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Rhode Island Quality Rating System Partnership

A Quality Rating System (QRS) is a method to assess, improve, and communicate the level of quality in early care and education and school-age care settings. This includes child care centers, family child care homes, preschool and nursery schools, and school-age child care programs. A Quality Rating System: 1) measures the quality of early care and education and after school programs against a common set of community-developed research-based standards, 2) offers supports to help programs meet these standards and 3) promotes the quality of programs to parents and other consumers through easily recognized symbols, usually stars.

As of 2006, 14 states have implemented statewide Quality Rating Systems for child care and early education providers. Many other states are in the process of designing or piloting a QRS. Research in some of the early states that have implemented a QRS has shown that, over time, the strategy works to systemically improve the quality of care children experience.

In 2005, Rhode Island established a 30-member steering committee to design a reliable system to assess the quality of early care and education and after school programs. The United Way of Rhode Island is providing funding for the 24-month research and development phase and three years of seed funding for the pilot and implementation phase. Rhode Island Kids Count is coordinating the research and development phase with support from the National Child Care Information Center and other national experts.

A Quality Rating System will improve the quality of care in Rhode Island as quality becomes more visible and as systems to support, reward, and recognize quality are put in place. A Quality Rating System will strengthen and build on the Rhode Island child care licensing and preschool approval system, will provide an organizing framework for professional development and quality improvement strategies, and will be a means to track progress toward improving the quality of programs across the state. A Quality Rating System will also provide parents with much needed information about quality.

Key Dates

February 2005	Statewide retreat to explore Quality Rating Systems
April 2005	Formation of QRS Steering Committee
September 2005	United Way of Rhode Island commits funding for design
November 2005	Statewide Community Forum
January 2006	Parent focus groups
June 2006	United Way of Rhode Island commits funding for pilot
August 2006	Release of draft QRS Program Standards & Criteria
September 2006	Statewide Community Forum
<i>March 2007*</i>	<i>Identification of QRS implementation agency</i>
<i>June 2007*</i>	<i>Statewide Community Forum</i>
<i>September 2007*</i>	<i>Pilot phase begins</i>
<i>September 2008*</i>	<i>Statewide implementation begins</i>

* dates in italics are tentative

Key Structural Elements of the Rhode Island Quality Rating System (draft):

- Participation in the Rhode Island Quality Rating System will be **voluntary**. Incentives will be provided to encourage maximum participation.
- Participation is only available to child care programs **licensed or certified by the Rhode Island Department of Children, Youth and Families** or **approved by the Rhode Island Department of Elementary and Secondary Education** as an “educational program for very young children.”
- Programs that have a valid, non-probationary license, certificate, or approval with no major, outstanding violations and that **have been in operation for at least one year** can participate in the QRS.
- The QRS will recognize **5 distinct levels of quality**. Programs with a non-probationary license will automatically qualify for Level One of the QRS. Programs at Levels Two through Five must meet specific standards that **exceed current licensing/certification/approval requirements**. Level Five standards reflect exemplary, national best practice.
- The QRS is based on a **“building blocks” structure**. Programs must meet all criteria from lower levels in order to achieve a higher level. They must meet all the criteria in a level in order to achieve it (e.g. Level Five programs must meet all the criteria in Level Five as well as all the criteria in Levels One through Four).
- The QRS Steering Committee determined early in the development phase that the standards would be **aligned across the three settings** (centers/preschools, family child care, and after school). Whenever possible, the standards are exactly the same across settings so a Level Three center is equivalent to a Level Three family child care home.
- The QRS incorporates **criteria that can be objectively, fairly and accurately measured**.
- The QRS **recognizes programs that have achieved accreditation from one of the three major national accreditation systems** (National Association for the Education of Young Children, National Association for Family Child Care, and the National Afterschool Association). All programs that have not achieved accreditation from one of these national bodies will need to meet target scores on valid and reliable program observation tools in order to achieve a high level within the QRS.
- **Site visits will be conducted** at every level of the QRS in order to verify specific quality criteria are being met.

What do the Levels Mean? (draft)

Level 1 – Licensed/Certified/Approved

Program holds a full non-probationary child care license/certificate and is in compliance with critical licensing criteria identified in QRS or program is approved by the Rhode Island Department of Education as a “program for the education of very young children.”

Level 2 - “Licensing plus”

Program is implementing good practices above and beyond licensing expectations in some areas and has established a quality improvement plan to move forward in achieving higher standards in critical QRS domains. (Level 2 also provides an opportunity to align licensing criteria that vary across settings.)

Level 3 – “Consistently Good”

Program consistently demonstrates good practice across QRS domains and uses valid and reliable process assessments and other strategies to evaluate the program and develop and implement a quality improvement plan across all domains of QRS.

Level 4 – “Consistently High Quality”

Program consistently demonstrates high quality practice across all QRS domains, is able to achieve at least good scores in all areas on a valid and reliable process assessment and systematically employs a continuous quality improvement approach that supports progress toward established program quality goals.

Level 5 – “Exemplary”

Program consistently demonstrates nationally recognized, research-based best practice across all QRS domains, achieving a level of sustained excellence that is documented in good to excellent scores in all areas on a valid and reliable process assessment and systematically employs a continuous quality improvement approach that sustains excellence and advances innovation in best practice.

QRS Categories and Measures At-A-Glance (draft)

QRS Category	Measures
Curriculum	<ul style="list-style-type: none"> ▪ Environmental Rating Score/Accreditation ▪ Teacher Planning & Prep Time (paid for centers and after school) ▪ Written Curriculum ▪ Rhode Island Early Learning Standards Program Portfolio (programs serving 3 and 4 year olds)
Health & Safety	<ul style="list-style-type: none"> ▪ Environmental Rating Score/Accreditation ▪ First Aid & CPR training
Staff-Child Interactions	<ul style="list-style-type: none"> ▪ Environmental Rating Score/Accreditation
Valuing Diversity	<ul style="list-style-type: none"> ▪ Environmental Rating Score/Accreditation ▪ Awareness/use of translation
Physical Environment	<ul style="list-style-type: none"> ▪ Environmental Rating Score/Accreditation ▪ Lead Safety ▪ Radon Safety ▪ Square feet per child of outdoor space ▪ Self-assessment of outdoor space and playground safety ▪ Square feet per child of indoor space ▪ Window/skylight in classroom ▪ Location of bathrooms for children ▪ Type of group dividers
Child Screening & Assessment	<ul style="list-style-type: none"> ▪ Distribution of info about Early Intervention and Child Outreach to parents ▪ Participation in the Department of Health's Developmental Screening Program ▪ % of children screened ▪ Existence of a child assessment system ▪ % of children with an up-to-date file of assessment information ▪ % of children with an individualized learning plan
Family Engagement	<ul style="list-style-type: none"> ▪ Parent-teacher conferences ▪ Newsletters ▪ Individualized daily written communication for children under 3 ▪ Individualized weekly written communication for children 3 to K entry ▪ Family meetings/events/workshops ▪ Opportunity for families to volunteer ▪ Parent advisory board meetings

QRS Categories and Measures At-A-Glance (draft, continued)

QRS Category	Measures
Ratio and Group Size	<ul style="list-style-type: none"> ▪ Staff-Child Ratios ▪ Group size ▪ Posted info about ratio and group size ▪ Staffing patterns ensure ratios and group size are consistently maintained
Staff & Administrator Credentials	<ul style="list-style-type: none"> ▪ Highest degree attained (high school diploma/GED, Child Development Associate, Associate's degree, Bachelor's degree, or greater). ▪ Number of college credits in specific fields. ▪ Rhode Island Early Learning Standards training and portfolio (for programs serving 3 and 4 year olds).
Staff & Administrator Professional Development	<ul style="list-style-type: none"> ▪ Individualized professional development plans ▪ Total annual hours ▪ Annual hours in health & safety ▪ Annual hours in age-appropriate child development & curriculum ▪ Annual hours in program management (for directors and family child care) ▪ Annual hours of external training
Program Administration	<ul style="list-style-type: none"> ▪ Current operating budget ▪ System to generate quarterly income/expense reports ▪ Involvement of on-site administrator in budgeting, ▪ Outside review/audit ▪ Annual \$ allocated for professional development ▪ % of revenue used for expenses ▪ Centers/After School staff compensation and benefits – wage scale, evidence of salary increases in recent years, paid holidays, paid time off, health insurance offered. ▪ Family child care staff compensation and benefits– written parent/provider contracts, evidence of salary increases, paid holidays, paid time off, assistants are paid at least minimum wage for all hours worked ▪ Annual surveys of parents and staff ▪ Use of self-assessment tools ▪ Program quality improvement plan