2009 CCPRC Annual Meeting Breakout A-4 Thursday, October 29, 2009, 10:30 a.m. - 12:00 p.m.

Are Quality Rating and Improvement Systems Living Up to Their Promises?

Description

Quality Rating and Improvement Systems (QRIS) are designed to achieve multiple goals, including better alignment and coordination of services, standards and incentives in an early childhood system; improved quality of care and education; increased availability of information for parents; and, promotion of children's positive development. The objective of this session was to provide a framework for developing and measuring the expected outcomes of QRIS in each area. A second, complementary objective was to update the audience on existing efforts to support research and evaluation on QRIS.

Presenters proposed a set of key indicators for the outcomes of interest (systems, programs/providers, families and children) and used examples from ongoing research to demonstrate the strength of the existing evidence base (as available). Presentations also addressed issues related to the design and timing of QRIS evaluation (when can long-term outcomes be expected/measured), challenges to consider (how should rating systems be validated, how should child outcomes be included and measures), and the intersection of research with policy (when should findings be used to change QRIS design or implementation parameters).

Moderator

J. Lee Kreader, National Center for Children in Poverty

Presenters

Kimberly Boller, Mathematica Policy Research, Inc. James Elicker, Purdue University Kathryn Tout, Child Trends

Scribe

Karen Ruprecht, Purdue University

1. Documents in Session Folder:

"Logic Model for Quality Rating and Improvement Systems."

2. Summary of Presentations

- Summary of Presentation #1: Kathryn Tout
 - o Logic Model for Quality Rating and Improvement Systems.
 - The logic model provides a graphic representation of QRIS activities and expected outcomes.
 - QRIS has goals at multiple levels, and we want to understand how effective the QRIS is at each level.

- We need to be intentional about specifying activities and having clear indicators that we can track over time at each level: systems, markets, programs, and families and children. We need to track and understand aspects of implementation and the context for QRIS.
- Issue of timing: When can we expect these outcomes? The logic model can
 provide a map of when to expect these types of outcomes. It can help us include
 realistic timelines for achieving outcomes.

• Summary of Presentation #2: Jim Elicker

- Principal investigator for Indiana's Quality Rating System (QRS) evaluation, Paths to QUALITY. The evaluation is in an early phase, collecting process data about implementation from parents and providers, along with child data.
- Assessing child outcomes: Some pressure from funders and advocates to measure child outcomes. It is important to consider the timing for measurement of child outcomes because programs take time to become fully functional. More time may be needed to realize the full impact of outcomes in terms of children's development.
- Challenges of doing large-scale field-based research: This is not a controlled environment. Community-based field studies may have more measurement error simply because of their scope.
- Even when programs are fully functional, some don't have a well-developed theory of change model.
- Valid measures: Do they exist and are we using them? We look for valid measures; they can drive the outcomes we measure, instead of the other way around. Are these measures valid for the settings in which we're using them?
- Broadening child outcomes: We need to look at the quality of life outcomes for children now, as well as in the long term. In Indiana, QRS data is being collected on children's social-emotional development, language, and cognitive development and how children are developing at each level, controlling for family variables.
- Families and parents: Interviewing parents about their level of understanding QRS. What information have they received about QRS? How important is QRS level to their child care choices? Are parents willing to pay more for child care, based on QRS level? A random-digit dial survey of parents is being conducted as well as interviews of parents whose children are with QRS providers.
- Program/provider level issues: Using environmental rating scales and the Arnett scale, Indiana is focusing on specific aspects of quality that QRS intends to improve. Measures are being developed around the ERS and Arnett scales; the measures are good, but more global in nature.
 - Assessing program fidelity: How quickly are providers rated and how quickly do they move through the system?
 - Assessing QRS by different types of providers: Some types of providers are participating more than others; licensed centers and homes are participating, but unlicensed registered ministries are not, although these types of providers outnumber licensed centers.
 - What do we know about nonparticipating providers?

• Summary of Presentation #3: Kim Boller

- Many systems affect children and families: QRS, child welfare, early intervention, etc. How do we understand them and look at different levels across systems?
- We are working in complex adaptive systems; parts are self-organizing and systems aren't replicable (can't necessarily make something happen in one State that works in another).
- We have changing contextual factors; context is not a constant. States are operating in changing economic climates, and this changes what the indicators of effectiveness might be. Throughout the evaluation process, you need to go back to the logic model to understand how activities and outcomes may be affected by changing context.
- There are many "unknowns" or unintended consequences. We can't predict what will happen in this complex adaptive system, but we can develop reasonable hypotheses that can be tested.
- How can we draw conclusions from these systems? We need to look at themes that emerge and identify the commonalities that exist among the QRSs.
- We need to start conducting systems evaluation now to understand the goals and motivations of actors. Activities include policy development and implementation and infrastructure capacity building.
- What can we measure in these studies? Planning influences decisions; operations; training/TA; funding and documentation costs; collaboration; communication; community and political support; evaluation; and what is being changed as a result of investments into systems.
- Currently trying to map QRS systems that will help identify systems goals (i.e., have goals changed from year to year?). We're using site visits, focus groups, and surveys.
- Systems evaluations: What do we know now? How do we study these changes? What are the measures? Can systems level change be measured at the child and family level?

3. Summary of Discussion with Presenters and Participants

- How will we gain access to quality impact findings? In Indiana, data is being collected about key family variables, such as education, income, and use of child care subsidies, controlling for Paths to QUALITY (PTQ) level, and family variables.
- Access issues in terms of eligibility for vouchers. It can be misleading to equate the environment with child outcomes when you look at rates of absenteeism of children in child care settings. Kim Boller is asking staff to document child attendance over time (i.e., How many days was the child expected to be at center? How many days were they there?). These have been difficult data to collect.
- What story can you tell about progress along the way (indicators of progress) to keep funders, providers, and legislators interested? Are more at-risk children showing up at higher rated providers? Are families selecting higher quality care, and is there a shift over time in who is accessing these providers?
- In Ohio, legislators are asking how many providers are rated in their districts.
- Continuously getting information to key decision-makers is important. In Indiana, the State receives reports on each region through the evaluation; other programs may want to consider interim reports to keep decisionmakers in the loop about emerging findings.

- Scales are being used in Indiana: For infants and toddlers, the Mullen Scales of Early Learning and the Brief Infant Toddlers Social Emotional Assessment (BITSEA); for preschoolers, the Peabody Picture Vocabulary Test (PPVT-IV) and the Letter/Word Identification and Applied Problems on the Woodcock Johnson, as well as the Social Competence & Behavior Evaluation (SCBE).
- What measures are you using for dual language learners? In Minnesota, they have languages for which there are no measures (e.g., Hmong). An ELL protocol is used for children who are not able to complete the battery in English. In Indiana, it is not part of the design.

4. Key Themes and Issues

- The idea of complex adaptive systems resonates—this is what QRS is—and it has impacts at several levels. May need to start with systems first, then programs, and then children and families. We need logic models with time dimensions so that outcomes are not expected quickly or simultaneously.
- We need interim outcomes to share with the policy world that are valid, reasonable, and not over-promised. We also need to share outputs because this is important to legislators.
- While it may take time for QRIS to produce child outcomes, now is the time to measure outcomes often and frequently. We need to look at 0-3, age 3 and older, and we need to look at various domains of development.
- Through the Quality Initiatives Research and Evaluation Consortium (INQUIRE), researchers will be developing products for policymaker that address the issues raised in the session.