

QRIS 101

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What is a QRIS?

Quality rating and improvement systems, or QRIS, "assess, improve, and communicate the level of quality in early care and education settings." These state systems can be designed for use by all types of early childhood programs—child care centers, family child care homes, Head Start programs, and school-based preschool programs. States can make participation entirely voluntary, or they can make participation mandatory for certain providers, such as those that accept public funding or all programs that are licensed to operate in the state.

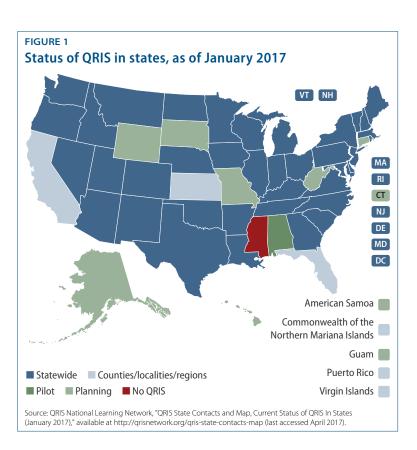
Why are QRIS necessary?

Only 10 percent of early childhood providers across the United States are considered high quality,² and children from low-income families and minority families are more likely to be in lower-quality care.³ QRIS offer a framework to:

- Increase the availability of high-quality programs
- · Deliver ongoing professional development and quality improvement supports to providers
- Strengthen parent understanding of program quality and the importance of high-quality child care and preschool

How common are they?

QRIS were developed in the late 1990s, in large part as a way to direct higher child care subsidy reimbursement rates to higher-quality programs. As of 2017, 49 states and the District of Columbia either have statewide or regional QRIS; are engaged in a pilot phase; or are planning for QRIS. In the past 15 years, QRIS have seen a significant expansion—both because of requirements under the federal Race to the Top – Early Learning Challenge grant⁴ and in response to a growing body of research on early brain development that highlights the importance of high-quality early learning.5



What do QRIS do?

Rate early childhood programs: Programs are rated on a scale, usually with three or five steps, stars, or levels. Each state QRIS is unique, but there are several common domains, or standards, across which programs are rated. The most commonly assessed areas in QRIS are:

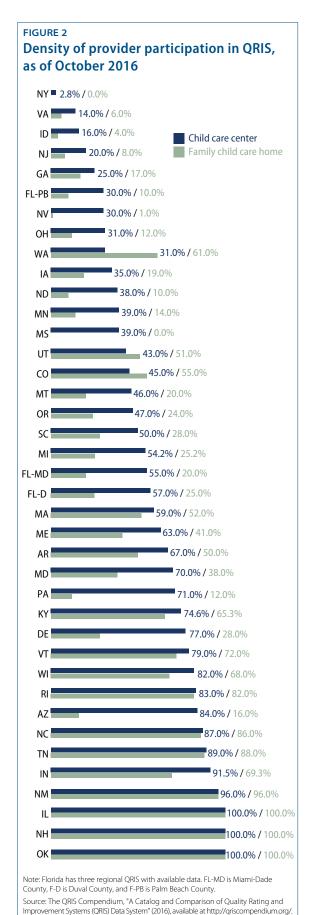
- 1. Staff qualifications and training
- 2. Curriculum
- 3. Environment and interactions
- 4. Family partnerships
- 5. Program administration
- 6. Health and safety
- 7. Child assessment

Direct quality improvement supports: These can be financial in nature—providing bonuses or higher reimbursement rates to reward programs for achieving a high-quality rating or to incentive them to reach a higher rating. They also can take the form of direct assistance to programs, including access to professional development, coaching, mentoring, or technical assistance navigating the QRIS process itself.

Inform parents about quality: QRIS provide parents with details about the quality level of early childhood programs, as well as educating parents and communities about the importance of high-quality child care and preschool in general. This requires communicating the actual rating levels through websites, events, and flyers—but also ensuring parents understand the differences between ratings so that they can make fully informed decisions about their child's care.

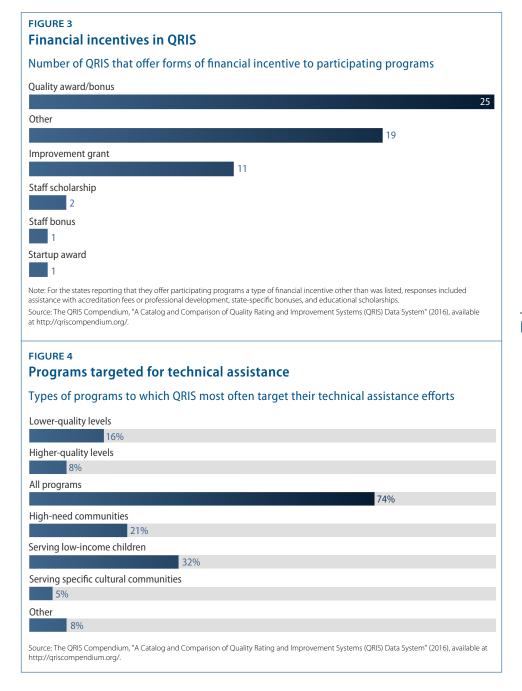
What do QRIS look like across the United States?

Participation rates are low. While three QRIS report 100 percent of eligible providers are participating, in many QRIS, participation is low. In 17 QRIS, less than 50 percent of child care centers participate. Among family child care providers, participation is less than 50 percent in in 23 systems.



Most QRIS offer financial incentives to improve quality. Almost 85 percent of QRIS offer some form of financial incentives, with quality awards and bonuses being the most widespread type.

Technical assistance is widely available for participating providers. Nearly three-quarters of QRIS report that technical assistance is available to all participating providers. Among those QRIS that target their technical assistance support to certain providers, they are most often targeted to programs that serve a significant percentage of lowincome children or programs in high-need communities.



Endnotes

- 1 Anne W. Mitchell, "Stair Steps to Quality: A Guide for States and Communities Developing Quality Rating Systems for Early Care and Education" (United Way and Alliance for Early Childhood Finance, 2005), available at http:// www.earlychildhoodfinance.org/down loads/2005/MitchStairSteps_2005.pdf.
- 2 National Institutes of Health, The NICHD Study of Early Child Care and Youth Development: Findings for Children up to Age 4 1/2 Years (U.S. Department of Health and Human Services 2016), available at https://www.nichd.nih. gov/publications/pubs/documents/seccyd_06.pdf.
- 3 Marianne M. Hillemeier and others, "Quality Disparities in Child Care for At-Risk Children: Comparing Head Start and Non-Head Start Settings," Maternal Child Health Journal 17 (1) (2013): 180-188, available at https://www. ncbi.nlm.nih.gov/pmc/articles/PMC3407821/.
- 4 The BUILD Initiative, "Early Learning Challenge," available at http://www.buildinitiative. org/OurWork/StateandLocal/EarlyLearningChallenge.aspx (last accessed April 2017).
- 5 See for example Harvard University Center on the Developing Child, "InBrief: The Science of Early Childhood Development" (2007), available at http://developingchild.harvard.edu/ resources/inbrief-science-of-ecd/.