Insights on QRIS from Six States & a Literature Review

Findings from an Evaluation of Parent Aware, Minnesota's QRIS

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Introduction

In March 2022, Child Trends contracted with the Minnesota Department of Human Services (DHS) to conduct an independent evaluation of Parent Aware, Minnesota's quality rating and improvement system (QRIS) for early care and education (ECE) programs.[1] The evaluation, required by the 2021 Minnesota Legislature, includes several research activities aimed at assessing the effectiveness of Parent Aware in supporting the state's children, families, and ECE workforce. This brief summarizes work completed for two activities conducted for the evaluation—a literature review and interviews with QRIS administrators in six states—and provides considerations for DHS in their ongoing efforts to refine and improve Parent Aware.

Background on state QRIS

In the 1990s, many states viewed accreditation status as the primary indicator of quality in ECE programs. Acknowledging, however, that many programs encountered barriers to accreditation, state QRIS were devised as a way to bridge the gap between licensing and accreditation by supporting programs' incremental quality improvement.[i, ii] The first statewide QRIS was launched in Oklahoma in 1998; currently, 42 states, one U.S. territory, and the District of Columbia have at least one fully-implemented QRIS.[2, iii] Despite the rapid growth of QRIS across the country, many states' QRIS are still relatively new. An influx of federal funds from the Race to the Top–Early Learning Challenge grant enabled a new wave of states to adopt a QRIS for the first time between 2011 and 2013; in 2016, 10 percent of state QRIS (four states) were still in their pilot phase.

Given the relative recency of QRIS and the investment in research and evaluation on QRIS implementation and outcomes, it is important to continue examining the effectiveness of QRIS and how they fit into states' ECE systems and goals related to equitable ECE access for families. Although several validation studies have found that ratings are associated with significant, albeit small, differences in observed quality, findings regarding the association between ratings and children's developmental outcomes have been mixed.[iv, v] Other studies have highlighted inequities related to which ECE providers participate in QRIS,[vi] how incentive structures such as tiered subsidy reimbursement or quality improvement grants based on rating

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[1] Parent Aware is available for family child care (FCC) and center-based programs that are licensed through the Minnesota DHS, certified child care programs, Head Start programs, public school-based pre-kindergarten programs, and voluntary pre-kindergarten programs.
[2] In a push to move away from ratings and towards further supporting programs' ongoing quality improvement, some states use the term QIS (quality improvement system), rather than QRIS.

level disproportionately benefit larger or better resourced programs, and implications for families' equitable access to high-quality care.[vii]

QRIS were originally designed with three goals in mind: to measure quality in ECE settings, to market programs to families, and to improve children's developmental outcomes.[viii] While many state QRIS—including Parent Aware—still have goals that are more or less aligned with this original conceptualization, some thought leaders have advocated for reframing these goals to emphasize support and individualization over measurement and standardization. Organizations such as the Policy Equity Group, for example, recommend new approaches to QRIS that simplify the rating process to focus on key features of children's experiences in ECE, improve incentive structures, and develop alternatives to ratings.[ix] Likewise, the Children's Equity Project recommends setting equity as the foundation of QRIS and ensuring that programs designated as high-quality are accessible and support positive outcomes for children who have been historically marginalized.[x]

Although there are many questions facing state QRIS, the available research, community engagement activities, and state-level efforts to revise and improve QRIS over the last 10 to 15 years offer insights for the path forward. Many states have evaluated and/or significantly revised their systems,[xi] and around 10 states—including Minnesota—are currently planning major revisions to their QRIS. These revisions also come in the wake of the COVID-19 pandemic, which caused many QRIS to pause their operations and in some cases prompted closer examination of the important relationship between program quality and the stability and well-being of the ECE workforce. State leaders and administrators now have an opportunity to critically evaluate and revise—or even completely reimagine—their QRIS to create strengths-based and effective systems that recognize and support providers' strengths, empower family choice, and improve children's experiences.

Background on Parent Aware, Minnesota's QRIS

After being implemented as a pilot QRIS program in Minnesota from 2007–2011, Parent Aware began expanding as a statewide system in January 2012 with private, state, and federal funding, including from the federal Child Care Development Block Grant and from a 2012–2016 federal Race to the Top–Early Learning Challenge grant.[xii] Parent Aware is administered by Minnesota DHS in coordination with the Minnesota Departments of Education (MDE) and Health (MDH)—as well as support from contractors such as Child Care Aware of Minnesota—to manage statewide and regional implementation.[3]

Parent Aware defines quality in ECE settings by awarding programs a One-to Four-Star Rating, which is determined by a program's ability to meet quality indicators within five categories of program standards.[4] To achieve a rating, programs must submit documentation outlining how they are meeting the required quality indicator for that rating level.

In addition to rating the quality of care in ECE settings via Star Ratings, Parent Aware offers various tools and resources to achieve three central goals: 1) Help families find high-quality care, 2) support ECE programs in improving their practices, and 3) help children benefit from high-quality ECE that prepares them for school and life.[5]

Helping families find high-quality care. Parent Aware provides a number of resources to help families in Minnesota find high-quality care that meets their needs. The Parent Aware online search tool allows families to search for care near them, with filters for factors such as program type, Parent Aware Star

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[3] See the Parent Aware website for more information: https://www.parentaware.org/programs/resources-for-programs/
[4] Parent Aware's five categories of program standards include: 1) Health and Well-being, 2) Relationships with Families, 3) Teaching and Relationships with Children, 4) Assessment and Planning for Each Individual Child, and 5) Professionalism.
[5] Read more about the mission of Parent Aware on the Parent Aware website: https://www.parentaware.org/mission/

Rating, hours of operation, and language, among others. The website also includes written materials to support families in finding care, as well as links to other helpful resources for families.

Supporting ECE programs' quality improvement. Programs that choose to participate in Parent Aware gain access to a suite of resources aimed at supporting them in their ongoing quality improvement.[6] In addition to qualifying for quality improvement grants, participating programs can also leverage the support of coaches,[7] professional development advisors, mental health consultants, and various other support staff. Programs rated at a Three- or Four-Star level also receive higher reimbursement rates through the Child Care Assistance Program (Minnesota's child care subsidy program) and the Early Learning Scholarship Program.[8] To further support ECE providers' ongoing learning and quality improvement, Parent Aware also includes various quality indicators related to staff education levels and credentials, and requires participation in professional development training.

Helping children access ECE that prepares them for school and life. Acknowledging that children's early educational experiences have important implications for their success and well-being in school and beyond, Parent Aware also aims to support the healthy learning and development of children by expanding access to high-quality care. Parent Aware Star Ratings demonstrate when ECE programs go above and beyond basic requirements to use best practices that support children's healthy learning and development. Additionally, through the quality improvement supports offered to participating programs, Parent Aware encourages and supports programs in adopting evidence-based practices.

Purpose of this report

As part of the Parent Aware Redesign launched in 2021,[9] DHS is working internally and with partners to assess the effectiveness of Parent Aware as a system, to understand and address inequities, and to make improvements that support the needs of the children, families, and members of the ECE workforce that the system was designed to serve. The Parent Aware Redesign efforts are informed in part by the Parent Aware Racial Equity Action Plan report,[xiii] which highlights existing inequities and challenges within Parent Aware and offers strategies to address them.

In 2022, DHS contracted with Child Trends to conduct an independent evaluation of Parent Aware to inform the broader Parent Aware Redesign and DHS' efforts to address existing inequities within Parent Aware. This report outlines findings from two evaluation activities: a literature review and interviews with QRIS administrators in six other states. The purpose of both activities was to address questions related to four priority topics that the DHS team identified to support the Parent Aware Redesign: QRIS structure, use of classroom observations, strategies for embedding equity, and system alignment for mixed delivery (see Figure 1).

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[6] Participation in Parent Aware is currently voluntary. However, the Minnesota Legislature recently passed a bill that will automatically assign all licensed child care programs a One-Star Rating beginning in July 2026 unless the program opts out of the QRIS. See Child Care Aware of Minnesota's 2023 Legislative update for more information: https://www.childcareawaremn.org/wp-content/uploads/2023/05/Final-2023-Legislative-Update-FINAL.pdf

[7] Minnesota and many other state QRIS offer various types of coaching to support ECE programs with different aspects of their practice (e.g., quality improvement, business administration, the rating process). We use the term "coaches" throughout this report to refer to the various types of coaching and other support staff available to participating programs.

[8] Benefits to Rated programs vary by Rating level as well as program type and Rating Pathway. Head Start programs, for example, can become Four-Star Rated through the *Automatic Rating Pathway* due to alignment between Head Start and Parent Aware standards and monitoring processes, and therefore are eligible for different kinds of supports and grants than other programs. See the Parent Aware website for more information: https://www.parentaware.org/programs/benefits-for-rated-programs/

[9] For more information on the Parent Aware Redesign, see the DHS website: https://mn.gov/dhs/partners-and-providers/program-overviews/child-care-and-early-education/parent-aware/

Our chosen methods of scanning the extant literature and interviewing state QRIS administrators are particularly well-suited for these topics. The literature scan allowed us to pull insights not only from numerous QRIS evaluation and validation studies, but also from recent scholarship related to ECE quality, the workforce, and equitable access to ECE. Likewise, speaking directly with state administrators involved in creating, revising, and/or implementing state QRIS allowed us to hear firsthand how different states are approaching these topics, grappling with bigger questions about QRIS, and thinking about priorities for future system revisions.

In this report, we summarize our approach and key findings from both the literature scan and the state QRIS interviews. Findings from the QRIS interviews and literature scan often touched on more than one of DHS' four priority topics (see Figure 1). Strategies for embedding equity in QRIS, for example, came up in multiple contexts, including how state QRIS define quality in ECE settings; how they structure processes for supporting programs' ongoing quality improvement; and how leaders think about broader policies, processes, and future priorities for their systems (see the Equity in State QRIS: Context and limitations section for additional context regarding how we define and discuss equity throughout this report). To support this more integrated approach to the data, we report key findings from the priority topics across three themes: defining quality in QRIS, engaging and supporting providers, and improving QRIS structures and processes. Table 1 shows where DHS' four priority topics are situated within the organization of this report.

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<tr><th rowspan="2">Figure 1. Four priority topics explored in this report</th></tr>
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Figure 1. Four priority topics explored in this report

- **QRIS structure**—specifically ideas to streamline indicators, collapse Rating levels, or even move away from the concept of "Ratings" entirely.
- The use of **classroom observations within QRIS**, and considerations for whether observations should be used to determine programs' ratings and/or as a tool for supporting ongoing quality improvement.
- Strategies for **embedding equity within QRIS** in terms of race, culture, language, and ability.
- **System alignment for mixed delivery**, including ways to improve transparency around requirements and processes for different types of programs, as well as options for customizing the system for different program types.

Table 1. Organization of DHS' four priority topics into sections of this report

Report Sections	DHS Priority Topics			
	QRIS structure	Classroom observations	Embedding equity in terms of race, culture, language, and ability	System alignment for mixed delivery
Defining quality in QRIS	X		X	X
Engaging and supporting providers	X	X	X	
Improving QRIS structure and processes	X		X	

Both the literature scan and the interviews with state QRIS administrators provide valuable insights not only into the four priority topics that DHS identified for this work, but also into how Parent Aware fits into broader conversations happening within the field about quality in ECE settings and future directions for

state QRIS. We also offer considerations for DHS that may inform improvements to Parent Aware as part of the state's redesign process.

Methodology & Data Sources

Interviews

To select the six states for interviews, Child Trends first conducted a review using the Quality Compendium's 2021 dataset of states' quality improvement systems (most of which are QRIS).[xiv] This initial review used filters for specific data elements to identify state QRIS with features aligned with at least one of the four priority topics identified by DHS (see Figure 1). Child Trends identified 13 state QRIS aligned with one or more of the priority topics and created a summary document for DHS outlining the ways in which comparing those states' QRIS to Parent Aware could be informative. DHS reviewed the document and provided input to help identify six states for further exploration and interviews with QRIS administrators: Washington, Michigan, Pennsylvania, Vermont, Louisiana, and Delaware. (See Figure 2 for an overview of the selected states and features of their QRIS.)

Figure 2. Key features of selected states' QRIS

Washington: Early Achievers

Rating system: Hybrid (Block at early levels and points at later levels)

Participation rule: Voluntary

Participation rule for programs with children receiving CCDF subsidies: Mandatory

Center-based program density: 59%

Family child care density: 47%

Michigan: Great Start to Quality

Rating system: Points

Participation rule: Voluntary

Participation rule for programs with children receiving CCDF subsidies: Voluntary

Center-based program density: 53%

Family child care density: 43%

Pennsylvania: Keystone STARS

Rating system: Hybrid (Block at early levels and points at later levels)

Participation rule: Licensed programs enrolled at first level

Participation rule for programs with children receiving CCDF subsidies: Mandatory

Center-based program density: 100%

Family child care density: 100%

Vermont: Step Ahead Recognition System (STARS)

Rating system: Hybrid (Mix of blocks and points at all levels)

Participation rule: Automatically enrolled at the first level

Participation rule for programs with children receiving CCDF subsidies: Mandatory

Center-based program density: 100%

Family child care density: 100%

Louisiana: Unified Statewide Early Childhood Quality Rating and Improvement System

Rating system: Points

Participation rule: Voluntary

Participation rule for programs with children receiving CCDF subsidies: Mandatory

Center-based program density: Unknown

Family child care density: Unknown

Delaware: Stars for Early Success

Rating system: No ratings; quality improvement system only

Participation rule: Voluntary

Participation rule for programs with children receiving CCDF subsidies: Voluntary

Center-based program density: 67%

Family child care density: 24%

Note: Program density is defined as the percent of rated programs by program type, with the numerator being the number of programs with a QRIS rating and the denominator being the total number of licensed programs in the state.

Source: Quality Compendium. (2021). https://qualitycompendium.org/

To strengthen our understanding of the states' QRIS and to inform interview protocols, Child Trends reviewed existing documentation from the six selected states. The interview protocols for each state included questions aligned with the four topics we explored through this work (see Figure 1), with some additional probing questions tailored to clarify information; we learned about each state's QRIS through our review of existing documentation.

Planning for these state QRIS interviews and submission to Child Trends' Institutional Review Board occurred in summer and early fall 2023. Our team contacted state administrators and conducted interviews from August through October 2023. Three team members reviewed the transcripts from the six interviews, identifying and synthesizing key themes related to how these states define quality in their QRIS, how they engage and support providers, and how they have improved and revised their QRIS.

Literature review

Child Trends conducted a review of previous literature (published roughly in the last five years) on the four topic areas DHS identified (see Figure 1). To find previous literature, we used relevant search terms in conjunction with the term "QRIS" on both Google and Google Scholar (see Table 2).

Table 2. Literature scan search terms by topic

Topic	Search Terms (+QRIS)
Structure	Streamlined indicators for QRIS
	Badges
	Program profiles
	Family fit
	Individualized support
Observation	Observation as starting point
	Observation data for CQI
	Observation tools in QRIS
Equity	Equity
Customizing	Customizing standards in QRIS

Child Trends reviewed titles from 120 publications (peer reviewed articles, grey literature,[10] and presentations and blog posts from QRIS-related organizations) and then scanned abstracts for their relevance to the priority topics. We identified 45 publications which were then reviewed in their entirety and examined for common themes and findings. In total, 14 articles provided unique contributions to this review.

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[10] Grey literature is work that is produced outside of traditional academic peer-reviewed channels. See https://www.nihlibrary.nih.gov/services/systematic-review-service/literature-search-databases-and-gray-literature for more information.

Equity in State QRIS: Context & Limitations

Minnesota's focus on improving equity within Parent Aware follows a recent statewide equity engagement effort. In 2022, DHS and MDE collaborated with a variety of partners to release the Parent Aware Racial Equity Action Plan report—the culmination of a multi-year effort to engage ECE providers and other community members in identifying and developing strategies to address key racial equity-related challenges within Parent Aware.[xv] The report focuses on four priority equity-related issues and strategies to address them, with topics ranging from racial inequities in statewide access to high-quality care to disparities in the supports offered to help ECE programs meet Parent Aware requirements and the need for revised quality standards and indicators aligned with community values. Importantly, the report authors note that the release of the report does not mark the end of Minnesota's work, but rather the beginning of the long process needed to make Parent Aware a more equitable system that meets the needs of all the state's children, families, and ECE providers. The roadmap provided by the Racial Equity Action Plan report, along with findings from the Parent Aware Evaluation and various other efforts led by DHS and their partners, will together help to inform proposed changes to Parent Aware as part of the ongoing Parent Aware Redesign.[xvi]

To inform DHS' efforts, the Child Trends team reviewed the recent literature and interviewed QRIS administrators from six states about strategies to embed equity within state QRIS, among other topics (see Figure 1). This work was informed by a report by The Children's Equity Project, which outlines 11 priorities for dismantling systemic racism and other inequities within QRIS (e.g., linguistic equity for dual language learners, workforce preparation).[xvii] Child Trends' work was also informed by a broad framework developed by Child Trends researchers that conceptualizes equitable access to high-quality ECE using four dimensions, including whether ECE programs: 1) can be accessed with reasonable effort from families, 2) are affordable, 3) support children's development, and 4) meet families' needs.[xviii] Throughout the Findings section of this report, we describe our learnings from the literature review and interviews with other states, including various ways of conceptualizing equity in QRIS and the strategies states and researchers have suggested to promote equity. Acknowledging the complexity of this topic, as well as the pervasiveness of racism and other forms of systemic discrimination in the U.S., these findings are not prescriptive but instead offer a range of examples that DHS and other state leaders can test, revise, and build upon as part of their ongoing efforts to promote equity and continuously improve Parent Aware to ensure it serves the needs of Minnesota's ECE community, families, and children.

Findings

Defining quality in QRIS

To begin, we explore themes related to definitions of quality within QRIS, drawing on both our interviews with QRIS administrators in six states and our review of the recent literature. This section includes themes related to:

- Crafting meaningful standards and indicators, including the benefits and tradeoffs of creating universal vs. customized indicators by program type

- Embedding equity in standards and indicators

- Streamlining indicators

- Aligning indicators and processes in mixed delivery systems

To craft meaningful and attainable standards and indicators, some QRIS consider how to balance the need for standardization, or universal indicators, with efforts to clarify how indicators are interpreted and demonstrated across program types and settings.

Although the state QRIS administrators interviewed recognized the value of a universal set of standards and indicators, they acknowledged that, in practice, standards and indicators often needed to be customized according to ECE program type. Some states discussed that as part of their QRIS revision processes, they deliberately attempted to improve alignment across ECE program types by creating a universal set of standards and indicators for programs. Pennsylvania noted that prior to their revision, they had 12 sets of standards for different program types and thus hoped to unify the standards, explaining, *"Overall, the feeling was that the intent of each standard should be able to be interpreted by programs, no matter their program type."*

Michigan and Vermont also aimed to create standards relevant to all program types. As one Michigan QRIS administrator said, *"We worked really hard to make the language understandable and equitable for folks so that all of those indicators, regardless of the setting, [could be] applied. So, if you were Head Start or a home-based provider, you were still meeting the same kind of quality indicator."* For example, one indicator is about whether the program provides families and staff with a description of how it supports parents who breastfeed. Michigan's Indicators Guidance Document includes information on why this indicator is important, examples of evidence to meet the intent of this indicator, and which age groups and program types this indicator applies to (i.e., infant and toddler, child care centers, and family/group child care).[xix]

Washington is taking a similar approach as they move toward "targeted universalism" and aim to make their system work for all programs and families. For example, Washington developed the Quick Tool, an ECE program assessment tool, which was designed specifically to be used across all programs and classrooms. The Quick Tool is based on Washington's Early Learning and Development Guidelines and Competencies. The Quick Tool assesses interactions between teachers and children using Video Highlights (i.e., videos submitted by ECE programs of their teaching practices), instead of classroom observations. Coaches use the Quick Tool to review Video Highlights and then provide a report for classrooms with information on how to improve teaching practices.

However, some states we interviewed found that certain standards and indicators need to be customized for different program types. For example, Pennsylvania is continuing to adjust their QRIS standards to provide additional clarification for school-age and FCC programs. Pennsylvania regularly convenes a group of school-age providers along with quality coaches and rating staff who work with school-age providers; there is a similar group focused on FCC settings. These groups help inform any clarifications to the QRIS standards.

States aim to incorporate equity into their QRIS by embedding it into their standards and indicators overall or by embedding it into select standards; however, the literature underscores tensions between standardization and customization.

All six states we interviewed have taken steps to incorporate equity into their standards and indicators. Some states include select indicators focused on equity while others interweave equity across standards. For example, Michigan's QRIS includes indicators related to reducing bias, such as an indicator on staff training on unconscious bias and the importance of understanding and reducing bias when serving families. Pennsylvania's QRIS has indicators related to culture and language, such as an optional indicator on professional development for staff focused on working with children from diverse populations. Pennsylvania recently updated their indicators to include children experiencing homelessness and children in foster care as part of how they define "children from diverse populations"; the QRIS administrator noted that while they always considered those groups be included in the definition, they formally made the change

to be more explicitly inclusive in their language and framing. In Delaware and Vermont, QRIS administrators took a holistic approach to embedding equity into their definition of quality, and interweaved principles related to equity and inclusion throughout all of their quality standards rather than through a select number of additions. For example, Vermont's QRIS embeds cultural competency and awareness in their responsive practices indicators.

Themes from our review of recent literature also emphasize the importance of continually examining standards of quality with cultural humility in mind. Approaching interactions and processes with cultural humility means acknowledging diversity of thought and leaving space for lifelong learning, rather than memorizing stereotypes.[xx] Current standards are often based in norms of privileged populations, and rely heavily on physical assets within programs, making movement toward the standards difficult for providers in less privileged settings.[xxi] Family engagement, for example, is an important part of QRIS, yet it is often measured in terms of how often families volunteer within a program or participate in program activities, which relies on having the personal and financial availability to take part in program activities. To address this, Sabol et al. suggest programs invest in opportunities to enhance parental well-being and subsequently improve the circumstances in which children are developing.[xxii] Centers could offer family engagement activities such as parenting classes, family support services, and activities designed to enhance a family's social capital. Programs could be rated based on the opportunities and support they provide, how well that support matches families' needs, and whether the support is evidence-based. When assessing these types of proposals, states can consider the potential outcomes for children and families as well as the implementation burden on smaller programs and FCC providers who may need to provide resources to external services rather than in-house services.

Additionally, the literature notes that current standards may not reflect common cultural practices for the communities they are intended to serve. For example, a study by Garrity et al. highlighted the ways in which QRIS standards are often mismatched with cultural practices within immigrant and refugee families.[xxiii] The providers in this study placed a high value on providing a safe place with opportunities for play and community building, rather than adhering to a strict curriculum for school readiness. Yet specific standards sometimes conflicted with cultural practices, meaning many struggled to meet those requirements. For example, in some cases it is typical for children to sleep on mats on the floor instead of in cribs. Requirements for sleeping arrangements that include cribs are not only culturally discordant, but also represent an increased expense that many FCC providers are unable to afford. Standards that focus on material supports may serve as barriers to equitable participation in quality improvement processes.

The literature review highlighted that standards intended to support equitable ECE practices will not have the intended impact if attention is not paid to how all children are experiencing the practices. For example, according to Iruka et al., Black children are less likely to attend high-quality programs compared to their peers of other races.[xxiv] However, a study by Jenkins et al. found that fewer Black providers participated in QRIS systems, which may be because standards sometimes privilege certain provider characteristics and contribute to inequities.[xxv] Meek et al. recommend that definitions of quality explicitly include equity, and that definitions of equity be consistent across states and QRIS.[xxvi] Additionally, indicators should be revised to center equity; for example, providers should have training on racial history and antiracist coaching and training. Furthermore, curricula must be culturally responsive and grounded in equity. In practice, this could include policies and indicators like the prohibition of harsh discipline and exclusionary practices.

As states work to embed equity within quality standards—and particularly those related to staff training and professional development—it is also necessary to consider and address the inequities that exist within the child care workforce. The national child care workforce, of which 40 percent are Black and Latina women, has historically been underpaid and undervalued.[xxvii, xxviii, xxix] Placing the burden of quality improvement solely on providers exacerbates working conditions that are unsupportive of workforce health and well-being.[xxx] This is especially concerning following the COVID-19 pandemic, which disproportionately

impacted Black and Latina women providers in terms of increased health issues, stress and anxiety, and financial and job insecurity.[xxxi] When examining how the financial and time burden of quality improvement falls on individuals in programs, states can consider investments in professional supports, fair pay, and opportunities for advancement that are commensurate with the education, credentials, and other training ECE providers are required to complete.[xxxii, xxxiii]

Examples of State Efforts to Promote Equity in QRIS

State participants in the interviews discussed embedding equity into their QRIS at multiple levels of the system. In addition to embedding equity in their standards and indicators, for example, states also think about equity in designing programs' continuous quality improvement (CQI) processes and in their own systemwide QRIS revision processes. Details and examples related to how states embed equity in QRIS are provided throughout this report, but states' strategies for promoting equity for children and families, ECE programs, and the QRIS system overall centered around a few common themes. Note that these are examples of state strategies, not comprehensive definitions of what it means to build an equitable QRIS.

Examples of how states promote equity for **children and families** include:

- Providing additional supports for children who have special needs or disabilities, are dual language learners, are experiencing homelessness, and/or are in foster care
- Providing additional supports for families in Tribal communities, families who speak a language other than English, and/or families who live in rural areas

Examples of how states promote equity **within ECE programs** include:

- Improving the cultural humility of ECE program staff
- Educating ECE program staff on implicit bias, power, and privilege

Examples of how states promote equity **within QRIS policies and processes** include:

- Making investments in programs and quality improvement that support programs of all quality levels, not just programs with the highest quality
- Adjusting standards and indicators to be relevant, useful, and attainable for all program types and settings
- Creating strategies to ensure all children, and particularly those receiving child care subsidies, can access high-quality care that meets their needs

Some states are moving towards a "less is more" approach to QRIS and streamlining quality indicators.

Some of the states we interviewed prioritized having a small set of indicators that make up their QRIS, selecting only those indicators demonstrated in research studies to have strong associations with children's developmental outcomes. For example, when revising their QRIS, state administrators in Delaware wanted to focus on what *"would have the most impact on children and families"* and decided on only three indicators (creating conditions for quality, positive climate and high-quality interactions, and family engagement and community services), with quality practices that help define each indicator tailored for center-based and

FCC programs.[11] Similarly, during revisions, Vermont wanted to *"reduce burden"* for ECE providers participating in their QRIS and focus on what *"improves child outcomes."* Vermont's revised QRIS includes only three elements of quality (adult-child interactions, family and youth engagement, and responsive practices). When working on their revised QRIS, which was launched in 2015, Louisiana decided to use the Classroom Assessment Scoring System® (CLASS®) as the only metric for QRIS ratings. An administrator from Louisiana's QRIS shared that this decision was made to simplify the rating process and increase fairness when evaluating a program by using a tool that doesn't rely on classroom resources.

A recent synthesis of the literature by Davis Schoch et al. identified three key aspects of quality in ECE settings that have consistently been shown to predict positive developmental outcomes for children: educator-child relationships, effective teaching and use of curricula, and educator preparation and professional development.[xxxvi] Across studies, researchers have found that positive relationships between providers and children result in improved child outcomes related to social skills, self-control, language development, classroom behavior, and academic skills. Additionally, the way a provider makes use of curricular materials by engaging children in conversation and providing instructional support has important implications for cognitive outcomes. Although research has not consistently found that educators' level of education or completion of ECE-related coursework are associated with child outcomes, many studies have demonstrated that professional development aligned with a specific curricula or practices tailored to the needs of the individual provider support increased quality of care, which in turn can promote positive outcomes for children in related domains.

Collapsing Quality Levels

During interviews, multiple states also discussed the possibility of collapsing quality levels in the future. For example, Pennsylvania's certification regulations (i.e., licensing requirements) are currently undergoing rewrites. This will likely affect Pennsylvania's QRIS system because the QRIS sits on top of the certification regulations. If the revised certification regulations are more comprehensive, Pennsylvania may not feel they need as many QRIS levels above the certification regulations and they may collapse levels. Additionally, Michigan's QRIS is partnering with another organization on an Office of Planning, Research, and Evaluation-funded research partnership project to explore if the QRIS is differentiating between levels of quality; the results of this project may influence changes to Michigan's quality levels and QRIS.

States' decisions to collapse quality levels may also be influenced by evidence from the recent literature, which suggests that QRIS with five levels are not always able to differentiate quality.[xxxiii] For example, a 2016 study of Oregon's QRIS found that programs with a Four- or Five-Star rating did not provide higher quality care in terms of adult-child interactions than Three-Star programs, though Three-Star programs did provide higher quality than One- and Two-Star programs.[xxxiv]

Of these three key factors identified by Davis Schoch et al.'s review of the literature (i.e., positive teacher-relationships, curricular practices, and professional development),[xxxvii] teacher-child relationships have been a particularly popular focus in the broader literature about QRIS, possibly due to its inclusion in commonly used measures such as the CLASS® and Environmental Rating Scales (ERS) tools. Evidence from our scan of the literature likewise suggests that while not all indicators are equally effective at predicting learning gains, teacher-child interactions in particular are a strong and consistent predictor of child outcomes. In a study by Markowitz et al., for example, researchers found that structural indicators, such as program and teacher characteristics (e.g., teacher education) were not related to student achievement.[xxxviii] However, modest

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[11] Read more about Delaware's three quality indicators here: https://dieec.udel.edu/home-revision-2/qis-revision-update/

relationships were found between the CLASS® observational measure and student gains in language, literacy, and mathematics.

Two states have moved to simplify their QRIS by focusing exclusively on teacher/caregiver-child interactions. Louisiana and Virginia both include CLASS® as the only indicator to determine ratings in their QRIS. As states continue to weigh the possibility of moving to a more simplified set of indicators, it is important to ensure that the goals of the QRIS are clear and unintended consequences have been discussed among key stakeholders. For example, if goals for a QRIS include facilitating access to high-quality learning experiences, supporting children's transition to kindergarten, and promoting family engagement in children's learning, QRIS leaders will also need to consider factors such as program stability, workforce well-being and staff retention, community-school partnerships, and affordability in their definitions of quality.

Although streamlined rating processes for certain program types can promote efficiency, states should carefully assess alignment across policies and systems—not only to support providers in navigating requirements, but also to ensure consistency and equity in the rating process.

Many states' QRIS include a streamlined rating process for Head Start/Early Head Start, pre-kindergarten, and accredited programs. In Minnesota, for example, Head Start and voluntary pre-kindergarten (VPK) programs, usually located in school districts and charter schools, are eligible to be rated through the Automatic Pathway, which allows them to automatically earn a Four-Star Rating via an application that is embedded into the annual Head Start and VPK application processes.[xxxix] Additionally, a 2021 national scan of states' QRIS found that nearly all states (83%) incorporate accreditation into their QRIS. More than half of those states (61%), including Minnesota, allow accredited programs to be rated through an automatic or accelerated process, and a few others (14%) instead allow accredited programs to earn extra points toward ratings.[xl]

The underlying rationale behind these varied rating processes is to streamline the QRIS and reduce administrative burden on providers by acknowledging the alignment between the QRIS requirements and the requirements for programs monitored through other regulatory bodies (e.g., the Office of Head Start, the state agencies that oversee pre-kindergarten programs, and the national organizations that provide child care accreditations). However, the literature also emphasizes that to ensure continued alignment and promote equity in QRIS, states need to frequently review other regulatory bodies' specific requirements for programs against QRIS standards and indicators.[xli]

During interviews with state QRIS administrators, some states mentioned their own processes for ensuring alignment between their QRIS and other requirements for ECE programs. For example, Vermont mentioned that their QRIS includes an automatic pathway for Head Start and accredited programs that allows programs to automatically receive a certain level or score on some indicators. In developing this automatic pathway, Vermont conducted a crosswalk of the Head Start Program Performance Standards and accreditation requirements with their proposed QRIS standards and indicators, with the goal of determining how being a Head Start program or being accredited could be used to meet certain standards in the QRIS.

The literature likewise highlighted the need for states to carefully consider which programs can or cannot access these alternate rating pathways and how that might create systematic inequities within states' QRIS. A 2022 report from Child Care Aware of America, for example, noted that it can be expensive and time-intensive for programs to become accredited, and that these factors may pose disproportionate barriers for FCC providers in particular; a 2020 survey showed that around 11 percent of licensed centers were nationally accredited compared to just 2 percent of licensed FCC programs.[xlii]

State governance structures for QRIS and other ECE programs may be another important factor to consider in promoting alignment between QRIS standards and other requirements for ECE programs. A 2022

national study by Whitaker et al. used publicly available data to examine states' ECE governance structures to explore the degree of alignment within state ECE programs and policy systems, including QRIS, pre-kindergarten, and the Child Care and Development Fund.[xliii] Their analyses found "little and limited alignment" within states' policy levers related to ECE standards, curricula, and assessment (which the authors operationalized as state QRIS). In examining state QRIS, for example, they found that many states did not include curricular guidance anywhere in their rating processes (40%). Although they found that more than half of states included alignment with early learning standards in QRIS rating processes (70%), there was wide variation in the specificity and rigor of alignment required. Their analyses also highlighted that states' ECE governance structures vary significantly. They found, for example, that nearly all states have at least two agencies involved in operating their QRIS—most often, state departments of human services, education, or early education—and six states have nine or more partners involved in QRIS oversight. The authors note that large or diffuse state governance structures could possibly explain some of the observed misalignment in ECE policies, but, importantly, that there is limited empirical research exploring the relationship between state agencies that oversee ECE programs, nor is there much evidence related to how state governance and policy alignment are related to child outcomes.

Others in the field have noted that the misalignment between state ECE policies can be a challenge for the ECE providers who are required to navigate them.[xliv] For example, Child Care Aware of America recommends that states explore creative strategies to improve coordination, such as through joint goal setting or braided funding.[xlv] King further suggests there is a need for improvement in QRIS, asserting that a strong, coordinated local infrastructure is essential to success in state-level approaches to children's services.[xlvi] A study by Whitaker et al. found wide dispersion in the distribution of management of ECE services, which could contribute to poor alignment of policies and service delivery.[xlvii] However, the authors note that the relationship between coordination of ECE services and program quality remains untested.

Engaging & supporting providers

In this section, we describe key findings from state interviews and our review of the literature related to the processes by which state QRIS engage with and support providers. We include themes related to the following topics:

- Strategies for emphasizing and promoting providers' continuous quality improvement (CQI) within QRIS

- Embedding equity in CQI processes

- Using observation tools in QRIS, either for ratings and/or for CQI, and challenges with using observation tools

- Creating ways for programs to showcase their unique strengths and approaches

Some states are shifting their focus away from ratings and toward a quality improvement system that focuses on self-reflection, assessment, and allowing programs to showcase what quality means to them.

Rather than taking a checklist approach to quality, some states we interviewed aim to take a more holistic approach in which programs are involved in a CQI process during which they can receive feedback and support. Multiple states discussed a desire for their QRIS to focus on the quality improvement aspect of QRIS over the rating aspect. As one administrator in Michigan said,

> "We just really wanted to shift the story and encourage folks and lift them up regardless of where they are and if they're meeting all of the indicators or if they're just meeting one and that's the start. At least they understand what high-quality practices are and then they can move on."

Several states discussed hearing from providers that their previous QRIS felt like a "checklist." For example, an administrator from Pennsylvania said, "*Programs had gotten used to saying to a quality coach, 'tell me the 20 things I need to give you in order to be a Star Four.'*" Similarly, Delaware heard from programs that the ERS was unpopular and that the entire rating process caused stress:

> "People were saying that they had PTSD from our verification process, and they were serious; they weren't joking. They were having nightmares about not having enough materials [in their programs]."

States had various ways of revising their QRIS to feel more supportive of programs' ongoing quality improvement and less like a "checklist." For example, Washington created Video Highlights, in which teachers are asked to submit a 10–15-minute video of them facilitating an activity or lesson with the children in their classroom. Video Highlights are assessed with the Quick Tool. Programs submit multiple Video Highlights over the three-year rating cycle. For each Video Highlight, teachers also complete a self-reflection exercise (e.g., noting their intentions for the activity/lesson, alignment of the teaching practices in the video with Washington's Early Learning and Development Guidelines, and their perceptions of their strengths and opportunities for growth). Teachers receive a data report with the results of the assessment of the Video Highlight (based on the Quick Tool) and then have the opportunity to work through the data and any feedback with their coach. Programs can also use the Video Highlights and data reports to inform and support professional development for their staff. On their decision to create the Video Highlights an administrator from Washington elaborated,

> "We knew that we wanted to not make this feel like a high-stakes, anxiety-provoking system that wasn't actually even a true representation of what was happening every day. The whole process was really established to have that in mind, with the teachers driving, they're choosing the video. We might have people say, 'Well, how do you know that that's a good choice?' The same can be true if you go to a site and they're changing teachers around in classrooms. We wanted this to feel empowering to providers. In a 10-to-15-minute clip, there is amazing information that you can gain in that and then it's super transparent. It's not something that is hidden from the providers, they choose this clip and then they work with their coach, who can also see this video practice and they can work on [it] together…So I would say the whole approach that Washington is using, we're still asking people to deeply reflect on the work they're submitting and engaging coaching for continuous quality improvement."

Washington's shift from classroom observations to these Video Highlights was very intentional. One administrator explained, *"I think throughout the entire revised system, programs are really prompted to capitalize on their areas of strength."* They shared that ECE programs have already reported feeling more valued and heard with the new system. Delaware also highlighted coaching as part of supporting programs' CQI. Delaware's QRIS offers three tiers of coaching with levels of support tailored for different types of programs with varying quality improvement goals.

Similarly, Vermont, Michigan, and Pennsylvania leverage self-reflection and self-assessment tools for programs. For example, to meet all three of Vermont's quality elements (adult-child interactions, family and youth engagement, and responsive practices), programs are required to conduct self-assessments. Vermont suggests programs choose to have a classroom observation as one of the assessments since classroom observations can show that programs are meeting the standards for both the adult-child interactions and

responsive practices quality elements. Vermont offers unlimited scored and "unscored" classroom observations so programs can receive multiple rounds of feedback and formulate a CQI plan.[12] Michigan also allows programs to receive unscored observations to formulate a CQI plan and has heard positive feedback from programs about the opportunity to receive an observation without the pressure of a rating. In Pennsylvania, self-assessments are part of programs' required annual CQI plan updates to maintain their rating, and the state provides at least 15 different self-assessment tools that programs can use and then discuss with a quality coach and a member of the assessment team.

The literature also underscores the importance of coaching and that CQI processes are most effective if feedback is shared with providers in a way that is easily translated to their practice. A recent study of pre-kindergarten classrooms by Farran et al. found that sharing results from the TOP (Teacher Observation in Preschool) and COP (Child Observation in Preschool) with teachers on a rapid cycle basis provided too much information without clear direction for improvement. [xlviii] In this partnership between researchers and teachers, coaching was essential for processing information and translating findings into action. Researchers were most successful at effecting change within teaching practices when they provided teachers with eight core practices related to developmental outcomes, which gave teachers tangible guidelines to follow and implement.

States embed equity into their CQI processes for programs, often through professional development or coaching processes.

Some states that we interviewed consider equity in their CQI processes for programs, and several have incorporated equity-focused tools and professional development resources for programs, as well as systems to support coaches in working with programs on equitable practices. As part of Washington's CQI process, the state includes a number of equity-focused questions that programs can work through with their coach. For example, programs might review data on the demographic characteristics and languages spoken by enrolled children compared to those of program staff as a way to identify gaps and discuss strategies for addressing those gaps with their coach.

Several other states we interviewed mentioned embedding equity into CQI processes using self-assessment tools and professional development resources designed for programs. Vermont, for example, refers programs to Advancing Equity in Early Care and Education—an online resource from the National Association for the Education of Young Children (NAEYC) that provides information, links to videos and other resources, and lists of concrete recommendations for programs, policymakers, and other stakeholders to embed equity into their work related to ECE.[13] Additionally, Delaware partnered with Dr. Nneka Ibekwe-Okafor at the University of Texas at Austin and Kaeleigh Hernandez (through support from the W.K. Kellogg Foundation) to support state administrators' efforts to embed equity into their QRIS. Dr. Nneka Ibekwe-Okafor and Kaeleigh Hernandez shared several resources and self-assessment tools that programs can use as part of their CQI process to think about racial equity and what it looks like in a classroom, should they choose to focus on a key practice that includes a focus on equity. As part of Pennsylvania's new internal assessment process, which allows programs to choose from a broader range of observation tools, one of the options programs can use as a self-assessment is the Inclusive Classroom Profile. The Inclusive Classroom Profile (ICP) includes items related to programs' space and materials, peer relationships and adult

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[12] Vermont described how "unscored observations" "help [providers] understand where there are opportunities. It's less about filling out paperwork and submitting it and more about thinking…and reflecting and working with coaches to understand where there are opportunities for improvement." Although Vermont uses the term "unscored observations," these observations are scored, but the score is not considered in determining a program's rating. "Unscored observations" are conducted by coaches to help programs become familiar with the observation tool and identify areas for improvement. Scored observations are conducted by certified CLASS® assessors.

[13] Read more about NAEYC's online resources here: https://www.naeyc.org/resources/position-statements/equity

interactions, support for communication, and several other factors designed to support programs in exploring the extent to which their daily classroom practices are supportive of children with disabilities.[14]

States reported that they still used observations as part of their QRIS, but several states are shifting the emphasis towards quality improvement rather than rating or are providing programs flexibility in the tools they use.

Among the states we interviewed that use observations in their QRIS (whether included in the rating or not), CLASS® was the most commonly used tool, although several states provided multiple options for programs.[15] Among the states we interviewed, Louisiana, Michigan, Pennsylvania, and Vermont all used CLASS®. These states discussed their reasons for using CLASS®, specifically, as they felt it fit their goals of CQI and improved child outcomes better than other observation and assessment tools. As an administrator from Louisiana said, *"there was a lot of concern with the prior assessment tools because they [teachers and centers] felt all the counting, all the measuring wasn't truly looking at those [teacher-child] interactions that they were able to facilitate and really have control over."*

As part of their QRIS revisions process, Louisiana engaged stakeholders at community meetings and proposed initial ideas for the QRIS, including using child assessments in the rating process. In particular, some expressed concerns about how basing ratings on standardized measures of children's outcomes might not account for the fact that children have varying needs and developmental trajectories, many of which are outside of programs' control. This feedback in part led to Louisiana's emphasis on using CLASS® as the only component of their QRIS rating.

> *"The department was considering using child assessment results in [the QRIS rating] and so many of us in the field had such great concerns about doing that because we were worried that young children with disabilities or behavioral challenges would be kicked out of sites, which already happens in alarming numbers—that even more would be kicked out of sites so that sites could improve their scores…You know, children don't develop along a strict timeline. There are some markers there to help you know how to scaffold supports and when you might be concerned, but you can't base a score of success on whether a child has met a specific marker of development."*

Similar to Louisiana, Michigan engaged an advisory committee, which included providers across the state who gave input to inform QRIS revisions, in the process of determining which tools to use. Michigan's QRIS administrators knew they wanted to move toward tools that focus on adult-child interactions and thus settled on CLASS®, although they still offer ERS to give programs choice about which tool to use.

Vermont, Michigan, and Pennsylvania use other tools in conjunction with CLASS®. Vermont uses CLASS® for centers and FCC programs, the Youth Program Quality Assessment (Y-PQA) for after-school programs, and Teaching Pyramid Observation Tool (TPOT) and Teaching Pyramid Infant-Toddler Observation Scale (TPITOS) for Vermont Multi-tiered System of Supports implementation sites. Michigan offers CLASS®, ERS, and the Social-Emotional Learning Program Quality Assessment (SEL-PQA) and allows programs to select which tool works best for them. Michigan offers training that helps programs determine which tool to use, as well as training on each of the tools themselves. Finally, Pennsylvania offers programs the use of ERS, CLASS®, and ten additional tools (e.g., the Business Administration Scale [BAS], Parenting Interactions with Children: Checklist of Observations Linked to Outcomes [PICCOLO], and TPITOS) for self-assessment or

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[14] See the Internal Assessment Process Guide for more information: https://www.pakeys.org/wp-content/uploads/2020/10/Keystone-STARS-Internal-Assessment-Process-Guide.pdf
[15] According to the Quality Compendium 2021 data, the ERS was the most commonly used observation tool, followed by CLASS®.

quality improvement purposes. Pennsylvania's assessment team created online, asynchronous trainings for most of the tools and allows programs to select one or more of these tools to inform their CQI goals.

While evidence suggests consistent associations between observation scores and child outcomes, recent literature also highlights notable limitations to using observations within state QRIS.

Numerous studies have found that observation tools focused on teacher-child interactions, such as the CLASS® and the ERS, are related to child outcomes in meaningful ways.[xlix] However, evidence points to some considerable limitations of observation tools and other strategies designed to capture practices occurring in a program (e.g., video recordings, wearable devices such as LENA that record adult-child talk). For example, a recent study found that approximately one in four children experiences very little adult-child interaction, even within classrooms at centers that have achieved the highest QRIS rating possible. The authors highlight that observation tools such as the CLASS® are typically scored based on the average experience of children in the classroom and therefore do not necessarily fully capture the nuanced experiences of individual children.[l] Other studies have similarly highlighted mixed findings regarding the relationship between observational scores and children's developmental outcomes, with some studies finding positive but modest associations on varying developmental outcomes (e.g., mathematics vs. literacy skills),[li] and others finding stronger associations for certain groups of children compared to others (e.g., children who speak English as their native language compared to non-native English speakers or children with individualized education plans compared to those without them).[lii]

Observations in QRIS: Spotlight on Washington's Self-Developed Tools

Washington has taken a slightly different approach compared to other states and uses two self-developed tools. The Program Profile is a self-assessment process in which programs gather data from interviews with leadership, families, and staff to facilitate their CQI process. This process occurs every three years, at the beginning of each rating cycle. The Quick Tool was developed to score the Video Highlights that programs submit for assessment, and was designed with the goal of applicability to all program types and settings. This tool was designed by a diverse group in a larger effort towards a system of targeted universalism. Washington is currently evaluating the Quick Tool to confirm its validity and reliability.

An additional challenge with using observations as part of state QRIS is that not all tools are consistently used or even equally valid across program types, care settings, and contexts. According to a 2016 summary of data from the Quality Compendium, 41 QRIS used observation tools in centers, while only 34 QRIS used observation tools in FCC programs. For those that do use observation tools in FCC programs, the most commonly used tools are ERS and CLASS®.[liii] Notably, CLASS® is not formally validated for use in FCC programs, although Teachstone does offer some guidance for using the tool in these settings.[liv] The ERS suite of tools include the Family Child Care Environment Rating Scale, Revised (FCCERS-R), which was specifically designed for use in FCC settings. However, a 2016 review found that only nine (out of 18) states included the FCCERS-R in their QRIS validation studies.[lv] The use of observation tools in QRIS also varies in terms of how many classrooms and which age groups are observed. Most states only observe a subset of classrooms in centers, and sometimes not all age groups are observed. While most QRIS observe both preschool-age and infant/toddler-age environments or classrooms, a 2016 review notes that less than half of QRIS use observations tools for school-age children in centers or in FCC programs.[lvi]

Some of the states we interviewed mentioned working to address the challenges of using observation tools by creating their own tools or offering programs a choice from an approved list of tools. Washington's Quick Tool was specifically designed to be used in all programs and classrooms, not just center-based programs. Prior to introducing the Quick Tool, classroom observations were only conducted in one third of toddler and

preschool classrooms and no infant classrooms. Now, the Quick Tool can be used in all classrooms. The state sees this as a more equitable approach because it provides data on all classrooms and children, which the program can use for CQI. As mentioned earlier, despite a shift in focus to CLASS® as an observation tool, Michigan still offers the ERS as an option as many FCC providers prefer it. Similarly, Louisiana, which is just starting to open its QRIS to FCC providers, was also cognizant that CLASS® may not be appropriate for use with FCC providers and worked with Teachstone for guidance around observing FCC homes. However, our review of the literature also highlights that these approaches may pose different challenges for states. Offering programs the choice between tools, for example, limits states' ability to examine statewide trends in the data.[lvii] Some evidence suggests that states should also be particularly cautious in assuming that two tools are valid and equivalent measures of quality, particularly when scores impact rating levels and/or financial incentives, such as subsidy reimbursement rates or access to quality improvement grants.[lviii]

Research also highlights that observations are most valuable when providers receive intensive and timely feedback on their scores to inform their ongoing CQI and professional development.[lix, lx] State QRIS also need to be intentional about these processes to share information in a way that is supportive and facilitates improvement, without a tone of judgment or negativity.[lxi] However, costs and implementation challenges make it difficult to conduct observations frequently enough that providers can use them in this way.[lxii] Reliable observations by trained observers are time-consuming and costly to implement. As a result, most programs are only required to have an observation every few years, though requirements vary significantly by program type and governance structure. Among state-funded pre-kindergarten programs, for example, only 16 states and DC require observations by a trained observer at least once per year. Head Start programs are similarly only required to have on-site observations on a multi-year cycle, and new federal rules passed in 2020 created a new set of thresholds for observation scores.[lxiii]

To promote the use of observations to inform programs' CQI while balancing implementation costs, many states vary how observations are used by rating level. Arkansas and Illinois, for example, require programs to complete training on and/or self-assessments using the ERS to achieve levels 1 and 2 of their QRIS, though scores do not impact ratings.[lxiv] Louisiana, which views CLASS® as their "north star" goal for improvement and requires two observations per year in all publicly-funded toddler and preschool classrooms,[16] has used a train-the-trainer model to train around 1,200 observers statewide. This approach allowed the state to expand their capacity to support programs' CQI through observations. To ensure ongoing reliability among the new cohort of observers, the state still requires that 50 percent of classrooms observed each year receive a second observation by a third party (the University of Louisiana).[lxv] Other recent research has likewise highlighted the importance of observer training and measures to ensure reliability. A 2018 study, for example, found some modest yet significant differences in observational scores collected by "local" observers as part of state accountability efforts compared to those collected by research teams.[lxvi] Their analysis found that although local and research observers' scores were similar on two of three CLASS® domains, local observers tended to score programs higher on the Instructional Support domain. In rare cases, these differences in scoring also impacted programs' QRIS ratings, though the authors note that results should be interpreted with caution due to their small sample size and that more research is needed to better understand the factors that impact reliability in observations.

Strategies such as program profiles, badging, and point-based QRIS can allow ECE programs to showcase their unique strengths and characteristics to families.

Program profiles can be another way for programs to showcase what quality care means to them and share their individual strengths with families. Five of the states we interviewed (Washington, Louisiana, Michigan, Vermont, and Pennsylvania) have program profiles or an online database families can use to search for and learn about ECE programs—and Delaware is currently in the process of developing program profiles. All five

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[16] This includes child care programs, Head Start, and school-based settings.

states' program profiles contain basic information about programs, such as address and QRIS rating or recognition level. However, additional information included in program profiles varies by state (see Table 3).

Table 3. Information included in program profiles

Information Included in Program Profile	WA	LA	MI	VT	PA
Basic information about program (e.g., address, director's name, ages served, transportation, QRIS rating or recognition level, accepts subsidy, capacity)	X	X	X	X	X
Licensing visits		X	X	X	X
Program mission statement or message to families			X	X	
Languages supported			X	X	
Program CLASS® scores and comparisons to community and state averages		X			
Ability to serve children with special health care needs			X		
Assessments or screenings used	X	X			
Teacher-child ratio		X			
Education level of teachers		X			
Information from interviews with director, teachers, and families	X				
Family engagement and partnership approach	X				
How programs promote a welcoming environment	X				

Some states include additional information in their profiles designed to help programs share their unique features, philosophies, and strengths with families. For example, Washington's profiles include information from interviews with teachers, directors, and families, such as what families love about their program. Washington wanted child care programs to be able to *"[tell] us their story…what is their teaching philosophy, what really inspires them, so that it felt like a very individualized opportunity for people to talk about their program and the things that are near and dear to their heart when they're working with families."* Vermont is currently considering how to update their data system so families can see more individualized information about programs, such as if programs are culturally diverse or if they use a particular educational approach, such as Montessori.

Some states also consider feedback from stakeholders, such as providers and families, when developing or revising program profiles. For example, Michigan used family surveys to find out what information families want to know about programs and then adjusted their program profiles as needed. Louisiana's Early Childhood Care and Education Performance Profiles were mandated by legislation to increase transparency and provide information to families about different child care options.[17] The state used stakeholder feedback from meetings with the community to inform the development of their Performance Profiles. Lastly, Delaware is working to co-design program profiles with providers, using Preschool Development Grant funds. Delaware profiles will show programs' progress toward their three quality indicators (creating conditions for quality, positive climate and high-quality interactions, family engagement and community services).

From our review of the literature, another option for highlighting the unique strengths of providers and programs is to use a badging system. Although conceptualizations of badging are flexible and early in their development, badging generally refers to the process of using unique signifiers or "badges" (which could be displayed with program profiles) to represent the achievements and specializations of a program. Badging is

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[17] Read more about Louisiana's Early Childhood Performance Profiles here: https://www.louisianabelieves.com/early-childhood/performance-profiles

similar to any point-based system in that it recognizes incremental successes. Badges could be achieved by the program as a whole or by individual workforce members/teachers/educators.

According to the Early Childhood Workforce Alliance, there is value in policymakers considering three ways for providers to earn a badge: competency-based, competency-demonstrated, and participation/experience.[lxvii] These badges should also include levels and be portable (i.e., move with the providers if they change programs), such that participants are motivated to earn the next level of a particular badge. For example, a provider would benefit from using badging to indicate specific capacities and professional development achievements and could use that badge on a resume or CV to showcase their strengths should the provider choose to work within another program. Using badging and point systems can also provide more nuanced information to families about a program and allow that program to be recognized for its unique strengths. However, the concept of badging is still early in development and has not been tested as an effective way to communicate program strengths to families.

Point-based QRIS can also reflect variation in programs more clearly than the highly correlated domains and standards of block systems. In a validation study conducted in Oregon by Lipscomb et al., registered family providers showed similar levels of quality in adult-child interactions when compared to centers and certified family programs.[lxviii] However, overall QRIS ratings were lower, with only 13 percent of registered family programs reaching four- or five-star ratings, compared to 40 percent of certified family programs and 36 percent of certified centers in the study.[18] Researchers suggest using a point system to reflect programs' unique strengths.

Improving QRIS structures & processes

In this section, we describe key findings related to improving QRIS structures and processes, again drawing on both our interviews with QRIS administrators and our review of the recent literature. This section includes themes related to:

- Processes for ensuring consistency and fairness in the rating processes, including through staff hiring and training
- Approaches for reducing burden on programs participating in QRIS
- Future directions for QRIS, including state approaches to system-level CQI via QRIS revisions as well as processes for engaging stakeholders and embedding equity in the revision process

States have a variety of processes to ensure QRIS staff are fair and consistent in how they determine ratings.

States use a variety of approaches to train the staff responsible for assigning QRIS ratings and ensure consistent and fair implementation across programs. Several states require that some rating applications are "double coded," meaning two rating staff review and score the same program's materials, compare results, and discuss and resolve any discrepancies.[19] However, states varied in terms of how and how often double coding processes are required among raters, with some states leaving it up to local agencies to set their own specific requirements. In Louisiana, for example, where programs' ratings are determined only by

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[18] A registered family program is a program within the provider's home that cares for no more than 10 children. See https://www.oregon.gov/delc/providers/pages/registered-family.aspx. A certified family program cares for no more than 16 children in a single-family dwelling. See https://www.oregon.gov/delc/providers/pages/certified-family.aspx. A certified center is a program that cares for thirteen or more children, or a program that cares for twelve or fewer children, in a building that is not a single-family dwelling. See https://www.oregon.gov/delc/providers/pages/certified-center.aspx.

[19] States use a variety of terms for the QRIS staff members who rate programs. For example, Pennsylvania uses the term "designator" and Michigan uses the terms "validator" or "evaluator."

CLASS® scores, the local community networks responsible for implementing the QRIS must each develop and submit a plan for conducting observations to determine ratings, including processes for identifying conflict of interests and ensuring reliability among observers. The state requires that at least 10 percent of observations are double coded.[20]

Others states similarly have rating staff double code programs' materials either together or with a manager, but do not require double coding for a specific percentage of programs. In Michigan, for example, QRIS administrators anticipate that the first year of implementing their revised QRIS will involve frequent double coding and consistency checks, which will decrease in frequency after the first year as they shift to annual reliability checks. In Pennsylvania, each program's materials are reviewed by both their coach and a rater, and the rating process includes a virtual or on-site meeting with the program to discuss any questions about the materials. The state's 19 early learning resource centers are responsible for hiring and onboarding their own coaches and rating staff, and many pair newly hired staff with more experienced staff as part of the training process.

Additionally, raters' familiarity with teachers and programs can have implications for the objectivity of observational ratings. In a study comparing CLASS® ratings between local state and research teams, scores within domains shared correlations ranging from 0.21 to 0.43.[lxix] Scores from local raters were slightly higher than those captured by the research team, and only 55.3 percent of classrooms were categorized similarly when state cut points for star levels were taken into account, with categorizations at the highest and lowest ratings being most variable. Researchers recommend that rating teams be highly trained and encourage the use of procedures that validate data from observational measures.

Revising documentation requirements is a promising strategy to reduce the administrative burden on ECE providers participating in the QRIS.

Current QRIS systems can create a burden on providers at an individual level, holding them to multiple sets of standards and requirements that become stressors on well-being and personal relationships. In a study by Edwards et al., these burdens were particularly impactful on the lives of Black female providers.[lxx] This qualitative work highlighted the historical context of Black women as caregivers and illustrated the everyday experiences of attempting to meet QRIS requirements in settings where they experience structural racism and systemic inequities that affect their financial well-being, personal health, and relationships with loved ones. The authors argue that applying fixed quality standards that may not consider context or available resources in a working environment with low pay, few or no health benefits, and limited opportunities for advancement, places untenable expectations on Black women. They suggest evaluating the effects of improvements in QRIS on individual teachers and ensuring equity across race and gender such that historical oppressions are not perpetuated.

States recognize that QRIS can also create burden for center directors or FCC providers, who have to submit documentation as evidence to become rated. As administrators from Delaware acknowledged in their interview, they are aware of the hurdles that providers face in the ECE field generally, as well as in the QRIS, and wanted to create a QRIS that felt useful *and* feasible for programs:

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[20] This process of double coding involves two observers independently and simultaneously scoring each cycle of an observation at a program. Once scoring for a cycle is complete, the observers compare scores and discuss any dimension scores that are different by more than two points to come to a consensus about the final score. After the final cycle is scored, reliability is calculated by subtracting the number of scores that were off by two from the total possible score, then dividing the result by the number of total scores. See https://www.louisianabelieves.com/docs/default-source/early-childhood/guide-for-shadow-scoring-class-observations.pdf?sfvrsn=2.

> *"Part of designing the system has been a recognition again that we are not funding it at the level that it needs to be funded, and therefore we have to have reasonable expectations of providers. For too long, we have piled new regulation onto a field that is underpaid, under resourced, traumatized in many ways of their own, often eligible for the services that we purport to offer to children and families themselves. There's just a reality that we face, that we are unwilling at this point in time to create more hurdles without funding the resources necessary to jump those hurdles."*

As highlighted by a 2019 review of state QRIS goals and structures, the frequency of required re-ratings within state QRIS may be another important consideration for reducing burden on participating programs.[lxxi] Nationally, state QRIS most commonly require re-ratings every three years, but some states require ratings every two years or even annually. Some states vary the frequency of required re-ratings based on programs' quality levels, with less frequent re-ratings for higher-rated programs. Other states offer different options for re-ratings that programs can choose from based on their individual goals. Georgia's QRIS, for example, has a "check-in" option where programs can share simplified updates to maintain their rating without going through the whole rating process again, as well as a "renewal incentive/CQI award" option where programs can maintain their rating but work towards quality improvement goals with the support of financial incentives.[lxxii] The privately-funded CQI award ($1,000 for centers, $500 for FCCs) supports a program's CQI related to director and teacher qualifications; child health, nutrition, and physical activity; family engagement; or another area related to the program's ERS report. What a program does with this award is not scored, but the program must submit an updated CQI portfolio with any updates or changes that were funded with the award.[lxxiii]

To reduce burden on programs participating in the QRIS, several of the states we interviewed are revising documentation requirements to allow programs to leverage existing materials and showcase what quality means to them. Vermont, Delaware, and Washington spoke about revising documentation requirements to meet programs where they are in their quality improvement journeys. In revising their QRIS earlier this year, for example, Vermont shifted from a block system where all programs had to submit evidence for certain indicators (e.g., staff training and credentials) to a point system that allows programs more flexibility to choose how to achieve their desired ratings. Their goals were to move away from requirements that felt like administrative boxes to be checked and instead focus on materials and exercises that have practical utility for programs beyond the rating application, such as self-assessment tools or CQI plans. Similarly, Delaware is shifting away from some of the more prescriptive, one-size-fits-all requirements within their QRIS and is instead asking programs what evidence, policies, procedures, or existing documentation they can leverage to best showcase their quality. The state is also developing an online system where programs interested in improving their ratings can work together with a coach to create and update their CQI plans based on what they have previously been working on in the program.

Washington has implemented a number of other approaches for reducing burden on programs within their QRIS. For example, the state allows programs to submit their official policy manual—a document all programs must submit to be licensed—as documentation in support of their requested rating. This approach not only reduces burden on programs by allowing them to leverage an existing document for another purpose, but also supports a sense of continuity between licensing and QRIS. Additionally, in lieu of unannounced on-site program visits, Washington's revised QRIS allows programs to submit their own Video Highlights that showcase what they think makes their program high-quality.

While some state QRIS have reduced or streamlined documentation requirements for programs, others are grappling with how to best balance consistency and accountability in the rating process with concerns about burden on programs. In Michigan, for example, some administrators shared concerns that under their prior QRIS, programs were not required to submit evidence or documentation on certain quality indicators and were only required to explain to their rater how they were meeting the requirement. In their revised QRIS,

programs must submit some form of evidence in order to receive credit for each quality indicator. To support programs in providing this additional evidence, the state created a comprehensive guidance document that not only explains the importance and intent of each quality indicator, but also provides examples of the kinds of evidence programs can submit to receive credit.[lxxiv] In the same spirit of the ongoing CQI that Michigan's QRIS expects of programs, the state likewise considers the guidance document to be iterative, in that their staff are constantly adding to or modifying the document to better support programs going through the rating process.

As states consider future revisions to their QRIS, engaging in a system-level CQI process continues to be a priority.

One of the most common themes in states' interview responses about potential future changes to their QRIS was implementing a CQI process at the system-level, not just at the program level. Delaware, Michigan, and Vermont all intend to engage in a process of CQI for the entire QRIS. As a Delaware administrator said,

> *"As long as I am requesting of providers that they continuously improve their quality, then the system itself needs to do the same thing. The needs of the children we're serving today are not the needs of the children we were serving five years ago, and they are not the needs of the children we will be serving in five years."*

Additionally, Washington QRIS administrators see systems-level CQI as a crucial strategy for getting ahead of any unintended consequences of recent shifts in their QRIS (e.g., the introduction of the "Quick Tool") and for continuously examining their own processes to ensure they stay true to their equity goals. Washington is also considering ways to build their QRIS capacity through partnerships and professional development for their coaching team.

Several states mentioned specific areas on which they hope to focus improvements, with equity being one of the most common areas of focus. For example, Michigan mentioned looking into equity assessment tools. Delaware reiterated their commitment to equity and said, *"One of the things that will not change is that there is a strong commitment to equity and to being a nonracist system…The point is that until we have addressed that, we won't be done."* Pennsylvania discussed their desire to ground themselves in a uniform definition of equity for their next round of revisions.

In thinking about future revisions, states also aimed to make other improvements to their QRIS. Michigan, for example, is considering implementing a badge system that would allow programs to highlight what is most important to them. Washington hopes to align its professional development systems, including coaching processes and the trainings offered to providers, to ensure systems meet providers' needs. Vermont noted that they still need to build out the framework for how quality improvement payments will be tied to their star system.

To promote equity at the system level, state QRIS processes and policies must be continually examined to assess who is and is not being served by QRIS and to identify strategies for expanding access.

In addition to cultural awareness, QRIS systems must ensure that standards are not creating additional barriers to participation for FCC providers, and that FCC providers are receiving the support and professional development opportunities they need. In a study of FCC providers in Delaware, researchers found that those who received an intensive professional development program were both more likely to achieve a Four-Star rating, and more likely to achieve that rating more quickly than providers who participated in QRIS alone.[lxxv] Similar results were found in a study of high intensity professional development across two states, with those participating showing improved child outcomes in the domains

of language and literacy. The study included a community of practice element, which is suggested to be of greater help to FCC providers, who can sometimes feel isolated in their work.[lxxvi] Taken together, these results suggest that tailored professional development as part of FCC participation in QRIS provides important opportunities for improvement in child outcomes.

Cultural differences, in addition to difficulty navigating the requirements of QRIS systems, could be a factor in whether or not providers choose to participate in QRIS. As noted by Garrity et al., QRIS standards represent a call to match practices with dominant norms within the United States, which may exclude providers who hold different values.[lxxvii] For example, providers in this study emphasized the importance of play and social emotional development but did not mention preparing children for future schooling as a main goal.

Additionally, findings about community characteristics have implications for equity in QRIS. In a study of characteristics of providers participating in QRIS, Jenkins et al. found that QRIS participation was highest in areas with greater levels of poverty and among programs that blended multiple funding streams, such as Head Start or pre-kindergarten. The authors hypothesized that these patterns may be due to requirements associated with multiple funding streams; programs in communities with greater levels of poverty may be more likely to receive one or more types of public funding, and with each funding stream, the likelihood of at least one requiring QRIS participation increases.[lxxviii] In a separate finding from the same paper, QRIS participation was lower in areas with high proportions of Black residents, which causes concern for equitable access to high-quality care. Although further investigation into the specific reasons for these differences in participation rates is necessary to better understand whether and how QRIS can serve families and providers in these communities, several policy experts hypothesize that one reason may be that QRIS are influenced by aspects of White Supremacy Culture that uphold structures of inequity.[lxxix] For example, one aspect of White Supremacy Culture is "one right way," which, in QRIS, could look like quality standards which uphold dominant norms, such as formal education being the only valid path to being a teacher.[lxxx]

In line with these themes from our review of the literature, several state QRIS administrators shared during interviews that they are not only thinking about embedding equity into their quality standards or into professional development for providers, but also into the system at large. QRIS administrators from Louisiana, for example, shared that they are primarily thinking about embedding equity at the system level, and specifically the need to improve statewide access to quality care across geographies and age groups. Additionally, Washington QRIS administrators mentioned that the state has prioritized hiring a diverse QRIS staff and is also considering how to increase language accessibility above and beyond translation.

Vermont and Pennsylvania expressed similar goals, and further shared strategies they have implemented to try to achieve them. Vermont, for example, recently made the significant change to remove tiered reimbursement within their QRIS. During the interview, a QRIS administrator from Vermont noted that because better resourced programs are more often able to achieve higher star ratings, decoupling those ratings from subsidy reimbursement rates felt like a move toward equity for the state. Similarly, QRIS administrators in Pennsylvania work closely with Child Care Works, the agency that manages the state's child care subsidy program, to examine statewide access to high-quality care. QRIS administrators frequently review the percentage of children receiving subsidy enrolled in STAR 1 and 2 programs compared to STAR 3 and 4 programs, for example, and use these data to inform their funding and other priorities.

Convening stakeholders to provide feedback on the QRIS is a common process for many states—but some states experience challenges gathering feedback from stakeholders.

States engage multiple partners and stakeholders—including providers and families—to provide feedback during the QRIS revision process. The six states we interviewed all described engaging stakeholders and seeking feedback during the QRIS revision process and subsequently making changes to the QRIS system based on the feedback they received. Washington, for example, surveyed stakeholders (e.g., directors, teachers, families, and coaches) during the Early Adopters phase of their recent revisions. The state brought this feedback and their proposed revisions to their stakeholder workgroup and then received additional feedback from that workgroup before moving forward. In Delaware, QRIS administrators found that families did not know the difference between star ratings and further noted that even if they did, they were choosing child care based on affordability, location, and vacancies, meaning star ratings were not helpful or influential in their decision-making process. This feedback was one of the reasons Delaware removed the "rating" from their QRIS.

Several states noted that their engagement processes and partnerships with other organizations have been crucial in supporting their equity goals for their QRIS. The QRIS administrator from Pennsylvania, for example, noted that a lot of the state's equity work happens behind the scenes with partners or other government agencies, such as Child Care Works. Delaware convened a state leadership team to guide their QRIS revision process, with members including representatives from the state's birth-to-three programs and particularly those involved in working with children who have special needs. The state also partnered with Dr. Nneka Ibekwe-Okafor at the University of Texas at Austin and Kaeleigh Hernandez (through support from the W.K. Kellogg Foundation). In addition to serving on the leadership team, these partners worked closely with QRIS staff to revise the state's quality standards and indicators through an equity lens. Louisiana shared examples such as local fundraising efforts, strategic partnerships with school systems to find new locations for ECE sites, and other projects to expand supports for young children with disabilities.

Several states also mentioned challenges related to gathering and incorporating feedback about QRIS revisions. Vermont, for example, uses an advisory group, but noted it is difficult to connect with families who work during the day. In response, Vermont has held more opportunities for engagement in the evenings. Delaware similarly held public sessions for providers to share feedback about their QRIS. However, they found that providers had mixed feelings about being asked to co-design processes on top of everything else that is expected of them for the QRIS:

> *"'Just tell us what we have to do. Tell us how to get the funding. We don't want to co-design with you, we don't have time for that. We're stressed out. We're burnt out. We're tired. We're busy. Tell us what to do to get funding so that we can survive.' That was a hard pill to swallow because we wanted to have...[a] moment where we all came together and agreed on what was best for children and families and how to achieve that, and providers overwhelmingly said [we don't have time but] we'll meet it as long as you fund it."*

Considerations for Parent Aware

Over the past 10 to 15 years, state QRIS leaders, researchers, and advocates have raised important questions regarding the effectiveness of QRIS—including the extent to which QRIS are meeting their original goals of supporting children's developmental outcomes and whether certain policies promote equitable access to high-quality care or exacerbate disparities. The COVID-19 pandemic's disruption to the ECE system presented a unique opportunity to grapple with these and other important questions, and further, for state leaders to re-evaluate, revise, or reimagine QRIS to better and more equitably support the needs of ECE providers, families, and children. As part of an evaluation of Parent Aware, Child Trends conducted a scan of the recent literature and facilitated interviews with QRIS administrators from six states (Washington, Michigan, Pennsylvania, Vermont, Louisiana, and Delaware). Through these activities, Child Trends sought to answer questions about three overarching topics related to how state QRIS 1) define and measure quality in ECE programs, 2) support and engage providers in CQI, and 3) make improvements to system-level structures and processes over time. Below, we provide the takeaways from this work for each of those three topics, as well as considerations for future revisions to Parent Aware.

Defining quality in QRIS

State QRIS leaders and researchers in the ECE field more broadly are critically examining how quality is defined and conceptualized in QRIS through quality standards and indicators. During interviews, state QRIS administrators highlighted the tension between developing indicators that provide a universal definition of quality versus those that are customized for different types of programs, as each approach has tradeoffs related to how programs experience and navigate QRIS. In the spirit of ensuring quality indicators are clear and meaningful to programs, some state QRIS leaders and researchers are considering whether there is a minimum or universal set of indicators that capture quality. Some states, including several we interviewed, are moving towards a "less is more" approach by streamlining indicators to only those with evidence showing they correlate with children's developmental outcomes. Another theme that emerged in both interviews and in our review of the literature was the importance of explicitly incorporating equity into QRIS standards and indicators. Research has found that QRIS standards often reflect White, middle-class norms and therefore may not be relevant or a meaningful representation of quality for many ECE providers and the populations of families and children they serve.

In response to these findings, Minnesota QRIS administrators could:

- Consider further improving upon a **"targeted universalism" approach[lxxxi] to defining quality** by providing more tailored guidance and support regarding how different types of programs can meet QRIS indicators. Minnesota has crafted a universal set of indicators for all programs while including some minor variation where necessary to ensure indicators are relevant and attainable across program types and settings.[21] A system such as this with mostly universal indicators may be simpler and easier for providers to navigate. However, some indicators may benefit from varied requirements or clarifying information to acknowledge that certain elements of quality show up differently in different types of programs. During interviews, some state QRIS administrators shared that based on provider feedback, they expanded their written guidance on QRIS indicators to include examples of how to best demonstrate each indicator in different types of programs and contexts. Building upon their current

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[21] Parent Aware's current quality standards and indicators are universal for all types of programs Rated via the Full Rating Pathway with one notable exception: CLASS® observations for the adult-child interactions indicator are only required in child care centers serving preschool-aged children. However, there is some additional variation within universal indicators in the requirements for child care centers versus FCC programs (for example, differences in the point thresholds needed to achieve a Three- or Four-Star Rating, annual staff training requirements, and specific staff credentials).

indicators, one strategy Minnesota could leverage to further pursue a goal of targeted universalism is to engage a diverse group of providers and coaches to provide input on which indicators might benefit from additional customization or clarification by program type.

- Keep in mind that **less may be more when it comes to quality indicators,** but it is important to consider the extent to which proposed **revisions or additions are equitable and reflect elements of quality that are meaningful to the diversity of providers and families in Minnesota.** A streamlined set of quality indicators could not only reduce the burden of participating in QRIS on providers but also promote efficiency in system-level processes. At the same time, both our conversations with state QRIS administrators and scan of the recent literature made clear the need for state QRIS to better center equity—particularly in quality standards and indicators, which are often based on White, middle-class norms. This analysis could result in additional indicators proposed for Parent Aware. For example, Parent Aware could consider adapting some of the sample indicators in the *Equity is Quality, Quality is Equity* report to encourage programs' use of equitable and culturally responsive practices that support the needs of all children and families, as well as program staff.[lxxxii] These indicators could include, for example, whether the program offers onboarding and ongoing training and professional development for staff on key equity issues such as the history of racism and implicit bias or whether the program has a systematic approach for evaluating and addressing the racial, ability, gender, and linguistic diversity of classroom materials. Minnesota might further **consider making some or all equity-related indicators required** for all programs.

Engaging & supporting providers

States and researchers are also considering how to better engage and support ECE providers in QRIS. During our interviews with six states and through our literature scan, we found that some states are shifting their focus away from ratings and instead strengthening their focus on quality improvement. Part of this approach includes revising how classroom observations are used within QRIS to offer programs more and/or lower-stakes opportunities to use data from observations for goal-setting and CQI. For example, some states offer programs both observations that are factored into the rating level they receive and the opportunity to participate in an observation that will not be factored into their rating but that can be used for goal setting with a coach. We also found that states are embedding equity into their CQI processes for programs, often through professional development or coaching focusing on equity-related topics, including culturally sensitive practices with children. Lastly, states are using strategies like program profiles or badging so programs can showcase their unique strengths and philosophies, in addition to their ratings, to families.

In response to these findings, Minnesota QRIS administrators could:

- Consider strategies to further **emphasize CQI within Parent Aware by expanding opportunities for programs to receive feedback, set goals, and work towards them**. Paperwork and assessments collected at a single point in time to determine a rating can make the rating process feel high stakes, stressful, or like an inauthentic representation of quality for providers. Our findings highlight several possible ways Minnesota QRIS administrators could address these challenges within Parent Aware. For example, Minnesota could adjust how classroom observations are used to emphasize CQI over ratings, possibly by offering both observations that are scored and factored into ratings and observations that are scored for the purpose of CQI only. Further, Minnesota could allow programs to select from multiple observation tools to find one that is relevant for their unique context and needs. Other possibilities for further emphasizing CQI within Parent Aware include expanding the supports and resources offered to programs, such as coaching, technical assistance, and self-reflection and assessment tools—all of which can provide data and information for programs to use to craft individualized goals. This could also be an

opportunity to encourage programs to assess their knowledge or use of equitable and culturally responsive practices and craft an individualized plan for improvement. Lastly, Minnesota could consider emphasizing CQI in Parent Aware by transitioning from ratings to recognition levels.

- Create additional ways for **programs to showcase their unique strengths to families** in addition to their ratings. Some providers may feel that ratings do not fully or accurately reflect their program's quality, and families may not always know how to interpret ratings or feel as if ratings provide the information they are interested in knowing. Our findings provide two promising strategies for helping providers share more individualized and nuanced information about their programs (beyond their rating or recognition level): program profiles and badges. For example, Minnesota could expand program profiles (i.e., online profiles where families can learn about ECE programs) to include more information about programs' unique strengths and characteristics, such as information from interviews with staff or families, programs' approach to family engagement, how programs promote a welcoming environment, and if programs can serve children with special health care needs. This information can help providers feel as if they are sharing a more complete picture of their program—and it can help families find programs suited to their needs. Further, coaches could be encouraged to work with programs to help them develop information for the *"In Their Own Words"* section of a program profile. This is a place where programs can showcase their unique strengths and philosophies to families; however, currently not all Parent Aware Rated programs complete this section of their program profile. Minnesota could also adopt badges, which represent programs' achievements and specializations and can be displayed online to help families learn about programs' unique strengths as a supplement to ratings. Badges could be given to ECE programs as a whole and/or individual staff. Notably, the concept of badging is relatively new, and our team did not encounter specific states using badges as a supplement to QRIS ratings through our research. If Minnesota considers adopting badges or expanding program profiles, state leaders could engage stakeholders (i.e., families and providers) to see what types of information would be most useful to families when searching for and selecting ECE and what types of information providers would like to share about their programs.

Improving QRIS structures & processes

State QRIS leaders and researchers are considering how to improve QRIS structures and processes, particularly to reduce the burden of participating in QRIS for providers and ensure equitable participation. To reduce the well-documented burden of participating in QRIS for providers (which may disproportionately impact educators of color and linguistically diverse educators since the cultural values implicit in the QRIS may be misaligned or contradict their own values and practices), state QRIS administrators shared strategies during interviews such as allowing programs to leverage existing materials as evidence of meeting QRIS standards and/or expanding the list of allowable evidence types so programs can choose from multiple options. Several state QRIS administrators shared during interviews that they are also exploring how to embed CQI not only in ECE programs participating in the QRIS, but also in the system overall. Several states shared future goals for their QRIS related to equity and access, including hiring a diverse QRIS staff, increasing the number of high-quality slots available to children receiving subsidy, and making QRIS materials and processes available in more languages. State QRIS administrators also highlighted the importance of using data to inform QRIS revisions and engaging stakeholders throughout the process to ensure changes are reflective of community values and needs. However, some state QRIS administrators cautioned that these engagement efforts must not cause too much additional burden on stakeholders, particularly providers.

In response to these findings, Minnesota QRIS administrators could:

- Consider adding goals to the Parent Aware Racial Equity Action Plan **related to increasing families' access to high-quality ECE** that are informed by data and intentional ongoing stakeholder engagement. Although the Parent Aware Racial Equity Action Plan lays out goals and strategies across four areas (discipline and expulsion; resource distribution and access [for educators]; standards, indicators, and policies; and workforce preparation and professional development), it does not include explicit goals related to increased access to Parent Aware Rated programs among families.[lxxxiii] By leveraging administrative data, considering the multiple dimensions of access (e.g., affordability, meeting families' needs), and engaging stakeholders, Minnesota leaders could gain a better understanding of families' access to Parent Aware Rated programs and identify strategies to reduce existing barriers and inequities. Importantly, state QRIS administrators shared during interviews that stakeholder engagement can sometimes unwittingly burden stakeholders. With this in mind, Minnesota should carefully consider how to intentionally and meaningfully engage community members in these conversations, which could include asking them directly how and when they would like to be engaged.

Conclusion

The multiple methods used for this study are particularly well suited to provide Minnesota QRIS administrators with a breadth of information on how QRIS are being revised and changed across the country and how recent research can inform the direction of those revisions. Our review of the literature highlighted emerging research on quality practices in ECE settings that support children's learning and development and how to support providers in implementing those practices, as well as what questions and gaps have yet to be addressed. Likewise, our interviews with state QRIS administrators provided firsthand information about states' priorities, learnings, and challenges related to revising their QRIS and implementing new processes.

Together, these findings provide valuable information to inform DHS and their collaborators' efforts on the Parent Aware Redesign. Given that many of the topics related to QRIS that we explored through this work are relatively new, however, more research and engagement with those doing the work in the field is needed. To facilitate continued discussion, reflection, and learning among state QRIS administrators following the interviews, the Child Trends team facilitated two conversations between the Minnesota team and QRIS administrators from five of the six states we interviewed.

Although state administrators provided a wealth of information about possible strategies that could be implemented in Parent Aware, many of these strategies are new to the field and have not yet been formally studied or evaluated. The suggestions in this report, therefore, are examples, rather than a strict roadmap or the only way to revise a QRIS. Along with other activities from this Parent Aware evaluation, the literature scan, interviews with QRIS administrators in other states, and follow-up conversations between Minnesota and other states are a starting point for a continuous dialogue about how Parent Aware and other state QRIS can better and more equitably support ECE providers, families, and children.

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References

[i] National Center on Early Childhood Quality Assurance. (2016). *QRIS Compendium 2016 fact sheets: History of QRIS growth over time.* Early Childhood National Centers. https://childcareta.acf.hhs.gov/sites/default/files/qris_history_2016.pdf

[ii] Mitchell, A. W. (2005). *Stair steps to quality. A guide for states and communities developing Quality Rating Systems for early care and education.* United Way. http://www.ctearlychildhood.org/uploads/6/3/3/7/6337139/qris_anne_mitchell.pdf

[iii] The Build Initiative & Child Trends. (2024). *Top trends: Quality Improvement Systems.* https://qualitycompendium.org/top-ten/qis-status

[iv] Tout, K., Magnuson, K., Lipscomb, S., Karoly, L., Starr, R., Quick, H., Early, D., Epstein, D., Joseph, G., Maxwell, K., Roberts, J., Swanson, C., & Wenner, J. (2017). *Validation of the quality ratings used in Quality Rating and Improvement Systems (QRIS): A synthesis of state studies.* OPRE Report #2017-92. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/opre/report/validation-quality-ratings-used-quality-rating-and-improvement-systems-qris-synthesis

[v] Brunsek, A., Perlman, M., Falenchuk, O., McMullen, E., Fletcher, B., & Shah, P. S. (2017). The relationship between the Early Childhood Environment Rating Scale and its revised form and child outcomes: A systematic review and meta-analysis. *PLoS One, 12*(6), e0178512. doi: 10.1371/journal.pone.0178512.

[vi] Jenkins, J. M., Duer, J. K., & Connors, M. (2021). Who participates in Quality Rating and Improvement Systems? *Early Childhood Research Quarterly*, *54*, 219-227. doi: 10.1016/j.ecresq.2020.09.005.

[vii] Li, J. (2019). *Achieving quality with equity: Recognizing and supporting high-quality practices and professionals in low-resource communities.* Zero to Three. https://www.zerotothree.org/resource/journal/achieving-quality-with-equity-recognizing-and-supporting-high-quality-practices-and-professionals-in-low-resource-communities/

[viii] National Center on Early Childhood Quality Assurance. (2016). *QRIS Compendium 2016 fact sheets: Mission and goal statements.* Early Childhood National Centers. https://childcareta.acf.hhs.gov/sites/default/files/qris_mission_goals_2016.pdf

[ix] The Policy Equity Group. (2022). *QRIS: Knocking it down and rebuilding early childhood* [Blog post]. https://policyequity.com/qris-building-the-case-for-knocking-it-down/

[x] Meek, S., Iruka, I. U., Soto-Boykin, X., Blevins, D., Alexander, B., Cardona, M., & Castro, D. (2022). *Equity is quality, quality is equity: Operationalizing equity in Quality Rating and Improvement Systems.* The Children's Equity Project. Child Care Aware of America. https://childandfamilysuccess.asu.edu/sites/default/files/2022-06/QRIS-report-062122.pdf

[xi] National Center on Early Childhood Quality Assurance. (2016). *QRIS Compendium 2016 fact sheets: History of QRIS growth over time.* Early Childhood National Centers. https://childcareta.acf.hhs.gov/sites/default/files/qris_history_2016.pdf

[xii] Minnesota House Research. (2023). *Parent Aware.* https://www.house.mn.gov/hrd/pubs/ss/ssparentaware.pdf

[xiii] Awaah, E. (2022). *Advancing a racial equity action plan for Parent Aware: Minnesota's quality rating and improvement system.* https://www.parentaware.org/wp-content/uploads/2022/03/MN-ParentAwareRacialEquityPlan-_2022.pdf

[xiv] The Build Initiative & Child Trends. (2021). Q*uality Compendium: A catalog and comparison of quality initiatives* (data system). https://qualitycompendium.org

[xv] Awaah, E. (2022). *Advancing a racial equity action plan for Parent Aware: Minnesota's quality rating and improvement system.* https://www.parentaware.org/wp-content/uploads/2022/03/MN-ParentAwareRacialEquityPlan-_2022.pdf

[xvi] Minnesota Department of Human Services. (2023). *Parent Aware redesign.* https://mn.gov/dhs/partners-and-providers/program-overviews/child-care-and-early-education/parent-aware/

[xvii] Meek, S., Iruka, I. U., Soto-Boykin, X., Blevins, D., Alexander, B., Cardona, M., & Castro, D. (2022). *Equity is quality, quality is equity: Operationalizing equity in Quality Rating and Improvement Systems.* The Children's Equity Project. Child Care Aware of America. https://childandfamilysuccess.asu.edu/sites/default/files/2022-06/QRIS-report-062122.pdf

[xviii] Paschall, K. & Maxwell, K. (2022). *Defining and measuring access to child care and early education with families in mind.* Child Trends. https://www.childtrends.org/publications/defining-and-measuring-access-to-child-care-and-early-education-with-families-in-mind

[xix] Michigan Department of Education. (2022). *Great Start to Quality: Quality indicators guidance document.* https://greatstarttoquality.org/wp-content/uploads/2022/12/GSQ_Guidance_Document_Revisions_11.2022.pdf

[xx] Center for Health Equity Advancement. (2020). *Cultural humility.* https://www.chea.upenn.edu/cultural-humility/

xxi Li, J. (2019). *Achieving quality with equity: Recognizing and supporting high-quality practices and professionals in low-resource communities.* Zero to Three. https://www.zerotothree.org/resource/journal/achieving-quality-with-equity-recognizing-and-supporting-high-quality-practices-and-professionals-in-low-resource-communities/

xxii Sabol, T. J., Sommer, T. E., Sanchez, A., & Busby, A. K. (2018). A new approach to defining and measuring family engagement in early childhood education programs. *AERA Open*, *4*(3), 2332858418785904. doi: 10.1177/2332858418785904

xxiii Garrity, S. M., Longstreth, S. L., Lazarevic, V., & Black, F. (2021). Examining the tensions between cultural models of care in family childcare and quality rating improvement systems. *Children and Youth Services Review*, *122*, 105927. doi: 10.1016/j.childyouth.2021.105927

xxiv Iruka, I. U. (2022). Delivering on the promise of early childhood education for Black children: An equity strategy. *New Directions for Child and Adolescent Development*, *2022*(183–184), 27–45. doi: 10.1002/cad.20483

xxv Jenkins, J. M., Duer, J. K., & Connors, M. (2021). Who participates in Quality Rating and Improvement Systems? *Early Childhood Research Quarterly*, *54*, 219–227. doi: 10.1016/j.ecresq.2020.09.005

xxvi Meek, S., Iruka, I. U., Allen, R., Yazzie, D., Fernandez, V., Catherine, E., McIntosh, K., Gordon, L., Gilliam, W., Hemmeter, M. L., Blevins, D., & Powell, T. (2020). *Start with equity: 14 priorities to dismantle systemic racism in early care and education.* The Children's Equity Project.

xxvii Edwards, E. B., Terry, N. P., Bingham, G., & Singer, J. L. (2021). Perceptions of classroom quality and well-being among Black women teachers of young children. *Education Policy Analysis Archives*, *29*(56). https://eric.ed.gov/?id=EJ1322649

xxviii Li, J. (2019). *Achieving quality with equity: Recognizing and supporting high-quality practices and professionals in low-resource communities.* Zero to Three. https://www.zerotothree.org/resource/journal/achieving-quality-with-equity-recognizing-and-supporting-high-quality-practices-and-professionals-in-low-resource-communities/

xxix Mefferd, E., & Dow, D. (2023). *The US child care system relies on women of color, but structural barriers systematically disadvantage them.* Urban Institute. https://www.urban.org/urban-wire/us-child-care-system-relies-women-color-structural-barriers-systematically-disadvantage

xxx Lieberman, A. (n.d.). Meaningfully incorporating equity into QRIS. *New America*. http://newamerica.org/education-policy/edcentral/meaningfully-incorporating-equity-into-qris/

xxxi Gillispie, C., Codella, C., Merchen, A., Davis, J., & Cappo, A. (2022). *Equity in child care is everyone's business*. The Education Trust. https://edtrust.org/resource/equity-in-child-care-is-everyones-business/

xxxii Iruka, I. U. (2022). Delivering on the promise of early childhood education for Black children: An equity strategy. *New Directions for Child and Adolescent Development, 2022*(183-184), 27-45. doi: 10.1002/cad.20483

xxxiii Edwards, E. B., Terry, N. P., Bingham, G., & Singer, J. L. (2021). Perceptions of classroom quality and well-being among Black women teachers of young children. *Education Policy Analysis Archives*, *29*(56). https://eric.ed.gov/?id=EJ1322649

xxxiv Tout, K., Magnuson, K. Lipscomb, S., Karoly, L, Starr, R., Quick H., Early, D., Epstein, D., Joseph, G., Maxwell, K., Roberts, J., Swanson, C., & Wenner, J. (2017). *Validation of the quality ratings used in Quality Rating and Improvement Systems (QRIS): A synthesis of state studies.* OPRE Report #2017-92. Washington, DC: Office of Planning, Research and Evaluation,

Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/sites/default/files/documents/opre/cceepra_qris_validation_report_b508.pdf

xxxv Lipscomb, S. T., Weber, R. B., Green, B. L., & Patterson, L. B. (n.d.). *Oregon's Quality Rating Improvement System (QRIS) validation study one: Associations with observed program quality*. https://health.oregonstate.edu/sites/health.oregonstate.edu/files/early-learners/pdf/research/qris-study-1-report-executive-summary.pdf

xxxvi Davis Schoch, A., Simons Gerson, C., Halle, T., & Bredeson, M. (2023). *Children's learning and development benefits from high-quality early care and education: A summary of the evidence.* OPRE Report #2023-226. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/opre/report/childrens-learning-and-development-benefits-high-quality-early-care-and-education

xxxvii Davis Schoch, A., Simons Gerson, C., Halle, T., & Bredeson, M. (2023). *Children's learning and development benefits from high-quality early care and education: A summary of the evidence.* OPRE Report #2023-226. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/opre/report/childrens-learning-and-development-benefits-high-quality-early-care-and-education

xxxviii Markowitz, A. J., Bassok, D., & Player, D. (2020). Simplifying quality rating systems in early childhood education. *Children and Youth Services Review*, *112*, 104947. https://doi.org/10.1016/j.childyouth.2020.104947

xxxix Parent Aware (2022). *Rating eligibility*. https://www.parentaware.org/programs/rating-eligibility/

[xl] Hur, E., Jeon, L., Guttman, A., Ardeleanu, K., Gaertner, G., Satchell, T., Swanson, C., Ott, S., & Mull, L. (2021). *A national scan of QRIS: Goals, quality assurance and monitoring, and quality standards, and financial incentives in 2019.* IDEALS Institute, Johns Hopkins University School of Education, Baltimore, MD. https://researchconnections.org/sites/default/files/134946.pdf

[xli] Hur, E., Jeon, L., Guttman, A., Ardeleanu, K., Gaertner, G., Satchell, T., Swanson, C., Ott, S., & Mull, L. (2021). *A national scan of QRIS: Goals, quality assurance and monitoring, and quality standards, and financial incentives in 2019.* IDEALS Institute, Johns Hopkins University School of Education, Baltimore, MD. https://researchconnections.org/sites/default/files/134946.pdf

[xlii] Child Care Aware of America (2022). *Demanding change: Repairing our child care system.* https://www.childcareaware.org/demanding-change-repairing-our-child-care-system/

[xliii] Whitaker, A. A., Jenkins, J. M, & Duer, J. K. (2022). Standards, curriculum, and assessment in early childhood education: Examining alignment across multiple state systems. *Early Childhood Research Quarterly, 58,* 59-74. doi: 10.1016/j.ecresq.2021.07.008

[xliv] King, H. M. (2021). *Redefining the measurement of early childhood program quality and child outcomes.* Cognia. https://www.cognia.org/wp-content/uploads/2021/04/Redefining-the-Measurement-of-Early-Childhood-Program-Quality-and-Child-Outcomes-Whitepaper.pdf

[xlv] Child Care Aware of America (2022). *Demanding change: Repairing our child care system.* https://www.childcareaware.org/demanding-change-repairing-our-child-care-system/

[xlvi] King, H. M. (2021). *Redefining the measurement of early childhood program quality and child outcomes.* Cognia. https://www.cognia.org/wp-content/uploads/2021/04/Redefining-the-Measurement-of-Early-Childhood-Program-Quality-and-Child-Outcomes-Whitepaper.pdf

[xlvii] Whitaker, A. A., Jenkins, J. M, & Duer, J. K. (2022). Standards, curriculum, and assessment in early childhood education: Examining alignment across multiple state systems. *Early Childhood Research Quarterly, 58,* 59-74. doi: 10.1016/j.ecresq.2021.07.008

[xlviii] Farran, D. C., Meador, D., Christopher, C., Nesbitt, K. T., & Bilbrey, L. E. (2017). Data-driven improvement in prekindergarten classrooms: Report from a partnership in an urban district. *Child Development*, *88*(5), 1466–1479. doi: 10.1111/cdev.12906

[xlix] Peterson, G., & Elam, E. (2020). *Observation and assessment in early childhood education: An open educational resources publication by College of the Canyons.* https://www.childdevelopment.org/docs/default-source/pdfs/observation-and-assessment-english2-8-20.pdf?sfvrsn=1e9226c1_2

[l] LENA. (2022). *QRIS and interaction: Do quality rating systems reflect individual experience?* https://www.lena.org/qris-and-interaction/#:~:text=They%20found%20that%20while%20QRIS,outcomes%20of%20the%20individual%20child

[li] Burchinal, M., Garber, K., Foster, T., Bratsch-Hines, M., Franco, X., & Peisner-Feinberg, E. (2021). Relating early care and education quality to preschool outcomes: The same or different models for different outcomes? *Early Childhood Research Quarterly*, *55*, 35-51. doi: 10.1016/j.ecresq.2020.10.005

[lii] Beecher, C. C., Strand, P., & French, B. F. (2018). Investigation of the development of pre-academic skills for preschoolers in Head Start. *Journal of Education for Students Placed at Risk (JESPAR),* 23(3), 230-249. doi: 10.1080/10824669.2018.1477601

[liii] National Center on Early Childhood Quality Assurance. (2016). *QRIS Compendium 2016 fact sheets: Use of observational tools in QRIS.* Early Childhood National Centers. https://childcareta.acf.hhs.gov/sites/default/files/qris_observational_tools_2016.pdf

[liv] Teachstone. (2020). *Considerations for observing in family child care homes.* https://f.hubspotusercontent10.net/hubfs/336169/Considerations%20for%20Observing%20in%20Family%20Child%20Care%20Homes%20(10_8_2020).docx.pdf

[lv] Tout, K., Starr, R., Wenner, J., & Hilty, R. (2016). *Measures used in Quality Rating and Improvement Systems (QRIS) validation studies.* OPRE Research Brief #2016-110. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/sites/default/files/documents/opre/cceepra_measures_in_qris_validation_studies_1222_508.pdf

[lvi] National Center on Early Childhood Quality Assurance. (2016). *QRIS Compendium 2016 fact sheets: Use of observational tools in QRIS.* Early Childhood National Centers. https://childcareta.acf.hhs.gov/sites/default/files/qris_observational_tools_2016.pdf

[lvii] Olson, L. & Lepage, B. (2022). *Tough test: The nation's troubled early learning assessment landscape.* Future Ed: Georgetown University. https://www.future-ed.org/wp-content/uploads/2022/02/REPORT_Tough_Test.pdf

[lviii] Murphy, E. E. (2023). *Evaluating the equivalency and ecological validity of the TPITOS and ITERS-3 ratings of quality in New Hampshire's quality recognition and improvement system* [Master's thesis, University of Notre Dame]. https://scholars.unh.edu/thesis/1714

[lix] Vitiello, V. E., Bassok, D., Hamre, B. K., Player, D., & Williford, A. P. (2018). Measuring the quality of teacher–child interactions at scale: Comparing research-based and state observation approaches. *Early Childhood Research Quarterly*, *44*, 161–169. doi: 10.1016/j.ecresq.2018.03.003

lx Olson, L. & Lepage, B. (2022). *Tough test: The nation's troubled early learning assessment landscape*. Future Ed: Georgetown University. https://www.future-ed.org/wp-content/uploads/2022/02/REPORT_Tough_Test.pdf

lxi Vitiello, V. E., Bassok, D., Hamre, B. K., Player, D., & Williford, A. P. (2018). Measuring the quality of teacher–child interactions at scale: Comparing research-based and state observation approaches. *Early Childhood Research Quarterly*, *44*, 161–169. doi: 10.1016/j.ecresq.2018.03.003

lxii Olson, L. & Lepage, B. (2022). *Tough test: The nation's troubled early learning assessment landscape*. Future Ed: Georgetown University. https://www.future-ed.org/wp-content/uploads/2022/02/REPORT_Tough_Test.pdf

lxiii Olson, L. & Lepage, B. (2022). *Tough test: The nation's troubled early learning assessment landscape*. Future Ed: Georgetown University. https://www.future-ed.org/wp-content/uploads/2022/02/REPORT_Tough_Test.pdf

lxiv Hur, E., Jeon, L., Guttman, A., Ardeleanu, K., Gaertner, G., Satchell, T., Swanson, C., Ott, S., & Mull, L. (2021). *A national scan of QRIS: Goals, quality assurance and monitoring, and quality standards, and financial incentives in 2019*. IDEALS Institute, Johns Hopkins University School of Education, Baltimore, MD. https://researchconnections.org/sites/default/files/134946.pdf

lxv Olson, L. & Lepage, B. (2022). *Tough test: The nation's troubled early learning assessment landscape*. Future Ed: Georgetown University. https://www.future-ed.org/wp-content/uploads/2022/02/REPORT_Tough_Test.pdf

lxvi Vitiello, V. E., Bassok, D., Hamre, B. K., Player, D., & Williford, A. P. (2018). Measuring the quality of teacher–child interactions at scale: Comparing research-based and state observation approaches. *Early Childhood Research Quarterly*, *44*, 161–169. doi: 10.1016/j.ecresq.2018.03.003

lxvii National Workforce Registry Alliance. (2022). *Badging: Considerations and potential ahead for the early childhood workforce.* https://www.registryalliance.org/wp-content/uploads/2022/02/Paper3-2-11-16.pdf

lxviii Lipscomb, S. T., Weber, R. B., Green, B. L., & Patterson, L. B. (n.d.). *Oregon's Quality Rating Improvement System (QRIS) validation study one: Associations with observed program quality*. https://health.oregonstate.edu/sites/health.oregonstate.edu/files/early-learners/pdf/research/qris-study-1-report-executive-summary.pdf

lxix Vitiello, V. E., Bassok, D., Hamre, B. K., Player, D., & Williford, A. P. (2018). Measuring the quality of teacher–child interactions at scale: Comparing research-based and state observation approaches. *Early Childhood Research Quarterly*, *44*, 161–169. doi: 10.1016/j.ecresq.2018.03.003

lxx Edwards, E. B., Terry, N. P., Bingham, G., & Singer, J. L. (2021). Perceptions of classroom quality and well-being among Black women teachers of young children. *Education Policy Analysis Archives*, *29*(56). https://eric.ed.gov/?id=EJ1322649

lxxi Hur, E., Jeon, L., Guttman, A., Ardeleanu, K., Gaertner, G., Satchell, T., Swanson, C., Ott, S., & Mull, L. (2021). *A national scan of QRIS: Goals, quality assurance and monitoring, and quality standards, and financial incentives in 2019*. IDEALS Institute, Johns Hopkins University School of Education, Baltimore, MD. https://researchconnections.org/sites/default/files/134946.pdf

lxxii Hur, E., Jeon, L., Guttman, A., Ardeleanu, K., Gaertner, G., Satchell, T., Swanson, C., Ott, S., & Mull, L. (2021). *A national scan of QRIS: Goals, quality assurance and monitoring, and quality standards, and financial incentives in 2019*. IDEALS Institute, Johns Hopkins University School of Education, Baltimore, MD. https://researchconnections.org/sites/default/files/134946.pdf

lxxiii Georgia Department of Early Care and Learning. (2019). *Quality Rated child care program manual.* https://qualityrated.decal.ga.gov/Content/Documents/PM_ProgramManual.pdf

lxxiv Michigan Department of Education. (2022). *Great Start to Quality: Quality indicators guidance document.* https://greatstarttoquality.org/wp-content/uploads/2022/12/GSQ_Guidance_Document_Revisions_11.2022.pdf

lxxv Hallam, R. A., Hooper, A., Buell, M., Ziegler, M., & Han, M. (2019). Boosting family child care success in Quality Rating and Improvement Systems. *Early Childhood Research Quarterly*, *47*, 239–247. doi: 10.1016/j.ecresq.2018.12.008

lxxvi Han, M., Buell, M., Hallam, R., & Hooper, A. (2021). An intensive professional development in family child care: A promising approach. *International Journal of Early Years Education*, *29*(2), 167. doi: 10.1080/09669760.2021.1914558

lxxvii Garrity, S. M., Longstreth, S. L., Lazarevic, V., & Black, F. (2021). Examining the tensions between cultural models of care in family childcare and quality rating improvement systems. *Children and Youth Services Review, 122*, 105927. https://doi.org/10.1016/j.childyouth.2021.105927

lxxviii Jenkins, J. M., Duer, J. K., & Connors, M. (2021). Who participates in quality rating and improvement systems? *Early Childhood Research Quarterly*, *54*, 219–227. doi: 10.1016/j.ecresq.2020.09.00

lxxix Teachstone & Policy Equity Group. (2022). *Knocking down QRIS structures: Rebuilding with effectiveness and equity at the forefront*. https://info.teachstone.com/hubfs/Knocking%20Down%20QRIS%20Structures%2009.15.22%20FINAL.pdf

lxxx Teachstone & Policy Equity Group. (2022). *Knocking down QRIS structures: Rebuilding with effectiveness and equity at the forefront*. https://info.teachstone.com/hubfs/Knocking%20Down%20QRIS%20Structures%2009.15.22%20FINAL.pdf

lxxxi Powell, J. A., Menendian, S., & Ake, W. (2019). *Targeted universalism: Policy & practice.* Othering & Belonging Institute at US Berkley. Primer, May 2019. https://belonging.berkeley.edu/targeted-universalism

lxxxii Iruka, I. U., Soto-Boykin, X., Blevins, D., Alexander, B., Cardona, M., & Castro, D. (2022). *Equity is quality. Quality is equity: Operationalizing equity in Quality Rating and Improvement Systems.* Children's Equity Project, Child Care Aware, and Equity Research Action Coalition. https://childandfamilysuccess.asu.edu/sites/default/files/2022-06/QRIS-report-062122.pdf

lxxxiii Awaah, E. (2022). *Advancing a racial equity action plan for Parent Aware: Minnesota's quality rating and improvement system.* https://www.parentaware.org/wp-content/uploads/2022/03/MN-ParentAwareRacialEquityPlan-_2022.pdf