

Results:
Statewide Stakeholder Consultation
on
Draft Early Childhood
Standards and Indicators

Prepared for
Minnesota Department of Education and the
Minnesota Department of Human Services

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Introduction

On behalf of the Minnesota Department of Education and the Department of Human Services, our consulting team conducted a comprehensive stakeholder consultation around the draft early childhood common program standards and indicators to inform a statewide Quality Rating and Improvement System framework. The work was funded by the Early Childhood Advisory Council as part of their work on program standards. The departments sought robust input from stakeholders throughout the state, and are using that to help shape their final draft recommendations to the Legislature in spring 2011.

Process and Participation Summary

The stakeholder consultation process design began with a stakeholder identification and analysis workshop in October 2010, from which our team and the departments jointly developed a detailed Stakeholder Consultation Plan. That plan listed all key stakeholders to be included in this consultation, and for each listed their “stake,” purpose of engagement, any barriers to their engagement and how to overcome those barriers, tools and techniques, contacts, responsibility, and schedule/status.

Stakeholders for this specific statewide consultation effort included the full range of organizations – direct service providers from all types of programs, advocates, legislators, and membership organizations, and covered the entire state. Consultation techniques were tailored to stakeholders and included workshops, public sessions, an online or paper survey, small-group sessions, and formal letters from organizations.

Input opportunities in November and early December 2011 were as follows:

- Public sessions and workshops in Alexandria, Shakopee, Golden Valley, Grand Rapids, Mankato, Maplewood, and Roseville
- Specialized workshops and small-group sessions in Minneapolis and St. Paul, focused on those serving or representing children, families, and providers of color and new immigrants, as well as parents
- An online survey that was open from November 17 to December 8



Both the in-person sessions and the online survey used as the primary resource a handout that provided an introduction, all draft standards and indicators, and answers to frequently asked questions (see Appendix, page 13). State staff members also attended the in-person sessions to show their respect and appreciation for stakeholder input but did not participate in any way, neither contributing content nor answering questions – we instead relied on the detailed FAQs to ensure consistent messages statewide.

To offer equitable opportunities for all stakeholders who wished to contribute, the in-person sessions and the online survey provided the same complete information about the draft standards and five levels of indicators and posed the following questions:

- How could the indicators across levels 1-5 better align and progress logically up to the standards?
- If any of these indicators might be barriers to provider participation, how would you change them to reduce those barriers?
- Fundamentally, these standards and indicators are about kindergarten preparedness. How could the standards (below) be improved or changed to better accomplish that?

As shown in the photos, at in-person sessions participants were divided into tables and recorded their table's narrative responses to the key questions; online participants did the same in response to these open-ended questions. Session participants were instructed to document all input rather than trying to reach consensus. A spokesperson from each table reported out to the group sample responses to the third question. Our analysis of the input showed that while there was sometimes consensus on an issue that was important to table members, participants had no trouble expressing the full range of positions and offering numerous and varied ideas on all of the topics.



Both the in-person sessions and online survey also asked people to volunteer the following demographic information:

Which most closely represents your primary perspective in giving input?

- Caregiver or teacher
- Parent or guardian
- Advocate or similar
- Program director/owner/administrator
- Child care resource and referral
- Higher education
- Other (please specify)

Which most closely represents your work setting or focus area?

- Licensed family child care
- Child care center
- Head Start
- School district pre-K
- Other (please specify)

Years in early childhood education

Zip code
Gender
Decade in which you were born
Race/ethnicity
Home language



Participation and Input

Thanks to numerous organizations throughout the state that helped organize and promoted both the in-person sessions and the survey link, we had excellent stakeholder participation in the state’s consultation on the early childhood draft common program standards and indicators. Over 700 people participated through in-person sessions or via an online survey between 17 November and 9 December 2010; about 180 of these were in person and the rest contributed via the online survey. While this stakeholder consultation process was *not designed to yield a stratified random sample*, the flexible design and successful



outreach to underrepresented stakeholders resulted in confidence in the demographic distribution as well as the breadth and quality of the input to help shape the state’s final recommendations on standards and indicators within the QRIS.



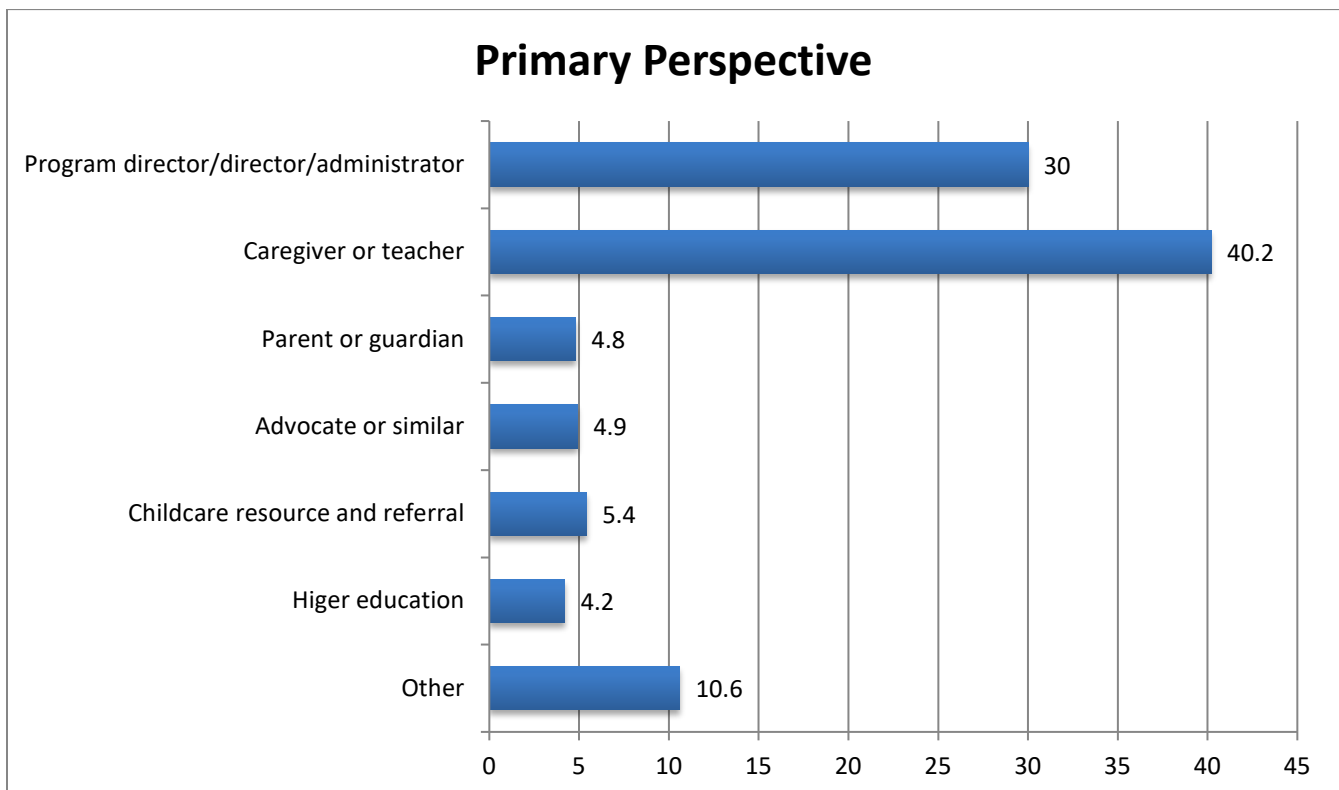
This section includes the demographic characteristics of the 683 participants who answered one or more of the demographic questions either in person or online. Following that is a discussion of the narrative input offered by participants and how the state used that to revise the draft common program standards and indicators.

Demographic Characteristics

This section characterizes the demographics of nearly all of the participants in the statewide stakeholder consultation. Of the 700+ participants, 683 provided responses to one or more of the demographic questions. It is important to note that this stakeholder consultation was *not* intended as a stratified random sample, so any comparisons to statewide data in the following narrative are simply reflections rather than any form of analysis.

Primary Perspective

As shown on the graph below, the majority of participants in the input process were caregivers/teachers, followed by program directors/owners/administrators. While we differentiated between those groups, they are in fact very similar, and when combined represent 70% of participants. This distribution aligns with the stakeholders identified through our initial stakeholder identification and analysis, and the results reflect our outreach efforts. Because comprehensive input from parents on these issues has been gathered by the Minnesota Early Learning Foundation and the Department of Human Services over the last several years, this stakeholder consultation did not target parents, as reflected in the data below.

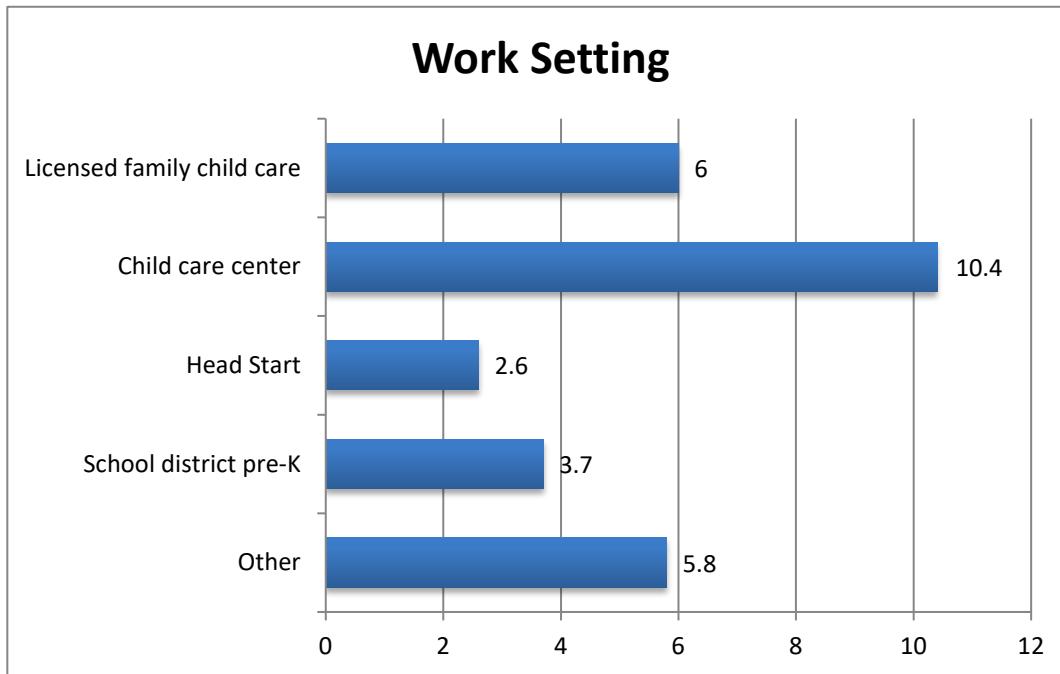


Gender

Males represented only 4% of the participants in this consultation, generally reflecting their much lower numbers among these stakeholder groups.

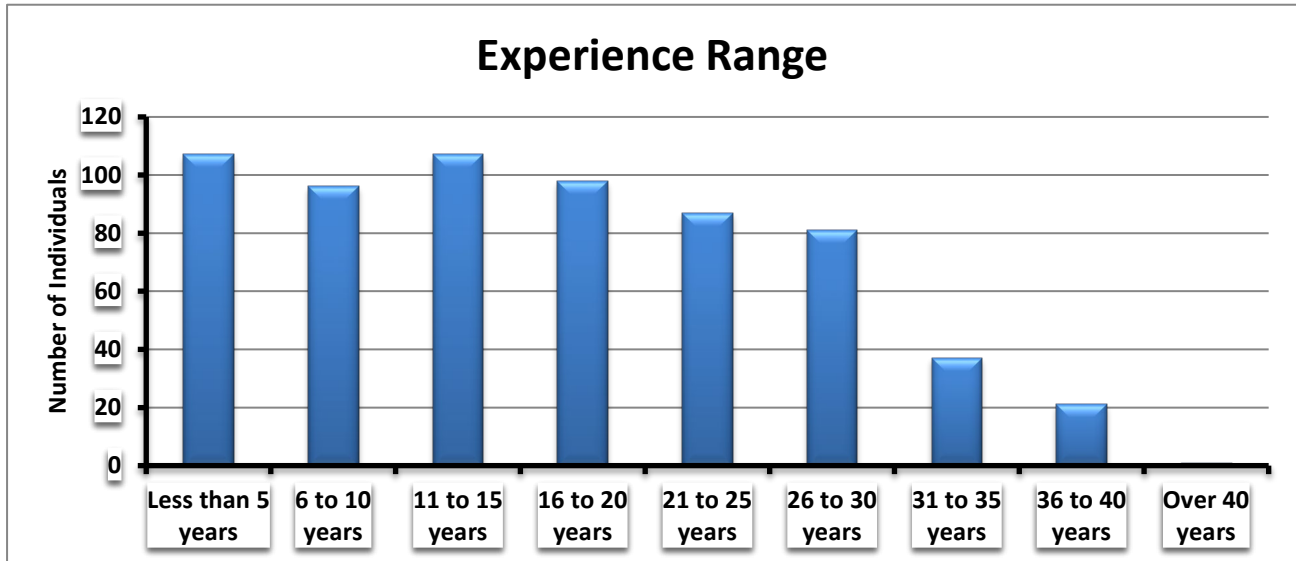
Work Setting / Focus

Participants working in direct service organizations, child care centers, or family child care homes were the largest group of participants in the stakeholder consultation process. Those involved with Head Start had the lowest participation levels. People listing their work or focus area as “other” included kindergarten teachers, ECFE teachers, social workers, and educators in higher education, among others.



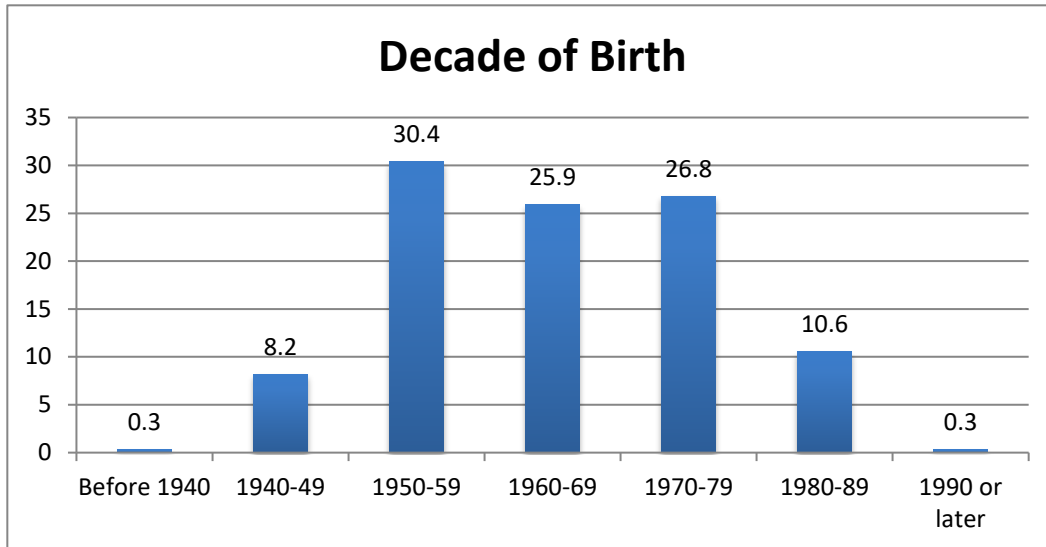
Years in Early Childhood Care or Education

More than 600 of the in-person and online participants answered this demographic question. Although responses varied from less than 1 year to more than 40 years, the mean (or average) years of experience was 17 years. The mode, or number that appears most frequently, is 30 years. Simply put, most of those participating in the input process are seasoned childhood care/education professionals and providers.



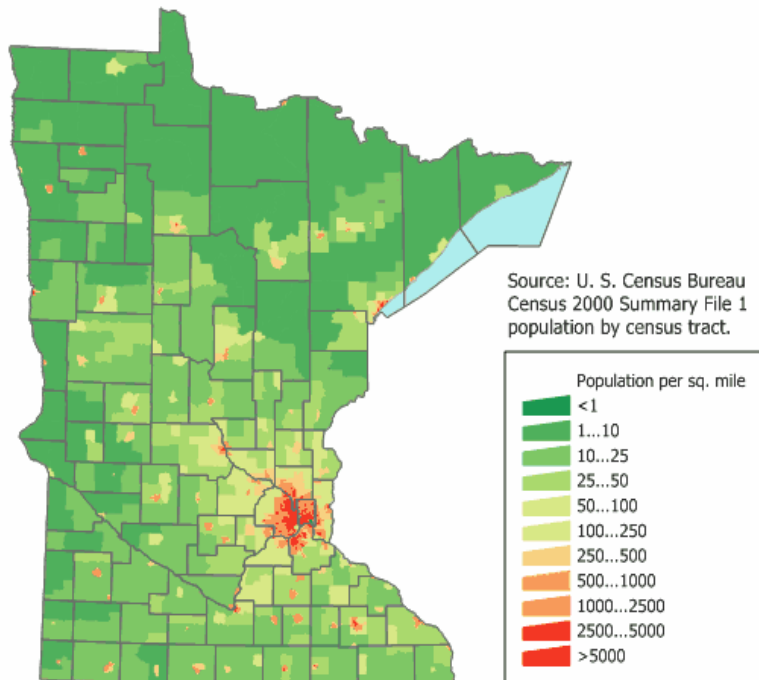
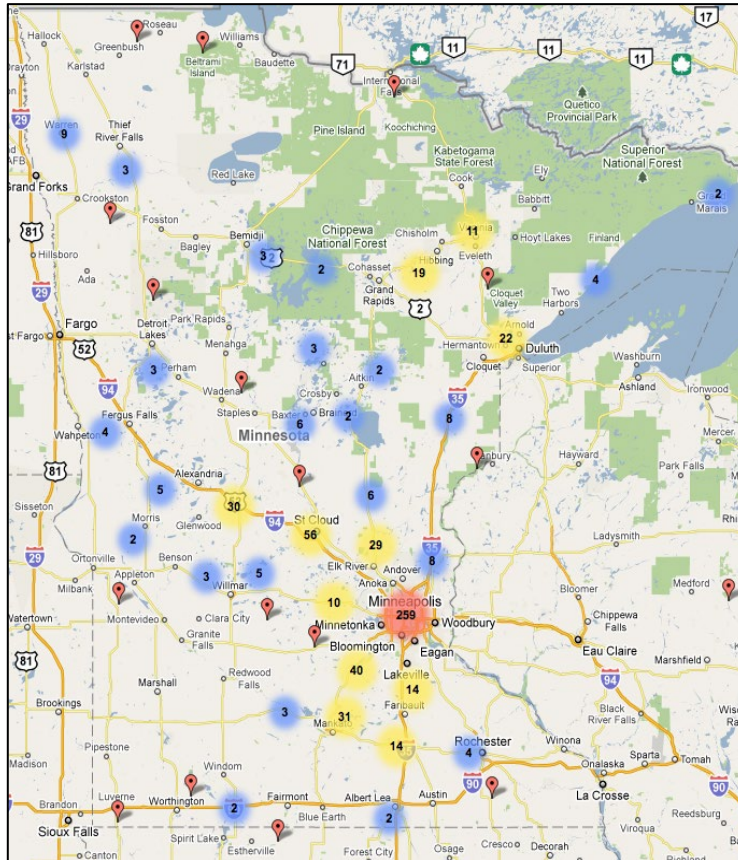
Age

As might be expected, the highest percentage of participants were between 51 and 60, followed by those ages 31 to 50.



Location

Input was gathered from across the state, with the greatest participation from stakeholders in the Twin Cities area. As shown on the two maps, the distribution of participants aligns reasonably well with statewide population distributions.



Race/Ethnicity

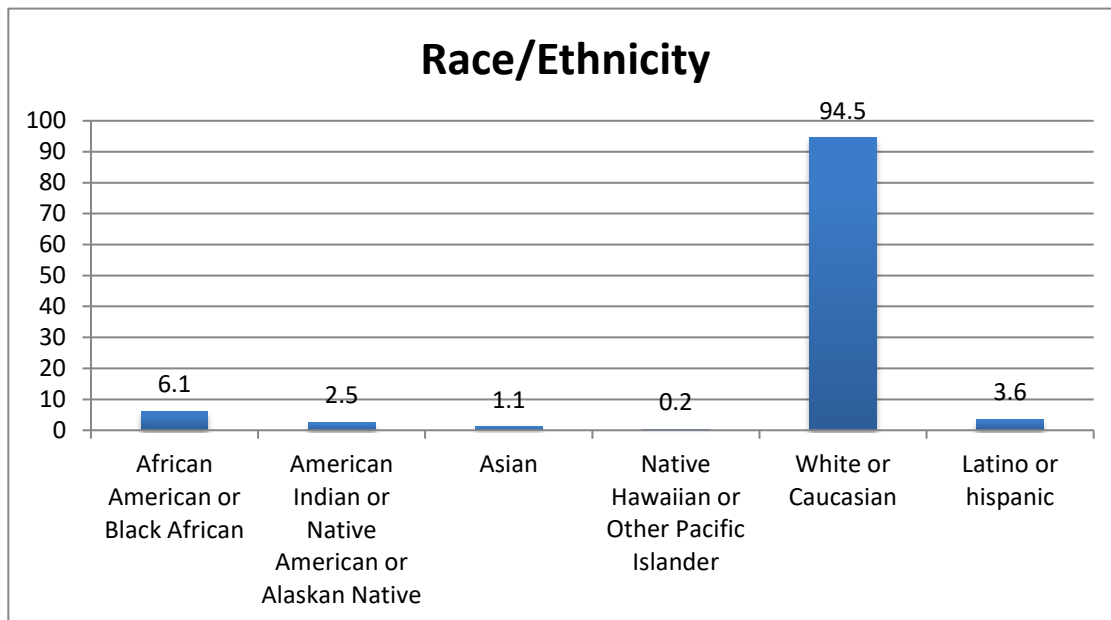
In collaboration with partners, our consulting team did reach out specifically and successfully to providers of and advocates for children in poverty and of color; nearly all of these participants were in the Twin Cities metro area.

Overall, however, participants identifying themselves as White / Caucasian represented more than 94% of statewide participants.

Those selecting African American or Black African comprised slightly more than 6%, with self-identified Hispanic or Latino participants representing slightly more than 3.5%.

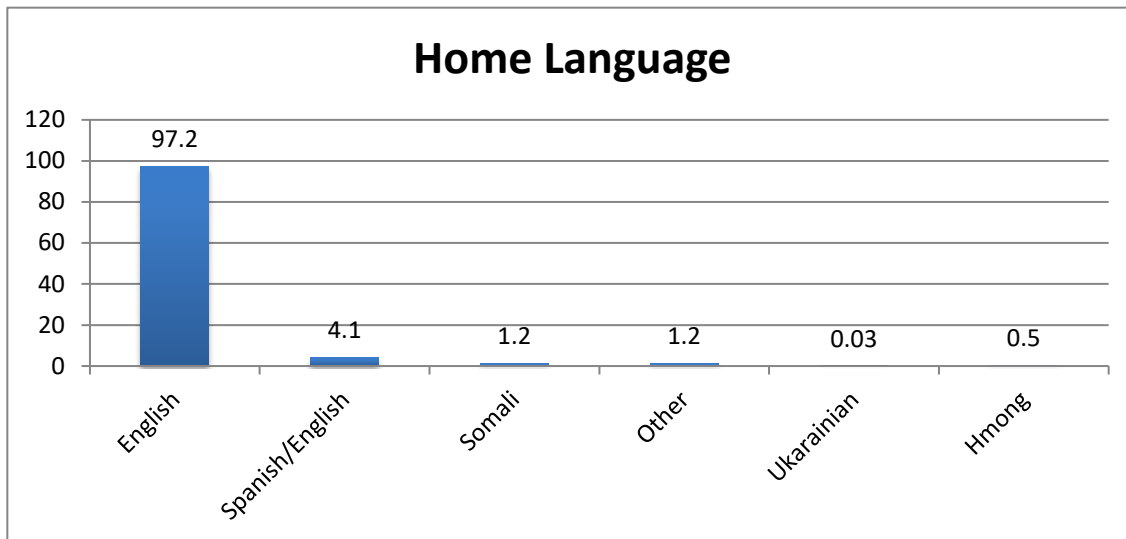


While this somewhat under-represents the statewide population of adults of color and *may* be similar to the race/ethnicity of practitioners in the state, the demographics of actual practitioners as well as the general adult population are out of sync with growing statewide population of *children*, an increasing percentage of whom are of color.



Home Language

English is the dominant home language of input process participants, with Spanish or Spanish / English a distant second.



Narrative Input

The extensive narrative input from the in-person sessions and online survey was entered or downloaded into Excel worksheets and thoroughly reviewed and analyzed in several ways. The complete set of raw and analyzed data was provided to state staff.

Both in-person sessions and online surveys gathered *open-ended responses* to three questions:

- Question 1: How could the indicators across levels 1-5 better align and progress logically up to the standards?
- Question 2: If any of these indicators might be barriers to provider participation, how would you change them to reduce those barriers?
- Question 3: Fundamentally, these standards and indicators are about kindergarten preparedness. How could the standards (below) be improved or changed to better accomplish that?

The online survey also offered space for completely open responses above and beyond those three questions.

The consulting team sorted each input item by which question elicited the response, and coded each by the relevant category of standard: Physical Health and Wellbeing, Family Partnerships, Teaching and Relationships, Assessment of Child Progress, and Professional Development. We also created new categories for responses related to system design, implementation, and general comments.



The input was then further coded and sorted as follows:

- 1=Key issues with potential system or policy implications
- 2=Technical and content issues
- 3=Out of scope, unrelated (e.g., suggestions for the Parent Aware program, requests to change state laws, “no comment,” etc.)
- 4=Positives, kudos, compliments

The coded technical and content issues (2s) were further organized and provided to the agencies. A dedicated team of state staff members reviewed them in detail and used that input to inform revisions to the draft standards and indicators.

Several summaries of key system and policy issues (1s) raised by stakeholders were prepared. Our consulting team also conducted workshops with state staff to explore these relative to the standards and indicators, system design, and structure. Implementation issues were addressed as they related to content and structure, and other items were tracked for future attention as the process moves forward with Legislative direction.

The remainder of this section summarizes our consulting team’s qualitative analysis of the major technical/content, system, and policy issues raised by stakeholders.

Key Issues

- 1. Support for standards:** In spite of one of the three key questions posed to stakeholders asking how to improve the *standards* to better prepare children for kindergarten, stakeholders overwhelmingly supported the standards and turned their attention instead to proposed changes to the indicators.
- 2. Number and complexity of indicators:** Many participants were concerned that there were too many indicators and some were overly complex or layered, making the system potentially unwieldy.
 - Embedding ERS and CLASS brings richness and rigor to the system but combined with the other indicators increases the number and complexity and becomes confusing. In addition, because many indicators on social/emotional development, creativity, physical and outdoor activities, and those specific to infants and toddlers were included *within* the ERS and CLASS systems, they were not obvious to most participants.
 - Participants also expressed concern that the number of indicators would make it difficult to focus on those that make the most difference for children.
 - Some participants were concerned that the system wasn't yet sufficiently flexible to accommodate programs that were organized under different systems such as Montessori or School Readiness.
- 3. Cultural proficiency:** Neither the general adult population nor individuals working in early childhood programs reflect the racial, ethnic, and linguistic demographics of today's young children. That said, stakeholders representing or serving children of color and in poverty provided important insights into how QRIS indicators can best support high quality early childhood services for children of color and in poverty.
 - Participants serving children of color or in poverty, as well as some other participants, noted that the draft indicators for this topic focused on better communications but did not sufficiently support programs to reach out to and respectfully serve families for whom English is not their first language nor families of all kinds that are "different" from particular providers.
 - It is important to note, however, that most of that frustration was about needing support for this outreach, not about the importance of cultural proficiency.
 - Many stakeholders insisted that cultural proficiency expectations should be baseline – beginning at level one or even included in licensing requirements rather than starting at level two.
- 4. Process transparency and accessibility:** Stakeholders provided considerable input on how to make the process clearer and easier to understand and improve quality. Understanding and analyzing the input was complicated because the state's draft process is based on a block scoring structure while the four-year Parent Aware pilot (with which large numbers of our participants were quite familiar) used a point structure.
 - Many stakeholders proposed alternative pathways up through the levels under each category, also cautioning that such an



approach needed to reduce the number of indicators while it accounted for existing capacity or other resources.

- Some stakeholders had concerns about the extent to which embedded systems like ERS and CLASS, as well as the QRIS indicators, were sufficiently flexible to accommodate the wide variety of programs, providers, and families throughout the state without there being confusing exceptions.
- Stakeholders familiar with ERS and CLASS noted that each uses a different internal scoring or measurement system, and both were different from the proposed block approach, raising concerns about people’s understanding and administration. They also noted that the CLASS was developed for use in classrooms with 3-4 year olds, not for classrooms with infants/toddlers or in family child care settings.

5. **Access to training and support:** Stakeholders in many rural areas and communities in poverty stated clear support for quality programs and better outcomes for children, but were very concerned that those who need this the most are least able to access or afford the requisite training, education programs, health consultants, special needs or mental health resources, dieticians, etc.

6. **Links between early childhood and K-12:** Participants recognized that strong connections between K-12 and early childhood education programs benefit children, families, and both school and early childhood program staff. Many stakeholders didn’t see these connections as being fully articulated in the standards and indicators, and some noted that there was no apparent commitment on the part of the local school districts to respect their work and actively support or sustain such linkages.

7. **Reciprocity and “approved” resources:**

While the consultation process was not focused on implementation, there were many questions and concerns from stakeholders about how this new process will align with state licensing, NAEYC accreditation, school district and School Readiness Program parameters, Head Start requirements, Parent Aware indicators, and the Child Care and Adult Food Program. There was further confusion about the references to “approved” programs, courses, consultants, etc., which were not developed for consideration during the public input process.



8. **Management:** A number of stakeholders noted that program/business management was a critical component of program success but were concerned that it was listed as a standard under professional development without associated indicators; they supported these being developed rather than the standard being dropped.

Appendix

Attached is the handout with the draft standards and indicators that formed the centerpiece of this statewide consultation process.

It was used in this form for the in-person sessions, and participants responded to the following three questions:

- Question 1: How could the indicators across levels 1-5 better align and progress logically up to the standards?
- Question 2: If any of these indicators might be barriers to provider participation, how would you change them to reduce those barriers?
- Question 3: Fundamentally, these standards and indicators are about kindergarten preparedness. How could the standards (below) be improved or changed to better accomplish that?

For the online survey, the sections were divided by standard for ease of response, with respondents answering the same three questions as in the in-person sessions.

Common Program Standards and Quality Indicators for Early Childhood Programs

November 2010

Minnesota’s Kindergarten Readiness Assessment data show that Minnesota has significant challenges in ensuring all children are fully prepared for kindergarten, especially in the developmental areas of mathematical thinking, language, and literacy. Children in poverty and in families where English is not the primary language spoken are at highest risk of entering kindergarten already behind other children, and may spend their entire school experience trying to catch up...sometimes without success. However, decades of research shows that children who attend high quality early childhood programs are much better prepared to enter school and be successful, graduate on time, and go on to college and careers.

For a number of years Minnesota has been working on a quality rating and improvement system in order to provide parents/guardians with more information regarding quality of programs and so that children across the state can benefit from high quality early care and learning programs. The 2009 Legislature took up this effort and directed the Minnesota Department of Education and Department of Human Services to develop

recommendations for common program standards and indicators for a statewide voluntary quality rating and improvement system (QRIS).

Since then, the departments have been developing standards and indicators based on best practice, research, the Minnesota Early Learning Foundation’s Parent Aware QRIS pilot and evaluation, and review by a panel of national experts. This voluntary QRIS applies to family child care, child care centers, and Head Start programs that are licensed and in good standing, and school-based pre-K programs. (Note: A brief explanation of the Environment Rating Scale and the Classroom Assessment Scoring System [CLASS] used in the draft standards and indicators is included in the Frequently Asked Questions.)

We also welcome input via an online survey at the following address: www.surveymonkey.com/s/QRISConsultation. An electronic version of this handout is available at: www.bit.ly/98cUz3. For information about in-person sessions around the state or questions about the process please email Eileen.Nelson@state.mn.us or Deb.Swenson-Klatt@state.mn.us.

Physical Health and Wellbeing				
Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> Provides families with contact information for resources for available vision, hearing, dental, and development screenings Has received at least one onsite Environment Rating Scale consultation unless the program has scored a 3 overall on the Environment Rating Scale Family child care providers have completed approved training on health and safety including child abuse, maltreatment, prevention, and reporting (this is already a licensing requirement for child care center employees) 	<p>All indicators under level 1, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have completed an Environment Rating Scale awareness course unless the program scored a 3 overall on the Environment Rating Scale For programs scoring below a 3 in any one of the Environment Rating Scale subscales, an improvement plan has been submitted for approval 	<p>All indicators under level 2, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have completed approved training on child nutrition or the program participates in the Minnesota Child and Adult Food Program Earns observed score of 3.5 or higher on the Environment Rating Scale 	<p>All indicators under level 3, plus:</p> <ul style="list-style-type: none"> Earns observed score of 4 or higher on Environment Rating Scale 	<p>All indicators under level 4, plus:</p> <ul style="list-style-type: none"> Earns observed score of 4.5 or higher on ERS Full-day programs only: Has an annual consultation with a qualified nutritionist or registered dietician to develop a written nutrition plan Family child care only: Has an annual consultation with a qualified health consultant to update health policies and procedures, identify health and safety issues, and provide a written report

Family Partnerships		a. Communicates with families on a regular basis; b. Supports children's transitions; c. Links families to parent education and comprehensive services		
Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> Refers families to a parent education program such as the Early Childhood Family Education (ECFE) program Refers families to early childhood health and development screening Family child care programs only: Keeps a daily log on topics such as sleeping, feeding, and behavior guidance and shares with parents (this is already a licensing requirement for child care center employees) 	<p>All indicators under level 1, plus:</p> <ul style="list-style-type: none"> Collects and reviews feedback from families on program and services Communicates critical program information with families in the family's primary language Offers orientation meetings for new families that include a discussion about their preferences, including those related to cultural norms and traditions Creates plans for transition between classrooms and for family child care between developmental milestones Refers families to appropriate health care and social services and to "Help Me Grow" for mental health and special education services 	<p>All indicators under level 2, plus:</p> <ul style="list-style-type: none"> Develops and implements action plan to address family feedback on program and services Works with families to create plans for kindergarten transition 	<p>All indicators under level 3, plus:</p> <ul style="list-style-type: none"> Uses a family advisory committee to gather input at least annually Makes family resource and education materials available 	<p>All indicators under level 4, plus:</p> <ul style="list-style-type: none"> Helps families access frequently requested family support services such as child care subsidy, medical assistance, and cash assistance, as needed Provides group parent-education sessions that focus on child development

Teaching and Relationships		a. Promotes and supports the learning and development of all children, including children who are linguistically and culturally diverse, and children with disabilities; b. Demonstrates effectiveness through intentional interactions with children; c. Provides individualized instruction that promotes development and helps close the learning gap so that children perform at age level or higher		
Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> All caregivers/lead teachers have completed a total of at least 8 hours of approved, basic child development training, 2 hours of which is on observing children 	<p>All indicators under level 1, plus:</p> <ul style="list-style-type: none"> Uses lesson plans and a daily schedule All caregivers/lead teachers have completed a total of at least 8 hours of approved training on the Early Childhood Indicators of Progress All caregivers/lead teachers have completed a CLASS awareness course or the equivalent For programs scoring below a 2 in any one of the CLASS domains, has submitted an improvement plan for approval 	<p>All indicators under level 2, plus:</p> <ul style="list-style-type: none"> Uses a curriculum that is aligned with the Early Childhood Indicators of Progress and has completed approved training on implementing curriculum All caregivers/lead teachers have completed a total of at least 4 hours of approved training or equivalent coaching on children's developmental disabilities, special health care needs, and behavioral challenges All caregivers/lead teachers have completed a total of at least 4 hours of approved training or equivalent coaching on supporting social-emotional, language, literacy, mathematical thinking, and physical development in young children Earns observed scores on CLASS: Emotional Support (ES)=4, Instructional Support (IS)=2.5, Classroom Organization (CO)=3.5 If a child has an Individualized Education Plan (IEP) or Interagency Family Services Plan (IFSP), has requested a copy to inform instruction 	<p>All indicators under level 3, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have completed a total of at least 8 hours of approved training or equivalent coaching on children's developmental disabilities, special health care needs, and behavioral challenges All caregivers/lead teachers have completed a total of at least 8 hours of approved training or equivalent coaching on supporting social-emotional, language, literacy, mathematical thinking, and physical development in young children Earns observed scores on CLASS: ES=5, IS=3, CO=4.5 	<p>All indicators under level 4, plus:</p> <ul style="list-style-type: none"> Connects with a kindergarten teacher or school district staff to learn about what is expected of children and the instruction offered in kindergarten, and works toward curriculum alignment Earns observed scores on CLASS: ES=6, IS=3.5, CO=5.5

Assessment of Child Progress				
a. Assesses children by observing and tracking their developmental progress using a research-based assessment tool, and uses those results to individualize instruction; b. Includes families in the assessment process				
Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> • All caregivers/lead teachers have completed training on observation • Observes children regularly and records information at least monthly 	<p>All indicators under level 1, plus:</p> <ul style="list-style-type: none"> • Shares observation summaries with families • Tracks learning using a tool aligned with the Early Childhood Indicators of Progress 	<p>All indicators under level 2, plus:</p> <ul style="list-style-type: none"> • All caregivers/lead teachers have completed training on using an approved assessment tool • Conducts assessment using approved tool at least twice per year on 1/3 of all children in at least the following domains: language and literacy, mathematical thinking, social-emotional development, and physical development • Asks families to share information about child's progress at home • Shares assessment results with families during meetings or family conferences 	<p>All indicators under level 3, plus:</p> <ul style="list-style-type: none"> • Shares assessment results twice per year with families and sets joint goals for children's progress • For a child with an Individualized Education Plan (IEP) or Interagency Family Services Plan (IFSP), shares assessment results with team with family's permission. For a child with a special need who is receiving specialty services (i.e., physical or occupational therapist) shares assessment results with service providers with family's permission. • Conducts assessment using an approved tool for all children twice a year in at least the following domains: language and literacy, mathematical thinking, social-emotional development, and physical development 	<p>All indicators under level 4, plus:</p> <ul style="list-style-type: none"> • Shares assessment results three times a year with families and sets joint goals for children's progress • Conducts assessment using an approved assessment tool for all children three times a year in at least the following domains: language and literacy, mathematical thinking, social-emotional development, and physical development

Professional Development

a. Caregivers/lead teachers, program directors/administrators, education coordinators: Have formal education degrees or credentials in early childhood education or a related field and are engaged in ongoing professional development to ensure current knowledge and skills;
 b. Program directors/administrators have specialized preparation in program administration or business management

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> All caregivers/lead teachers have submitted verified training and professional development credentials 	<p>All indicators under level 1, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have professional development plans 	<p>All indicators under level 2, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have completed at least <i>one</i> of the following: <ul style="list-style-type: none"> 8 early childhood-related, approved semester credits Child Development Associate (CDA) credential from the Council for Early Childhood Professional Recognition All caregivers/lead teachers have completed training in working with families from different cultures and socio-economic levels 	<p>All indicators under level 3, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have completed at least <i>one</i> of the following: <ul style="list-style-type: none"> 16 early childhood-related, approved semester credits 2 early childhood-related, approved semester credits and a Diploma from the Association of Montessori International, or preprimary credential, or primary diploma, or provisional certificate from the American Montessori Society Certificate in Child Development or Early Childhood Education from a community or technical college Child Development Associate (CDA) credential from the Council for Early Childhood Professional Recognition and at least 60 hours of approved coaching/mentoring All caregivers/lead teachers are making progress on their professional development plans For child care centers, school-based preschool programs, and Head Start programs: Education coordinator, director, or lead administrator has a baccalaureate degree with at least 24 early childhood-related, approved semester credits 	<p>All indicators under level 4, plus:</p> <ul style="list-style-type: none"> All caregivers/lead teachers have a baccalaureate degree with at least 24 early childhood-related, approved semester credits or higher All caregivers/lead teachers are making progress on their professional development plans For child care centers, director has a director's credential

Minnesota Early Childhood Quality Rating and Improvement System (QRIS)

Common Program Standards and Indicators

Frequently Asked Questions

- 1. Why is this being done now?** For a number of years Minnesota has been working on a quality rating and improvement system so that children across the state can benefit from high quality early care and learning programs and be better prepared for kindergarten. The 2009 state Legislature took up this effort and directed the Minnesota Department of Education (MDE) and Department of Human Services (DHS) to develop recommendations for common program standards and indicators for a statewide voluntary quality rating and improvement system (QRIS).
- 2. How will QRIS specifically benefit at-risk children?** Minnesota's Kindergarten Readiness Assessment data show that Minnesota has significant challenges in ensuring all children are fully prepared for kindergarten, especially in the developmental areas of mathematical thinking, language, and literacy. Children in poverty and in families where English is not the primary language spoken are at highest risk of entering kindergarten already behind other children, and may spend their entire school experience trying to catch up... sometimes without success. However, decades of research shows that children who attend high quality early childhood programs are much better prepared to enter school and be successful, graduate on time, and go on to college and careers.
- 3. How is the implementation going to work?** The next step is to await action in the 2011 Minnesota Legislature, which will also shape the implementation timeline. If no action is taken, MDE and DHS will continue training and preparing providers for implementation at some unspecified time in the future; if an implementation date is established and funds allocated, the departments will develop detailed implementation plans. Launching a statewide QRIS includes planning for awarding and monitoring ratings, provider improvement supports and incentives, professional development, parent outreach, information and incentives, and system evaluation and funding. This is a work in progress and will require supporting all affected programs as the system progresses.
- 4. How will this affect me? Is this required?** As in the current Parent Aware pilot and in all planning for a future QRIS, participation is voluntary. The framework of common program standards and indicators is designed to include licensed family child care homes, child care centers, and Head Start programs that are licensed and in good standing, and school-based pre-K programs. There are some minor differences in how the standards apply to the different programs; those are noted in the indicators.
- 5. Who determines what "level" a program is? Who gets those results?** There are several important steps in preparing for the program rating process: a) Ensure clarity about the standards and indicators, and the evidence and documentation needed for meeting the indicators; b) train and develop a set of skilled staff to handle the observations and review the documentation; specially trained and reliable observers will conduct and score the Environmental Rating Scale (ERS) and Classroom Assessment Scoring System (CLASS) tools as part of the gathering of program information; c) review and determine a level. Also in this process are opportunities for programs to access support to help understand the process and requirements. Details for implementing a statewide QRIS are not yet developed but the assumption is that to support parent choice, levels will be posted on a QRIS website (as they are in Parent Aware).

Minnesota Early Childhood Quality Rating and Improvement System (QRIS)

Common Program Standards and Indicators

Frequently Asked Questions

- 1. Why is this being done now?** For a number of years Minnesota has been working on a quality rating and improvement system so that children across the state can benefit from high quality early care and learning programs and be better prepared for kindergarten. The 2009 state Legislature took up this effort and directed the Minnesota Department of Education (MDE) and Department of Human Services (DHS) to develop recommendations for common program standards and indicators for a statewide voluntary quality rating and improvement system (QRIS).
- 2. How will QRIS specifically benefit at-risk children?** Minnesota's Kindergarten Readiness Assessment data show that Minnesota has significant challenges in ensuring all children are fully prepared for kindergarten, especially in the developmental areas of mathematical thinking, language, and literacy. Children in poverty and in families where English is not the primary language spoken are at highest risk of entering kindergarten already behind other children, and may spend their entire school experience trying to catch up...sometimes without success. However, decades of research shows that children who attend high quality early childhood programs are much better prepared to enter school and be successful, graduate on time, and go on to college and careers.
- 3. How is the implementation going to work?** The next step is to await action in the 2011 Minnesota Legislature, which will also shape the implementation timeline. If no action is taken, MDE and DHS will continue training and preparing providers for implementation at some unspecified time in the future; if an implementation date is established and funds allocated, the departments will develop detailed implementation plans. Launching a statewide QRIS includes planning for awarding and monitoring ratings, provider improvement supports and incentives, professional development, parent outreach, information and incentives, and system evaluation and funding. This is a work in progress and will require supporting all affected programs as the system progresses.
- 4. How will this affect me? Is this required?** As in the current Parent Aware pilot and in all planning for a future QRIS, participation is voluntary. The framework of common program standards and indicators is designed to include licensed family child care homes, child care centers, and Head Start programs that are licensed and in good standing, and school-based pre-K programs. There are some minor differences in how the standards apply to the different programs; those are noted in the indicators.
- 5. Who determines what "level" a program is? Who gets those results?** There are several important steps in preparing for the program rating process: a) Ensure clarity about the standards and indicators, and the evidence and documentation needed for meeting the indicators; b) train and develop a set of skilled staff to handle the observations and review the documentation; specially trained and reliable observers will conduct and score the Environmental Rating Scale (ERS) and Classroom Assessment Scoring System (CLASS) tools as part of the gathering of program information; c) review and determine a level. Also in this process are opportunities for programs to access support to help understand the process and requirements. Details for implementing a statewide QRIS are not yet developed but the assumption is that to support parent choice, levels will be posted on a QRIS website (as they are in Parent Aware).

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6. **What happens to programs that are already accredited by other organizations?** The extent to which credit may be given for meeting other accreditation requirements or program standards will be determined after the standards and indicators have been finalized in order to ensure alignment.
7. **Will there be any support to help programs, providers, and staff improve?** The Department of Education and Department of Human Services are committed to professional development, including making specific types of training available to programs that enroll in the QRIS. The amount and type of targeted professional development will be dependent on funding, as will the implementation of plans for quality improvement supports.
8. **How does this QRIS relate to the Parent Aware QRIS standards and indicators?** Per Legislative direction, the state Department of Education and Department of Human Services drafted the common program standards and indicators using the Parent Aware pilot as the foundation. Parent Aware is a pilot, and its funding ends June 2011. On 11 November 2010, the Minnesota Early Learning Foundation (MELF) released the year-three evaluation of Parent Aware. The departments will review those results along with the feedback they receive from these in-person and online stakeholder consultations as they finalize their recommendations to the Legislature.
9. **Why do the proposed indicators use two observation tools, the ERS and the CLASS?** These observation tools linked to positive child outcomes were included as indicators to support the QRIS goal of improving the school readiness of children. These two observation tools capture quality by examining the environment in which the child spends his/her day and the interactions between children and adults in

the program/classroom. Observations would be conducted in programs using these tools and the results would be included in assigning a level in the QRIS. These observation tools are especially important because the results identify areas for improvement and supports can then be targeted to improve levels.

There are three Environment Rating Scales (ERS) measuring overall program quality. The Early Childhood Environmental Rating Scale is for child care center classrooms serving children 3-5 years old. The Infant and Toddler Environmental Rating Scale is used in child care centers serving infants and toddlers. The Family Child Care Environmental Rating Scale is for family child care programs serving mixed ages. The ERS are nationally normed, valid, and reliable tools focused on personal care, language and reasoning, interaction, activities, furnishings and display, program structure, and parent and staff needs.

The Classroom Assessment Scoring System (CLASS) is an observation tool developed for teachers of children 3-5 years old. CLASS focuses on the teacher interactions that really matter for children's development. It assesses a teacher's strengths and areas for growth across a wide variety of topics. The Classroom Assessment Scoring System (CLASS) provides a reliable, valid assessment of effective interactions. Research conducted in over 3,000 classrooms concludes that from pre-K programs into the third grade, children in programs with higher CLASS ratings realize greater gains in achievement and social skill development. The CLASS tool includes three domains of quality: emotional support, instructional support, and classroom organization.