
Silver State Stars: Quality Rating Improvement System Pilot Project

Year Three Final Evaluation Report
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About the Nevada Institute for Children's Research and Policy

The Nevada Institute for Children's Research and Policy (NICRP) is a not-for-profit, non-partisan organization whose primary goal is to advance the well-being of children in Nevada. As a research center in the School of Community Health Sciences at the University of Nevada Las Vegas, NICRP is dedicated to conducting academic and community-based research that helps guide the development of policies, practices, and programs which serve to enhance the health and well-being of children and their families. For more information about NICRP, please contact us or visit our website at <http://nic.unlv.edu>.

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Introduction and Background

Quality Rating Improvement Systems (QRIS) are being developed across the country to improve the quality of early childhood education centers. These systems have been developed to provide a more objective way to assess quality in a center providing childcare. Currently, there are Quality Rating Improvement Systems (QRIS) in 26 states or local jurisdictions in the United States and the remaining 25 states are in the process of developing a QRIS. Each of these systems varies slightly in its requirements and protocols, but all have the goal of improving the quality of early childhood education. The pilot project in the state of Nevada, which started in 2010, is the first QRIS in Nevada and has been working to test and refine the program processes before moving to full implementation.

To begin the process of implementing a QRIS, experts in early childhood education in Nevada were assembled to form a QRIS Workgroup. This workgroup created the Silver State Stars QRIS, including the structure of the system (a 5-star rating system), the quality indicators used to create the star rating, and the process for technical assistance and grant funding for quality improvements in centers.

In the Spring of 2009, the QRIS Workgroup, along with the Nevada Office of Early Care and Education, University of Nevada Cooperative Extension (UNCE), and the Nevada Institute for Children's Research and Policy (NICRP), implemented the Silver State Stars QRIS Pilot Project. This pilot project was designed to implement the program in 24 centers, over the two year period from 2009 to 2011, to evaluate the utility of the star rating system and processes designed to improve center quality. After working with the first 2 years of centers, changes were made to the program and improvements made to the associated processes and an additional six centers were chosen to pilot the revised program from July 2011 to June 2012.

Selection of Participating Centers

For the third and final year of the pilot, centers were selected using the same methods used to select the initial 24 centers. The Nevada Office of Early Care and Education sent postcards to all licensed childcare centers in Southern Nevada notifying them of the pilot project. If centers were interested in being selected for participation, they were asked to mail back the postcard and include the center director's contact information and two basic pieces of demographic information: (1) the ownership type of the center (non-profit, privately owned, or corporately owned) and (2) the size of the center. These variables were chosen as sampling criteria for the pilot because each could have an impact in the use of the QRIS model as created for the pilot project. This year 28 centers responded and six centers were selected for participation.

After NICRP selected the centers for this year of the project, the Nevada Office of Early Care and Education contacted each of the six centers to verify they were still available to participate in the pilot. Some centers either did not respond to this call or no longer wished to participate in the pilot for a variety of reasons, including ownership changes, director changes, and timing of the project. If a center was contacted and then chose not to participate a replacement center was selected by NICRP using the same selection process that was used for the original sample (see Evaluation Reports for Years 1 and 2 for full methodology).

Evaluation Plan

In this final year of the pilot project NICRP worked with the Office of Early Care and Education, University of Nevada Cooperative Extension, and the contracted consultant for the environment rating assessment to document and solicit feedback on newly develop tools, forms and processes to help improve the QRIS for Nevada. In order to complete this task NICRP used three different methods: (1) feedback from participating center directors (at two points in time), (2) independent assessments of quality using the Early Childhood Environment Rating Scale-Revised (ECERS-R) or Infant Toddler Environment Rating Scale-Revised (ITERS-R), and (3) preliminary star ratings using the Silver State Stars criteria.

Finally, NICRP also documented the changes made to the program as a result of the earlier pilot years. In each of the previous annual report NICRP made recommendations for improvement based on the findings of the evaluation (see page 6). These changes are discussed throughout the report to understand how the earlier years of the evaluation may have impacted the Year three centers. Findings from all of the evaluation components are discussed in separate sections, including specific methodology for each. At the conclusion of the report, overall recommendations for program improvement are listed and explained.

Changes to the Program for Year Three Pilot Centers

After two years of the pilot program, the Office of Early Care and Education along with the QRIS workgroup and others identified necessary changes to the processes used to improve the system for centers in Nevada. In the previous reports several recommendations were made and the table below outlines how each of these recommendations was addressed in Year Three of the pilot.

Recommendation from Years 1 and 2	Changes Made in Year Three
<p>1 Creation of a “Pre-QRIS” program to help get centers to a level where they could successfully participate in QRIS.</p>	<p><i>By Year Three of the program, all participating centers were provided with a three hour orientation meeting along with 6 hour training about the Environment Rating Scales. During full implementation of the program, centers can apply to receive coaching which will be based on need and the ability to meet benchmarks for success.</i></p>
<p>2 Expand the amount of time for technical assistance</p>	<p><i>In this year of the pilot “technical assistance” was referred to as coaching in an effort to empower centers to make the changes on their own with guidance from the coach. After implementation, the QRIS system will be designed to allow centers to apply for coaching and the amount of time the center works with the coach will be determined based on benchmarks as opposed to a pre-determined time frame.</i></p>
<p>3 Further develop written program guidelines and protocols that can be used as a reference for both participating centers, and staff conducting assessments or providing technical assistance.</p>	<p><i>In the third year of the pilot, centers received more written documentation and processes for center participation, and star ratings were more formalized. An instructional handbook and a website has been developed for full implementation of the program</i></p>
<p>4 Provide training on how to introduce new materials into the classroom.</p>	<p><i>Throughout the pilot UNCE provided training on a variety of topics, and coaches worked with center staff to ensure appropriate introduction of new materials into the classroom.</i></p>
<p>5 Complete a full review of quality indicators, within each of the quality standards, especially those within “Health and Safety.”</p>	<p><i>The work group met to review the quality indicators at the conclusion of the second year of the project. Some elements were reviewed for redundancy and removed and others were added in their place.</i></p>
<p>6 Ensure that implementation of this program on a wider scale includes education for the public on how the ratings are determined and what they mean in terms of quality.</p>	<p><i>Prior to year three this recommendation had not been acted upon. However, when the program is implemented in July 2012 the QRIS website does contain information about what the different star ratings mean. QRIS also has plans to do additional marketing activities to help parents and center staff better understand the program.</i></p>

Findings

1. Center Director Pre-Survey

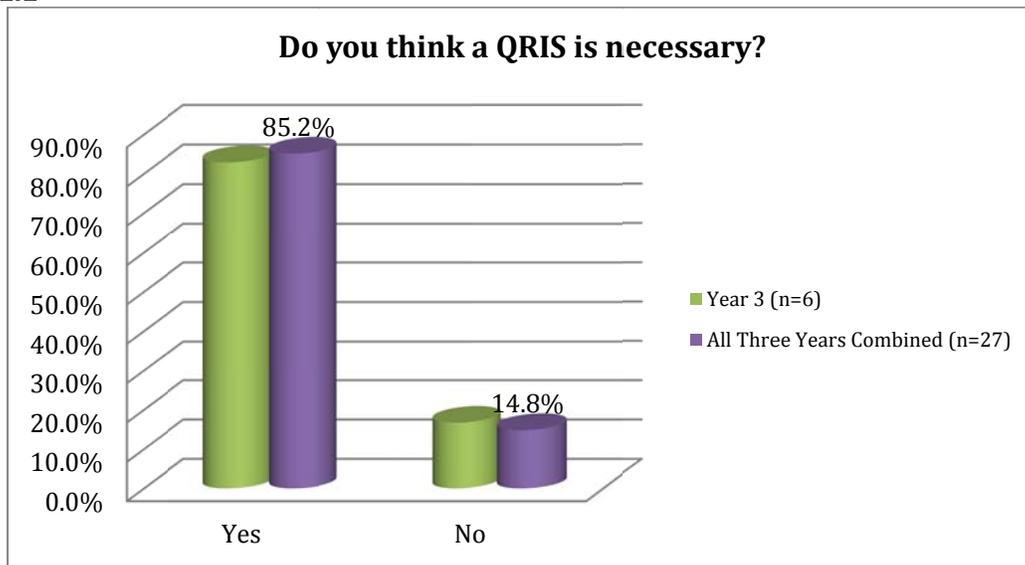
Methodology

Again in Year Three of the pilot, centers selected for participation in the program were asked to attend an orientation meeting to familiarize themselves with the program as well as the process and time frames for their participation. Shortly after this meeting directors were emailed a short electronic survey to better understand their knowledge about QRIS as well as any of their concerns prior to participating in the pilot. Directors were emailed a link to the on-line survey and asked to complete it within one week. Responses were then analyzed and the results are listed below.

Findings

Center directors were asked about their feelings regarding a QRIS with regard to its necessity, usefulness to parents, and usefulness to childcare centers. Nearly all (85.2%) center directors indicated that they felt a QRIS was necessary (Figure 1.1).

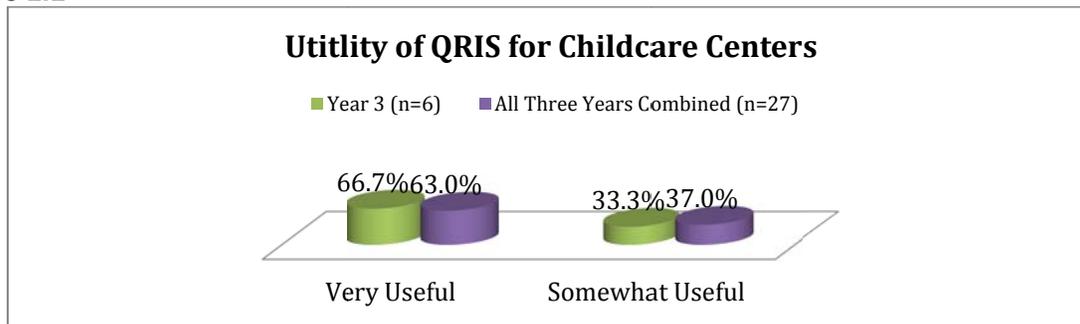
Figure 1.1



	Year 3 (n=6)	All (n=27)
QRIS Necessary		
Yes	83.3% (n=5)	85.2% (n=23)
No	16.7% (n=1)	14.8% (n=4)
Total	100%	100%

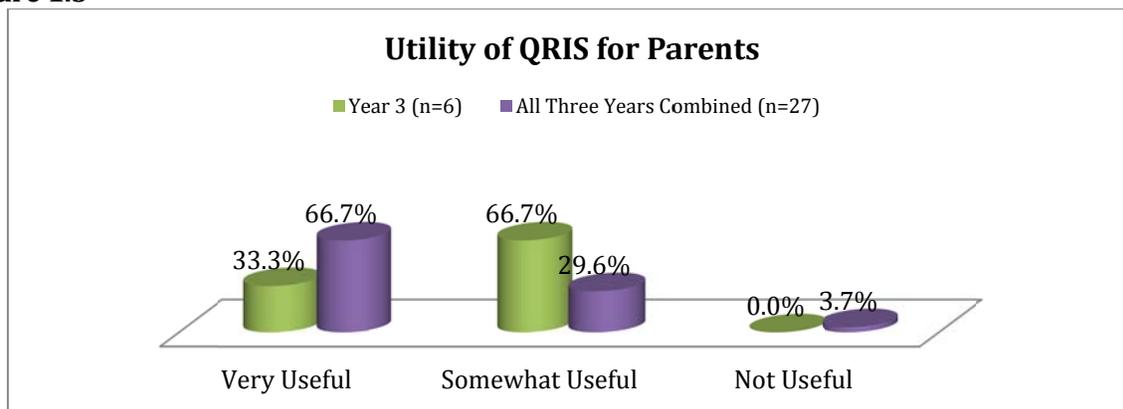
Figure 1.2 and Figure 1.3 illustrate center director's feelings regarding the utility of a QRIS for childcare centers and parents that use childcare centers respectively. Figure 1.2 clearly illustrates that directors felt a QRIS would be useful for centers, while Figure 1.3 shows that the majority of directors also felt a QRIS would be useful for parents as well.

Figure 1.1



	Year 3 (n=6)	All (n=27)
QRIS Utility for Centers		
Very Useful	66.7% (n=4)	63.0% (n=17)
Somewhat Useful	33.3% (n=2)	37.0% (n=10)
Not Useful	0.0% (n=0)	0.0% (n=0)
Total	100%	100%

Figure 1.3

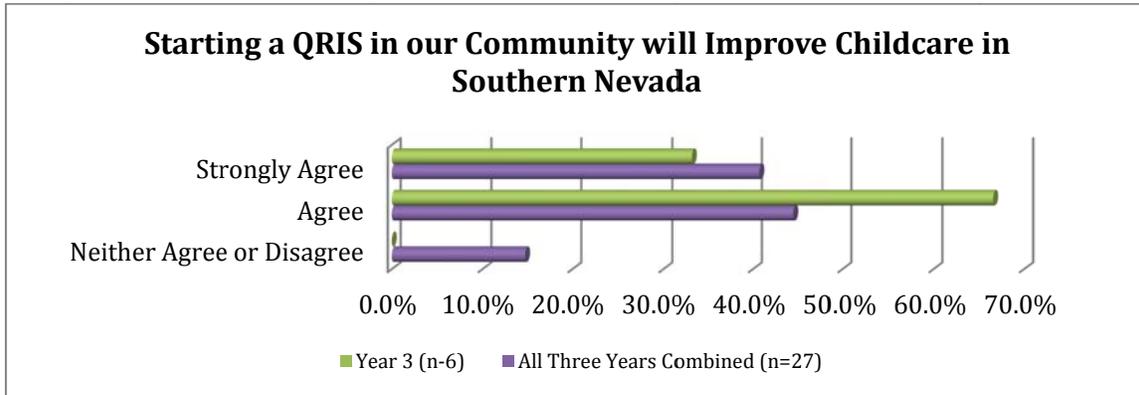


	Year 3 (n=6)	All (n=27)
QRIS Utility for Parents		
Very Useful	33.3% (n=2)	66.7% (n=18)
Somewhat Useful	66.7% (n=4)	29.6% (n=8)
Not Useful	0.0% (n=0)	3.7% (n=1)
Total	100%	100%

Next, directors were asked to describe why they signed on to be a part of this pilot project. The majority reported they were participating in the pilot because they wanted to improve their center for the benefit of the children through receiving technical assistance. Others stated that they were participating to “see where we are lacking” and having someone outside their center evaluate it without incurring any costs. One director expressed her interest in improving quality stating, “These children deserve the best”. Only two center directors explicitly listed the grant funding and as the reason to participate in the program.

A QRIS is intended to improve the quality of childcare through the provision of technical assistance and the provision of information to parents so they may differentiate between centers. The majority of center directors that completed this survey either agreed (44.4%) or strongly agreed (40.7%) that “starting a QRIS in our community will improve childcare in Southern Nevada”, as demonstrated in Figure 1.4 below.

Figure 1.4

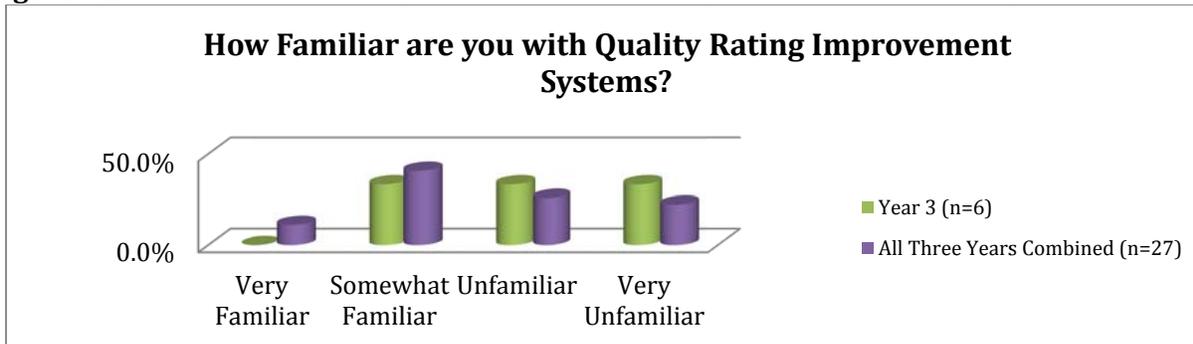


	Year 3 (n=6)	All (n=27)
QRIS will Improve Quality in Southern NV		
Strongly Agree	33.3% (n=2)	40.7% (n=11)
Agree	66.7% (n=4)	44.4% (n=12)
Neither Agree nor Disagree	0.0% (n=0)	14.8% (n=4)
Disagree	0.0% (n=0)	0.0% (n=0)
Strongly Disagree	0.0% (n=0)	0.0% (n=0)
Total	100%	100%

Directors were also asked about any concerns they had in participating in the project. This question was left open-ended so that directors could list any potential concerns without being limited by a list. Most of the directors reported that they had concerns, with the majority falling into one of three specific categories. These included: (1) the center’s ability to score well on the star rating scale, (2) the time involved with participating in the project, and (3) the impact of viewpoints of those involved in the project. This information was used to design questions for the follow-up interview and address whether these preliminary concerns actually turned into issues or barriers when participating in the program.

Directors were then asked how familiar they were with Quality Rating Improvement Systems for childcare centers. Figure 1.5 illustrates that the majority (40.7 percent) of all center directors were “somewhat familiar” with QRIS prior to participating in the pilot project.

Figure 1.5



	Year 3 (n=6)	All (n=27)
Familiarity with QRIS		
Very Familiar	0.0% (n=0)	11.1% (n=3)
Somewhat Familiar	33.3% (n=2)	40.7% (n=11)
Unfamiliar	33.3% (n=2)	25.9% (n=7)
Very Unfamiliar	33.3% (n=2)	22.2% (n=6)
Total	100%	100%

Finally, directors were also asked whether they were currently participating in other projects that provide technical assistance and/or consultation services. Two of the six (33.3%) Year Three centers reported that they were also participating in another program – one director reported United Way High Scope and the other center reported Shots for Tots and Color Me Healthy.

Summary and Conclusions

This survey helped to describe the participating centers and identify center directors’ concerns and experiences early in the QRIS process. It seems that most directors participated in this pilot to improve quality in their center as well as to receive expert training and technical assistance to increase the knowledge of their staff. Prior to starting the pilot, some of the center directors did have some concerns regarding participation. These included the amount of time the project would take, the viewpoints held by those involved in the project and their center’s ability to score well using existing star rating criteria. These issues were all addressed in the follow-up face-to-face interview with the directors, discussed in Section 4.

2. Environment Rating Scores

Methodology

To assess the quality of a childcare center related to observations of what a child may experience in a given day, two nationally recognized environment rating scales were used in the pilot, the ECERS-R and the ITERS-R. These scales have been tested for reliability and validity and are widely accepted in the field as good measures of childcare quality. These assessments were completed at two points in time by an independent consultant. The consultant received training in administering the assessment prior to the start of the pilot project. The first assessment was completed at the start of the project before any technical assistance or grant funding were provided to centers, and the second assessment was completed after the six months of technical assistance and grant funds had been spent. The consultant conducting the reviews generated reports for each center and classroom assessed. At the conclusion of the post-assessment, a report was submitted to NICRP with the center's overall score, the overall score on the ECERS-R and ITERS-R, and the change from pre-assessment to post-assessment on each of the primary elements of the scales.

These scores were entered into PASW 18, a database for statistical analysis, and comparisons are presented in the findings section below. Year Three centers' scores are compared regarding overall score changes from the first assessment to the second assessment, as well as scores on each of the subscales from the first and second assessments. Comparisons to earlier years of the project are provided as appropriate.

Findings

Figure 2.1 displays the pre- and post-assistance scores for each center on the environment rating scales. These scores were provided to NICRP by the consultant completing the assessments. A center's pre-assistance or post-assistance overall score is the average of each classroom's ECERS-R/ITERS-R rating within a center. In Year Three of the pilot it was determined that the "Parents and Staff" subscale of the ECERS-R/ITERS-R would not be used to calculate a center's overall score. Both the rater conducting the assessments and program staff agreed that this subscale was often difficult to measure accurately during observations and many other professionals using this assessment tool exclude this subscale, so it was eliminated for Year Three of the pilot project. Scores for centers in Years 1 and 2 have been recalculated and are presented in Figure 2.1 below. This figure illustrates there were two centers in the first year, two in the second year, and one in the third year whose overall ERS score, after receiving the technical assistance and grant funding, was lower than when the center began the pilot project. Centers with a decrease in score for pre to post assessment are highlighted in red and those centers with the highest increase in score from pre to post are highlighted in green.

Figure 2.1 Environment Rating Scores Pre and Post Assistance

Year 1 (Avg. Change 0.47)				Year 2 (Avg. Change 0.60)				Year 3* (Avg. Change 0.59)			
Center	Pre Test	Post Test	Change	Center	Pre Test	Post Test	Change	Center	Pre Test	Post Test	Change
1	2.42	3.46	1.04	13	3.70	3.44	-0.26	25	2.78	3.05	0.27
2	3.81	3.80	-0.02	14	3.15	3.82	0.66	26	2.49	3.31	0.82
3	2.98	3.76	0.78	15	2.90	3.48	0.58	27	2.76	2.47	-0.29
4	3.85	3.90	0.05	16	2.38	1.98	-0.39	28	2.54	3.75	1.21
5	3.08	3.23	.015	17	2.96	3.18	0.22	29	3.71	4.67	0.96
6	2.82	2.77	-0.05	18	3.89	4.76	0.87				
7	2.97	3.69	0.72	19	2.11	2.55	0.44				
8	2.97	3.49	0.52	20	3.44	4.67	1.23				
9	4.29	4.54	0.25	21	3.83	4.02	0.19				
10	3.31	4.28	0.96	22	3.63	4.91	1.29				
11	3.29	4.44	1.15	23	3.15	4.23	1.08				
12	2.65	2.68	0.03	24	2.14	3.46	1.32				

**NOTE: While 6 centers enrolled in Year 3 of the pilot, one center dropped out of the program and did not receive their final Environment Rating Score and is therefore not included in these results.*

Figure 2.2 displays average score changes, based on a five-point scale, that all 29 centers received, with Years 1 and 2 grouped together and Year Three centers together. Figure 2.2 shows that the greatest improvements in scores for centers in the first two years of the project were in items related to "Activities", with an average increase of 1.07 points, while for Year three centers the greatest increase was in "Program Structure".

For centers in the first two years of the pilot in the section "Interactions" there was actually an overall decrease in scores of -0.19 points, however for Year Three centers there was an average increase of 0.91 points in this section. This may be because as centers in the first two pilot years worked to make improvements in their centers in other areas, the focus on interactions between teachers and students and teachers and parents were lacking in post assessments. However, this seems to have been addressed with the centers in the third year of the pilot.

Figure 2.2

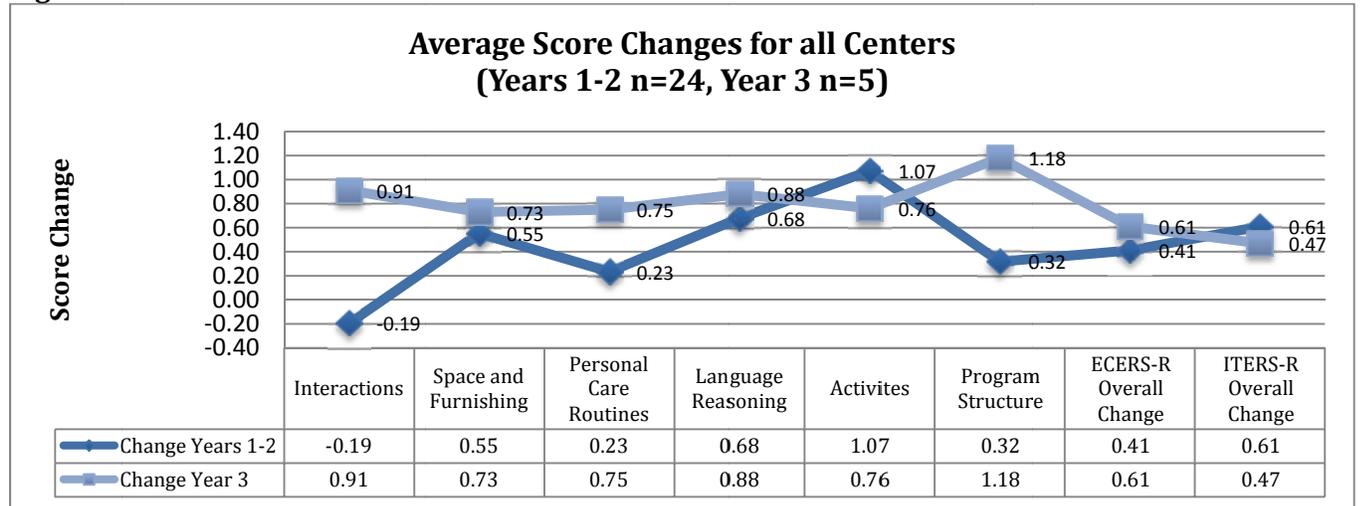
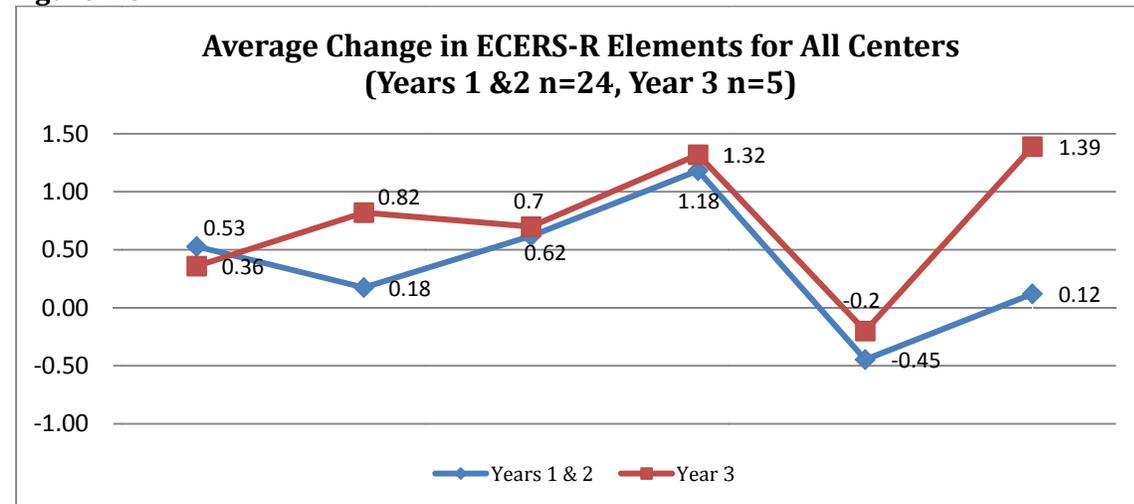


Figure 2.3 represents the average change in each assessment area for the ECERS-R, over all 29 centers. The red line in the figure indicates the average change for ECERS-R scores for centers in the first 2 years of the pilot, and each point on the blue line represents the average increase or decrease in scores for each element for centers participating in the third year of the pilot. The area that saw the greatest improvement within early childhood classrooms in all 29 centers was “Activities”, with an average increase of 1.18 points in the first two years and an increase in 1.32 points in the third year. The assessment area of “Interaction(s)” actually saw a decrease of 0.45 points on average for centers in the first two years and a slightly smaller decrease for centers in the third year (-0.2 points). While in this most recent year the decrease in this category was smaller, this remains an important area of focus for coaches as they work with centers to improve their scores.

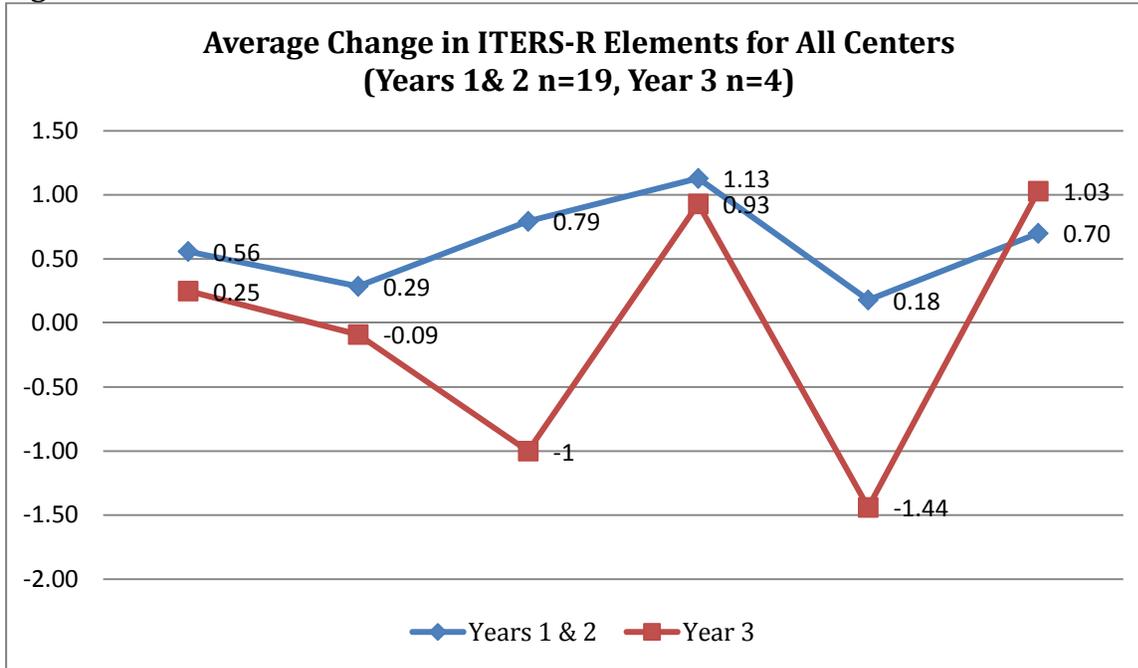
Figure 2.3



	Years 1 & 2	Year 3
ECERS-R – Space and Furnishing	.53	.36
ECERS-R – Personal Care Routines	.18	.82
ECERS-R – Language Reasoning	.62	.7
ECERS-R – Activities	1.18	1.32
ECERS-R – Interaction(s)	-.45	-.20
ECERS-R – Program Structure	.12	1.39

Figure 2.4 represents the average change in each assessment area for the ITERS-R for all centers. The red line in the figure indicates the average overall change in ITERS-R scores over all 23 centers that were assessed using the ITERS-R (some centers did not have classrooms with infants and toddlers and therefore this scale was not used in those centers). Each point on the blue line is the average increase or decrease in scores for each element in Years One and Two, and the red line indicates these changes in scores for Year Three centers. On average, centers in the first two years saw an increase in all elements of the ITERS-R; the smallest change was in “Personal Care Routines”, and the greatest increase was seen in “Activities”. However, in the third year centers saw a decrease in “Personal Care Routines” and “Interactions”.

Figure 2.4



	Years 1 & 2	Year 3
ITERS-R – Space and Furnishing	.56	.25
ITERS-R – Personal Care Routines	.29	-.09
ITERS-R – Language Reasoning	.79	-1.0
ITERS-R – Activities	1.13	.93
ITERS-R – Interaction(s)	.18	-1.44
ITERS-R – Program Structure	.70	1.03

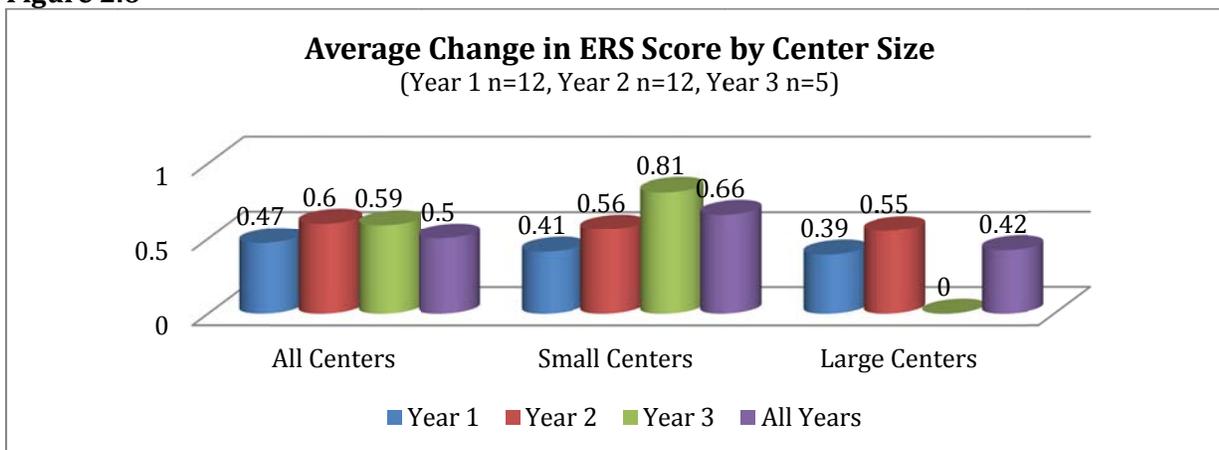
Figure 2.5 represents the changes in overall environment rating scores for each of the 29 centers. When centers were solicited to participate in the pilot, they were asked to indicate their size and ownership type to ensure a diverse sample of centers was included in the pilot. Those centers with 120 children or fewer were classified as “small,” while those with more than 120 children were categorized as “large.” The table organizes centers by their year of participation and small centers are highlighted in orange, large centers in blue. In addition information on average changes in scores for each year by size are presented in the table and then graphically displayed in figure 2.6 below.

Figure 2.5 Changes in Overall Center ERS Score

		Size	Pre ERS	Post ERS	Change
Year 1 <u>Average Change:</u> Overall = 0.47 Small Centers = 0.41 Large Centers = 0.39	Center 1	Small	2.42	3.46	1.04
	Center 2	Small	3.81	3.8	-0.02
	Center 3	Small	2.98	3.76	0.78
	Center 4	Large	3.85	3.9	0.05
	Center 5	Large	3.08	3.23	0.15
	Center 6	Large	2.82	2.77	-0.05
	Center 7	Large	2.97	3.69	0.72
	Center 8	Large	2.97	3.49	0.52
	Center 9	Small	4.29	4.54	0.25
	Center 10	Large	3.31	4.28	0.96
	Center 11	Large	3.29	4.44	1.15
	Center 12	Large	2.65	2.68	0.03
Year 2 <u>Average Change:</u> Overall = 0.60 Small Centers = 0.56 Large Centers = 0.55	Center 13	Large	3.7	3.44	-0.26
	Center 14	Large	3.15	3.82	0.66
	Center 15	Small	2.9	3.48	0.58
	Center 16	Small	2.38	1.98	-0.39
	Center 17	Large	2.96	3.18	0.22
	Center 18	Small	3.89	4.76	0.87
	Center 19	Large	2.11	2.55	0.44
	Center 20	Small	3.44	4.67	1.23
	Center 21	Large	3.83	4.02	0.19
	Center 22	Large	3.63	4.91	1.29
	Center 23	Small	3.15	4.23	1.08
	Center 24	Large	2.14	3.46	1.32
Year 3 <u>Average Change:</u> Overall = 0.59 Small Centers = 0.82 Large Centers = N/A	Center 25	Small	2.78	3.05	0.27
	Center 26	Small	2.49	3.31	0.82
	Center 27	Large	2.76	2.47	-0.29
	Center 28	Small	2.54	3.75	1.21
	Center 29	Small	3.71	4.67	0.96
	Overall Change				
All Centers	0.50	Small Centers	0.67	Large Centers	0.42

Figure 2.6 below demonstrates that on average we see an increase in center scores regardless of size, and all centers showed greater improvement in the later years of the pilot.

Figure 2.6



NOTE: In Year Three of the pilot project there was only one large center that completed participation and therefore an average score for large centers could not be calculated in Year Three.

Summary and Conclusions

The majority of participating centers saw an increase in their environment rating score, after the technical assistance; however, the amount of change for each center varied. Additionally, we can see that the amount of change in scores has increased overall when the first two years of the pilot are compared with the final year. This change is likely due to the changes that were introduced in the final year of the pilot, including additional information and instruction for center staff and directors, as well as increased experience and training for the rater conducting these assessments.

3. Quality Indicators – Star Ratings

Methodology

Participating pilot centers were given the quality indicators created by the QRIS Workgroup at one of their initial meetings with UNCE staff. UNCE staff created a Quality Indicators Form that explained each indicator and the criteria necessary to meet an indicator. Center directors were then asked to review all quality indicators and mark those indicators on the form that the center could meet, those it could possibly meet, and those that it could not meet.

This information was used to assess each center’s Silver State Stars QRIS star rating, based on a scale of one to five stars. Centers were not asked to provide documentation for the indicators for this “pre-assessment.” Rather, pre-assessment ratings were used as one of the baseline measures for the overall evaluation, and help to inform improvements made within the center. The ratings were a result of the center directors’ review of indicators and their feedback on whether they met, could possibly meet, or could not meet the criteria for each indicator. The pre-assessment star rating only took into account the indicators that could currently be met. In the third year of this pilot there were changes made to the QRIS Model, including the addition and deletion of indicators within the different quality areas. The changes to the model for Year Three are outlined below.

Reasons for Criteria Changes (edits or removal)

- Assessed as part of child care licensing regulations
- Assessed as part of the Environment Rating Scales
- Too difficult for centers to document
- Too difficult for reviewers to verify
- Unclear wording

Edited Criteria	Removed Criteria
Required Criteria: Center has current child care license	Required Criteria: Center meets NAEYC standards for group sizes and ratios
All administrators and (50%, 60%, 70% or 80%) of all teaching staff members have written Nevada Registry professional development plans completed	All administrators and teaching staff have two clock hours on the topic “cultural competencies” received in the past two years (will be added to section 2, Administration & Staff Development)
All administrators and (50%, 60%, 70% or 80%) of all teaching staff members have two clock hours on the topic of “early childhood mental health” received in the past two years	Other Criteria: Center provides age and individually appropriate classroom materials and activities to prepare children for transitions
Center has a minimum average ERS score of 3.5, with no classroom score under 3.0	Center has a written statement on curriculum
Center has a minimum average ERS score of 4.5, with no classroom score under 4.0	Center has a written statement on child evaluation and referral process
Center has a minimum average ERS score of 5.0, with no classroom score under 4.5	Center has a written statement for the purpose of on-going child assessment
Added Criteria	Documentation of modifications and reasonable accommodations made for children with special needs
Required Criteria:	Center meets ADA accessibility requirements
Center is currently registered with the Child Care Subsidy Program	Center has an advanced plan for emergency preparedness addressing specific disasters
	All administrators and teaching staff have an additional 4 hours of training for administrators and teaching staff in health, safety, or nutrition received in the past two years
	Center has documentation indicates that the building has been assessed for lead, radon, radiation, asbestos, fiberglass, or any other hazards from friable material
	Additional first-aid kits are located in each classroom, on the playground and in all vehicles used to transport children
	Children with teeth, brush or are assisted in brushing, at least once during the day
	Staff members participate in cultural events designed for children and their families
	Center displays samples of children’s work at child level to include: writing sample, process art, photos of child and family activity.

Included in the Silver State Stars QRIS criteria used for Year Three of the pilot, there are four quality standards used as criteria to assign a star rating to each center. Under each of these four quality standards there are several criteria. The number of criteria possible and number required for each level in each quality standard for Years 1 and 2, as well as Year Three, is presented in Table 3.1 below.

Table 3.1 Quality Standards and Number of Possible Indicators

Quality Standard	# of Possible Indicators		# Required for 2 Stars			# Required for 3 Stars			# Required for 4 Stars		
	Years 1 & 2	Year 3	Count	Years 1 & 2 %	Year 3 %	Count	Years 1 & 2 %	Year 3 %	Count	Years 1 & 2 %	Year 3 %
	Policies and Procedures	15	24	4	27%	17%	8	53%	33%	12	80%
Administration and Staff Development	21	23	4	19%	17%	8	38%	35%	12	57%	52%
Health and Safety	15	22	4	27%	18%	8	53%	36%	12	80%	55%
Family and Community Partners	15	20	4	27%	20%	8	53%	40%	12	80%	60%

NOTE: In Year Three for a center to receive 5 stars they must be NAEYC Accredited and were not required to submit a binder, therefore at the 5 star level there are no required number of criteria.

At the end of each six month technical assistance period, each of the center directors had created a portfolio – in the form of a binder – to provide documentation for fulfillment of each of the quality indicators that center had selected. The Office of Early Care and Education, and the consultant who completed the environment rating assessments, reviewed each binder and made determinations about a center’s final Silver State Star QRIS rating. In Year Three of the pilot, only those centers who were not NAEYC accredited were required to submit a binder, to provide documentation for each of the indicators. For those centers that were NAEYC accredited they only had to provide documentation that they meet the primary qualifications required under each star level. Therefore there were four binders submitted from the five Year Three centers, as one center was NAEYC accredited.

The review of binders resulted in tracking the number of centers that “attempted” each of the indicators, as well as the number of indicators that were “accepted.” Centers could choose which of the indicators within each quality standard they wanted to attempt, and provided documentation for each indicator they felt they could meet. Reviewers decided whether or not the submitted documentation was sufficient to fulfill a particular requirement, and if so, “accepted” the documentation. If documentation was not sufficient, the indicator was not accepted and did not count toward a center’s total number of indicators within a quality standard.

Findings

Figure 3.1 displays the proportion of accepted indicators within each quality standard for Year Three centers as well as the combined average percent for both Year One and Year Two centers. Data is only presented for those centers that created an application portfolio (binder). There were some centers that did not complete this process in Years One and Two, and in Year Three one of the centers was not required to complete a binder, as the policy was changed to not require a binder if the center was NAEYC accredited. As demonstrated below, for the most part centers in Year Three of the pilot had a greater proportion of accepted criteria in each of the categories with the exception of “Administration and Staff Development. This is likely a result of the greater detail of instructions as to what to include in the binder, as well as refined criteria for acceptance of specific documentation.

Figure 3.1

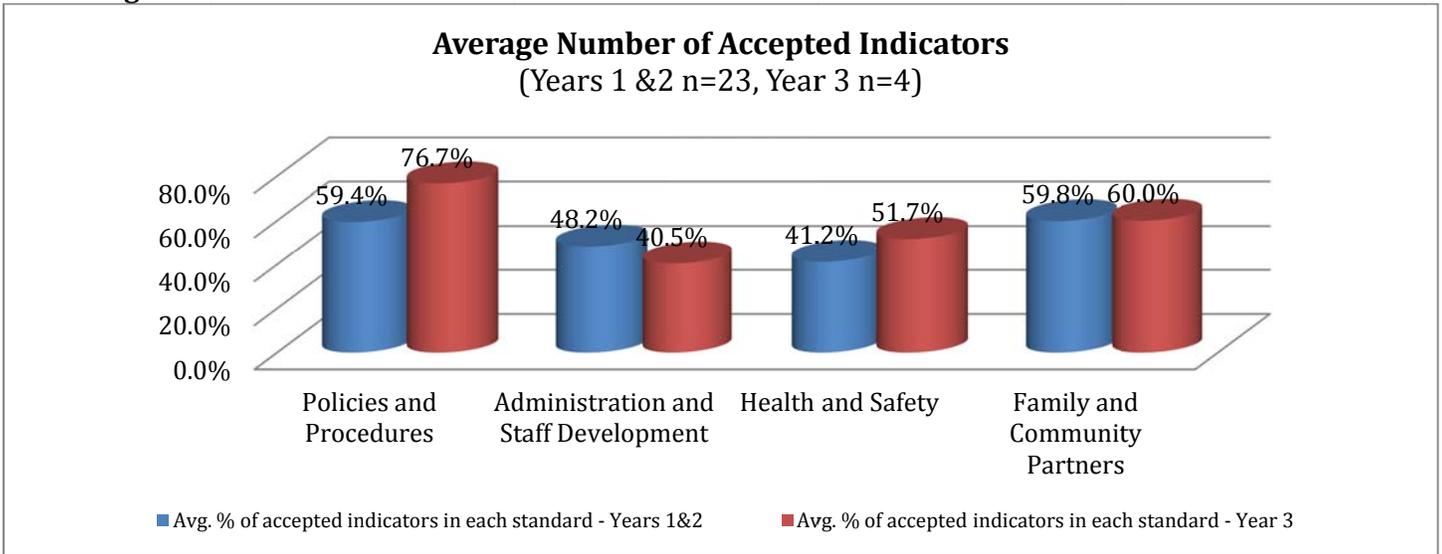


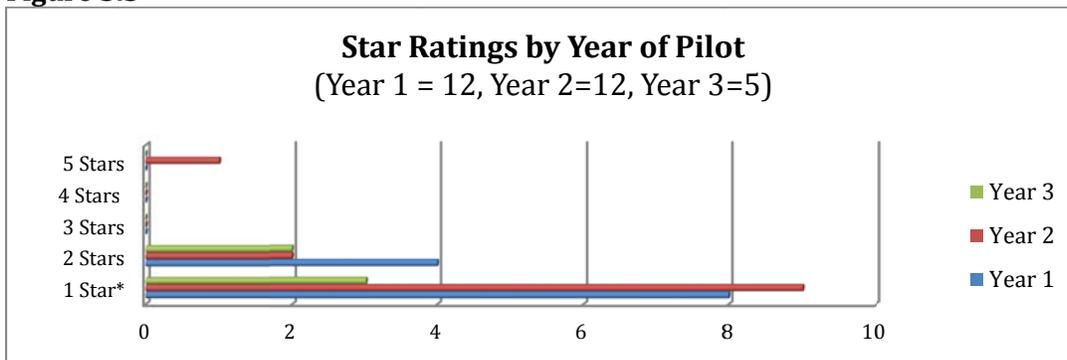
Table 3.2 below illustrates the average number of accepted criteria for the Year Three centers that submitted a binder. This information is important to note because centers must meet minimum thresholds in each of the star rating categories. For a center to receive two stars, they must meet at least four criteria in each category. To receive three stars, a center needs at least eight criteria in each category, and to receive four stars, a center must meet 12 criteria in each category.

Table 3.2 Average Number of Accepted Criteria in Each Quality Indicator Category for Year Three Centers (n=4)

Quality Indicator Category	Average Number of Accepted Criteria	# Required for 2 Stars	# Required for 3 Stars	# Required for 4 Stars
Policy and Procedure	11.5	4	8	12
Administration and Staff Development	8.5	4	8	12
Health and Safety	7.75	4	8	12
Family and Community Partners	9	4	8	12

Throughout the pilot project staff have reviewed a total of 29 centers to assign a star rating. After the policy was changed to allow NAEYC accredited centers to apply for a star rating without submitting a portfolio (binder), only one center was awarded more than two stars. The breakout of star ratings assigned by year of the pilot is listed below in Figure 3.3.

Figure 3.3



*NOTE: Those centers that did not submit a portfolio (binder) but were not NAEYC accredited, or who did not submit documentation of all required criteria were assigned a 1 Star rating.

In Year Three of the pilot there were changes made to the criteria in each of the quality standards. These changes are detailed on page 17 of this report. The changes included the addition, deletion, and modification of several criteria. In addition there were more criteria available under each of the quality standards to provide more options under each standard (see page 18 for a list of the number possible in each standard). In analyzing each center's binder, reviewers recorded the total number of centers that attempted each of the criteria, the number of criteria that were accepted through related documentation, and the number that were not accepted. The following tables (3.4 through 3.7) are organized by quality standard. These tables display the number of centers within Year Three, that attempted each criterion, as well as the number of instances when documentation was accepted, versus not accepted, within each of the Quality Improvement standards. Again please note that although 5 centers participated in Year Three of the pilot project, only four centers were required to submit documentation under these quality standards.

Additionally, percentages were calculated that represent the proportion of those centers that attempted to meet each criteria, as well as the proportion of instances when documentation was accepted, versus not accepted. The criteria within each standard with the lowest proportion of attempts (less than 50%) are highlighted in pink, and the criteria with the lowest proportion of accepted documentation (less than 50%) are highlighted in blue.

Table 3.4 displays information about the criteria under the "Policies and Procedures" standard for both years of the project. In Year Three there were three criteria that none of the centers attempted to document, including accreditation (1A), a compensation plan that provides for annual pay increases (1H), and the provision of annual written performance evaluations for staff. The final model with all indicators for Year Four Implementation can be found in Appendix A.

Table 3.4 Quality Standard 1: Policies and Procedures

1	Attempted (Total out of 4 Centers that submitted binders)		Accepted		Not Accepted		Policies and Procedures
	#	%	#	%	#	%	
1A	0	0%	N/A	N/A	N/A	N/A	Accreditation: Center is accredited by an approved accrediting body
1B	4	100%	3	75%	1	25%	Assessment: On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records
1C	4	100%	4	100%	0	0%	Assessment: On-going child assessment includes at least one formal method such as checklists, screening tools, or assessment tools
1D	4	100%	4	100%	0	0%	Curriculum: Classrooms have weekly or monthly curriculum planning calendars
1E	3	75%	2	67%	1	33%	Curriculum: Classrooms have written lesson plans for teacher-directed activities
1F	1	25%	0	0%	1	100%	Curriculum: Classrooms have written lesson plans for teacher-directed activities that include adaptations for children with special needs
1G	1	25%	1	100%	0	0%	Curriculum: Preschool lesson plans align with Nevada Pre-K Standards
1H	0	0%	N/A	N/A	N/A	N/A	Employee: Center has a compensation plan that provides for annual pay increases (i.e cost of living)
1I	3	75%	3	100%	0	0%	Employee: Center has a compensation plan that provides for increases based on merit, education, or performance
1J	4	100%	1	25%	4	100%	Employee: Medical insurance is available to staff members
1K	4	100%	4	100%	0	0%	Employee: Benefits (other than medical insurance) are provided to staff members
1L	4	100%	4	100%	0	0%	Employee: Center has a written employee handbook with a signature page
1M	2	50%	2	100%	0	0%	Employee: Center reimburses professional development expenses incurred by teaching staff
1N	0	0%	N/A	N/A	N/A	N/A	Employee: Supervisor provides teaching staff with an annual written performance evaluation
1O	1	25%	1	100%	0	0%	Inclusion: Center has a documentation system in place to support collaboration with specialist working with identified children
1P	2	50%	2	100%	0	0%	Policies: Center has a written physical activity statement
1Q	1	25%	1	100%	0	0%	Program: Center holds monthly staff meetings
1R	1	25%	1	100%	0	0%	Inclusion: Center has a written statement on the inclusion of children with special needs
1S	2	50%	2	100%	0	0%	Inclusion: Center obtains (with parental consent) an IFSP/IEP for each child enrolled with a diagnosed disability
1Ta	2	50%	2	100%	0	0%	Inclusion: Center collaborates with outside agency and family before administrative withdrawal of any child with medical/behavioral issues
1Tb	2	50%	2	100%	0	0%	Policies: Center has a written policy for procedures on reporting child abuse & neglect included in their parent handbook
1U	3	75%	2	67%	1	25%	Policies: Center has a written health statement
1V	1	25%	1	100%	0	0%	Program: Center has a documented procedure to receive staff feedback on program quality
1W	1	25%	1	100%	0	0%	Program: Staff feedback on program quality is used to develop a written plan for program improvement

Table 3.5 represents information about the “Administration and Staff Development” quality standard for Year Three. Within this standard, for year three, there are 23 criteria available. In Year Three, nine criteria had 50% or fewer centers that attempted to meet the criteria (highlighted in pink), and in six of those nine criteria no centers attempted to meet them. The final model with all indicators for Year Four Implementation can be found in Appendix A.

Table 3.5 Quality Standard 2: Administration and Staff Development

2	Attempted (Total out of 4 Centers that submitted binders)		Accepted		Not Accepted		Administration and Staff Development
	2	50%	1	50%	1	25%	
2A	2	50%	1	50%	1	25%	Director: Director has a minimum of 21 credits in management or business related courses
2B	4	100%	4	100%	0	0%	Director: Director is a current member of a national early childhood professional organization
2C	0	N/A	N/A	N/A	N/A	N/A	Director: Director participates on an early childhood committee
2D	4	100%	3	75%	1	25%	Director: Director has completed an approved Environment Rating Scale (ERS) training
2E	2	50%	2	100%	0	0%	Director: Director has completed an approved Program Administration Scale (PAS) training
2F	3	75%	3	100%	0	0%	Program: Center has a documented action plan based on their ERS scores
2G	0	N/A	N/A	N/A	N/A	N/A	Program: Center has a documented improvement plan based on the PAS score
2H	0	N/A	N/A	N/A	N/A	N/A	Program: Center is a current T.E.A.C.H. Early Childhood Nevada site
2I	0	N/A	N/A	N/A	N/A	N/A	Program: Center offers quarterly staff development activities
2J	1	25%	1	100%	0	0%	Staff: Minimum placement on the career ladder is 2.1 for 75% of teaching staff
2K	0	N/A	N/A	N/A	N/A	N/A	Staff: Minimum placement on the career ladder is 4.1 for 50% of teaching staff
2L	1	25%	1	100%	0	0%	Staff: Work environment for staff includes a place for adults to take a break from children, an adult-sized bathroom, and a secure place for staff to secure their belongings
2M	2	50%	2	100%	0	0%	Staff: Work environment for staff includes a place for adults that is an administrative area for planning, separate from children’s areas
2N	2	50%	2	100%	0	0%	Staff: Supervisor completes observations of teaching staff at least three times a year
2O	2	50%	2	100%	0	0%	Staff: Supervisor provides teaching staff with written feedback based on observations of teacher’s performance
2P	0	N/A	N/A	N/A	N/A	N/A	Staff: 50% of teaching staff are current members of a national early childhood professional organization
2Q	1	25%	1	100%	0	0%	Staff Development: Center has a written policy that teaching staff complete a minimum of five additional hours of annual training above licensing requirements
2R	2	50%	2	100%	0	0%	Staff Development: All administrators have two clock hours on the topic “ <i>early childhood mental health</i> ” received in the past two years
2S	2	50%	2	100%	0	0%	Staff Development: All administrators have two clock hours on the topic “ <i>inclusion</i> ” received in the past two years
2T	2	50%	1	50%	1	50%	Staff Development: All administrators have two clock hours on the topic “ <i>cultural competencies</i> ” received in the past two years
2U	4	100%	3	75%	1	25%	Staff Development: 50% of all teaching staff have two clock hours on the topic “ <i>early childhood mental health</i> ” received in the past two years
2V	4	100%	2	50%	2	50%	Staff Development: 50% of all teaching staff have two clock hours on the topic “ <i>inclusion</i> ” received in the past two years
2W	2	50%	2	100%	0	0%	Staff Development: 50% of all teaching staff have two clock hours on the topic “ <i>cultural competencies</i> ” received in the past two years

Table 3.6, below, contains information regarding the “Health and Safety” quality standard for Year Three. This standard has 22 criteria available and the table shows the number of centers that attempted each of the criterion, as well as the number of instances where the documentation was accepted.

Table 3.6 Quality Standard 3: Health and Safety

3	Attempted (Total out of 4 Centers that submitted binders)		Accepted		Not Accepted		Health and Safety
3A	2	50%	2	100%	0	0%	Emergency Preparedness: Center has an emergency preparedness kit
3B	1	25%	1	100%	0	0%	Emergency Preparedness: All administrators have advanced training for emergency medical response to threatening incidents
3C	3	75%	3	100%	0	0%	Emergency Preparedness: 50% of all teaching staff have advanced training for emergency medical response to threatening incidents
3D	4	100%	4	100%	0	0%	Health: Health and Safety Assessment is completed by a child care health consultant
3E	4	100%	4	100%	0	0%	Health: Child Record Review is completed by a child care health consultant
3F	1	25%	1	100%	0	0%	Health: Center has individualized health plans for children with medical concerns
3G	0	0%	N/A	N/A	N/A	N/A	Health: Center provides care for sick children in a separate location, supervised by a nurse
3H	2	50%	2	100%	0	0%	Health: Staff plan and implement daily developmentally appropriate physical activities for all children
3I	0	0%	0	0%	0	0%	Health: Center has a documented improvement plan based on a nutrition and physical activity self-assessment checklist
3J	0	0%	0	0%	0	0%	Mental Health: The ASQ:SE is used to screen children’s social-emotional development
3K	2	50%	2	100%	0	0%	Mental Health: Children in need of developmental services are referred to the appropriate agency
3L	1	25%	1	100%	0	0%	Mental Health: Children in need of mental health services are referred to the appropriate agency
3M	0	0%	N/A	N/A	N/A	N/A	Mental Health: Center has a behavior support team
3N	0	0%	N/A	N/A	N/A	N/A	Mental Health: Center has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence
3O	0	0%	N/A	N/A	N/A	N/A	Mental Health: Center is a demo site for the Nevada TACSEI Project
3P	0	0%	N/A	N/A	N/A	N/A	Nutrition: Menus are evaluated by a nutritionist
3Q	1	25%	1	100%	0	0%	Nutrition: Center is a Child and Adult Care Food Program (CACFP) sponsored site
3R	1	25%	0	0%	1	25%	Nutrition: Center supports breastfeeding by offering a designated location
3S	0	0%	N/A	N/A	N/A	N/A	Oral Health: Infant’s teeth and gums are wiped with a disposable tissue after each feeding
3T	3	75%	3	100%	0	0%	Oral Health: Preschool children receive annual oral health education
3U	4	100%	4	100%	0	0%	Playground: Playground Safety Assessment is completed by certified playground safety inspector
3V	3	75%	3	100%	0	0%	Sanitation: All classrooms have a cleaning and sanitation schedule posted

In Year Three, there were twelve criteria where less than 50% of centers attempted to meet the criteria (highlighted in pink), however for all criteria, if it was attempted it was accepted at least 50% of the time.

Table 3.7 Quality Standard 4: Family and Community Partners

4	Attempted (Total out of 4 Centers that submitted binders)		Accepted		Not Accepted		Family and Community Partners
	4	100%	2	50%	2	50%	
4A	4	100%	2	50%	2	50%	Community: Center collaborates with a community agency
4B	4	100%	4	100%	0	0%	Families: Families are encouraged to tour center before enrolling child
4C	3	75%	3	100%	0	0%	Families: Center compiles and provides written program information for families in their home language
4D	3	75%	2	67%	1	33%	Families: Materials from community agencies are available for families at the center
4E	3	75%	2	67%	1	33%	Families: Breastfeeding materials and information are available for families at the center
4F	4	100%	4	100%	0	0%	Families: Program distributes a newsletter to families at least quarterly
4G	3	75%	2	67%	1	33%	Families: Center has a communication form families can use to communicate with teachers
4H	3	75%	3	100%	0	0%	Families: Parent teacher conferences are scheduled on an as needed basis
4I	2	50%	2	100%	0	0%	Families: Parent teacher conferences are scheduled on a regular basis
4J	2	50%	2	100%	0	0%	Families: A written procedure is in place to help families transition children to the next classroom, other programs, or school
4K	2	50%	2	100%	0	0%	Families: Center has a documented procedure to receive family feedback on program quality
4L	1	25%	1	100%	0	0%	Families: Families' feedback is used to develop a written plan for program improvement
4M	2	50%	2	100%	0	0%	Families: Center has a written plan for parent involvement
4N	2	50%	2	100%	0	0%	Families: Center offers family involvement activities at a minimum of four times per year
4O	0	0%	N/A	N/A	N/A	N/A	Families: Center offers classes or training opportunities specifically for parents at a minimum of four times per year
4P	1	25%	1	100%	0	0%	Families: Center offers an annual class or training opportunity provided by an outside agency for parents
4Q	0	0%	N/A	N/A	N/A	N/A	Families: Center offers an annual class or training opportunity focused on health, physical activity, or nutrition for parents
4R	0	0%	N/A	N/A	N/A	N/A	Families: Center has an advisory or governing board which includes at least one parent
4S	0	0%	N/A	N/A	N/A	N/A	Families: Center has a parent board advisory or association
4T	1	25%	1	100%	0	0%	Inclusion: Staff is available to attend IEP/IFSP meetings with family and service providers

Table 3.7 above displays the 20 available criteria under the “Family and Community Partners” quality standard, as well as the number of centers that attempted to meet each of the criteria in Year Three. Within the 20 criteria, there are two criteria that only one center attempted (4L and 4P) and there were four criteria that no centers attempted

Summary and Conclusions

Binders submitted for review in the first two years of the pilot varied widely in their composition and level of completeness. There are several criteria within each of the quality standards that, after discussion by the committee, were revised or removed for Year Three Centers. Given these new standards it appears that a greater proportion of centers who attempt a criterion are accepted. This is likely a result of more detailed instruction for centers as to what to submit as documentation. The final set of required criteria as well as criteria within each of the quality standards for implementation of the program can be found in Appendix A.

In addition, in the first two years of the pilot, reviewers identified areas where clarification may be necessary to create more stringent guidelines and protocols for documentation that will be accepted to meet the criteria in each of the standards. For the third year of the pilot, centers were provided with binder tabs to organize their portfolios as well as worksheets to help demonstrate required criteria.

4. Center Director Interviews

Methodology

Center directors that participated in the third year of Quality Rating Improvement System pilot project were interviewed regarding their experiences during the project. There were a total of five centers that participated in this year of the pilot. Three of those directors were interviewed, one submitted comments in writing, and the fifth director was not able to be interviewed prior to the completion of this report. During these interviews, directors were asked for their feedback to identify areas in the process that are working well, and those that may need improvement. Interview questions were based on information provided from the online survey the center directors completed prior to beginning the pilot. Each interview lasted approximately one hour and all interviews were recorded and later transcribed, to ensure accuracy. Director responses were then analyzed by identifying main themes within each interview, followed by grouping similar responses, across all interviews, for each theme. The overarching themes are presented in the findings section below.

Findings

Orientation

Center directors were asked to provide feedback regarding the orientation they attended prior to starting their participation with QRIS. All four directors who were interviewed indicated that they liked the orientation process and found it very informative. While directors reported that the orientation did not make them “100% prepared” for participation many indicated that they thought it was a good experience. Some respondents reported that the orientation was a lot of information with one director stating, “I think it was a bit of an overload, but being an overload, it causes excitement too.” One center offered the suggestion of creating a timeline with benchmarks that centers can see at the orientation, for example, “within the first 30 days this should be accomplished, within the first 60 days this should be accomplished...then we would be better equipped to know what was going on and not feel like we’re flying by the seat of our pants.”

Concerns before Beginning the Program

Right after orientation was completed, center directors were asked to complete a short online survey to better understand their level of familiarity with QRIS, ECERS-R-R/ITERS-R, and their concerns going into the program. A few of those concerns were consistent throughout these pre-surveys, so directors were asked about them after they had completed their participation to see if they ended up being a problem or a concern for them during participation. There were three primary concerns that directors were asked about in the follow up interview.

Scoring

The first was regarding their center’s ability to score well using the existing criteria. All four directors reported some level of concern regarding scoring and assessment, often stating that they wanted to score well and receive a high rating. Some directors spoke specifically about criteria in the Environment Rating Scales, indicating that there are some things they simply “can’t fix” like problems with the physical building, or major renovations including modifications to furniture. Another director still felt that there was some repetition in existing criteria under the quality standards and thought that should be further reviewed and refined.

Time

Some directors expressed concern about the amount of time they would need to commit to complete this program. After participation, all four center directors acknowledged that participation was a lot of work and a large time commitment for the director as well as their staff. One director said, "It was pretty time consuming – to come up with what we did – but I think it was necessary and it was worth it." Another director reported, "I don't think we had a clear view of how time consuming it would be." Some directors offered suggestions to help streamline the process and make it less tedious. One director suggested making the portfolio binder submission an electronic process, where centers would upload all the documentation rather than print and include in a paper binder.

Bias in the Rating Process

During the pre-survey some directors indicated that they were concerned that the viewpoints of those involved in the project would bias the rating systems used to assess the centers. Of the four directors interviewed only one expressed concern in this area, citing that there was some confusion about acceptable criteria, and conflicting advice given during the pilot by the same person. All other directors indicated that everyone was very professional and objective in their assessments.

Environment Rating Process

Directors were asked to talk a little about the process of scheduling and participating in the environment rating assessment for the QRIS. All four directors reported that the timing and scheduling of these assessments was pleasant and that the rater worked with their schedules to ensure these were done at a convenient time. However, there were also some suggestions regarding this process that were also expressed in earlier years of the pilot and could not be changed given the nature of the ERS assessment process. Some directors would have liked to have been given feedback immediately after the assessment was completed, or been able to direct the rater to see items that may not have been readily visible at the time of the assessment. In addition, some directors reported that they expected the rater to spend more time observing the classroom for a full day so that all activities could be observed.

Technical Assistance or Coaching

During the interview directors were asked to talk about their experience with the Coaches from the University of Nevada Cooperative Extension. First, directors were asked about the process of receiving their ERS scores. All four directors felt that the review of the ERS scores (both before and after coaching) was helpful, however one center indicated that only the review of the ERS scores they received before coaching was helpful stating, "The first review was informative, but the last and final results were not gone over very well at all."

Availability and Advice of Coaches

Directors were also asked about the availability of the coaching staff, as well as whether or not they felt the coaches were knowledgeable about early childhood education. All of the directors reported that the coaches were very knowledgeable, and answered all of their questions in a timely fashion, reporting, "Anytime you requested or called them or emailed them or anything, they were very helpful – they were great!" Another director noted that the coaching was a great strength of the program, and another described the coaches as "phenomenal." Three of

the four respondents reported that they were active participants in their center's improvement plan and that they created their plan in collaboration with their coach. However, one director reported that she felt at first the improvement plan was "dictated to her". However she did say that after discussion with the coach it was a much more collaborative process.

A few of the directors did have some suggestions to improve this process. Some directors reported feeling rushed at the end of the process, and did not feel that some of the goals remained consistent throughout the six month period, one director shared, "We saw a lot more hands on in the beginning, then through the middle part of it not as much. And then at the end - the last two weeks- it was like 'oh we gotta get everything done. It was like if we would have stayed a little more consistent with the coaching, you know, and the coaches would have focused on a couple of rooms rather than focusing on all the rooms...So I think if we would have had a better game plan going into it, sitting down and going room by room, rather than the building as a whole, we probably would have been more successful."

Grant Funding

Finally, in this section of the interview directors were asked about the grant funding and the process to obtain funds and purchase supplies. Two of the directors liked the process indicating that the process was fast and it was easy to be reimbursed, while the other two directors had some suggestions for improvement. One director reported that it would have been better to have more time to make selections for purchases stating, "You had to get the list turned in before you even knew what your list needed to be. So that part was very frustrating for us." Both of these directors indicated concern over the restrictions on vendors for purchases was frustrating. One director said, "the refusal to work with certain vendors was not right. It forced me to put out money we didn't have, and then wait." One of these directors suggested grouping the approved items list into categories of which indicators the items would help to improve. This change would help ensure that directors know they are purchasing materials that will actually help improve their score.

Overall Experience with QRIS

Challenges to Participation

The majority of the challenges discussed by Year Three directors were regarding the creation of portfolio binders or other aspects of the assignment of a star rating. One director felt that the "binder was very repetitive", another said that they had a difficult time understanding the "why" of things required in the binder. This director stated, "A good example would be our curriculum. In that binder we had to re-do everything. Our curriculum has all the requirements - its printed out-but yet that wasn't acceptable and we couldn't understand why." This director suggested that there be more of a feedback loop process whereby if items are not accepted then a reason or rationale would be provided to the center so that they understand what they need to do differently. This director also suggested having a coach sit with them to assist and answer questions while they created their portfolio (binder), noting that there should also be more flexibility built into the process. She expressed concern that if all of the elements of certain criteria are there, then the formatting should be flexible, "...if mine has the activity included but on mine its number one and you want it as number three, why is mine wrong?" Three of the four directors did also note that the

additional worksheets and binder tabs created were useful for them in creating and organizing their portfolios. The remaining director felt that only one of the binder tabs were helpful, and that it would be easier if the binders were electronic and allowed for on-line organization and submission.

Would you Participate Again if Asked?

Three of the directors that were interviewed indicated that given the chance they would participate in the pilot again, but one was not sure. This director reported that while she did gain a lot of knowledge from participating in the project, she was concerned that their feedback would not impact the program itself because it was rolled out so quickly after they completed participation citing, “When we went to that meeting and were going over the changes that were made, I don’t feel that many changes were made and some of them would have been beneficial. I do think it was good for us – I would say that I definitely have a better understanding going into this – we know what to expect.”

Benefits to Participation

Directors were asked about the greatest benefits to participation in the pilot project and all four of them described what they saw as the benefits. All directors noted that it was a benefit to learn new ways to improve quality for the children in their centers. Two directors cited the materials they received as the greatest benefit, as this allowed them to improve the experience for the children in their center and it got their teachers motivated and excited to make improvements to the center. The other two directors focused on the additional knowledge gained throughout the process and the value of an outside perspective on ways to improve as greatest benefits to participation.

Suggestions for Improvement

All directors were asked if they had any suggestions for ways to improve the program as it rolls out in the coming year. Their suggestions are detailed in the list below.

- Ensure that at the orientation, directors understand the time commitment they are making to the program so that they will follow through with participation. Perhaps directors that participated in the pilot could attend and talk about how much time it really takes to fully participate in the program. Or, a detailed timeline could be reviewed so that directors can see when deadlines are to ensure they have the time to complete them according to schedule.
- Ensure that the timeline for the center is logical and allows for all steps to be completed in sequence. The assessments should be complete and the improvement plan developed before any materials are ordered to ensure that the materials really will go toward improving scores.
- Make sure communication about requirements, deadlines, etc. are disseminated to all parties involved and that messages are consistent so that directors are not being pulled in multiple directions.
- Continue to review required criteria for the different star ratings. One director does not agree that accreditation should be required for the highest star levels, and also does not agree that the center directors should have to have a bachelor’s degree to be at the highest star levels.

- Increase the availability of opportunities for continuing education and training classes on the Environment Rating Scales. Multiple classes need to be offered at different times (including Saturdays) so that staff have the opportunity to complete them.

Is a Star Rating System Useful for Nevada

After participating in the pilot and completing the full process – directors have a unique perspective on the utility of a star rating system in Nevada. Directors were asked whether or not they felt it was useful. The majority of Year Three center directors indicated that although they may have reservations about some of the processes or criteria within the star ratings – they do see the utility of the program as a whole. One director specified that she did not think that the benefits of the program would be seen for another five to ten years stating, “I’m certainly glad we have a standard. I’m glad that we’re all on one page, even if I don’t agree with all of the requirements.” She felt that it will take time for centers to come on board with the program and we may not see improvements in outcomes overall immediately.

Another director noted that she didn’t feel that this rating reflects “100% of the quality” in that center, noting that “bigger centers may have an advantage because they have more resources from their staff, or administration. They may have one central office that can take care of all of their centers at the same time, but smaller centers may have a tough time.” This same director also indicated that while the system may not be perfect, they think it is good to have a system in place, citing, “I think it’s good. Better than nothing, because if we don’t do this kind of thing, then we’re never going to go to the next step. So even though we’re concerned with how to improve, if we’re not starting a pilot program people won’t care. I believe a lot of people, they really don’t care. We have to do it.”

Summary and Conclusion

Overall directors were positive about the program as a whole but continue to have reservations about some of the required criteria. Directors provided valuable feedback for improvement in the system and some of their suggestions have already been incorporated into the final QRIS model for Nevada.

5. Final Summary and Recommendations

Data were collected from multiple different sources during the three years of this QRIS pilot project. These data provide insight into the particular areas of success, as well as those areas that required additional clarification or modification. Overall the centers in this final year of the pilot performed better than centers in previous years with a greater average increase in ERS scores in years two and three of the pilot (see page 15), as well as a greater proportion of accepted criteria under each of the quality indicators. This demonstrates that the changes made to the program helped centers to succeed.

In the feedback from participating center directors we saw that the changes made were useful, as many felt the orientation prepared them for participation and found the tools created to assist in creating the application binder to be useful. However, many of the concerns discussed by directors were similar to what we saw in the first two years of the pilot. Directors are still concerned about the requirements for center directors in terms of education levels, and there is still contention about the requirement for accreditation at the five star level.

As a result of the experiences and feedback from all who participated in the three year pilot project several changes were made to the model itself as well as the procedures for participating in QRIS. These changes are outlined below.

Year Four Implementation Changes

The Silver State Stars Quality Rating Improvement System was rolled out in Southern Nevada starting on July 1, 2012. As a part of this program all licensed child care centers were notified about the program and that until they enroll to be rated they would be assigned a star rating of one. In the implementation year centers can apply for coaching and grant funds to make improvements or they can choose to move directly into the assessment phase and apply for their star rating. In addition the program has incorporated a feedback loop into the process where once a binder has been reviewed and a star assigned, if criteria are not accepted centers have 30 days to ask questions to understand why the criteria were not accepted or provide additional documentation so that it can be accepted. A program manual has been developed to help centers navigate the program, as well as instructions and information sheets that have been posted on the QRIS website, <http://nvsilverstatestars.org/>.

Required criteria for each star level were also modified to allow for NECPA (National Early Childhood Program Accreditation) accreditation in addition to NAEYC (National Association for the Education of Young Children) accreditation at the five star level. The model was also revised to allow for a range of acceptable ERS scores at each of the star rating levels rather than requiring one cut off point for each star rating level. The full program implementation model can be reviewed in Appendix A of this report.

Recommendations for Future Consideration

Upon reviewing all participating Year Three center results, there are several recommendations for future consideration. These are listed below.

1. Create a Reference Guide or Manual for Acceptable Documentation in Binders

Directors reported that there were times when they were provided conflicting information about what would be acceptable documentation for certain criteria. It may be helpful to create more detailed guidelines using examples so that there is a reference that all participants can use.

2. Timeline and Benchmarks for Program Completion

Some directors indicated that they would have benefitted from having a specific timeline created for their participation to refer to during the program, but also to plan in advance of the program. The timeline would not only document what the director needed to complete, but would also provide a schedule for coaching and deadlines for completion of the portfolio binder.

3. Consider moving the portfolio binder process on-line

Two of the center directors in this final year of the pilot suggested moving the portfolio binder process online so that documentation could be uploaded into a central system rather than having to print all materials, and take time to organize a binder.

4. Use the Orientation to Explain the Rationale for Required Criteria

It seems that throughout the three year pilot there have been some consistent points of contention for directors regarding the required criteria. One of them was the requirement of NAEYC accreditation to become a five star center, and the other has been the education requirements for center directors at the higher star levels. It may be beneficial to explain some of the evidence used to support these decisions at the orientation so that centers understand those constraints as they enter the program.

5. Program Evaluation

As the program moves from a pilot project to a program it will be important to continue to track and document the processes associated with the program. Information about how many centers participate, apply for coaching and grant funds, and complete the program will be important for program planning and budgeting, but will also let program administrators understand how the program is being utilized by the community. In addition, it will be important as the program continues to start to examine the relationships between outcomes for children, and the star rating of their child care center to really understand if this system is a good measure of quality, and what that means for children in Nevada. This will require a more in depth outcome evaluation to test the correlation between star ratings and outcomes for children.

Appendix A: QRIS Model for Year 4 Implementation

Silver State Stars Quality Rating Improvement System (QRIS)



APPLYING FOR A STAR RATING

Step 1:

Program administrator (center director and/or owner) attends an initial QRIS orientation.

Please visit the Nevada Registry website for orientation dates and locations – [Hwww.nevadaregistry.org](http://www.nevadaregistry.org)

Step 2:

A QRIS Specialist is assigned to the program.

Step 3:

Program administrator completes an initial QRIS documentation checklist.

Program receives technical assistance from QRIS Specialist on procedures, by phone or e-mail, if needed.

Step 4:

Program administrator attends three hour Environment Rating Scale (ERS) overview training

Please visit the Nevada Registry website for training dates and locations – [Hwww.nevadaregistry.org](http://www.nevadaregistry.org)

Step 5: (Optional)

Program administrator applies to the QRIS Coaching program through the Children's Cabinet – see next section.

Step 6:

Program administrator completes an application and submits with the program documentation binder to the Office of Early Care and Education.

A QRIS Rater contacts program administrator to schedule an ERS Assessment.

If a *No* is given to any documentation submitted in the binder, program administrator will be given two weeks to submit corrected documentation.

Step 7:

A rating is assigned and the program is notified by mail.

Program administrator has 30 calendar days to notify the Office of Early Care and Education in writing to provide detailed justification (including reference to a specific indicator or score) if he or she has an objection or disagree with rating.

Applying for Coaching and Grant Funds

Programs seeking additional quality improvement assistance can apply for a QRIS Coach through the Children's Cabinet. Coaching information will be given at both the QRIS Orientation and ERS overview training.

Step 1:

Program administrator (center director and/or owner) attends an initial QRIS orientation.

Please visit the Nevada Registry website for orientation dates and locations – [Hwww.nevadaregistry.org](http://www.nevadaregistry.org)

Step 2:

Program administrator attends three hour Environment Rating Scale (ERS) overview training

Please visit the Nevada Registry website for training dates and locations – [Hwww.nevadaregistry.org](http://www.nevadaregistry.org)

Step 3:

Program administrator completes coaching request form and submits to the Children's Cabinet.

Step 4:

A QRIS Coach is assigned to the program.

Step 5:

A QRIS Rater contacts program to schedule a pre-ERS assessment.

Step 6:

Program administrator and QRIS coach develops a program improvement plan based on the scores of the pre-ERS assessment.

Programs may receive assistance for a maximum of 18 months, awarded in six month increments. After each six months, programs will be assessed on their progress made.

Step 7:

Program administrator may apply for a program improvement grant. The amount of the grant will be based on the licensing capacity of each program. Grant funds are for classroom materials only and must align with the pre-ERS assessment results.

Step 8:

Follow Steps 6 and 7 from above to proceed with QRIS rating.

SILVER STATE STARS QRIS REQUIRED CRITERIA

★	★ ★	★ ★ ★	★ ★ ★ ★	★ ★ ★ ★ ★
<ul style="list-style-type: none"> ▪ Center has current child care license <p>Silver State Stars QRIS is a voluntary program open to licensed child care centers in Southern Nevada. Centers at Star Level 1 have successfully met child care licensing standards.</p> <p>Centers at Star Level 1 have either chosen not to participate in Silver State Stars QRIS or are in the process of achieving a higher star level.</p> <p>Centers that choose to participate in Silver State Stars QRIS demonstrate and document quality indicators above licensing regulations. It should be understood advancing from Star Level 1 to subsequent levels is an accomplishment that takes a significant amount of time and effort.</p>	<ul style="list-style-type: none"> ▪ Center has current child care license ▪ Center is currently registered with the Child Care Subsidy Program ▪ All administrators and 50% of all teaching staff members have written Nevada Registry professional development plans ▪ 25% of classrooms meet QRIS group sizes ▪ 25% of classrooms meet QRIS ratios 	<ul style="list-style-type: none"> ▪ Center has current child care license ▪ Center is currently registered with the Child Care Subsidy Program ▪ All administrators and 60% of all teaching staff members have written Nevada Registry professional development plans ▪ 50% of classrooms meet QRIS group sizes ▪ 50% of classrooms meet QRIS ratios ▪ Center has a minimum average ERS score of 3.50-3.99, with no classroom score under 3.00 ▪ Director has a minimum placement on the career ladder of 3.1 	<ul style="list-style-type: none"> ▪ Center has current child care license ▪ Center is currently registered with the Child Care Subsidy Program ▪ All administrators and 70% of all teaching staff members have written Nevada Registry professional development plans ▪ 75% of classrooms meet QRIS group sizes ▪ 75% of classrooms meet QRIS ratios ▪ Center has a minimum average ERS score of 4.00-4.49, with no classroom score under 4.00 ▪ Director has a minimum placement on the career ladder of 4.2 	<ul style="list-style-type: none"> ▪ Center has current child care license ▪ Center is currently registered with the Child Care Subsidy Program ▪ All administrators and 80% of all teaching staff members have written Nevada Registry professional development plans ▪ 100% of classrooms meet QRIS group sizes ▪ 100% of classrooms meet QRIS ratios ▪ Center has a minimum average ERS score of 4.50-5.00, with no classroom score under 4.50 ▪ Director has a minimum placement on the career ladder of 5.2 ▪ Lead teachers meet QRIS staff qualifications.
	Centers must meet a minimum of four (4) Quality Indicators from each of the four categories listed below on pages 5-9.	Centers must meet a minimum of eight (8) Quality Indicators from each of the four categories listed below on pages 5-9.	Centers must meet a minimum of twelve (12) Quality Indicators from each of the four categories listed below on pages 5-9.	<p style="text-align: center;">NAEYC and NECPA Accredited Centers</p> <p style="text-align: center;"><i>(Note: accredited centers must meet required criteria, but do not have to provide additional documentation for the Quality Indicators listed below.)</i></p>

QUALITY INDICATORS

There are four categories of quality indicators:

1. Policies & Procedures
2. Administration & Staff Development
3. Health & Safety
4. Family & Community Partners

ENVIRONMENT RATING SCALES (ERS)

Each center will be assessed using the following ERS tools:

- Infant Toddler Environment Rating Scales, Revised Edition (ITERS-R)
- Early Childhood Environment Rating Scales, Revised Edition (ECERS-R)

An overall ERS score for each center will be determined based on the scores averaged from 50% of the classrooms for each age group. Classrooms selected for assessment will be based on a random draw.

Note: *Subscale 7- Parents and Staff* will not be used as part of the assessment for this project.

SILVER STATE STARS QRIS RATING

A center's star rating will be based on a combination of meeting the required criteria which includes the ERS scores and the number of quality indicators met.

QUALITY INDICATORS

1. Policies & Procedures				
<input type="checkbox"/> Center is accredited by an approved accrediting body	<input type="checkbox"/> Center has a compensation plan that provides for annual pay increases (i.e. cost of living raises)	<input type="checkbox"/> Center has a compensation plan that provides for increases based on merit, education, or performance	<input type="checkbox"/> Medical insurance is available to staff members	<input type="checkbox"/> Benefits (other than medical insurance) are provided to staff members
<input type="checkbox"/> Center has a written employee handbook with a signature page	<input type="checkbox"/> Center reimburses professional development expenses incurred by teaching staff	<input type="checkbox"/> Center holds monthly staff meetings	<input type="checkbox"/> Center has a documented procedure to receive staff feedback on program quality	<input type="checkbox"/> Staff feedback on program quality is used to develop a written plan for program improvement
<input type="checkbox"/> Supervisor provides teaching staff with an annual written performance evaluation	<input type="checkbox"/> Classrooms have weekly or monthly curriculum planning calendars	<input type="checkbox"/> Classrooms have written lesson plans for teacher-directed activities	<input type="checkbox"/> Classrooms have written lesson plans for teacher-directed activities that include adaptations for children with special needs	<input type="checkbox"/> Preschool lesson plans align with Nevada Pre-k Standards
<input type="checkbox"/> On-going child assessment includes at least one informal method such as observations, portfolios, or teachers' anecdotal records	<input type="checkbox"/> On-going child assessment includes at least one formal method such as checklists, screening tools, or assessment tools	<input type="checkbox"/> Center has a documentation system in place to support collaboration with specialist working with identified children	<input type="checkbox"/> Center has a written statement on the inclusion of children with special needs	<input type="checkbox"/> Center obtains (with parental consent) an IFSP/IEP for each child enrolled with a diagnosed disability
<input type="checkbox"/> Center collaborates with outside agency and family before administrative withdrawal of any child with medical/behavioral issues	<input type="checkbox"/> Center has a written policy for procedures on reporting child abuse & neglect included in their parent handbook	<input type="checkbox"/> Center has a written health statement included in their parent handbook	<input type="checkbox"/> Center has a written physical activity statement in their parent handbook	<input type="checkbox"/>

2. Administration & Staff Development

<input type="checkbox"/> Minimum placement on the career ladder is 2.1 for 75% of teaching staff	<input type="checkbox"/> Minimum placement on the career ladder is 4.1 for 50% of teaching staff	<input type="checkbox"/> Work environment for staff includes a place for adults to take a break from children, an adult-sized bathroom, and a secure place for staff to secure their belongings	<input type="checkbox"/> Work environment for staff includes a place for adults that is an administrative area for planning, separate from children's areas	<input type="checkbox"/> Director is a current member of a national early childhood professional organization
<input type="checkbox"/> 50% of teaching staff are current members of a national early childhood professional organization	<input type="checkbox"/> Supervisor completes observations of teaching staff at least three times a year	<input type="checkbox"/> Supervisor provides teaching staff with written feedback based on observations of teacher's performance	<input type="checkbox"/> Director has a minimum of 21 credits in management or business related courses	<input type="checkbox"/> Director participates on an early childhood committee
<input type="checkbox"/> Center offers quarterly staff development activities	<input type="checkbox"/> Center has a documented action plan based on their ERS scores	<input type="checkbox"/> Director has taken Program Administration Scale (PAS) training	<input type="checkbox"/> Center has a documented improvement plan based on the PAS score	<input type="checkbox"/> Center is a T.E.A.C.H. Early Childhood Nevada site
<input type="checkbox"/> Center requires teachers receive a minimum of five additional hours of annual training above licensing requirements	<input type="checkbox"/> All administrators have two clock hours on the topic "early childhood mental health" received in the past two years	<input type="checkbox"/> All administrators have two clock hours on the topic "inclusion" received in the past two years	<input type="checkbox"/> All administrators have two clock hours on the topic "cultural competencies" received in the past two years	<input type="checkbox"/> 50% of all teaching staff have two clock hours on the topic "early childhood mental health" received in the past two years
<input type="checkbox"/> 50% of all teaching staff have two clock hours on the topic "inclusion" received in the past two years	<input type="checkbox"/> 50% of all teaching staff have two clock hours on the topic "cultural competencies" received in the past two years	<input type="checkbox"/> 50% of all teaching staff have two clock hours on the topic "Environment Rating Scales" received in the past two year	<input type="checkbox"/>	<input type="checkbox"/>

3. Health & Safety				
<input type="checkbox"/> Health and Safety Assessment is completed by a child care health consultant	<input type="checkbox"/> Child Record Review is completed by a child care health consultant	<input type="checkbox"/> Center is a registered Web IZ provider	<input type="checkbox"/> Menus are evaluated by a nutritionist	<input type="checkbox"/> Center is a Child and Adult Care Food Program (CACFP) sponsored site
<input type="checkbox"/> Center supports breastfeeding by offering a designated location	<input type="checkbox"/> All classrooms have a cleaning and sanitation schedule posted	<input type="checkbox"/> Staff plan and implement daily developmental appropriate physical activities for all children	<input type="checkbox"/> Center has a documented improvement plan based on a nutrition and physical activity self-assessment checklist	<input type="checkbox"/> Center provides care for sick children in a separate location, supervised by a nurse
<input type="checkbox"/> Center has individualized health plans for children with medical concerns	<input type="checkbox"/> Center has an emergency preparedness kit	<input type="checkbox"/> All administrators have advanced training for emergency medical response to threatening incidents	<input type="checkbox"/> 50% of all teaching staff have advanced training for emergency medical response to threatening incident	<input type="checkbox"/> The ASQ:SE is used to screen children's social-emotional development
<input type="checkbox"/> Children in need of developmental services are referred to the appropriate agency	<input type="checkbox"/> Children in need of mental health services are referred to the appropriate agency	<input type="checkbox"/> Center has a behavior support team	<input type="checkbox"/> Center has a documented improvement plan based on the Inventory of Practices for Promoting Social Emotional Competence	<input type="checkbox"/> Center is a Nevada TACSEI Project demo site
<input type="checkbox"/> Infant's teeth and gums are wiped with a disposable tissue after each feeding	<input type="checkbox"/> Preschool children receive annual oral health education	<input type="checkbox"/> Children up to two-years-old are served whole milk	<input type="checkbox"/> Children two-years-old and older are served skim or 1% milk	<input type="checkbox"/>

4. Family & Community Partners				
<input type="checkbox"/> Families are encouraged to tour center before enrolling child	<input type="checkbox"/> Parent teacher conferences are scheduled on a regular basis	<input type="checkbox"/> Parent teacher conferences are scheduled on an as needed basis	<input type="checkbox"/> A written procedure is in place to help families transition children to the next classroom, other programs, or school	<input type="checkbox"/> Staff is available to attend IEP/IFSP meetings with family and service providers
<input type="checkbox"/> Center has a documented procedure to receive family feedback on program quality	<input type="checkbox"/> Families' feedback is used to develop a written plan for program improvement	<input type="checkbox"/> Center has a written plan for family involvement	<input type="checkbox"/> Center offers quarterly family involvement activities	<input type="checkbox"/> Center offers quarterly classes or training opportunities for parents
<input type="checkbox"/> Center offers an annual class or training opportunity provided by an outside agency for parents	<input type="checkbox"/> Center offers annual class or training opportunity focused on health, physical activity, or nutrition for parents	<input type="checkbox"/> Center collaborates with a community agency	<input type="checkbox"/> Materials from community agencies are available for families at the center	<input type="checkbox"/> Breastfeeding materials and information are available for families at the center
<input type="checkbox"/> Center has an advisory or governing board which includes at least one parent	<input type="checkbox"/> Center has a parent advisory board or association	<input type="checkbox"/> Program distributes a quarterly newsletter to families	<input type="checkbox"/> Center compiles and provides written program information for families in their home language	<input type="checkbox"/> Center has a communication form families can use to communicate with teachers

INCENTIVES FOR PARTICIPATION

	1	2	3	4	5
Coaching	Children's Cabinet	Children's Cabinet	Children's Cabinet	Accreditation Facilitation Project	Accreditation Facilitation Project
One-time Initial Grant (\$4,000-\$8,500)	Children's Cabinet Based on licensing capacity	Children's Cabinet Based on licensing capacity	Children's Cabinet Based on licensing capacity	Office of Early Care & Education Based on licensing capacity	Office of Early Care & Education Based on licensing capacity
Advancement Bonus at Renewal			\$250	\$500	\$1000
Tiered Reimbursement			6%	9%	12%

Please direct any questions, comments, and/or concerns to Patti Oya

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