Integration of QRIS and State Professional Development Systems

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Selected findings from a recent survey about PD/TA in QRISs: Implications for Integration

◆ Spring of this year, conducted survey of 17 states with state-wide QRISs

◆ Focus on features of group professional development and on-site assistance

◆ Key topics included: Targeting and actual use of on-site assistance; types of activities TA providers use in on-site visits; content of on-site and group PD, support for providers of PD/TA

Features of On-site Assistance

♦ Overall, on-site assistance not widely used by lower-rated programs. Few states target lower-rated programs and even those that do report that few programs and home-based providers use on-site assistance.

♦ Typical intensity of on-site assistance is low. Over half the states report that the typical frequency of visits is fewer than monthly or monthly.

♦ Many states reported using some on-site assistance linked to group training, but states also reported that most group training occurs as single day workshops.

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Activities that occur frequently in on-site TA/coaching

- "Talking to teachers or providers about how to improve classroom or home environments….and activities" ~ 82% (14)

- "Talking to a center-based director about how to improve the program and classroom quality" ~ 82% (14)

- "Observing teachers or providers interacting with children and giving guidance and feedback" ~ 59% (10)

- "Modeling best practices for teachers or providers" ~ 35% (6)

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Content Areas that are Focus of PD/TA

♦ The three content areas most often reported as a frequent focus of PD/TA: improving the classroom environment, learning how to conduct classroom assessments, and improving supports for children's social-emotional development.

♦ Some areas key to children's early learning were reported by fewer states: supporting language and early literacy growth (about half); monitoring children's learning and individualizing the curriculum (under a quarter), and helping parents promote children's learning (one state).

Providers of group training/TA (supports and credentials)

♦ Fewer than half the states reported using a formal guide for on-site assistance either for training or as resource for the TA provider.

♦ Participation in state-developed training and reliability on ERS assessments were commonly cited as requirements.

Implications for Integration

- How can states find resources for higher-intensity, on-site assistance? One strategy is to invest less in lower-impact PD and shift resources to potentially higher impact PD. Are some states mapping investments in different kinds of PD across larger PD system, and is this a feasible and possibly valuable strategy?

- What strategies can increase the use of evidence-based practices? Cross-sector training (child care, Pre-k, Head Start, Special Education, early childhood mental health); Use of more standardized tools and resources (training guides, QIP planning protocols, coaching protocols).

- What are the benefits and downsides of standardizing assistance across the larger system?

Thank You!

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