

DELAWARE QRIS REVISION RESEARCH & DATA SYNTHESIS

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Table of Contents

Executive Summary	1
Review of QRIS Structure.....	2
The Origin and Growth of Quality Rating and Improvement Systems.....	2
North Carolina QRIS: Star Rated License System.....	3
Virginia QRIS: Virginia Quality.....	3
Pennsylvania QRIS: Keystone STARS Program.....	3
Delaware QRIS: Delaware Stars for Early Success	3
Recommendations for the DE QRIS Revision Process.....	4
North Carolina QRIS: Star Rated License System.....	4
Pennsylvania QRIS: Keystone STARS Program.....	5
Delaware QRIS: Delaware Stars for Early Success	5
Recommendations for the DE QRIS Revision Process	6
Recommendations for Proposed Changes to the Delaware QRIS	8
References.....	10



Executive Summary

This document provides an overview of Quality Rating and Improvement Systems (QRIS). Included are summaries of current QRIS in several states, research on Delaware Stars for Early Success (Delaware's QRIS) and other states' QRIS, and recommendations for the process of revising Delaware Stars and the content of a revised Stars system.

Recommendations for the revision process include:

1. Use an external facilitator for the revision process.
2. Identify the goals for the revision process and the revised QRIS.
3. Set clear expectations for roles and responsibilities.
4. Carefully select personnel to revise the QRIS.
5. Communicate clearly, consistently and frequently with stakeholders.
6. Limit opportunities for “circling back” to previously made decisions.
7. Increase buy-in for all ECE providers.
8. Engage families in the revision process.
9. Pilot the revisions before finalization.

Recommendations for the revised Stars include:

1. Tightly align point allocation to factors proven to impact child outcomes
2. Incorporate multiple indicators of classroom quality.
3. Incorporate Continuous Quality Improvement (CQI) into each level of Stars.
4. Demonstrate equity and inclusion throughout the Stars system.
5. Revise the financial incentive structure.
6. Revise the provider support structure.



Review of QRIS Structure

States' Quality Rating and Improvement Systems (QRIS) are generally viewed as important state-level mechanisms to systematically improve early childhood education and care experiences and provide parents with consistent, reliable information to inform their care selection process. Many states, including Delaware, view their QRIS as a dynamic system that changes in response to the field's evolving understanding of the nature of high-quality early education and care settings and the effect of provider-level characteristics on child learning and development. In this section of the report, we trace the history of QRIS and describe the structural features of several states' QRIS.

The Origin and Growth of Quality Rating and Improvement Systems

In 2011, the Obama administration introduced the Early Learning Challenge (RTT-ELC) as part of its series of Race to the Top grant competitions to encourage development of America's education infrastructure ("Race to the Top", 2017). The RTT-ELC encouraged state departments of education to promote high-quality early learning programs by developing a system to evaluate early care and education (ECE) programs. As a result, US states and territories began creating QRIS to assess and transparently communicate the quality of participating ECE settings. As of January 2017, 39 states and territories had instituted statewide QRIS ("Current Status of QRIS", 2017).

QRIS are organized around a state's definition and operationalization of setting quality. That is, each state selects a set of criteria and associated measures to distinguish settings in terms of their quality. These criteria often address teacher professional qualifications, classroom structural and process features, and setting-level safety and health characteristics. Most QRIS have 4 or 5 levels, with programs being assigned a higher level based on their higher quality. States use one of three scoring systems. The first is a scoring system in which settings must accomplish all criteria to progress from one to the next highest level. In the second scoring system, a setting can progress from one to the next highest quality level by achieving some but not necessarily all criteria in the next highest level. This system works because criteria are assigned points that contribute to an overall score that, once it crosses a predetermined threshold, triggers an increase in the rating level. The third scoring system is a hybrid system in which some criteria are required and others form part of a menu with associated points. For example, states might mandate providers achieve certain criteria in order to reach a particular level. After that level, QRIS uses a point system to distinguish providers among the higher levels of the rating system.

States have used a variety of strategies to increase settings' participation in and progress through the QRIS. These strategies include tying eligibility for state grants to QRIS participation and using a tiered reimbursement system in which settings with higher QRIS ratings receive higher compensation for child care vouchers used by families in the setting. The original RTT-ELC goal of increasing the quality of early learning environments by holding providers accountable to state-developed standards has continued to define QRIS revision rounds. In the following section, we describe several states' QRIS.



North Carolina QRIS: Star Rated License System

Predating the RTT-ELC, the North Carolina QRIS was one of the first in the country. Currently, North Carolina's QRIS, the "Star Rated License System," is a 5-level points-based system in which family child care programs and licensed center-based facilities can voluntarily enroll ("Profile Report", N.D.). However, since licensing and QRIS are one body, all child care providers automatically get a star rating when they are licensed. The rating system incorporates both education standards and assessments of the provider's program. Additionally, centers can earn one Quality Point by meeting advanced criteria that are tied to evidence-based practices, such as implementing rigorous curricula, reducing group sizes or child-faculty ratios, or credentialing at least 75% of staff ("How Points are Earned", N.D.). Providers' scores range from 1 to 15 points, which correspond to 1 to 5 stars on the Star Rated License System.

Virginia QRIS: Virginia Quality

Virginia also utilizes a voluntary QRIS, known as Virginia Quality. In contrast to the points system that North Carolina developed, Virginia uses a block structure where providers must meet all criteria in one block to progress to the next ("Virginia Quality Frameworks", 2015). Virginia Quality focuses on continuous improvement, and providers are evaluated on an assortment of standards that range from staff educational attainment and program standards to the curriculum and assessments utilized by providers ("Virginia's Foundation Blocks", 2013). Providers must offer opportunities for staff professional development. The QRIS rating incorporates both teacher-student interactions as well as opportunities for children to engage in meaningful play with peers.

Pennsylvania QRIS: Keystone STARS Program

Pennsylvania developed a mandatory statewide QRIS, known as Pennsylvania Keystone STARS, which uses a hybrid point and block structure to evaluate staff qualifications and professional development, curricula, and family and community partnerships ("Keystone STARS Program", 2018). All early learning settings in the mixed delivery system (including licensed center-based care, family child care, Head Start programs, state-funded pre-K, private academic schools, and early intervention preschool programs) must enroll in the Keystone STARS program. Pennsylvania revised its QRIS in 2015, and an external evaluator conducted a study of the revision process to provide recommendations for future revisions of state QRIS.

Delaware QRIS: Delaware Stars for Early Success

Like other states, Delaware has revised its QRIS based on research recommendations and in line with state and federal initiatives. Delaware used a block system until 2012, when it implemented a hybrid system of blocks and points to align with the RTT-ELC grant competition. Delaware continued to modify its QRIS from 2014 to 2016, which resulted in its current Delaware Stars system. Currently, providers must meet all criteria for the lower two blocks to advance to the points system. Then, points distinguish ECE providers among levels three to five, based on a set of criteria divided among four domains: Family and Community

Partnerships, Qualifications and Professional Development, Management and Administration, and Learning Environment and Curriculum. Star levels 1 and 2 focus on committing to Continuous Quality Improvement (CQI) and setting goals, while levels 3 through 5 involve observations and ratings of the childcare provider. Star level 3 allows providers to select standards on which they are judged, while Star levels 4 and 5 involve “essential standards” that are mandatory and consistent across providers. These “essential standards” were created to guarantee providers with the highest ratings demonstrate evidence of attaining the highest levels of quality. Delaware Stars is a voluntary QRIS, but providers must participate to receive particular state and local funding sources, such as Tiered Reimbursement, Infrastructure Grants, and for their staff to receive WAGE\$ bonuses. Additionally, providers must be licensed to participate in subsidy reimbursement, and they qualify for higher reimbursement rates if the provider achieves Star levels 3 through 5.

Review of QRIS Research: Validation and Descriptive Studies

Validation studies analyzing how QRIS ratings are associated with measures of quality and preschool children’s development were required by states that received RTT-ELC grants. The Office of Planning, Research, and Evaluation (OPRE, 2017) put together a report synthesizing the findings from validation studies in multiple states to determine if rating systems were successfully driving increases in outcomes. In the systems evaluated, the report found significant differences in some child outcomes between children attending the highest-rated and lowest-rated settings. However, the differences between settings that were closer to one another in their quality ratings were not substantively meaningful.

While the results were inconsistent across individual state validation studies, the OPRE report indicated that particular child outcomes were more likely to have positive relationships with QRIS ratings. Specifically, higher ratings in the QRIS often had a positive, statistically significant relationship with children’s executive function skills and indicators of social-emotional development. These findings suggest that QRIS can be a useful tool for driving improvement in aspects of early learning settings that support positive developmental outcomes for children. To understand how these general findings varied from state to state, please read the [OPRE 2017 synthesis report](#).

In the sections that follow, we summarize recent studies of the QRIS we described above.

North Carolina QRIS: Star Rated License System

Findings from a study by Bassok, Dee, and Latham (2017) indicated that settings that participated in the QRIS responded to low ratings by actively working to increase their quality ratings. Additionally, the authors found that enrollment in low-rated settings fell over time compared to enrollment in high-rated settings in the same time period.



Pennsylvania QRIS: Keystone STARS Program

The external evaluator of Pennsylvania Keystone STARS' found both strengths and limitations of the revision process (Perkins, 2017). Specifically, the state benefitted from utilizing a Think Tank process to frame the program and incorporate the voices of families, children, and learning professionals. Trained facilitators led the revision panel and guided the group to reach consensus on evaluation components. Furthermore, Pennsylvania provided specific guidance to providers through its website and community meetings, and the state used feedback loops to encourage providers to meet expectations. However, the external evaluator found that the review panel was absent of diverse voices such as individuals of color and representatives from other sectors (i.e., health and safety representatives, business community stakeholders, etc). While the facilitator helped guide the revision process, the state would have benefitted from face-to-face meetings and a prolonged timeline to revise the QRIS.

Delaware QRIS: Delaware Stars for Early Success

Researchers have conducted numerous validation studies on Delaware Stars, ranging from studies of the 2012 hybrid system to studies that look at the 2016 revisions. The most comprehensive study was conducted by the RAND Corporation in 2016. This study investigated whether Delaware Stars ratings were related to improvements in ECE outcomes, and it looked at which components of the QRIS were more predictive of improved outcomes for children (Karoly, Schwartz, Messan Setodji, & Haas, 2016). This study was intended to examine the 2012 hybrid QRIS. However, the data for this study were collected amidst the roll-out of revisions in 2014. Therefore, its findings do not reflect the rigorous changes that were implemented from 2014 to 2016. Additionally, given that the data for the study were collected while DOE was implementing the 2014 revisions, readers should exercise caution when interpreting the report's findings. However, the authors were able to conclude that two quality domains were more predictive of increases to children's outcomes: higher scores on Qualifications and Professional Development were associated with increased literacy and problem-solving skills, while higher scores on Management and Administration were associated with higher levels of children's executive functioning. Furthermore, the RAND study concluded that the sum of a provider's Delaware Stars points had predictive power for children's developmental outcomes.

Other validation studies have indicated support for the Delaware Stars program, although the results have been mixed. For example, a positive correlation was found between toddler engagement at ECE providers and global QRIS ratings (Hooper & Hallam, 2017), which indicates that higher-ranked providers are delivering better environments and outcomes for children. There is also evidence of positive correlations among various domain outcomes, as well as between each outcome and overall QRIS ratings (Buell, Hooper, Hallam, & Han, 2018). Various studies have indicated significant relationships between providers' ratings and only particular outcomes, yet these studies have not provided evidence that Delaware Stars improves all outcomes across all domains. These studies documented that the 2012 revision of the Delaware Stars program increased the quality of ECE spaces ("Improved Spaces", 2018); classroom learning activities ("Improved Learning", 2018); classroom interactions for infant-, toddler-, preschool-, and family-care centers ("Improved Classroom Interactions", 2018); and literacy practices ("Improved Early Literacy", 2018).



QRIS MEASURES THAT HAVE BEEN LINKED TO STUDENT OUTCOMES

Measure	Correlated Outcome
Teacher Qualifications and Professional Development	Literacy and problem-solving skills
Management and Administration	Executive functioning
Global Delaware Stars Score [2012 revision]	Literacy practices, literacy, and language environment
Global Delaware Stars Score [2012 revision]	Quality of ECE spaces
Global Delaware Stars Score [2012 revision]	Classroom interactions
Global Delaware Stars Score [2012 revision]	Learning activities
Global QRIS Score [Nationally]	Toddler engagement

Note: All rows demonstrate significant, positive relationships between the predictor and the outcome.

While participants of Delaware Stars indicate high approval of the program (“Delaware Stars for Early Success Satisfaction”, 2014; Miskell, Nativ, & Zabala, 2018), there are barriers for providers to join. Stakeholders have reported overall satisfaction with the program, and they have affirmed that the QRIS encourages them to continuously monitor the quality of their programs. Furthermore, Delaware Stars emphasizes the inclusion of families and communities, which leads ECE providers to find new ways to work with these groups and to document their successes. However, non-QRIS providers have reservations about joining the program. In a focus group of a representative sample of ECE providers, non-participants indicated that the QRIS is challenging to navigate and that guidelines are often difficult to follow (Hallam, Hooper, Bargreen, Buell, & Han, 2017). For adults who own and manage a child care program without the support of others, the paperwork mounts an administrative challenge, which could force these providers to decide between filling out forms and providing greater care for the children. Additionally, non-participants indicate that families do not understand or use Delaware Stars rankings when making decisions about where to enroll their children, so they believe the challenges outweigh the financial benefits that participation in QRIS would provide.

Recommendations for the DE QRIS Revision Process

In light of the extant information on QRIS revision processes– both nationwide and those specific to Delaware Stars – and AnLar’s work on other revision processes, AnLar makes the following recommendations regarding Delaware’s revision process:

- 1. Use an external facilitator for the process.** The use of a trained facilitator with expertise in both the process of facilitation and the content of QRIS ensures that the state will engage in a meaningful, timely, and reflective process. It can also help to ensure that individuals with diverse backgrounds are engaged in the process and help the state to reflect upon the revision process as it occurs.
- 2. Identify the goals for the revision process and the revised QRIS.** The goals for the revision process and the revised QRIS should be clearly stated from the outset to ensure that everyone involved in the process has a shared understanding of the expected outcomes of the process and how the process will be conducted. By identifying these goals, the project leads can clearly communicate with all



stakeholders what they hope to accomplish with this process, how they will accomplish it, and who will be involved in the revision design and implementation of resulting changes.

3. **Set clear expectations for roles and responsibilities.** Changes to Delaware Stars will only be successful if the right stakeholders and decision-makers are involved in the revision process. Individuals involved in this process must understand the expectations for their participation and their responsibilities in the process. To make efficient use of time, work on the revision process should be done outside of formal stakeholder meetings. Communicating this expectation in advance of the meetings will be critical to timely revisions.
4. **Carefully select personnel to revise the QRIS.** The Delaware Department of Education (DOE) should be careful to select relevant stakeholders from all realms of early child care facilities, including families, teachers, administrators, developmental experts, business leaders, and safety experts. DOE should also ensure that the group represents the Delaware population as a whole, including people of color, migrant families, low-SES families, LGBTQ families, and representatives from across the state. Ensuring that the revision group can contribute unique perspectives from all walks of Delaware life will be crucial to designing a QRIS that meets everyone's needs.
5. **Communicate clearly, consistently and frequently with stakeholders.** The successful revision of and implementation of a revised Stars relies on timely, meaningful stakeholder engagement. By communicating clearly and consistently with stakeholders throughout the process DOE can ensure that stakeholders are up-to-date on the project, including what activities are being conducted. Effective communication can help to ensure buy-in to the process. Similarly, frequent stakeholder engagement opportunities can help the state to identify potential objections to or issues with proposed revisions before reaching the pilot stage.
6. **Limit opportunities for “circling back” to previously made decisions.** The engagement of stakeholders throughout the revision process can sometimes lead to an iterative process in which new information is identified or new perspectives are included that leads the revision team to revisit previously made decisions. While this process is sometimes necessary, the state should clearly document the reasons for each decision in the revision process as it is made and be intentional about communicating when and why previously decided issues are being revisited and if they are open to further discussion.
7. **Increase buy-in for all ECE providers.** While 85% of providers who are QRIS participants have voiced satisfaction with the program (“Delaware Stars for Early Success Satisfaction, 2014), many providers have encountered barriers to joining the program. DOE should conduct a focus group to listen to providers’ feedback on the barriers to joining QRIS, and consider how those concerns may be addressed through the revision process.
8. **Engage families in the revision process.** Since the Department seeks to have families use the revised QRIS as part of their early childhood program decision making process, families should be involved in QRIS revisions to indicate the types of information that would be most helpful to them and how they would prefer to receive that information.

- 9. Pilot the revisions before finalization.** In order to ensure the revised QRIS meets the needs of providers and has the intended impact on program quality and student outcomes, DOE should pilot the revised QRIS with a variety of providers representing different program types and different levels of quality.

Recommendations for Proposed Changes to the Delaware QRIS

Based on the validation studies that have been conducted on QRIS, AnLar recommends the following key components for the next iteration of Delaware Stars:

- 1. Tightly align point allocation to factors proven to impact child outcomes.** Validation studies have demonstrated a lackluster relationship between QRIS and various child outcomes. DOE should link points to behaviors (i.e., teacher-child interaction quality) and inputs (i.e., language-rich environment, setting-level systems that support continuous professional development for educators and leaders) that have the strongest role in improving child outcomes, such as growth in executive functioning. As the management and administration domain has the strongest documented connections to executive functioning in the existing QRIS validation studies, and increasing children's executive functioning is one of the major outcome goals of QRIS, the QRIS revision should clearly delineate specific inputs that improve management and administration. Tying the QRIS points to these behaviors will motivate ECE providers to make the proposed changes, which will tighten alignment of points to growth in children's outcomes. The revisions should emphasize only the most important practices so that providers can focus their attention on those that are known to support child outcomes. DOE should consider reducing the number of standards to hone in on the most significant recommendations and guidelines.
- 2. Incorporate multiple indicators of classroom quality.** Classroom quality, particularly instructional quality, has been linked to improved kindergarten readiness among children in multiple studies. Integrating a measure of instructional quality into the QRIS that provides actionable improvement-based information for educators along with a reliable indication of instructional quality may tighten the link between the QRIS level and child outcomes.
- 3. Incorporate Continuous Quality Improvement (CQI) into each level of Stars.** Providers should be encouraged to continue developing their practices, whether through professional development or through setting-based reflection practices. Being reflective and contemplative leads educators to enhance tools that work and to adopt more effective and efficient practices. Setting-based indicators of CQI include educator release-time for planning and evidence of a leader's instructional leadership, including observation of and shared reflection with educator teams. Additionally, the QRIS itself needs to have regular reviews to evaluate the system and ensure it is reaching intended goals. By identifying stakeholders who can regularly provide input to DOE, as well as by scheduling regular evaluations of the QRIS, the Delaware Stars program will not need a major overhaul in a few years; rather, system-level CQI will keep the QRIS effective and current.



4. **Demonstrate equity and inclusion throughout the Stars program.** Early childhood professionals and the families and children they serve differ in many dimensions, including income, race, ethnicity, home language, religion, life experiences and level of existing knowledge and skills. Settings that are responsive and welcoming to this diversity—that seek equity by providing extra support for those who need it, and that demonstrate respect by establishing communication and feedback protocols to include diverse perspectives in the management of the settings and the classroom—are better positioned to see growth in development in all children attending compared to settings that do not establish these practices.
5. **Revise the financial incentive structure.** Tiered reimbursement systems encourage early childhood leaders to improve QRIS ratings. In surveys of both QRIS participants and providers who have not opted in to QRIS, respondents acknowledged that one of the major reasons for joining QRIS is the financial support provided by Delaware (“Delaware Stars for Early Success”, 2014; Miskel, Nadiv, & Zabala, 2018). Higher reimbursement rates not only increase the likelihood that settings will continue to accept state child care vouchers but also give providers a competitive edge in recruiting and retaining staff that may be attracted to slightly higher wages that could be offered in settings at higher levels compared to those at lower levels. DOE should revise the financial incentive structure to align with the goals of the new QRIS model. Specifically, the financial incentives should offer support to programs to achieve and sustain the identified quality practices from the QRIS.
6. **Revise the provider support structure.** Provider support consists of both technical assistance (TA) and training, and each of these components can be offered along many dimensions. Both QRIS participants and providers who have not opted in to QRIS have acknowledged that navigating the requirements, paperwork, and technical assistance can be challenging (“Delaware Stars for Early Success”, 2014; Miskel, Nadiv, & Zabala, 2018). The provider support structure should be revised to support the goals of the new QRIS model, including providing TA to providers necessary to support the adoption and implementation of new policies and practices in the revised QRIS. In addition, early childhood leaders may benefit from TA and trainings that address key administration, management, and leadership skills including instructional leadership. Trainings should intentionally be coordinated with TA to support the goals of the new QRIS model. The skills and capacities of the leader form a foundation upon which the systems and norms of the setting itself are defined and developed. As providers are held to new standards, the TA and training will need to evolve to provide support in attaining and implementing new recommendations.

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