for these populations.

- Develop an appeals process.
- Promote the establishment of a resource for FCC providers seeking NAFCC accreditation, such as that provided by HECAP for center-based providers.
- Refine the renewal steps for the professional development component.
- Refine the questions of the pilot study and identify the program selection variables and a process for recruiting the programs that will participate in the pilot.

I able 1. The Look (dimension or subscale) and Assessments that Measure Identified ()IrS ()uality Fig	
Table 1. The Tools (dimension or subscale) and Assessments that Measure Identified QIrS Quality Ele	ments

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Early Childhood Ca	re and Education				
Child/Teacher Interactions	Language-Reasoning/ Listening and Talking Interaction	Behavior Management Productivity Quality of Feedback Language Modeling		Teaching (3)	Relationships (Provider with Children)
Curriculum	Personal Care Routines Activities Program Structure	Concept Development		Curriculum (2)	Developmental Learning Activities
Child Assessment			Child Assessment (PAS)	Assessment of Child Progress (4)	Developmental Learning Activities
Mental Health		Positive Climate Negative Climate Teacher Sensitivity Regard for Student Perspectives		Relationships (1)	Developmental Learning Activities

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Environment	Space & Furnishing	Instructional Learning Formats		Physical Environment (9)	Environment
Family Partners	hips				I
Policies	Parents & Staff/ Parents & Provider			Families (7)	Relationships (Provider with Parents & Families)
Resources & Education	Parents & Staff/ Parents & Provider			Families (7)	Relationships (Provider with Parents & Families)
Communication	Parents & Staff/ Parents & Provider		Family Partnerships (PAS) Provider-Parent Communication (BAS)	Families (7)	Relationships (Provider with Parents & Families)
Involvement	Parents & Staff/ Parents & Provider		Family Partnerships (PAS)	Families (7)	Relationships (Provider with Parents & Families)
Outside Family Support Resources	Parents & Staff/ Parents & Provider		<i>Community Resources (BAS)</i>	Community Relationships (8)	

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Diversity and Inc	usion				
Materials	Space & Furnishing		Child Assessment (PAS)	Physical Environment (9)	Relationships
Activities	Activities Program Structure			Teaching (3)	Relationships
Child/Teacher Interactions	Interaction			Relationships (1)	Relationships
Staff Training	Parents & Staff/ Parents & Provider			Teachers (6)	Professional & Business Practices
Family Involvement	Program Structure		Family Partnerships (PAS)	Families (7)	Relationships
Staff Qualificatio	ns				
Teacher Qualifications			Staff Qualifications (PAS) Qualifications & Professional Development (BAS)	Teachers (6)	

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Director Qualifications			Staff Qualifications (PAS) Qualifications & Professional Development (BAS)	Teachers (6)	
Individual Professional Development Opportunities	Parents & Staff/ Parents & Provider		Human Resource Development (PAS)	Teachers (6)	
Program Design a	ind Management				
Classroom Size and Ratios			Personnel Cost & Allocation (PAS) Work Environment (BAS)	Leadership & Management (10)	
Staff Compensation	Parents & Staff/ Parents & Provider		Human Resource Development (PAS) Income & Benefits (BAS)	Leadership & Management (10)	
Self-Assessment Mechanisms			Program Planning & Evaluation (PAS)	Leadership & Management (10)	Professional & Business Practices

Quality Elements	Early Childhood Environment Rating Scale-Revised (ECERS-R) Infant Toddler Environment Rating Scale-Revised (ITERS-R) Family Childcare Environment Rating Scale (FCCERS-R)	Classroom Assessment Scoring System (CLASS)	Program Administration Scale (PAS) Business Administration Scale for Family Child Care (BAS)	National Association for the Education of Young Children (NAEYC) Accreditation	National Association for Family Child Care (NAFCC) Accreditation
Staff Development Plan	Parents & Staff/ Parents & Provider		Human Resource Development (PAS) Provider as Employer (BAS	Leadership & Management (10)	Professional & Business Practices
Policies and Procedures			Human Resource Development (PAS) Center Operations (PAS) Fiscal Management (BAS/PAS) Record Keeping (BAS) Risk Management (BAS) Marketing & Public Relations (BAS/PAS)	Leadership & Management (10)	Professional & Business Practices

Table 2. Assessment Scores/Measures by QIrS Level

Standard Area	QirS Level 1	QirS Level 2	QIrS Level 3	QirS Level 4	QIrS Level 5
					NAEYC or NAFCC Accredited
Early Childhood Care & Education/ Diversity & Inclusion	ERS Baseline Score	ERS Score: 3.0	CLASS score: 3.0 ERS Score: 3.5	CLASS score: 4.0 ERS Score: 4.25	CLASS score: 5.0 ERS Score: 5.0
Family Partnerships/ Program Design & Management	Attend Training on PAS/BAS	Complete PAS/BAS Self- Assessment; Collect Required Documents	PAS/BAS score: 3.5	PAS/BAS score: 4.25	PAS/BAS score: 5.0
Staff Qualifications Center-based	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5	Preschool Programs: See Table 3 Infant/toddler Programs: See Table 5
Staff Qualifications Home-based	See Table 4				

DHS Licensed Position	QirS Level 1*	QIrS Level 2*	QIrS Level 3*	QirS Level 4*	QIrS Level 5*
	FW: 2.3	FW: 4.1	FW: 4.3	FW: 4.3	FW: 5.3
Director	<i>and</i> 3 Credit Hours** ±	<i>and</i> 3 Credit Hours**	<i>and</i> 3 Credit Hours**	<i>and</i> 6 Credit Hours**	<i>and</i> 9 Credit Hours**
	FW: 2.3	FW: 4.1	FW: 4.3	FW: 4.3	FW: 5.3
Teacher	100% of Teachers	100% of Teachers	50% of Teachers	100% of Teachers	50% of Teachers
	FW: 2.3	FW: 4.1	FW: 4.1	FW: 4.2	FW: 4.2
Assistant					
Teacher	50% of Asst.	50% of Asst.	100% of Asst.	50% of Asst.	100% of Asst.
	Teachers	Teachers	Teachers	Teachers	Teachers
Aide	FW: 1.1	FW: 1.2	FW: 1.3	FW: 1.3	FW: 2.1
	100% of Aides	100% of Aides	50% of Aides	100% of Aides	50% of Aides

Table 3. QIrS Staffing Qualifications by Position for Center-Based Preschool Programs

*Levels are based on the HCYC Framework (FW) for Early Care & Education Practitioners (April 2001). In order to be on a specific QIrS level, the stated *minimum* FW Level (or higher) for all positions in the licensed center must be met.

** Credit hours must come from courses in educational leadership, management, or a related field (human services administration, business administration, organizational development, public administration).

± Castle Colleagues Certificate is acceptable at Level 1.

Table 4. QIrS Staffing Qualifications for Family Child Care Homes

DHS-Licensed Position	QIrS Level 1*	QIrS Level 2*	QIrS Level 3*	QIrS Level 4*	QIrS Level 5*
Family Child	FW: 1.1	FW: 1.4	FW: 3.1	FW: 4.3	FW: 5.3
Care (FCC) Provider	Enrollment in QCP			<i>and</i> 5 Clock Hours **	and 10 Clock Hours **

* Levels are based on the HCYC Framework (FW) for Early Care & Education Practitioners (April 2001). In order to be on a specific QIrS level, the stated *minimum* FW Level (or higher) must be met.

**Clock Hours of training in business, which may include: small business practices, contracts and policies, record keeping, tax planning, legal, and insurance issues, technology applications, accounting, marketing, money management and retirement, and grant writing.

DHS Licensed Position	QIrS Level 1*	QIrS Level 2*	QIrS Level 3*	QIrS Level 4*	QIrS Level 5*
Director®	FW: 4.1	FW: 4.2	FW: 4.3	FW: 4.3	FW: 5.3
	and 45 hours course-	and 45 hours course -	and 45 hours course-	<i>and</i> 45 hours course-	<i>and</i> 45 hours course-
	work in I/T	work in I/T	work in I/T	work in I/T	work in I/T
	development Ω	development Ω	development Ω	development Ω	development Ω
	and 3 Credit Hours** ±	and 3 Credit Hours**	and 3 Credit Hours**	<i>and</i> 6 Credit Hours**	<i>and</i> 9 Credit Hours**
Lead Caregiver®	FW: 3.2 and 45 hours course- work in I/T development Ω 100% of Lead Caregivers	FW: 3.3 and 45 hours course- work in I/T development Ω 100% of Lead Caregivers	FW: 4.3 <i>and</i> 45 hours course- work in I/T development Ω 50% of Lead Caregivers	FW: 4.3 <i>and</i> 45 hours course - work in I/T development Ω 100% of Lead Caregivers	 FW: 5.3 and 45 hours course- work in I/T development Ω 50% of Lead Caregivers
Caregiver®	FW: 3.1	FW: 3.1	FW: 3.2	FW: 3.2	FW: 4.2
	and 30 hours course-	and 30 hours course-	and 30 hours course-	and 30 hours course-	and 30 hours course-
	work in I/T	work in I/T	work in I/T	work in I/T	work in I/T
	development Ω	development Ω	development Ω	development Ω	development Ω
	50% of Caregivers	100% of Caregivers	50% of Caregivers	100% of Caregivers	50% of Caregivers
Aide	FW: 1.1	FW: 1.2	FW: 1.3	FW: 1.3	FW: 2.1
	100% of Aides	100% of Aides	50% of Aides	100% of Aides	50% of Aides

Table 5. QIrS Staffing Qualifications by Position for Center-Based Infant and Toddler Programs

*Levels are based on the HCYC Framework (FW) for Early Care & Education Practitioners (April 2001). In order to be on a specific QIrS level, the stated *minimum* FW Level (or higher) for all positions in the licensed center must be met.

**Credit hours must come from courses in educational leadership, management, or a related field (human services administration, business administration,

organizational development, public administration). ± Castle Colleagues Certificate is acceptable at Level 1.

[®] Must meet DHS Licensing Experience and Coursework Requirement (see http://patchhawaii.org/providers/center/early).

 Ω This may be met in college credit hours and/or DHS-approved community based training requirements.

Table 6. Timetable for Moving		/ 12 12 11	
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Pre-enrollment	QIrS Acceptance &	1 st ERS	Quality	Quality	Decision: QIrS	1 st CLASS
Meeting & QIrS	Enrollment	Assessment	Assessment	Improvement	Level	Assessment* and
Application	Orientation		Report		Advancement or	1 st PAS/BAS
					Renewal?	Assessment*
Steps 1 & 2	Steps 3 & 4	Step 5	Step 6	Steps 7 & 8	Step 9	Step 10
During this meeting	Within two weeks,	Within the next	Within one	Within 30	Within two	One month after
held twice a year QIrS	programs will be	six weeks, an	month after ERS	business days	months to one	the QIrS Level
applications will be	notified of	ERS Assessment	Assessment,	after QA Report	year after	Advancement
distributed.	acceptance.	will occur.	program will	is received,	receiving a QIrS	Application is
			receive its	Quality Coach	rating, a	received, a
The application is due	Two weeks after		Quality	will meet with	program may	program is
one month following	acceptance letter		Assessment	program to	submit either an	assessed on the
the meeting.	a QIrS orientation		Report.	create & submit	application for	CLASS and
	will occur.			a Quality	QIrS Level	PAS/BAS to
			Programs will be	Improvement	Advancement	determine the
			assigned a	Plan (which	(See Table 7) or	level it has
			Quality Coach	includes the	it must renew its	attained.
			within a month.	PAS/BAS self-	current level	
				assessment) and	(see <i>Renewal</i>	
				may submit a	Steps).	
				Quality		
				Improvement		
				Grant		
				Application.		

*For programs that are currently accredited through NAEYC or NAFCC, the 1st CLASS and PAS/BAS assessments will occur in Step 5.

Table 7. Steps for QIrS Level Advancement

Advancement	ERS, CLASS, PAS/BAS	Quality Assessment	Quality Improvement
Application	Assessments	Report	
Two months to one year after receiving an initial QIrS Level rating, a program may apply for Level Advancement.	Within the next six weeks, ERS, CLASS, and PAS/BAS assessments will occur.	Within one month after assessments are conducted, a program will receive a revised Quality Assessment Report that states achieved QIrS Level.	Within 30 business days after QA Report is received, Quality Coach will meet with program to create & submit a Quality Improvement Plan and may submit a Quality Improvement Grant Application.

Table 8. Attitudes Skills and Knowledge (ASK) Categories Compared to QIrS Standard Areas and Elements

ASK Categories	QIrS Standard (elements)
Growth & Development	Mental Health
Professionalism	Program Design & Management Area
Diversity	Diversity Standard Area
Observation & Assessment	Child Assessment
Health, Safety & Nutrition	Program Design & Management Area
Relationships & Guidance	Child/Teacher Interactions
Learning Environment	Materials
	Curriculum
Planning Learning Experiences	Activities
Working With Families	Families
Program Management	Program Design & Management Area
Practitioner's Choice	
	Inclusion

Table 9. Annual Quality Award Matrix for Center-based Programs
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Program Size	Level 1	Level 2	Level 3	Level 4	Level 5	Subsidized Enrollment (per child amount)
Small (Up to 49 Children)	\$1800	\$2400	\$3000	\$3600	\$4200	\$50
Medium (50-89 Children)	\$2800	\$3400	\$4000	\$4600	\$5200	\$50
Large (90-159 Children)	\$3800	\$4400	\$5000	\$5600	\$6200	\$50
Very Large (160 or more Children)	\$4800	\$5400	\$6000	\$6600	\$7200	\$50

Table 10. Annual Quality Award Matrix for Home-based Programs

Level 1	Level 2	Level 3	Level 4	Level 5	Subsidized Enrollment (per child amount)
\$900	\$1200	\$1500	\$1800	\$2100	\$50

Figure 1. QIrS Process for Programs Not Accredited by NAEYC or NAFCC



Figure 2. QIrS Process for NAEYC or NAFCC Accredited Programs



Figure 3. QIrS Organizational and Administrative Structure

