

Shifting the Focus

Moving from a Quality Rating and Improvement System to a Continuous Quality Improvement System



What you'll learn...

The 9 most important things to keep in mind when you move from a QRIS focused on star ratings to a QRIS focused on levels of continuous quality improvement

Across the country, early versions of quality rating and improvement systems were geared toward “raising the floor” of early care and education. Moving toward a goal of overall quality improvement, this first wave focused on state licensing standards and basic foundational elements necessary for a program to get started.

BUILD Initiative’s report *Quality Rating and Improvement Systems: Stakeholder Theories of Change and Models of Practice* determined that while some QRIS are still building their foundation to “raise the floor” of early care and education, others are evolving their systems—creating version 2.0 and focusing on goals like improving child outcomes across sectors or supporting child and family services.

In thinking about the next wave of growth, BUILD assembled a think tank that offered recommendations for version 3.0 of QRIS development. In reviewing those recommendations, it becomes clear that the ratings-based system currently in use by many states will not support the recommendations—and *may even jeopardize the future success of those quality rating and improvement systems.*

To be most successful in achieving its objectives, a state’s QRIS must meet certain criteria: it should be simple to use and understand, as well as easily digestible and translatable into other languages to allow for greater access and easier management both now and in the future. While recognizing other quality efforts in your state, the quality improvement system also needs to be relevant and based on the latest research; and, it must be seen as a high-value brand for early care and education in your state.

This whitepaper will describe how shifting the focus from a ratings-based quality improvement system to a levels-based continuous quality improvement system achieves all these goals.

Read on...

9 Tips for Success

As you transition from a ratings-based quality improvement system, keep in mind the 9 things needed for your levels-based continuous quality improvement system to be successful.

- 1 Use the latest research and relevant feedback
- 2 Be brave—streamlining standards will require hard choices
- 3 Focus on the goal of continuous quality improvement rather than on a rating
- 4 Simplify always—claim success when your quality improvement standards can be explained on a two-sided, 8.5x11 sheet
- 5 Make it easy for providers to join now, and to stay engaged in the future
- 6 Lessen the administrative burden wherever possible
- 7 Make it easy to track providers' progress to-date, and to plan for the future
- 8 Build a comprehensive marketing communication strategy early in the process
- 9 Make sure your quality improvement system has a brand identity that makes sense and reflects your environment

TIP #1:

Use the latest research and relevant feedback

When revising your state's continuous quality improvement system, it's important to use the latest available research to reflect the needs of your community. The "Resources" tab at www.buildinitiative.org has a wide variety of materials that you can access.

Since your state has already piloted or launched a quality improvement system, you have access to a wealth of additional information that will be incredibly valuable in the development of the improved system.

For example, Virginia Quality—that state's quality rating and improvement system—leveraged feedback from their multi-year pilot to develop six specific goals for the 2.0 version of their system:

- 1 **Expansion:** Increase the number of programs that can be served by the QRIS
- 2 **Sustainability:** Automate and streamline processes while maintaining quality and rigor
- 3 **Accessibility:** Offer user-friendly application and participation processes
- 4 **Supportive:** Emphasize continuous quality improvement by integrating quality

improvement activities and supports at every point of contact

- 5 **Alignment:** Build on existing documents and standards
- 6 **Reflective:** Incorporate feedback from communities and research on best practice in QRIS

How did Virginia collect this feedback?

- They conducted focus groups and surveys, and convened working groups—gathering data from more than 450 stakeholders.
- They engaged Child Trends to conduct evaluation activities in preparation for the transition process.
- They analyzed existing data and documents, as well as online surveys from mentors, coordinators, and program directors.
- They conducted interviews with participating programs and coordinator groups.
- They engaged in regional site visits and double-coding visits with raters. (The Virginia Department of Social Services recognizes eight regions in the state of Virginia.)
- They met with Hub staff for in-depth discussions.

Leveraging this information has several advantages—it ensures that all voices are heard, secures buy-in in advance, and demonstrates both responsiveness to the community and a commitment to continuous quality improvement through your quality improvement system.

TIP #2:

Be brave when streamlining standards

When evolving your quality rating and improvement system, it can be tempting to incorporate every expert suggestion, include every new standard, and act on every bit of feedback collected.

For that reason, it's important to stay focused on the goals of *your* continuous quality improvement system. Keep in mind that the intent behind a quality improvement system is to improve quality in early care and education across the board, so the structure has to address the needs of many stakeholders and a wide range of programs. This means that there will be some hard decisions to make in terms of discerning what should be included and what should be left out.

For example, as Virginia Quality began evolving their system, they deliberately decided to focus the design of their version 2.0 and include only those quality components that they were certain would impact learning. For that reason, they slimmed down what they measure—determining to include only excellent measurement tools, and only when it made sense to do so (i.e., when the tools exist and they're feasible to use in a QRIS context). As a result, their 2.0 version uses only two measurement tools: Classroom Assessment Scoring System (CLASS) and Environment Rating Scale (ERS).

In addition, they organized the QRIS components in such a way that they build on one another and increase in rigor (e.g., Level 2 requires relatively low teacher qualifications, while there are tougher requirements for CLASS scores at Level 5). They tried to do this by using what they know about child care quality in order to design a system that makes sense—recognizing, for example, that teachers with some education (requirement for Level 2) are better at implementing curriculum (an element of Level 3). Further, classrooms with curriculum in place (Level 3) will be more likely to do better on CLASS's Instructional Support domain (Level 4/5).

Virginia Quality kept a laser focus on their six goals (see page 4), which was key to their success as they evolved the design of their quality improvement system.

TIP #3:
Focus on continuous quality improvement rather than on a star-based rating

In the beginning, some quality improvement systems focused on stars and ratings to provide a visual evaluative score that showed both providers and families how each program measured up to a standard set of criteria. Yet, in practice, this arrangement proved to be a challenge.

Why?

First, what provider really wants to be judged and rated by an outside “expert”? This idea doesn't sound friendly or encouraging (and probably wouldn't be high on your list to volunteer for), making it especially difficult for states without mandatory enrollment. And even in states that have mandatory enrollment, this attitude doesn't start off the QRIS experience on a positive note.

Second, with the popularity of online ratings systems for everything from hotels to doctors, the public has a preconceived idea that a star rating is an average based on all of the ratings given. Yet in some states, a provider's overall rating is actually the *lowest* rating received, so parents don't get a true picture of the entire program.

In addition, the implied understanding is that online ratings are based on subjective feelings rather than objective criteria. Those of us who work with QRIS all the time understand that quality rating and improvement systems don't work like that, but the general public doesn't understand that difference. Consequently, it would take a great educational effort to try and shift parents and the public away from this belief.

The biggest challenge, however, is that looking at a QRIS as simply a rating system puts the emphasis on the wrong thing. Rather than focusing on a “rating,” providers and families should instead focus on “quality” and “improvement.”

Virginia Quality realized some of these challenges with the ratings-based structure used during their pilot, and worked to address them as they evolved that state's QRIS. For example, they chose to include teacher goal and curriculum in version 2.0—not only because they knew such elements are important, but also because they wanted to support programs' improvement in this area. In addition, quality improvement is a big part of their overall goals for the system.

As a way of better communicating that they wanted to encourage providers in their long-term efforts to improve quality and achieve sustained participation, Virginia Quality decided to use a levels-based model for their quality improvement system (below).

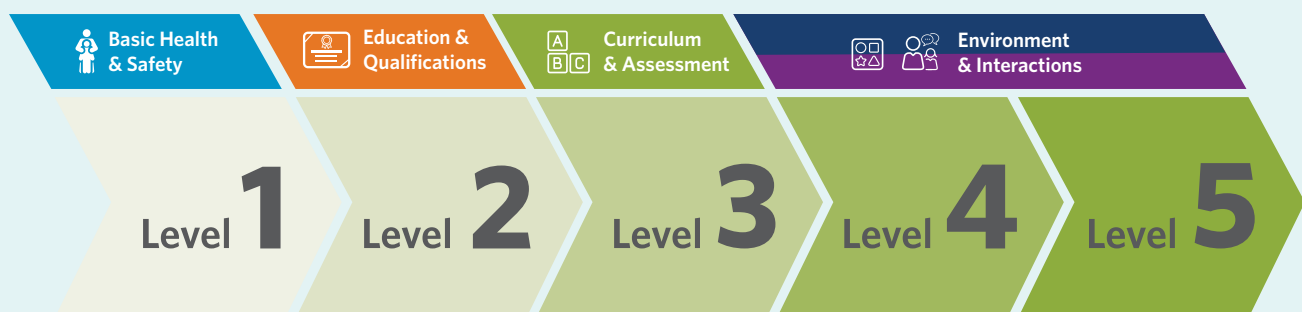
It's interesting to note that while Virginia Quality included teacher goal and curriculum in their system, they're measuring those elements in a less rigorous way because there's less research consensus about the mechanisms by which these components impact learning.

For instance, it's difficult to measure curriculum in an inexpensive, consistent way, and isn't feasible to mandate a particular curriculum or measure curriculum fidelity across the whole state. Instead, they built a way to measure some aspect of intentionality in curriculum (a self-review checklist) and positioned the checklist in the structure of their QRIS to make it feel less "high stakes."

By using a levels-based system, Virginia Quality had an opportunity to tell a different story about what a quality improvement system is—a more accurate story which placed the focus squarely on continuous quality improvement and organized the components so that they build on one another and increase in rigor. Interestingly, reframing the story put them in a position to achieve all six of the goals (shown below) established for the 2.0 version of their quality improvement system:

- 1 **Expansion:** Increase the number of programs that can be served by the QRIS

Virginia Quality's Levels-Based Model



- 2 **Sustainability:** Automate and streamline processes while maintaining quality and rigor
- 3 **Accessibility:** Offer user-friendly application and participation processes
- 4 **Supportive:** Emphasize continuous quality improvement by integrating quality improvement activities and supports at every point of contact
- 5 **Alignment:** Build on existing documents and standards
- 6 **Reflective:** Incorporate feedback from communities and research on best practice in QRIS

TIP #4:
Simplify always—claim success when your quality rating standards can be explained on an 8.5x11 sheet

There are several aspects to improving quality in early care and education—staffing, education and professional development, environment, curriculum—and complex criteria and processes can be burdensome and time-consuming to administer.

For that reason, simplifying the journey to improved quality in early care and education is critical. When providers find the system



(back)

(front)

Virginia Quality's 1-sheet (2-sided) Quality Standards

easy to engage with, they're more likely to participate fully and stay committed. And when the system is easier to administer, employee training and on-boarding are more streamlined, and you require less staff to achieve your goals.

When Virginia Quality took a fresh look at their quality improvement standards, they discovered ways to greatly simplify the system. By making the right decisions for the 2.0 version of their system, Virginia Quality was able to encapsulate their standards on two sides of one 8.5x11 sheet (shown on previous page).

TIP #5:

Make it easy for providers to join now and to stay engaged in the future

One of the potential barriers that keeps some providers from participating with a quality improvement system is fear.

- *"If my program isn't rated well, how will I know what needs to be improved?"*
- *"What if the evaluator scores my program low...or even worse, what if I'm at the bottom of the list?"*
- *"I already participate with other organizations that evaluate our program's quality...will I lose clients if I don't do this one, too?"*
- *"Why should I participate and risk getting a low star rating if the program down the street (my competition) isn't participating and won't be rated?"*

- *"I already participate in another highly respected accreditation, so what's the benefit to doing this, too? It just seems like it would be a lot more work."*

Knowing that providers may be reluctant, it's important that the system is flexible, friendly, and accessible, as well as easy to use and understand. Creating a system that provides a clear path for continuous quality improvement, has a less threatening entry point for providers when they start out, and credits providers for their work with other quality programs addresses all these challenges.

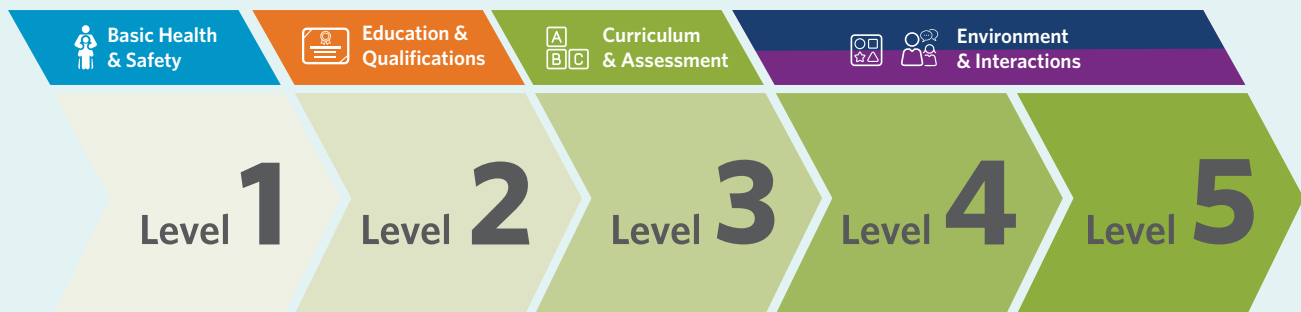
In their efforts to improve their state's system, Virginia Quality developed a levels-based system (see visual on next page) that could be easily explained with clear visuals, and which demonstrated the simple path for providers to move ahead in their efforts to improve program quality.

Additionally, Virginia Quality configured the levels in such a way that providers who participate in the system complete Levels 1, 2, and most of 3 on their own.

- Level 1 simply requires that a provider is in good standing with state regulations and has completed the Virginia Quality orientation (available through an online module or in-person training so providers can choose the method best suited to their needs and personality).
- Level 2 outlines specific education and qualification milestones for staff.
- At Level 3, programs review their own curriculum/assessment practices and

Friendly and Accessible

This levels-based system is easily explained with clear graphics and labels and visualizes the simple path forward for providers to improve program quality.



complete a self-study on their Environment Rating Scale (ERS) and Classroom Assessment Scoring System (CLASS). A technical assistant specialist then visits the program after the checklist has been completed to do a quick validation of the information the program submitted for their self-review checklist.

Recognizing that, in some states, other organizations are also working on quality-related issues and providers have already met certain quality standards aligned with those groups, Virginia Quality created a “Fast Track” within their continuous quality improvement system.

This Fast Track process gives a boost to providers whose programs are already enrolled in programs like the Virginia Preschool Initiative or Head Start, or which have NAEYC Accreditation. Through the Fast Track process, these programs enter the system at Level 3; by saving them time and resources, providers are encouraged to stay engaged.

One final note on provider engagement: It may be tempting to focus on connecting only with those providers most in need of quality improvement. However, it’s critical that your quality improvement system engage with *all* levels of providers—both the providers you know will benefit the most from improvement, and those that are the best in your state who may think they don’t need an outside continuous quality improvement system.

A levels-based system focused on continuous quality improvement can have a greater attraction for the full range of providers, in that it provides a way to engage an entire community of quality-focused leaders and learners—creating a way for those further along in the system to share their experience and ideas, mentoring those who are also committed to improving quality in early care and education.

TIP #6:

Lessen the administrative burden wherever possible

When states have hundreds or thousands of early care and education providers, it can be a herculean task to administer. Creating a system that streamlines your staff's role—without compromising quality—can be quite difficult.

With effective system development and the use of technology, however, there are some ways to reduce the stress on staff.

As mentioned, one way that Virginia Quality addressed this issue was to configure the levels so that site visits don't begin until a provider is at Level 3. (Note: This delayed visitation is much easier when the standards are easily explained on just one sheet of paper!)

In addition, Levels 1, 2, and most of 3 are more automated and can be completed online with just a bit of staff involvement. By reducing the amount of time needed to administer the system, your staff can work on tasks related to expanding participation, training, and executing the standards you've developed.

Another resource-saving step in Virginia Quality's evolution of their system was the clarification of the path forward. Working transparently with providers, Virginia Quality's levels-based system spells out exactly what criteria need to be met by programs with that designation—as well as the activities required to reach the next level. This well-defined progress plan

ensures that providers understand not just where they are, but also what they need in order to go to the next level.

TIP #7:

Make it easy to track and plan providers' progress

In an effort to communicate the need for continuous quality improvement, it's important to emphasize that quality improvement is not once-and-done, but rather is an ongoing effort. **The standards should clearly define the path for each program's quality improvement—and show how each level builds on the one before it.**

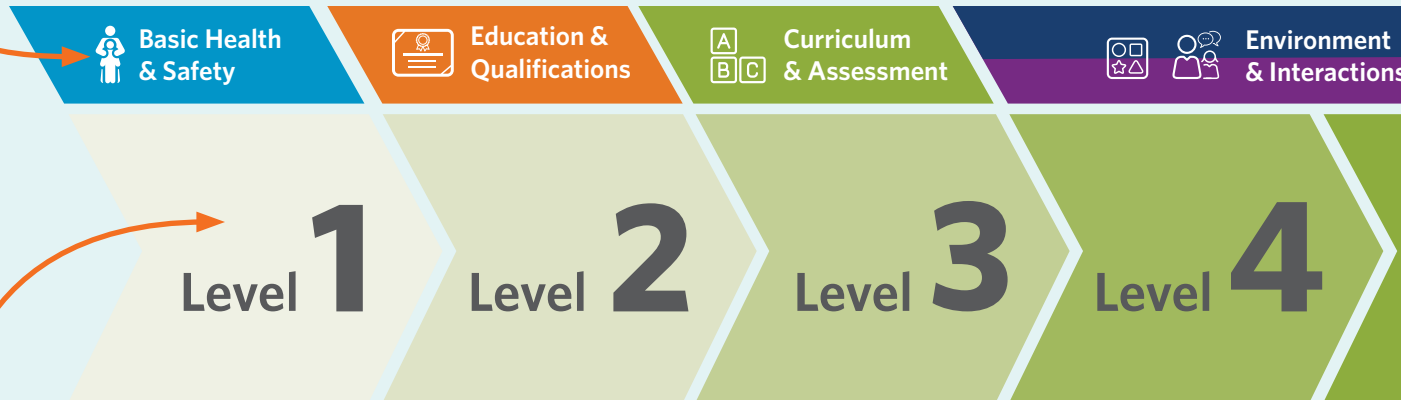
When designing their transparent system, Virginia Quality leveraged four standards that build on the critical foundation of basic health and safety—organizing them in a logical progressive sequence which ensures that providers are systematically addressing the key areas needed for achieving the goal of continuous quality improvement.

The visual (see next page) used to describe this path included right-facing arrows to emphasize that the goal is forward progress and continuous quality improvement.

Virginia Quality awards quality levels to child care and preschool programs based on:

- 1 Education and Qualifications
- 2 Curriculum & Assessment
- 3 Environment
- 4 Interactions

Icons with labels show the key areas needed to address continuous quality improvement.



Right-facing arrows emphasize that the goal is forward progress.

Programs progress through the levels at their own pace. Criteria are the same for all programs (i.e., they have to be met), but activities required for improvement are more flexible, and can be completed in a variety of ways depending on what a program needs. Required improvement activities help to prepare programs for the next level.

TIP #8:
Build a comprehensive marketing communication strategy early in the process

Just as it's important to clearly define the standards of your continuous quality improvement system, it's critical to communicate that message effectively. After spending the

time and effort to develop a system that can improve children's educational outcomes and impact their lives, the next step is to make sure the right people learn about it. For a more detailed description of this process, read the four-part series *Redesigning the Brand Identity for Your QRIS*.

Knowing when and how to reach out to the right audience can be tricky, so it's helpful to hire professionals for this work. A marketing communications firm—preferably one with experience in marketing quality improvement systems—can work with you to develop a customized strategy for the most effective rollout of your system.

There are several things to keep in mind when developing the marketing communications strategy. Following is a recap of the information you should expect your strategy to include:



- **The Three Components of Your Continuous Quality Improvement System (shown above)**

What they are, their individual roles in the system, and why they matter overall

- **Your State’s Quality Environment**

What’s the current quality framework in your state, and how does the continuous quality improvement system fit in?

- **Building the Right Brand Identity**

An honest evaluation of your current brand identity (if you have one) and its use, with clear recommendations on how you can develop or improve it

- **Identification of the Different Audiences**

Their needs, interests, and points of view

- **Goals for Each Audience**

What do you want each audience to think, know, or believe after you’ve communicated with them?

- **Three Levels of Needed Messaging**

Defining and addressing the needs of your internal audience, middle audience, and external audiences

- **The Order of Communication**

Once you know who your audience is and how to address them, in what order should you communicate and why?

- **Communication Challenges for Providers and Parents**

Key watch-outs for these very different audiences

- **Recommended Tactics for Providers and Parents**

Specific ways to effectively reach out to providers—before communicating to parents

TIP #9:

Make sure your QRIS brand identity makes sense and reflects your environment*

A high-quality brand identity—one which represents a community of quality-focused leaders and learners—is most effective when it becomes a beacon that everyone wants to be associated with. And for continuous quality improvement systems, the brand identity must also convey quality, and embody professional care and education.

Your brand identity will face much competition for attention from all audiences, yet it still needs to stand out in a very crowded marketing environment—representing quality early care and education to policymakers and stakeholders, enticing providers to participate and improve their quality, and serving as a beacon for parents in search of quality early care and education for their families. The new Virginia Quality brand identity brought together two separate existing brand looks and included a set of consistent visuals to reinforce key messaging.

In brand identities as with many things, simpler is better: the brand look must be clear and memorable.

When the continuous quality improvement standards are simple and clear like the levels system used by Virginia Quality, your brand identity can be executed with visuals

which are easy to understand, more digestible, and more easily translatable.

In an increasingly multicultural environment, the best quality improvement systems have brand looks that represent and connect diverse cultures and languages.

Consideration of diverse audiences is a key element to keep in mind as the marketing communication strategy takes shape. This factor impacts everything: the brand name, logo design, brand colors, image choices, even the messages themselves. Keeping this filter in mind throughout the process allows for better attraction to the audience, as well as longer attention and stronger engagement.

The brand identity is the look and feel of your QRIS brand. It gives visual form to your organization and identifies information like:

- Name
- Logo (visual elements that will be used on all materials)
- Colors (primary and secondary)
- Photography (consistent images/photographic style)
- Typography (font choices)
- Illustrations (including the use of lines, styles of charts and diagrams, etc.)
- Icons
- Tone (feeling/vibe)

*Read our four-part series *Redesigning the Brand Identity for Your QRIS* found at: orangesquare.com/part1-redesigning-brand-identity-QRIS.

SUMMARY:

Putting it all together for your continuous quality improvement system

Recent reports from BUILD Initiative outline a five-fold purpose for a quality improvement system, namely:

- 1 Improving early care and education workforce activities and outcomes
- 2 Improving family outcomes
- 3 Improving child outcomes
- 4 Raising the floor on basic health and safety in early care and education
- 5 Raising the floor of quality in early care and education

Shifting from a ratings-based quality improvement system to a levels-based continuous quality improvement system makes it possible to successfully achieve this five-fold mission.

Additional Information

For more information about how Virginia Quality shifted from a Quality Rating and Improvement System to a Continuous Quality Improvement System, email qris@vecf.org

About Orange Square

Orange Square is dedicated to improving the lives of children and their families by combining your expertise in QRIS with our expertise in marketing communications and the QRIS National Learning Network.

Together with you, we work to improve the quality of early care and education by building public awareness and engagement.



Learn more about our services and knowledge on QRIS marketing communications at orangesquare.com/QRIS



Join our LinkedIn group dedicated to QRIS marketing and communications at linkedin.com/groups/8540612



For questions or to get in touch with us, email kristine@orangesquare.com



Orange Square Inc.
161 Exchange Street, Suite 1
Pawtucket RI 02860
401-305-6611
orangesquare.com