

## **B. High-Quality, Accountable Programs**

### **(B)(1) Developing and adopting a common, statewide Tiered Quality Rating and Improvement System. (10 points)**

The extent to which the State and its Participating State Agencies have developed and adopted, or have a High-Quality Plan to develop and adopt, a Tiered Quality Rating and Improvement System that--

(a) Is based on a statewide set of tiered Program Standards that include--

- (1) Early Learning and Development Standards;
- (2) A Comprehensive Assessment System;
- (3) Early Childhood Educator qualifications;
- (4) Family engagement strategies;
- (5) Health promotion practices; and
- (6) Effective data practices;

(b) Is clear and has standards that are measurable, meaningfully differentiate program quality levels, and reflect high expectations of program excellence commensurate with nationally recognized standards<sup>1</sup> that lead to improved learning outcomes for children; and

(c) Is linked to the State licensing system for Early Learning and Development Programs.

*In the text box below, the State shall write its full response to this selection criterion. The State shall include the evidence listed below and describe in its narrative how each piece of evidence demonstrates the State's success in meeting the criterion; the State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

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<sup>1</sup> See such nationally recognized standards as:

U.S. Department of Health and Human Services. (2009). Head Start Program Performance Standards. Washington, DC: U.S. Department of Health and Human Services. PDF retrieved from: 45 CFR Chapter XIII - 1301-1311 <http://eclkc.ohs.acf.hhs.gov/hslc/Head%20Start%20Program/Program%20Design%20and%20Management/Head%2>

[0Start%20Requirements/Head%20Start%20Requirements/45%20CFR%20Chapter%20XIII/45%20CFR%20Chap%20XIII\\_ENG.pdf](#)

U.S. Department of Defense. DoD Instruction 6060.2, Child Development Programs (CDPs), January 19, 1993, certified as current August 25, 1998 (to be updated Fall 2011). Washington, DC: U.S. Department of Defense.

Retrieved from:

[http://www.militaryhomefront.dod.mil/portal/page/mhf/MHF/MHF\\_DETAIL\\_1?section\\_id=20.60.500.100.0.0.0.0.0&current\\_id=20.60.500.100.500.60.60.0.0](http://www.militaryhomefront.dod.mil/portal/page/mhf/MHF/MHF_DETAIL_1?section_id=20.60.500.100.0.0.0.0.0&current_id=20.60.500.100.500.60.60.0.0)

American Academy of Pediatrics, American Public Health association, and National Resource Center for Health and Safety in Child Care and Early Education. (2011) Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Early Care and education Programs. Elk Grove Village, IL; American Academy of Pediatrics.

Evidence for (B)(1):

- The completed table that lists each set of existing Program Standards currently used in the State and the elements that are included in those Program Standards (Early Learning and Development Standards, Comprehensive Assessment Systems, Qualified Workforce, Family Engagement, Health Promotion, Effective Data Practices, and Other), (see Table (B)(1)-1).
- To the extent the State has developed and adopted a Tiered Quality Rating and Improvement System based on a common set of tiered Program Standards that meet the elements in criterion (B)(1)(a), submit--
  - A copy of the tiered Program Standards;
  - Documentation that the Program Standards address all areas outlined in the definition of Program Standards, demonstrate high expectations of program excellence commensurate with nationally recognized standards, and are linked to the States licensing system;
  - Documentation of how the tiers meaningfully differentiate levels of quality.

### ***Summary***

Florida has a strong history of tiered reimbursement through its Gold Seal Quality Care Designation Program which was authorized by the Florida Legislature in 1996. This Gold Seal Quality Care Program must be based on the nationally recognized standards of the National Association for the Education of Young Children (NAEYC), the National Association of Family Child Care, and the National Early Childhood Program Accreditation Commission. Florida has been working toward statewide TQRIS with pilots in seven regions of the state and extensive investment in TQRIS infrastructure over the last three years, to include systems for program assessment, professional development and data collection.

Through Race to the Top-Early Learning Challenge (RTT-ELC) funding Florida will become the first state to apply a high standard of scientific rigor to the evaluation of a statewide

TQRIS to ensure that Gold Seal standards and levels are meaningfully tied to children's outcomes. Florida's high-quality plan for building upon its existing TQRIS system will enable Florida to use data collected as part of the state's TQRIS and other work outlined in the RTT-ELC proposal to inform policy makers and determine what reforms are needed to the early learning system to create stronger outcomes for young children, particularly Children with High Needs. Within the next four years Florida will implement a TQRIS statewide, creating a national model and blueprint to validate that the TQRIS standards and levels equate to strong child outcomes. Using technology to streamline and create efficiencies in the quality improvement process will result in reduced administrative costs so that more funding goes directly toward proven quality improvement strategies and targeted supports for child care businesses and schools.

With RTT-ELC funding Florida will implement a validated, statewide quality rating improvement system that will, within four years, include every legally operating early learning and development program type in the state. Florida's current early learning and development landscape consists of 8,704 centers and 5,587 family child care homes with a collective capacity to serve over 687,000 children; an estimated 6,560 centers, 3,049 family child care homes and 966 public school programs serve an estimated 236,000 children who receive child care subsidies. Leading up to statewide implementation, the state will ensure providers are fully prepared to participate in TQRIS. The programs serving Children with High Needs will receive extra supports as outlined in this proposal so they benefit from high-quality early learning and development programs.

Florida's TQRIS will serve as the nation's TQRIS model by:

- integrating innovative technology strategies to reduce overhead;
- having validated assessment strategies to ensure the TQRIS tiers are tied to meaningful outcomes for children;
- adopting highly effective quality assurance policies and procedures;
- implementing innovative strategies to engage and support families;
- supporting TQRIS with proven data solutions to enhance quality improvement work and investments; and

- employing innovative, effective quality improvement strategies that support businesses that serve large populations of Children with High Needs.

With Florida's diverse population, our plan ensures that cultural diversity and equity are authentically present in the validated standards, implementation strategies, quality improvement supports and outreach to families. Florida's ability to develop a psychometrically validated and reliable TQRIS that reflects cultural practices will make this blueprint invaluable to other states.

The timeline for adopting TQRIS statewide in Florida is as follows (an \* indicates these activities are paid for with funding other than RTT-ELC):

#### Phase 1 (2007-2011):

- Pilot and refine TQRIS in seven pilot communities\*
- Develop professional development system (competencies, registry, etc.)\*
- Create the Early Learning Data System and PLATINUM to enhance data capacity\*
- Build statewide capacity for ASQ and ASQ-SE screenings\*
- Build statewide capacity for Environment Rating Scales (ERS) and CLASS assessments\*

#### Phase II: (January 2012-August 2012)

- Pilot PLATINUM. Take statewide\*
- Train assessors and Assessor Trainers on ERS and CLASS\*
- Finalize TQRIS Pilot Study standards based on extensive input from providers, researchers and other stakeholders
- Design stratified random sampling plan for Pilot Study
- Train providers statewide on ASQ and ASQ-SE, provide kits and access to Enterprise data system
- Further customize PLATINUM based on pilot and program needs
- Finalize curriculum review/approval process to reflect Early Learning and Developmental Guidelines

#### Phase III: (September 2012-August 2013)

- Implement Pilot Study to measure degree to which standards and levels meet TQRIS goals, to include being tied to children's outcomes
- Training on PLATINUM for providers
- Shared services website available for providers who complete PLATINUM training and Registry enrollment
- Start Provider Outreach/Engagement Campaign moving toward statewide implementation of Quality Counts by 2015
- Providers implement ASQ statewide for all children
- Support from coalition for providers on ASQ as needed
- Develop and evaluate licensing/technical assistance models to best support programs

- The Early Learning Data System finalized
- Start rule making process for TQRIS standards/levels that will be implemented in 2015
- Use results of Pilot Study to refine TQRIS standards and levels for Validation Study

Phase IV: (September 2013-August 2014)

- Implement Validation Study to ensure standards and levels meet TQRIS goals, to include being tied to children's outcomes
- Training on PLATINUM for providers
- Shared services website available for providers who complete PLATINUM training and have current Registry enrollment
- Continue Provider Outreach/Engagement Campaign moving toward statewide implementation of Quality Counts by 2015
- Providers implement ASQ statewide for all children
- Support from coalition for providers on ASQ as needed
- Refine and finalize licensing/technical assistance models to best support programs
- Further rule making for Quality Counts standards/levels that will be implemented in 2015
- Revise Early Learning and Developmental Standards to reflect HS Outcomes Framework
- Use results of Validation Study and feedback from stakeholders throughout RTT-ELC project to inform policymakers and rulemaking on final TQRIS standards and levels

Phase V: (September 2014-December 2015)

- Finalize TQRIS standards and levels in rule
- Building from Provider Outreach/Engagement Campaign, provide orientation to new standards to programs throughout state
- Statewide assessment of early learning and development programs
- Shift to new model of licensing/technical assistance as refined in Phases II-IV
- Complete case study documenting systems evolution over RTT-ELC grant and share widely with field

***Context of TQRIS in Florida***

Florida is fully implementing a tiered reimbursement system through the Gold Seal Quality Care Program and piloting its TQRIS in seven counties. The TQRIS includes tiered program standards that reflect best practices in program assessment and quality measures; sets high expectations for program excellence; builds upon state licensing requirements; includes all sectors of early learning and development program types; uses valid and reliable tools implemented by reliable assessors; and provides engaging and publicly available information to families in multiple languages.

The pilot of the TQRIS in seven counties represents phase I for statewide implementation

(see graphic in opening Summary of Section B); this work has occurred since 2005. These TQRIS pilot projects are heavily supported by local Children's Services Councils and early learning coalitions (see Section A for description). These community systems are hubs for innovation and creating strategies to meet local needs and effectively leverage public and private funding for children especially those with high needs.

A diverse group of seven both rural and urban counties currently implement a TQRIS and serve as pilot communities for the state. These counties include Broward (Fort Lauderdale), Duval (Jacksonville), Hillsborough (Tampa), Miami-Dade (Miami), Osceola (Kissimmee), Palm Beach, Pinellas (Clearwater), Polk (Lakeland, Winter Haven), Sarasota and Seminole (Lake Mary/Longwood/Sanford) and represent 53.6% of the state's population of children under the age of six. These pilot TQRIS leaders work closely together through a multi-county collaborative to align their standards and improvement strategies and share best practices.

Together, these county-based TQRIS include 1,614 programs, including 1,124 centers, 273 family child care homes, 137 Head Start and Early Head Start programs and 80 school-based pre-K programs. A total of 82% of these programs overall serve Children with High Needs who receive child care subsidies or have diagnosed special needs.

A total of \$31 million is invested annually in these pilot TQRIS systems. A majority is invested back into program improvements and provider supports for grants/materials, scholarships, training, wage incentives, technical assistance and career counseling and accreditation support (see (B)(4)(c)(1) for the number of programs listed by star level). Florida's strong foundation of implementing the Gold Seal Quality Care Program and the lessons learned from these pilots will inform the statewide TQRIS.

There is a strong commitment to developing a statewide TQRIS and learning from these pilot communities on what best supports providers in attaining and maintaining consistent high-quality standards of care. In 2009 as part of the development of Florida's Early Childhood Framework (see Attachment (B)(1)(1) for a copy of the Framework and list of participants in development process), a diverse group of statewide leaders identified as one of their top priorities to "*Create a statewide quality rating improvement system including support to help programs increase and sustain quality.*" In 2010 early childhood stakeholders including early

learning associations that represent all provider types, early learning coalitions, and governing state agencies worked with the Florida Legislature to pass law supporting implementation of quality rating and improving systems (Section 411.01 (4)(d)3.i., Florida Statutes.)

***(B)(1) Developing and adopting a common, statewide Tiered Quality Rating and Improvement System***

Through RTT-ELC funding, Florida will build from its strong Gold Seal Quality Care Program and pilot TQRIS systems and implement Phases II-V of its plan to create rigorously validated standards and quality levels that are tied to children's outcomes. *(B)(1)(a) Is based on a statewide set of tiered Program Standards*

Florida has a high-quality plan to build on its existing tiered program standards to adopt a validated TQRIS statewide. RTT-ELC funding will allow Florida to implement TQRIS in all legally operating early learning and development program types with a statewide set of tiered Program Standards:

- Validate improved tiered program standards and levels for TQRIS including: use of the state's Early Learning Standards (Standards) for children birth to five-years-old (section 411.01(4)(d)8., Florida Statutes); a comprehensive assessment system applicable to all types of early learning and development programs (section 411.01(5)(c)2.d., Florida Statutes); early childhood educator qualifications aligned to the Florida Career Pathway(section 411.01(5)(c)1.c., Florida Statutes); effective family engagement strategies (section 411.01(2)(a), Florida Statutes); include health promotion practices; and be supported by leading-edge effective data practices (section 411.01(5)(c)1.e., Florida Statutes).
- Ensure TQRIS standards are measurable, meaningfully differentiate program quality levels, and reflect expectations of program excellence through the Pilot and Validation Studies.
- Ensure TQRIS standards are linked to and build upon state licensing requirements.
- Leverage a more efficient licensing system by streamlining inspections.

*Current Status*

The Gold Seal Quality Care Program is currently being implemented statewide as Florida's tiered reimbursement program. These standards must be based on the nationally recognized standards of the National Association for the Education of Young Children (NAEYC), the National Association of Family Child Care, and the National Early Childhood Program Accreditation Commission. The QRIS Multi-County Collaborative has agreed to QRIS standards that are being implemented in the TQRIS pilot sites. These standards for center-based care and family child care are outlined below.



**Table (B)(1)-1a: Status of all Program Standards currently used in the State  
Centers**

Program Standards Elements				
Early Learning and Development Standards	Comprehensive Assessment Systems	Qualified Workforce	Family Engagement	Other
Overall domain weigh 15%	Overall domain weigh 40%	Overall domain weigh 20%	Overall domain weigh 7.5%	Overall domain weigh 10%
<b>CURRICULUM</b>	<b>ITERS</b>	<b>STAFF QUALIFICATION &amp; PROFESSIONAL DEVELOPMENT</b>		<b>RATIOS</b>
One Star	One Star	One Star	One Star	One Star
1.1 A Coalition approved, developmentally appropriate curriculum.	3.00 - 3.49	1.1A Director holds a current Foundational Level Florida Director's Credential.	1.1 A family handbook.	Ratio *Max Group Size
Two Stars	Two Stars	1.1B 1 staff per 20 children enrolled have a DCF Staff Credential, with CDA/CDAE or higher education.	Two Stars	Infants 1:4 N/A
1.2 Lead Teachers have received a minimum of 6 hrs of training on the implementation of the adopted curriculum.	3.55-3.99	1.1C All staff have completed the 40-hour DCF mandated basic training and the 5-hour Early Literacy course (in the allowable time frame).	1.2 A minimum of three modes of communication are used to share child and program information with families.	Ones 1:6 N/A
Three Stars	Three Stars	2.1 100% of Lead Teachers have completed the 40-hour DCF mandated basic training and the 5-hour Early Literacy course (in the allowable time frame)	Three Stars	Twos 1:11 N/A
1.3 All instructional staff employed for 6 months or more have been trained on the use of the adopted curriculum.	4.00-4.49	3.1 100% of Assistant Teachers have completed the 40-hour DCF mandated basic training and the 5-hour Early Literacy course (in the allowable time frame).	Four Stars	Threes 1:15 N/A
Four Stars	Four Stars	4.1 All staff complete 10 hours of annual in-service training.	1.4A Family-teacher conferences to review child's progress and needs and set goals for the child.	4/5s 1:20 N/A
1.4A A developmentally appropriate curriculum is fully implemented in each classroom	4.50-5.49	1.2 Director holds a current Foundational Level (Level I or Level II) Florida Director's Credential.	1.4B Activities are provided for children and families to assist in the transition.	Two Star
1.4B A system	Five Stars	2.2A 100% of Lead Teachers have a HS Diploma or GED.	Five Stars	Ratio *Max Group Size
	5.50-7.00	2.2B 50% have a DCF Staff Credential, with CDA/CDAE or higher education.	1.5A Families have the opportunity to evaluate the provider in writing at least annually.	Infants 1:4 8
	<b>Developmental Screening and referral process is in place for 90% of all children and results are shared with staff and families.</b>	3.2 25% of Assistant Teachers have a DCF Staff Credential or are currently enrolled in a credential program.	1.5B Resources are available to communicate with families in the family's primary language.	Ones 1:6 10
		4.2 50% of all teaching staff complete 15 hours of annual in-service training.	1.5C	Twos 1:11 14
		1.3 Director Level I or Level II Florida Director's Credential.		Threes 1:15 20
		2.3 100% of Lead Teachers have DCF Staff Credential on file documenting CDA/CDAE or higher education.		4/5s 1:20 20
		3.3 50% of Assistant Teachers have DCF Staff		Five Star
				Ratio *Max Group Size
				Infants 1:4 8
				Ones 1:6 10
				Twos 1:11 12
				Threes 1:15 18
				4/5s 1:20 20

<p>for ongoing child observations is in place.</p> <p><b>Five Stars</b></p> <p>1.5 Child assessment guides differentiated program planning and communicating with families.</p>		<p>Credential Recognition or are currently enrolled in a credential program.</p> <p>3.3 <b>50%</b> of Assistant Teachers have DCF Staff Credential Recognition or are currently enrolled in a credential program.</p> <p>4.3 <b>50%</b> of all teaching staff have 20 hrs of annual in-service training.</p> <p><b>Four Stars</b></p> <p>1.4 Director holds a current Advanced Level Florida Director's Credential.</p> <p>2.4 <b>25%</b> of Lead Teachers have an AS in ECE, an AA or higher degree, or 60 credit hrs of college coursework with 18 credits in ECE.</p> <p>3.4 A <b>75%</b> of Assistant Teachers have a HS diploma or GED.</p> <p>3.4 B <b>25%</b> have a DCF Staff Credential, with CDA/CDAE or higher education.</p> <p>4.4 <b>50%</b> of all teaching staff complete 25 hrs of annual in-service training.</p> <p><b>Five Stars</b></p> <p>1.5 Director holds a current Advanced Level Florida Director's Credential and has an AA/AS degree or higher, or 60 credit hrs of college coursework with 18 credits in ECE.</p> <p>2.5 <b>50%</b> of Lead Teachers have an AS in Early Childhood Education, an AA or higher degree, or 60 credit hrs of college coursework with 18 credits in ECE.</p> <p>3.5A <b>100%</b> of Assistant Teachers have a HS diploma or GED.</p> <p>3.5B <b>50%</b> have a DCF Staff Credential, with CDA/CDAE or higher education.</p> <p>4.5 <b>50%</b> of all teaching staff complete 30 hrs of annual in-service training tied to their professional development plan.</p>	<p>Developmental screening and referral process is in place for 90% of all children and results are shared with staff and families.</p> <p>Activity suggestions are developed with staff and families for children identified with potential delays.</p>	<p>Overall domain weigh 7.5%</p> <p><b>STAFF ADMINISTRATION</b></p> <p><b>One Star</b></p> <p>2.1A Risk Management plan.</p> <p><b>Two Stars</b></p> <p>2.2 Personnel policy manual.</p> <p><b>Three Stars</b></p> <p>2.3A Staff meetings are held at least quarterly.</p> <p>2.3B Written performance evaluations are completed annually.</p> <p><b>Four Stars</b></p> <p>2.4A Policies &amp; procedures.</p> <p>2.4B Marketing plan.</p> <p>2.4C Written performance evaluations are completed annually and include classroom observation.</p> <p><b>Five Stars</b></p> <p>2.5A A salary scale is in place and is differentiated by education and experience.</p> <p>2.5B A financial record-keeping system.</p> <p>2.5C Written performance evaluations are completed annually, and include a classroom observation and professional development plan.</p>
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#### RATIONEL FOR RATIOS:

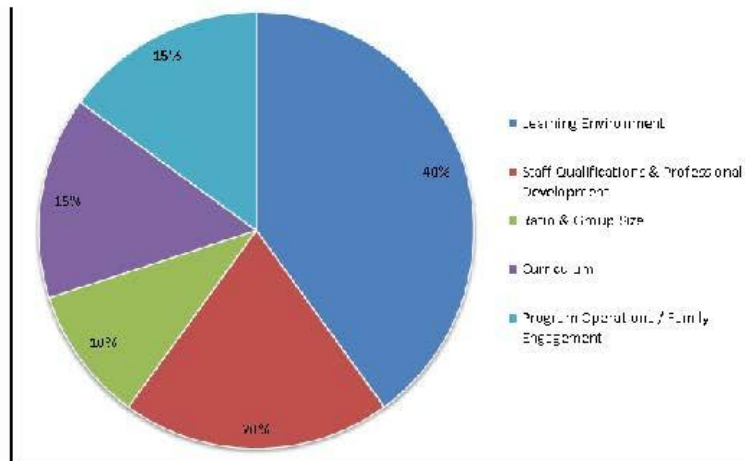
Rich learning environments and positive, pro-social relationships contribute to a child's developmental progress (Kroll, & Rivest, 2000). Structural features of care that support such interactions include better staff child ratios and group size (Kroll, & Rivest, 2000; Zaslow, Calkins, & Halle, 2000). Children are best served and learn more in small group settings with experience dearly childhood professionals who have time to plan for children's individual development. The younger the child, the more individualized the programming must be for quality outcomes (Dwyer, Chait, & McKee, 2000). Smaller group size is associated with greater child initiations, opportunities to work on extending language, mediation of children's social interactions and support for exploration and problem solving (Ghazvini, & Foster, 2004). Programs with lower adult-to-child ratios individualized experiences based on child's needs, provide appropriate care and stimulating learning activities and a safe environment. Children do well when they have numerous opportunities for interaction and bonding with their teacher, and lower ratios and group size allow for those important relationships.

Dwyer, M. Christine; Chait, Robin; & McKee, Patricia. (2000). *Building strong foundations for early learning: Guide to high-quality early childhood education programs*. Washington, DC: U.S. Department of Education, Planning and Evaluation Service.

Ghazvini, A. S., & Foster, B. F. (2004). *Implementing a quality universal prekindergarten program in Florida*. THE POLICY GROUP for Florida's Families and Children. Retrieved on September 15, 2011 from <http://www.policygroup.org/downloads/hupk%20series/2004-B001.pdf>

Kroll, C.K. & Rivest, M. (2000). *Sharing the stories: Lessons learned from five years of Smart Start*. Early Childhood Initiatives in North Carolina.

Zaslow, M., Calkins, J., & Halle, T. (2000). *Background for community-level work on school readiness: A review of definitions, assessments, and investment strategies*. Child Trends.





**Table (B)(1)-1b: Status of all Program Standards currently used in the State  
Family Child Care Homes**

Program Standards Elements				
Early Learning and Development Standards	Comprehensive Assessment Systems	Qualified Workforce	Family Engagement	Other
Overall domain weigh 15%	Overall domain weigh 30%	<b>LICENSING</b>	Overall domain weigh 10%	Overall domain weigh 5%
<b>CURRICULUM</b>	<b>FCCERS-R</b>	Overall domain weigh 20%	<b>FAMILY ENGAGEMENT</b>	<b>Ratios</b>
One Star	One Star	<b>Staff Qualifications- Professional Development</b>	One Star	One Star
Developmentally appropriate curriculum.	Score of 3.0 – 3.49	One Star	Family Handbook.	Meets Licensing requirements
Two Star	Two Star	A. Provider and substitute meet licensing requirements.	Signed acknowledgement of receipt of handbook by parent.	Two Star
Written lesson plans for 3 months.	Score of 3.5 – 3.99	B. Substitute meets licensing requirements.	Two Star	Meets Licensing requirements
Three Star	Three Star	Two Star	Two methods of communication with families including the following: -Individualized daily written communication is sent home with children under age three.	Three Star
Continue to implement a developmentally appropriate curriculum.	Score of 4.0 – 4.49	A. Provider has a H.S. diploma or GED.	OR sent home with children over age three.	Infants only 1:4 Birth-5 1:6 (no more than 2 infants)
All instructional staff employed 6 months or longer have received training on their chosen curriculum.	Score of 4.5 – 5.49	B. 15 hours annual in-service training.	A family meeting/social event/workshop is offered once per year.	3s & 4s only 1:6 Birth-12 1:10 (no more than 1 child <age 2; no more than 5 children <age 5)
Four Star	Four Star	C. Substitute has 2 hours annual in-service.	Three Star	<b>Large FCCH:</b> Infants & 1s only 2:8 Birth-5 2:12 (no more than 3 are < age 2)
Curriculum is fully implemented.	Score of 5.5 – 7.0	Three Star	At least 2 family activities per year provided and 1 parent-teacher conference.	Four Star
Five Star	Overall domain weigh 15%/10%	A. Provider has completed DCF Staff Credential or higher.	Four Star	Infants only 1:3 Birth-5 1:5 (no more than 2 infants)
Child assessment guides differentiated program planning and communicating with families.	<b>DEVELOPMENTAL SCREENING</b>	B. Completed Second Helping or 3 college credit hr course.	Three Star	3s & 4s only 1:6 Birth-12 1:9 (no more than 1 child <age 2; no more than 4 children <age 5)
	One Star	C. 20 hours annual in-service training.	Four Star	<b>Large FCCH:</b> Infants & 1s only 2:8 Birth-5 2:12 (no more than 2 are < age 2)
	Consent for screening is obtained for all children at time of enrollment.	D. Substitute has 4 hours annual in-service.	Three Star	3s & 4s only 2:12
	The provider has received training on Ages & Stages Questionnaire (ASQ).	Four Star	Individualized daily	Five Star
	The ASQ completed on every School Readiness child within 45 days of enrollment and every six months thereafter.	A. Provider has a DCF Staff Credential* or higher and 9 college credits in ECE.		Infants only 1:3 Birth-5 1:5 (no more than 2 infants)
	Parents participate in the completion of the ASQ and are informed of the results.	B. 25 hours annual in-service training.		3s & 4s only 1:6
	Children who fall outside the typical	C. Provider is a current member of a family child care association or other early childhood professional association.		
		D. Substitute has 6 hours annual in-service.		
		Five Star		
		A. Provider has an A.A. or A.S. degree or higher with 18 credits in ECE.		
		B. 30 hours annual in-service training.		
		C. Provider plays an active role in a family child care association or other		

	<p>range of development on two or more ASQ domains are referred for further assessment and/or evaluation.</p> <p><b>Two Star</b></p> <p>The ASQ is completed on all other children (birth to five) enrolled in the program.</p> <p><b>Three Star</b></p> <p>The provider gives written information to all parents regarding developmental milestones.</p> <p><b>Four Star</b></p> <p>The provider has completed a minimum of 3 hrs of training on working with children with special needs.</p> <p><b>Five Star</b></p> <p>The provider has completed a minimum of 3 hours of training annually on working with children with special needs.</p>	<p>early childhood professional association.</p> <p>D. Substitute has 8 hours annual in-service.</p> <p><b>Large FCCH</b></p> <p><b>One Star</b></p> <p>A. Provider and employee meet licensing requirements.</p> <p><b>Employee</b></p> <p>A. Employee meets licensing requirements.</p> <p><b>Two Star</b></p> <p>A. Provider has a H.S. diploma or GED.</p> <p>B. 15 hrs annual in-service training.</p> <p>C. Substitute has 2 hrs annual in-service.</p> <p><b>Employee</b></p> <p>A. Provider has completed Second Helping or 3 college credit hrs course in ECE or Business Management.</p> <p>B. 15 hours annual in-service training.</p> <p><b>Employee</b></p> <p>A. First Aid/CPR.</p> <p>B. Employee has completed 30 hours FCC.</p> <p>C. Employee has completed 5 hour literacy</p> <p>D. 15 hours annual in-service training.</p> <p><b>Three Star</b></p> <p>A. Provider has 6 college credits in ECE</p> <p>B. 10 hours training in Special Needs.</p> <p>C. 20 hours annual in-service training.</p> <p><b>Employee</b></p> <p>A. Employee has H.S. diploma or G.E.D.</p> <p>B. 20 hours annual in-service training.</p> <p><b>Four Star</b></p> <p>A. Provider has 12 college credits in ECE</p> <p>B. 25 hours annual in-service training.</p> <p>C. Join a FCC association or other ECA.</p> <p><b>Employee</b></p> <p>A. 10 hours training in Special Needs.</p>	<p>written communication is sent home with children under age three and a weekly summary of activities is posted OR sent home with children over age three.</p> <p>Opportunities for 2 parent-teacher conferences; information on community resources provided to families.</p> <p><b>Five Star</b></p> <p>Families have opportunity to evaluate the provider in writing at least annually.</p> <p>Resources are available to communicate with families in the family's primary language.</p> <p>Activity suggestions are developed with staff and families for children identified with potential delays.</p> <p>The family child care provider has established at least one method to support children and families transitioning into the FCCH and/or transitioning out of the FCCH into another program or kindergarten.</p>	<p>Birth-12 1:9 (no more than 1 child &lt;age 2; no more than 4 children &lt;age 5)</p> <p><b>Large FCCH:</b></p> <p>Infants &amp; 1s only 2:8 Birth-5 2:12 (no more than 2 are &lt; age 2)</p> <p>3s &amp; 4s only 2:12</p> <p>Overall domain weigh 10%</p> <p><b>ADMINISTRATION</b></p> <p><b>One Star</b></p> <p>Provider meets licensing standards</p> <p><b>Two Star</b></p> <p>Written Policies and procedures as well as a Risk Management Plan.</p> <p>Annual Provider-Parent Agreement</p> <p>Job descriptions</p> <p>Substitute Orientation</p> <p>The provider utilizes at least two public relations tools.</p> <p><b>Three Star</b></p> <p>Standard Business practices are in place to include financial record-keeping for revenue and expense.</p> <p>The provider utilizes at least four public relations tools.</p> <p><b>Four Star</b></p> <p>Annual Budget</p> <p>Marketing Plan</p> <p>Liability insurance</p> <p>There is defined space to conduct the family child care business.</p> <p><b>Five Star</b></p> <p>The provider computer, printer, internet access and email</p> <p>Large FCC-Salary and</p>
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		B. 25 hours annual in-service training. <b>Five Star</b> A. Provider has an A.A. or A.S. degree or higher with 18 credits in ECE.		Benefit structure for employee
		B. 30 hours annual in-service training.		
		C. Provider plays an active role in a family CCA or other EC professional association.		
		<b>Employee</b> A. Employee has DCF staff credential B. 30 hours annual in-service training.		

**Calculating the Overall Star Quality Rating**

The compiled score for each component is multiplied by the “weight” to achieve total points for each component. Points are then summed, and the total point score is placed on a pre-determined range to identify the program’s overall Star quality rating.

**Bonus Points**

Overall Maximum of 3 Bonus Points per provider

- 1 Bonus point will be given if the Provider has a bachelor’s degree or higher and at least 18 credits in ECE/CD
- 2 Bonus points will be given if the Provider has a B.S. degree or higher in ECE/CD.

Component	Score	Weight	Max Total Points
Learning Environment (FCCERS-R)	5	X3	15
Professional Qualifications	5	X2	10
Family Engagement	5	X 1	5
Program Administration	5	X 1	5
Curriculum	5	X1.5	7.5
Developmental Screening	5	X1.5/1	7.5/5
Staff to Child Ratio and Group Size –Local Decision	5	X .5	2.5

<b>Total points</b>	<b>50</b>
<b>Extra Bonus Points (Maximum 3 points)</b>	<b>3</b>
<b>Total Possible Star Rating Points</b>	<b>53</b>

Point range per Star level	
Star Rating	Points
1	4 - 12
2	13 - 24
3	25 - 36
4	37 - 42
5	43 - 50

In addition to supporting and learning from the pilot TQRIS communities, the state of Florida has built important statewide infrastructure over the last three years in preparation for statewide TQRIS implementation, to include developing the following system components.

#### *Early Learning and Developmental Standards*

Florida has Early Learning and Developmental Standards for children birth to five-years-old that are researched-based; developmentally, culturally and linguistically appropriate; aligned to the state's K-12 standards and the national core standards; and appropriate and inclusive for dual language learners (DLLs) and children with disabilities. These standards are the foundation of Florida's early care and education system. See Section (C)(1) for more information on the standards.

The creation and adoption of the integrated standards for birth to age five in 2011 set the stage for the next phase of TQRIS expansion in Florida to align the TQRIS standards to these rigorous expectations of what children should know and be able to do. Through the reforms made possible with RTT-ELC funding, the state's early learning and developmental standards will be a central part of the new TQRIS standards and system. The revised TQRIS standards will each be aligned to the state's Birth to Five Early Learning and Developmental Standards.

#### *Comprehensive Assessment System Capacity*

Florida has methodically developed statewide, comprehensive assessment capacity on screening measures, formative assessment strategies, and program assessments of both the learning environment and adult-child interactions:

- *Screening measures:* Florida law requires all children who receive child care subsidies (approximately 236,000/year in FY 2010/2011) are screened at least once annually. After a thorough review of the psychometric qualities of various screening tools and their appropriateness for the diverse population of Florida's children, the ASQ-3 and ASQ-SE were selected as the statewide screening tool in 2009. Child care subsidy providers receive both training and materials on the ASQ-3 and ASQ-SE. To ensure sustainability, 175 trainers were trained by Brookes Publishing in 2010 to maintain ongoing training capacity. Results of the screenings will be documented in Enterprise (ASQ data system) and interface with PLATINUM (see later in this section for description of PLATINUM) to inform early learning program delivery.

Screening alone will not ensure Children with High Needs receive necessary support. A priority for state systems development and coordination is to provide a more comprehensive assessment in a timely and thorough manner if screening results indicate concerns about special needs. In 2009, the Florida Children and Youth Cabinet identified child screening and assessment as a priority area for coordination across Florida's state agencies serving children. At the request of the Florida Children and Youth Cabinet, The Policy Group for Florida's Families and Children convened a task force of experts and stakeholders to assess the strengths and challenges of the state's system of child screening and assessment and make recommendations for improved coordination. The Florida Children and Youth Cabinet adopted the recommendations, including the creation of a statewide protocol for child screening and sharing of data across state agencies.

The Office of Early Learning, the statewide Developmental Disabilities Council (DD Council) and other departments with responsibility for services for children with special needs are currently developing a statewide protocol for child screening by actively building greater coordination with pediatricians, family practitioners, state agencies and entities to improve screening, assessment and delivery access (see section C for additional detail.)

- *Curriculum and Formative assessments:* Florida law requires child care programs offering child care subsidies implement a developmentally appropriate curriculum (section 411.01(5)(c)2.a., Florida Statutes. Additionally, all low-performing VPK providers must implement an approved, research-based curriculum from the Department of Education's Approved VPK Curricula Packages for Low-Performing Providers. The Department of Education and Florida's Office of Early Learning are collaboratively developing a curriculum review process to ensure approved curricula align to the state's Standards. The offices developed evaluation rubrics and trainings that will begin in November 2011, after the official adoption of the Early Learning and Developmental Standards, anticipated October 18, 2011 through action by The Florida State Board of Education. The curriculum review will be a rolling review in which models are evaluated for their alignment to the Early Learning and Developmental Standards. Providers will continue to have choice in choosing curricula deemed to be aligned to the state-defined learning expectations, as defined by the early learning standards. Publishers will also maintain the ability to submit curricula and revisions as they occur to maximize provider choice in curriculum selection.



There are similar plans to approve formative assessment systems based on alignment with the newly adopted early learning standards in accordance with Section 411.01(5)(c)2.d., Florida Statutes. Currently, there is a prominence of use of Teaching Strategies GOLD, Galileo, and Work Sampling by early childhood educators across the state. There are promising curriculum training models using communities of practice with High/Scope and Creative Curriculum. This work has increased the fidelity of curriculum implementation and Classroom Assessment Scoring System (CLASS) scores in participating programs. The trainings were provided in English and Spanish; extensive materials were developed on the curricula in Spanish to support the professional development needs of Spanish speaking providers and the children they serve, many of whom have been identified as high need. These will be expanded in 2012 through public-private partnerships and complement the RTT-ELC reforms.

- *Program assessment:* In 2010, as part of the Partner's Initiative, providers, early learning coalitions, and governing agencies recognized the significance of teacher child interactions in facilitating optimal child outcomes and agreed to create a more consistent program assessment strategy statewide of the Environment Rating Scales (ERS) and the CLASS. The Office of Early Learning will contract for statewide assessor training, train-the-trainer instruction and orientation models for these tools by the time RTT-ELC awards are announced. Current assessor capacity is outlined in Section (B)(3).

#### *Early Childhood Educator Qualifications*

In the last three years, Florida developed many necessary key elements for a comprehensive early childhood professional development system; these are explained in more detail in Section D:

- *Comprehensive Core Competencies for every role in the field:* Florida has adopted statewide competencies for Early Care and Education (ECE) Practitioners, ECE Directors, Technical Assistance Specialists, Trainers, Career Advisors, and Afterschool Practitioners (see Section (D)(1)).
- *Training and Trainer Registry:* A training and trainer Registry is nearly complete; the system will be available statewide by the end of 2012 (see Section (D)(2)).

- *Trainer/Training Qualifications and Standards:* Comprehensive, evidence-based standards have been adopted statewide and will be used to validate training registered in the training Registry (see Section (D)(2)).
- *Career Pathway:* This whole system, supported by the Florida *Steps to Success* Early Learning Career Pathway, provides both formal and informal routes to increasing knowledge, skills, credentials and degrees (see Attachment (D)(1)-(1)).
- *Career Pathways Training Modules:* Florida has created 315 hours of training in the core competencies (45 hours in each of the seven areas of the competencies) for early childhood educators. These courses were designed to form the foundation for articulation for credentials or college credits (see Section (D)(1)).
- *Commitment to racial equity:* The University of Florida, which has deep expertise on issues of racial equity, is working closely with OEL and the Professional Development Initiative (PDI) Steering Committee to ensure a strength-based approach to diversity and inclusiveness by including *Leading for Racial Equity* training, a research and outcomes-based model for heightening awareness and skills of professionals (see Section (D)(2)).
- *Scholarships:* Florida invests more than \$3 million annually in TEACH scholarships and TQRIS counties invest an additional \$2.9 million in higher education and training scholarships for early childhood practitioners.
- *Wage Stipends:* The TQRIS counties invest more than \$2.3 million annually in WAGES and similar programs to help attract and retain quality early learning professionals.

### *Family Engagement Strategies*

Florida has a strong commitment to engaging and supporting families, particularly of high need children. Specifically, Florida has invested in a number of strategies that designed to ensure early learning and development programs have additional skills and knowledge to support families. Examples of this commitment include:

- The establishment of a statewide training and technical assistance network targeting specialists in Infant/Toddler, Special Needs, After School and School Readiness.
- Florida's Prevention of Child Abuse, Abandonment, and Neglect Plan outlines Florida's Office of Early Learning's commitment to incorporating the Five Protective Factors as a

foundation for work within Florida's early education and care systems by June 30, 2015.

[www.flgov.com/wp-content/uploads/childadvocacy/Section%203%20CAN%20Plan%20Final%202011.01.05.pdf](http://www.flgov.com/wp-content/uploads/childadvocacy/Section%203%20CAN%20Plan%20Final%202011.01.05.pdf)

- Early learning coalitions are conducting specific trainings such as “Communication Skills for Challenging Conversations”, “Parents as Partners”, “Take 5 minutes for fun” to help increase the skills needed for child care providers to actively engage parents into their programs. Early learning coalitions are also partnering with other organizations such as Head Start to implement a community café focused on building the Five Protective Factors among child care providers, parents and the local community organization.

### *Cultural Competence*

Nationwide, Florida has the third highest Hispanic population and the third highest enrollment of Hispanic students from K-12 (Pew Hispanic Center, 2011, <http://pewhispanic.org/states/?stateid=FL>). Similarly, Florida has the largest concentration of Haitians outside of Haiti (The Haitian Times, 2011, <http://www.inmotionaame.org/migrations/>).

These facts make it a priority to ensure culturally competent and responsive care for children, and a culturally competent and responsive TQRIS. Miami-Dade County, which is larger than 16 states and is one of the most diverse communities in the nation, is one of the National Association for the Education of Young Children (NAEYC) pilot projects for the Pathways to Cultural Competence project. Miami-Dade County has the largest TQRIS statewide and is a nationally recognized leader in integrating issues of race, culture and diversity in the standards, professional development of quality improvement staff and overall implementation philosophy.

### *Health Promotion Practices*

Currently, each coalition has determined which health screening practices it implements locally. Some coalitions have focused on vision and hearing while others have focused on dental and even Body Mass Index. As part of RTT-ELC funding to support health promotion the OEL will develop a health screening (section 411.01(2)(a), Florida Statutes) checklist that will

inventory what health services a child has received. Based on the answers to the checklist a provider will be given referral resources to community supports that will help high-needs children be paired with resources that ensure that basic developmental health services can be accessed.

### *Effective Data Practices*

Florida has invested significantly in its data infrastructure over the last several years and by the end of 2013 will have one of the strongest early childhood data systems in the nation. The primary elements of this system are the Early Learning Data System and PLATINUM (Program Leveraging Assessment Technology through Integrated, Networked, Uniform Measures) (see below for more thorough description of each system). These two systems, the Early Learning Data System as the administrative data system and PLATINUM as the program quality Software as a Service (SaaS) solution, provide complete analysis of the child care subsidy program's system. The proposed development of supplemental data systems and interfaces (i.e., Head Start data system and interface to the Early Learning Data System) will allow for a system-wide, comprehensive approach to data access and analysis.

### *THE EARLY LEARNING DATA SYSTEM*

The Early Learning Data System is a web-based data system that accesses, manages, stores, and shares programmatic, administrative, financial and outcome data across departments and funding streams (more detail provided in Section (E)(2)). The Early Learning Data System will replace the twenty-year-old distributed information system that currently supports the work of thousands of child care professionals throughout the state. It will be completed in 2013. More than 387,000 children and their families access the information and resources of Florida's early learning programs each year. The development and implementation of the Early Learning Data System means ensuring accountability for an annual budget of approximately \$1 billion and strengthening the state's early learning programs. A feasibility study estimated a cost savings of over \$28 million a year from enhanced efficiencies in program operations through the Early Learning Data System; these saved funds can serve an additional 7,000 children annually with expanded access to child care subsidies.

## *PLATINUM*

PLATINUM is Florida's statewide quality improvement Software as a Service (SaaS) solution for early learning and development programs. After seeing demonstrations of the systems developed by the TQRIS pilot communities in 2009, early learning coalition directors requested development of a statewide solution. The use of these data solutions are extremely popular with child care businesses as they simplify paperwork, streamline administration and support quality improvement in targeted, effective ways. As part of the State Advisory Council dollars allocated through the Administration for Children and Families, Florida is developing a system for use statewide to support program quality improvement work. With input from coalitions and a detailed examination of the systems used for quality improvement in both Florida and other states, the Office of Early Learning developed a request for proposals for an existing Software as a Service (SaaS) solution that could be implemented statewide; procurement of an existing system will occur by the end of 2011. PLATINUM will be piloted in early 2012 and available statewide by the end of 2012.

PLATINUM will enhance Florida's ability to efficiently capture valid and reliable program assessment data, combined with information from other state and local systems (e.g., licensing, professional development registry) to automatically calculate a program's star rating and create individual program profiles on each center and family child care home. These program profiles will give a summary picture of the key data pieces on the individual program that can be shared with early childhood educators, directors, technical assistance specialists and other local quality improvement teams. All data in PLATINUM also is available in both standardized and customizable reports of statewide, regional or local data.

One of its unique features is that it creates efficiencies relative to the process of quality improvement and effectively measures what best facilitates quality improvement over time. PLATINUM will identify the predictable next steps to meet higher standards. Given the PLATINUM system requirements, programs can use this information to create work plans; this information will then populate an individualized quality improvement plan. All quality investments (training, scholarships, technical assistance, career advising, grants) are documented in PLATINUM and can be used to measure the impact of these investments on program quality

over time. Deployed statewide, this will help Florida, local early learning coalitions, and providers determine what investments create quality improvements and how they add value to small businesses.

In 2012 with PLATINUM, Florida will have statewide data available to streamline all areas of program documentation, program assessment, development of quality improvement plans and documentation of progress toward goals to inform future quality improvement investments and create provider and statewide administrative efficiencies. With RTT-ELC funding Florida can maximize this tool and integrate PLATINUM into its statewide TQRIS, providing a bold new model for maximizing resources. Collectively, PLATINUM and the Early Learning Data System and the high-quality plan outlined in this section, will enable Florida to expand its existing TQRIS statewide, document its impact and implement a series of leading edge innovations that will be the model for the nation of the next generation of TQRIS for early learning and development programs.

#### *Plans for Transformative Reform*

There is statewide commitment from the early learning coalitions, Children's Services Councils, provider groups and leadership at the state level that the TQRIS program standards will include: the Early Learning and Developmental Standards; formative assessment and ongoing anecdotal records; measures of environmental quality using the Environment Rating Scales; measures of adult-child interactions using the CLASS tools; early childhood educator qualifications aligned to the Florida Career Pathway (informal and formal pathways); family engagement strategies; health promotion; and meaningful measures of cultural competence. Throughout Phases II-V of this high-quality plan there will be significant opportunities for provider input and provider association contributions in order to support best business practices. Once the Office has completed the TQRIS Pilot Study it will submit findings to Florida's Governor's Office, Senate President, and Speaker of the House of Representatives prior to engaging in the rulemaking process. This will result in significant and sustained opportunity for provider engagement to inform standards and ensure they are supportive of small businesses throughout the period of RTT-ELC funding.

As outlined in the opening summary of Section B, Florida has a five-phase plan for ensuring the TQRIS program standards and levels meaningfully differentiate program quality and are predictive of children's outcomes. The existing tiered program standards created in Phase I (see tables (B)(1)-1a and (B)(1)-1b) will be built upon to include additional key measures strongly correlated to children's outcomes.

In Phase II additional elements (teacher-child interactions, formative assessment, early learning and developmental standards, health promotion) will be factored into the TQRIS. Draft standards for the Pilot Study are provided in tables (B)(1)-1c and (B)(1)-1d.

**Table (B)(1)-1C: Draft Program Standards for Pilot Study  
Centers**

**Table (B)(1)-1C: Draft Program Standards for Pilot Study  
Centers**

Program Standards Elements

1 star = Meets licensing requirements

2 star = meet School Readiness Contract requirements

3 star = Gold Seal Accredited OR meets requirements for 3 star program as outlined below

4 star = Gold Seal Accredited *and* meets 4 star CLASS score requirements OR meets all requirements for 4 star program as outlined below

5 star = Gold Seal Accredited *and* meets 5 star CLASS score requirements OR meets all requirements for 5 star program as outlined below

*Standards are cumulative. Requirements for all previous level must also be met.*

*\*\* - if a Program is Gold Seal accredited in Florida these requirements will be waived for Star designation*

*Integration of ERS TBD in Phase II*

**STANDARDS, WEIGHTING PER ELEMENT AND CALCULATIONS OF SCORES TO BE FINALIZED IN PHASE II**

Early Learning and Development Standards	Comprehensive Assessment Systems	Early Childhood Educator Qualifications**	Family Engagement Strategies**	Other**
<p><i>Overall domain weight TBD in Phase II</i></p> <p><b>CLASS</b></p> <p><b>Three Stars</b></p> <p>100% of staff complete 5 hr. orientation to Florida standards training within 6 months of employment</p> <p><b>Four Stars</b></p> <p>50% of staff complete 15 hours of standards training on how to use standards to inform assessment, program planning</p> <p><b>Five Stars</b></p> <p>100% of staff complete 15</p>	<p><i>Overall domain weight TBD in Phase II</i></p> <p><b>CLASS</b></p> <p><b>Three Stars</b></p> <p>Director and at least 50% of staff complete training on CLASS and self-study on classrooms using Toddler and PreK CLASS</p> <p><i>CLASS score requirements</i></p> <p>ES: 4.0-4.49</p> <p>CO: 4.0-4.49</p> <p>IS: 3.0-3.49</p> <p><b>Four Stars</b></p> <p><i>CLASS score requirements</i></p> <p>ES: 4.5-4.99</p> <p>CO: 4.5-4.99</p> <p>IS: 3.5-4.0</p> <p><b>Five Stars</b></p> <p><i>CLASS score requirements</i></p> <p>ES: 5.0-5.49</p> <p>CO: 5.0-5.49</p> <p>IS: 4.0-4.49</p>	<p><i>Overall domain weight TBD in Phase II</i></p> <p><b>Three Stars</b></p> <p>Director Level I or Level II Florida Director's Credential.</p> <p>100% of Lead Teachers have DCF Staff Credential on file documenting CDA/CDAE or higher education.</p> <p>50% of Assistant Teachers have DCF Staff Credential Recognition or are currently enrolled in a credential program.</p> <p>50% of Assistant Teachers have DCF Staff Credential Recognition or are currently enrolled in a credential program.</p> <p>50% of all teaching staff have 20 hrs of annual in-service training.</p> <p><b>Four Stars</b></p> <p>Director holds a current Advanced Level Florida Director's Credential.</p> <p>25% of Lead Teachers have an AS in ECE, an AA or higher degree, or 60 credit hrs of college coursework with 18 credits in ECE.</p> <p>75% of Assistant Teachers have a</p>	<p><i>Overall domain weight TBD in Phase II</i></p> <p><b>Three Stars</b></p> <p>Family handbook provided to all families.</p> <p>A minimum of three modes of communication are used to share child and program information with families.</p> <p>At least two family involvement activities are provided each year.</p> <p><b>Four Stars</b></p> <p>All written and verbal communication provided in family's preferred language.</p> <p>Family-teacher conferences held 2x/year to review child's progress and needs and set goals for the child.</p> <p>Score of 40% on Pathways to Cultural Competence Project Teacher and Program checklists</p> <p><b>Five Stars</b></p>	<p><i>Overall domain weight TBD in Phase II</i></p> <p><b>HEALTH PROMOTION PRACTICES</b> <i>TBD in Phase II</i></p> <p><b>Two Stars</b></p> <p><b>Three Stars</b></p> <p><b>Four Stars</b></p> <p><b>Five Stars</b></p> <p><b>STAFF ADMINISTRATION</b> <i>TBD in Phase II</i></p> <p><b>Three Stars</b></p> <p>Risk Management plan Personnel policy manual.</p> <p>Staff meetings are held at least quarterly.</p> <p>Written performance evaluations are completed annually.</p> <p><b>Four Stars</b></p> <p>Policies &amp; procedures.</p>



<p>hours of standards training on how to use standards to inform assessment, program planning within 6 months of employment</p>	<p><b>Developmental Screening**</b>  <b>Three Stars</b>  ASQ-3 and ASQ-SE screenings completed annually on all children in program; referrals provided if additional assessment needed  <b>Four Stars</b>  Screening results shared with families; referrals for additional assessment followed up on.  <b>Five Stars</b>  Screening results shared with families along with suggested activities to do at home.</p> <p><b>Formative Assessment</b>  <b>Three Stars</b>  Coalition approved, developmentally appropriate curriculum implemented. Lead Teachers have received a minimum of 6 hrs of training on the implementation of the adopted curriculum. Instructional staff employed for 6 months or more have been trained on the use of the adopted curriculum.  <b>Four Stars</b>  An approved, online observation-based assessment system for documenting ongoing child observations is in place and used at least 3x/year.  <b>Five Stars</b></p>	<p>HS diploma or GED.  25% have a DCF Staff Credential, with CDA/CDAE or higher education.  50% of all teaching staff complete 25 hrs of annual in-service training.  <b>Five Stars</b>  Director holds a current Advanced Level Florida Director's Credential and has an AA/AS degree or higher, or 60 credit hrs of college coursework with 18 credits in ECE.  50% of Lead Teachers have an AS in Early Childhood Education, an AA or higher degree, or 60 credit hrs of college coursework with 18 credits in ECE.  100% of Assistant Teachers have a HS diploma or GED.  50% have a DCF Staff Credential, with CDA/CDAE or higher education.  50% of all teaching staff complete 30 hrs of annual in-service training tied to their professional development plan.</p>	<p>Families have the opportunity to evaluate the provider in writing at least annually.  Score of 60% on Pathways to Cultural Competence Project Teacher and Program checklists</p>	<p>Marketing plan.  Written performance evaluations are completed annually and include classroom observation.  <b>Five Stars</b>  A salary scale is in place and is differentiated by education and experience.  Financial record-keeping system.  Written performance evaluations are completed annually, and include a classroom observation and professional development plan.</p>
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	Regular observation guides differentiated program planning and providing results to families with recommendations for activities to do at home.			
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Table (B)(1)-1d

**Table (B)(1)-1D: Draft Program Standards for Pilot Study**  
**Family Child Care Homes**  
 Program Standards Elements  
 1 star = Meets licensing requirements  
 2 star = meet School Readiness Contract requirements  
 3 star = Gold Seal Accredited OR meets requirements for 3 star program as outlined below  
 4 star = Gold Seal Accredited *and* meets 4 star CLASS score requirements OR meets all requirements for 4 star program as outlined below  
 5 star = Gold Seal Accredited *and* meets 5 star CLASS score requirements OR meets all requirements for 5 star program as outlined below  
*Standards are cumulative. Requirements for all previous level must also be met.*

\*\* - if a Program is Gold Seal accredited in Florida these requirements will be waived for Star designation  
**STANDARDS, WEIGHTING PER ELEMENT AND CALCULATIONS OF SCORES TO BE FINALIZED IN PHASE II**

Program Standards Elements				
Early Learning and Development Standards	Comprehensive Assessment Systems	Qualified Workforce	Family Engagement	Other
<i>Overall domain weight TBD in Phase II</i>	<i>Overall domain weight TBD in Phase II</i>	<i>Overall domain weight TBD in Phase II</i>	<i>Overall domain weight TBD in Phase II</i>	<b>Health</b> <i>TBD in Phase II</i>
<b>Three Stars</b>	<b>FCCERS-R or CLASS</b> <i>TBD in Phase II</i>	<b>Staff Qualifications- Professional Development</b>	<b>FAMILY ENGAGEMENT</b>	<i>Three Star</i>
5 hr. orientation training on Florida standards completed within 6 months of opening home	Three Star	Three Star	Three Star	<i>Four Star</i>
Four Stars	Score of 4.0 – 4.49	Provider has completed DCF Staff Credential or higher.	Two methods of communication with families including the following:	<i>Five Star</i>
Five Stars	Score of 4.5 – 5.49	Completed Second Helping or 3 college credit hr course.	-Individualized daily written communication is sent home with children under age three.	<b>ADMINISTRATION</b>
10 hours of standards training on how to use standards to inform observations, program planning	Five Star	20 hours annual in-service training.	-A weekly summary of activities is posted OR sent home with	<i>Three Star</i>
Five Stars	NAFCC Accredited	Substitute has 4 hours annual in-service.		<i>Written Policies and procedures as well as a Risk Management Plan.</i>
	<b>DEVELOPMENTAL SCREENING</b>	Four Star		<i>Annual Provider-Parent Agreement</i>
	Three Star	Provider has a DCF Staff Credential* or higher and 9 college credits in ECE.		<i>Job descriptions</i>
	ASQ-3 and ASQ-SE is completed on all children enrolled in	25 hours annual in-service training.		<i>Substitute Orientation</i>
		Provider is a current member of a		

<p>NAFCC Accredited</p>	<p>program. The provider gives written information to all parents regarding developmental milestones.</p> <p><b>Four Star</b></p> <p>The provider has completed a minimum of 3 hrs of training on working with children with special needs. Referrals for further assessment provided if special needs suspected.</p> <p><b>Five Star</b></p> <p>NAFCC accredited</p>	<p>family child care association or other early childhood professional association.</p> <p>Substitute has 6 hours annual in-service.</p> <p><b>Five Star</b></p> <p>NAFCC Accredited</p> <hr/> <p><b>Large FCCH</b></p> <p><b>Three Star</b></p> <p>Provider has 6 college credits in ECE</p> <p><b>10 hours training in Special Needs.</b></p> <p><b>20 hours annual in-service training.</b></p> <p><b>Employee</b></p> <p>Employee has H.S. diploma or G.E.D.</p> <p><b>20 hours annual in-service training.</b></p> <p><b>Four Star</b></p> <p>Provider has 12 college credits in ECE</p> <p><b>25 hours annual in-service training.</b></p> <p>Join a FCC association or other ECA.</p> <p><b>Employee</b></p> <p><b>10 hours training in Special Needs.</b></p> <p><b>25 hours annual in-service training.</b></p> <p><b>Five Star</b></p> <p>NAFCC Accredited</p>	<p>children over age three.</p> <p>A family meeting/social event/workshop is offered once per year.</p> <p>At least 2 family activities per year provided and 1 parent-teacher conference.</p> <p>Resources and materials in family's preferred language.</p> <p><b>Four Star</b></p> <p>Three methods of communicating with families including the following:</p> <p>Individualized daily written communication is sent home with children under age three and a weekly summary of activities is posted OR sent home with children over age three.</p> <p>Opportunities for 2 parent-teacher conferences; information on community resources provided to families.</p> <p><b>Five Star</b></p> <p>NAFCC Accredited</p>	<p><i>Standard Business practices are in place to include financial record-keeping for revenue and expense.</i></p> <hr/> <p><i>The provider utilizes at least four public relations tools.</i></p> <p><b>Four Star</b></p> <p><i>Annual Budget</i></p> <p><i>Marketing Plan</i></p> <p><i>Liability insurance</i></p> <p><i>There is defined space to conduct the family child care business.</i></p> <hr/> <p><i>The provider computer, printer, internet access and email</i></p> <hr/> <p><i>Large FCC-Salary and Benefit structure for employee</i></p> <p><b>Five Star</b></p> <p><i>NAFCC Accredited</i></p>
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In Phase II (see timeline in opening Summary of Section B) these program standards, levels and points per section will be refined and finalized within the first seven months of RTT-ELC funding using results from research, best practices in field, statewide input from early childhood educators and the existing standards in place in Florida's Gold Seal Quality Care programs and pilot TQRIS. State and national experts with expertise in psychometrics and program quality and child outcomes will work together to define the quality tiers for the Pilot Study (Phase III) and Validation Study (Phase IV), refine the standards and the tiers as needed to determine the final tiered program standards for TQRIS (see Section (B)(5)(a) and (b) for description of Pilot and Validation studies). Completing these standards is a central part of Phase II (see timeline Summary at beginning of Section B) of statewide TQRIS implementation and

will be completed within the first seven months of RTT-ELC funding.

In addition to the tentative new TQRIS standards and levels, important reforms will be made possible with RTT-ELC funding related to integrating the early learning and developmental standards, a comprehensive assessment system and effective data practices that are outlined below.

### *Early Learning and Developmental Standards*

Florida's Early Learning and Developmental Standards (section 411.01(4)(d)8., Florida Statutes) will continue to serve as the foundation of all of the state's programmatic standards, ensuring consistent alignment to learning expectations, and will be integrated into TQRIS to increase use of the standards. In this high-quality plan, we will provide Early Learning and Developmental Standards training across the state to all categories of programs, child care subsidy, VPK, Head Start, and private non-subsidy programs (see Section C). Since the Head Start program aligned program expectations to a separate, but related set of standards, tools for the Head Start community will be developed through RTT-ELC funding to assist in compliance of the state's early learning and developmental standards.

When the state approaches a revision of its early learning and developmental standards in 2014, it will convene a multi-disciplinary, multi-programmatic team of early childhood education experts to refine the standards using the Head Start Child Outcomes Framework in the design. Before, standards were developed independent of the Head Start Child Outcomes Framework. In this high-quality plan we will start with the existing standards, the Head Start Child Outcomes Framework and updated research all together to streamline revisions. For more detail regarding the state's quality plan for early learning and developmental standards, see Section C.

### *Formative assessment*

As outlined above, Florida is developing a system to approve formative assessment systems (section 411.01(5)(c)2.d., Florida Statutes). The purpose for utilizing a research-based curricula and ongoing assessments is two folded: 1) to create a system of accountability that can report information about children's outcomes, and 2) to identify areas of achievement and

improvement to assure the quality of the preschool experience for all children. When early learning programs share this information with the QRIS, support can be provided to early learning programs for improvement.<sup>1</sup> To provide valuable, reliable findings, anecdotal assessments must be standardized or must utilize consistent evaluation and data-collection methodologies across programs and localities. These assessments must involve all students, including Children with High Needs, English language learners and children with disabilities, and must be appropriate for measuring gains across diverse backgrounds, cultures, and ability levels.<sup>2</sup> A research based curriculum with an ongoing assessment companion provides tools for practitioners to plan and guide instruction, and for QRIS to follow processes of accountability and quality assurance.<sup>3</sup> With these tools practitioners can collect data over a variety of contexts and over time to gain a more valid and reliable picture of what children know and can do.<sup>4</sup>

Formative assessment models that include the state's early learning and developmental standards and data reporting capabilities will be approved by the state for early childhood educators to inform instruction throughout the year. This standardization of formative assessment expectations and data reporting allows for concurrent validation of assessment models in real time (see Section C for fuller description). This level of scientific rigor will allow all programs in the state to have feedback on the most effective formative assessment approaches.

#### *A Comprehensive Assessment System: Screening Measures*

Nearly half of children with special needs are not diagnosed prior to school entry, which means they miss important early intervention opportunities.<sup>5</sup> Consistent screening (section

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<sup>1</sup> Tout, K., Starr, R., Soli, M., Moodie, S., Kirby, G., & Boller, K. (2010). *Compendium of Quality Rating Systems and Evaluations*. Child Trends & Mathematica Policy Research. Retrieved on 10/19/2010 from [http://www.acf.hhs.gov/programs/opre/cc/childcare\\_quality/compendium\\_qrs/qrs\\_compendium\\_final.pdf](http://www.acf.hhs.gov/programs/opre/cc/childcare_quality/compendium_qrs/qrs_compendium_final.pdf)

<sup>2</sup> National Research Council. (2008). *Early Childhood Assessment: Why, What, and How*. Committee on Developmental Outcomes and Assessments for Young Children, C.E. Snow and S.B. Van Hemel, *Editors*. Board on Children, Youth, and Families, Board on Testing and Assessment, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.

<sup>3</sup> Tout, K., Starr, R., Soli, M., Moodie, S., Kirby, G., & Boller, K. (2010). *Compendium of Quality Rating Systems and Evaluations*. Child Trends & Mathematica Policy Research. Retrieved on 10/19/2010 from [http://www.acf.hhs.gov/programs/opre/cc/childcare\\_quality/compendium\\_qrs/qrs\\_compendium\\_final.pdf](http://www.acf.hhs.gov/programs/opre/cc/childcare_quality/compendium_qrs/qrs_compendium_final.pdf)

<sup>4</sup> National Research Council. (2008). *Early Childhood Assessment: Why, What, and How*. Committee on Developmental Outcomes and Assessments for Young Children, C.E. Snow and S.B. Van Hemel, *Editors*. Board on Children, Youth, and Families, Board on Testing and Assessment, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.

<sup>5</sup> Glascoe, F. P. (2000). Evidence-based approach to developmental and behavioural surveillance using parents' concerns. *Child: Care, Health and Development*. Volume 26, Issue 2, pages 137–149, March 2000.

411.01(5)(c)2.c., Florida Statutes) using reliable tools can identify children who need further assessment. Building on existing ASQ-3 and ASQ-SE screening capacity, all children in TQRIS programs will be screened annually using these screening tools. The way screening and referral will be integrated into the updated TQRIS standards is outlined in tables (B)(1)-1c and -1d. The child care subsidy program has already adopted ASQ-3 and ASQ-SE into practice. Early learning coalitions will offer regular screening tool trainings and follow up support for programs requesting technical assistance with the new tools. ASQ materials and training will be made available and programs will be encouraged to use these tools for statewide consistency. In addition to the statewide, cross-program adoption of these tools, Florida will expand statewide the use of the Enterprise solution, an online data system developed for the ASQ-3 and ASQ-SE, so that consistent reporting of screening data are provided and interfaced with other data systems.

RTT-ELC funding will reduce the time between a child's screening and the need for further assessment and intervention. New collaborations and partnerships will ensure that children receive early intervention services to remedy their delay. Streamlined data sharing with Part B and Part C will eliminate system failure delays and allow for sharing of profiles of children (with parental permission) to render services more efficiently and effectively. See Section (C)(2) for more details.

#### *A Comprehensive Assessment System: Measures of Environmental Quality*

Other studies show, a positive association between ECERS scores and children's language and communication skills,<sup>6,7</sup> reading, cognitive development and math scores.<sup>8</sup> Using

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6 Burchinal, M. R., Peisner-Feinberg, E., Bryant, D. M., & Clifford, R. (2000). Children's social and cognitive development and child-care quality: Testing for differential associations related to poverty, gender, or ethnicity. *Applied Developmental Science, 4*, 149-165.

7 Burchinal, M. R., Roberts, J. E., Nabors, L. A., & Bryant, D. M. (1996). Quality of center child care and infant cognitive and language development. *Child Development, 67*, 606-620.

8 Burchinal, M. R., Peisner-Feinberg, E., Bryant, D. M., & Clifford, R. (2000). Children's social and cognitive development and child-care quality: Testing for differential associations related to poverty, gender, or ethnicity. *Applied Developmental Science, 4*, 149-165

ECERS, a stronger relationship was found between child care quality and children's academic, language, and social development on items focusing on instruction and interactions.<sup>9</sup> More information on the ERS is provided in Section (B)(3).

#### *A Comprehensive Assessment System: Measures of Adult-Child Interactions*

Numerous large-scale studies have shown that the quality of teacher-child interactions has a predictive effect on children's social competence and level of behavior problems as well as language, reading and math skills. These effects are particularly strong for low-income children.<sup>10 11</sup> More information on the CLASS is provided in Section (B)(3).

#### *Family Engagement*

Longitudinal research shows that through high school, family involvement contributes to positive results for students.<sup>12 13 14 15 16</sup> Early childhood is a uniquely effective time to engage

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9 Burchinal, M. R., Kainz, K., Tout, K., Zaslow, M., Martinez-Beck, I., et al. (2009). Early care and education quality and child outcomes. Office of Planning, Research and Evaluation Research-to-Policy Brief #1.

10 Burchinal, M., Vandergrift, N., Pianta, R., & Mashburn, A. (2010). Threshold analysis of association between child care quality and child outcomes for low-income children in pre-kindergarten programs. *Early Childhood Research Quarterly*, 25(2), 166–176.

11 Curby, T. W., LoCasale-Crouch, J., Konold, T. R., Pianta, R. C., Howes, C., Burchinal, M., Bryant, D., et al.

(2009). The Relations of Observed Pre-K Classroom Quality Profiles to Children's Achievement and

Social Competence. *Early Education & Development*, 20(2), 346–372.

12 Catsambis, S. (2001) Expanding knowledge of parental involvement in children's secondary education: Connections with high school seniors' academic success. *Social Psychology of Education*, 5, 149-177.

13 Epstein, J. L. & Sheldon, S. B. (2002). Present and accounted for: Improving student attendance through family and community involvement. *Journal of Educational Research*, 95, 308-318. Epstein & Van Voorhis, 2001; *Reflecting on the Homework Ritual: Assignments and Designs*. Theory Into Practice - Volume 43, Number 3, Summer 2004, pp. 205-212.

14 Sheldon, S. B. & Epstein, J. L. (2005a). Involvement counts: Family and community partnerships and math achievement. *Journal of Educational Research*, 98, 196-206.

15 Sheldon, S. B & Epstein, J. L. (2005b). School programs of family and community involvement to support children's reading and literacy development across the grades. In J. Flood and P. Anders (Eds.), *Literacy Development of Students in Urban Schools: Research and Policy* (pp. 107-138). Newark, DE: International Reading Association (IRA).

16 Harvard Family Research Project: Family Involvement that Makes a Difference. Spring 2006



families; when strengthened it can have a predictive effect on children's academic achievement and social development.<sup>17</sup> Particularly for high need children, parent participation in early learning programs (e.g., parent-teacher conferences, extended program visits, helping with program activities) and regular communication between families and teachers are positively associated with children's language, self-help, social, motor, adaptive, and basic school skills.<sup>18</sup> Florida will enhance and validate its family engagement TQRIS standards to ensure they positively relate to children's outcomes.

### *Cultural Competence*

Florida is committed to culturally responsive care for children and a culturally responsive TQRIS. While there is philosophical consensus that culturally responsive care and systems matter for children, there is little research evidence on this topic.<sup>19</sup> Culturally responsive care should be embedded in the standards for TQRIS to ensure the systems are best serving families and communities,<sup>20</sup> yet there are is nearly no rigorous research or guidance on this topic for state systems.<sup>21</sup> Building from the Culturally Competent Pathways project with NAEYC, guidance and feedback of national experts, local experience, and feedback from providers and families, Florida will ensure that TQRIS meets the needs of all children, families and providers. These standards, levels and quality improvement incentives will be validated through the Pilot and Validation studies, helping to fill a critical gap in the early learning and development field and improving early learning programs diverse children, families and providers experience.

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18 Marcon, R. (1999). Positive relationships between parent school involvement and public school inner-city preschoolers' development and academic performance. *School Psychology Review*, 28(3), 395-412.

19 Zaslow, M., Martinez-Beck, I., Tout, K., & Halle, T. (2011) *Quality Measurement in Early Childhood Settings*. Brookes Publishing: Washington, D. C.

20 Bruner, C., Ray, A., Stover-Wright, M., & Copeman, A. (2009) *Quality rating improvement systems for a multi-ethnic society*. [www.buildinitiative.org/files/QRIS-Policy%20Brief.pdf](http://www.buildinitiative.org/files/QRIS-Policy%20Brief.pdf).

21 Zaslow, M., Martinez-Beck, I., Tout, K., & Halle, T. (2011) *Quality Measurement in Early Childhood Settings*. Brookes Publishing: Washington, D. C.



### *Effective Data Practices*

The TQRIS will be supported by the Early Learning Data System and PLATINUM (see earlier information in this section for full descriptions of the Early Learning Data System and PLATINUM). RTT-ELC funding will expand the data interfaces and data sharing agreements with other state agencies and partners for integration with the Early Learning Data System. All early learning and development programs will have access to PLATINUM through RTT-ELC funds. Most critically, the data in PLATINUM will interface with both the Early Learning Data System and the Florida Department of Education's Statewide Longitudinal Data Warehouse (see Section E) transforming Florida's ability to link early learning data with the Prek-12 system to longitudinally assess program and child data.

Funding will enable fuller automation of the TQRIS: enrollment, applications for supports, applications for Pell Grants and other publicly available higher education grants, and scholarships for to access information, and support to improve program quality. Through the implementation of the Early Learning Data System, providers in Florida will be able to complete all documentation and paperwork online for VPK and other publicly funded programs streamlining record keeping and paperwork. Support will be provided to programs without this capability (see Section (B)(4)(a). This funding also will increase system usability by allowing early learning coalitions to customize fields and enter local program data which is key to serving children with high needs and their families.

RTT-ELC funding will increase system usability by allowing early learning coalitions to customize fields and enter local program data which is key to serving children with high needs and their families.

PLATINUM's early childhood educator portal helps programs to manage their own quality improvement work. PLATINUM will feature both Spanish and English languages make sure all early childhood educators benefit from strong program improvement resources. This ensures businesses have more autonomy to design and manage their own quality improvement work and have tools available to them to do this in an efficient and targeted way that will directly impact their program. Early childhood educator training will occur in Phase III (September 2012). To encourage usage; one of the benefits of accessing PLATINUM will be access to the

Shared Services Florida website and gain access to valuable program management tools and cost savings (see Section (B)(4)(a) for more information on this incentive).

*(B)(1)(b) Is clear and has standards that are measurable, meaningfully differentiate program quality levels, and reflect high expectations of program excellence commensurate with nationally recognized standards that lead to improved learning outcomes for children*

Florida's existing Gold Seal Quality Care programs and tiered program standards are measurable, meaningfully differentiate program quality levels and reflect high expectations of program excellence commensurate with nationally recognized standards (see tables (B)(1)-1a and (B)(1)-1b). RTT-ELC funding will allow for:

- Increasing the number of gold seal quality child care programs.
- Enhancing existing standards to include adult-child interactions, health promotion and a more authentic reflection of meaningful standards related to cultural diversity (see draft standards for Pilot Study at tables (B)(1)-1c and (B)(1)-1d).
- Rigorously evaluating the enhanced standards through an independent Pilot Study and independent Validation Study (see Section (B)(5)).

#### *Current Status*

The existing TQRIS program standards included in Tables (B)(1)-1a and (B)(1)-1b). To date there have been no validation studies of these standards or quality levels. While there is evidence that many of the elements of these standards improve children's outcomes, no data exists to evaluate the relationship between the standards and levels and children outcomes.

#### *Plans for Transformative Reform*

This foundation, combined with research and best practices nationally, will inform the standards that will be taken statewide for the TQRIS Pilot Study in Phase III (see timeline in opening Summary of Section B); preliminary standards for the Pilot Study are provided in Tables (B)(1)-1c and (B)(1)-1d in the previous section.

Florida plans to create the nation's most comprehensive and rigorously evaluated TQRIS. The standards will be more comprehensive than any existing standards in their assessment of the multiple domains that impact children's outcomes, to include health, culture and family engagement. As outlined in Section (B)(5), Florida will complete large-scale Pilot and Validation Studies to ensure the standards are meaningfully tied to children's outcomes and that they differentiate program quality.

The Phase III Pilot Study will assess the standards, cut points and any impacts on child outcomes. These findings will be used to inform the refinement of the TQRIS standards and levels, which will then be empirically tested through a broader Validation Study. This Validation Study will be completed in Phase IV to empirically validate that the standards are appropriate, the levels meaningfully differentiate program quality and higher levels are related to improved child outcomes. From these results the TQRIS standards will be finalized through formal rule promulgation for statewide implementation in 2015.

Through RTT-ELC funding Florida will dedicate significant funding toward increasing the number of Gold Seal child care programs in the state. Funding will be available to assist with accreditation fees, technical assistance to ensure programs will be successful at achieving accreditation, scholarships for training and other professional development improvements and grants to materials to enhance the physical environment of the early learning and development programs. All programs that receive this support will also receive training on the CLASS tools, have access to the Teachstone video library and receive access to the shared services website (see Section (B)(4)(a)); these resources will be designed to support their businesses and provide new resources to enhance adult-child interactions in a way that will improve the outcomes of children, particularly Children with High Needs.

*(B)(1)(c) Is linked to the State licensing system for Early Learning and Development Programs*

The state child care licensing standards will serve as the foundation for Florida's TQRIS. Florida's child care licensing has some of the strongest oversight in the nation, ranked 2<sup>nd</sup> by

NACCRRRA's annual report on child care licensing and oversight, but on standards the state was ranked 28<sup>th</sup>.<sup>22</sup> On August 31, 2010, Department of Children and Families (DCF) then Secretary George H. Sheldon designated a Work Group to carefully examine child care standards and identify areas which can and must be improved and strengthened to provide a safe and nurturing environment in which the children of the State of Florida can grow and thrive. As a result this work group identified areas for improvement to include licensure requirements (See Appendix (D)(1)-4). Through RTT-ELC funding Florida will revisit the recommendations of the Child Care and Improvements Work Group to determine what improvements can be made to the system within existing legislative authority in an effort to accomplish the following:

- Strengthen basic licensing standards.
- Streamline oversight and monitoring to create efficiencies for schools and child care businesses and ensure they operate with consistent and streamlined regulation.
- Help programs move through a system of continuous quality improvement through incentives, accountability and supports.

#### *Current Status*

This agreement to build TQRIS from licensing standards is widespread. Among other evidence, it was agreed upon in a series of recommendations created in 2010 to strengthen the state's licensing recommendations by the Child Care Standards and Improvements Workgroup with stakeholder representation of child development experts, early learning coalitions, Children Service's Councils, providers, and governing agencies.

#### *Plans for Transformative Reform*

Florida will continue to build from licensing through TQRIS. These basic standards will be strengthened by determining the status of and means to improve staff training requirements and testing procedures (section 402.305, (2)(d)8., Florida Statutes) and looking at key predictive indicators a child care facility must meet in order to provide quality care and programming.

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<sup>22</sup> National Association of Child Care Resource and Referral Agencies (2011). We Can Do Better: 2011 Update: NACCRRRA's Ranking of State Child Care Center Regulation and Oversight. Available: [http://www.naccrra.org/publications/naccrra-publications/publications/Alabama\\_Mississippi\\_0315111.pdf](http://www.naccrra.org/publications/naccrra-publications/publications/Alabama_Mississippi_0315111.pdf)

All programs that meet licensing requirements will automatically become a 1 Star program in the improved TQRIS. Programs that meet eligibility requirements for any publically funded programs would receive a 2 Star designation. Programs that have attained Gold Seal Accreditation in accordance with section 402.281, Florida Statutes will receive a 3 star designation. Programs that have attained Gold Seal Accreditation in accordance with section 402.281, Florida Statutes and have completed a CLASS assessment with a minimum score of 4.5 for the emotional support and classroom organization subscales and a 3.5 on the instructional support subscale will receive a 4 star designation. Finally, programs that have attained Gold Seal Accreditation in accordance with section 402.281, Florida Statutes and have completed a CLASS assessment with a minimum score of 5 for the emotional support and classroom organization subscales and a 4 on the instructional support subscale will receive a 5 star designation. If a provider has not received a Gold Seal Quality Care Designation the star ratings would be based on the continuous program improvement system as preliminarily outlined in tables (B)(1)-1c and (B)(1)-1d.

Currently the state requires that child care licensing inspections be completed three times a year for child care facilities and two times a year for family child care homes. These inspections are based on established frequencies and are not usually triggered by any one event.

In an effort to look at administrative efficiencies and building on the recommendations of the Work Group, the child care program office at DCF, OEL and the early learning coalitions will work together to identify areas where streamlining of oversight and inspections can occur. This would help ensure that DCF and coalitions are maximizing resources to ensure that children are being cared for in healthy, safe and high quality environments.

Florida is committed to developing strategies to support child care businesses. Through the RTT-ELC funding, the Pilot and the Validation Studies the state will ensure early learning and development programs have consistent regulations and do not receive conflicting advice or operate under conflicting regulations. Based on issues identified by the stakeholder group and assessed through the Pilot and Validation Studies the Office will utilize this information to help inform the TQRIS standards that will be codified through formal rulemaking. The goal of this work will be to clarify regulatory guidance for providers and ensure they do not operate with

conflicting guidance. By providing consistent expectations and eliminating conflicting guidance for providers, oversight will be streamlined.

(B)(2) Promoting participation in the State's Tiered Quality Rating and Improvement System.  
(15 points)

The extent to which the State has maximized, or has a High-Quality Plan to maximize, program participation in the State's Tiered Quality Rating and Improvement System by--

(a) Implementing effective policies and practices to reach the goal of having all publicly funded Early Learning and Development Programs participate in such a system, including programs in each of the following categories--

(1) State-funded preschool programs;

(2) Early Head Start and Head Start programs;

(3) Early Learning and Development Programs funded under section 619 of part B of IDEA and part C of IDEA;

(4) Early Learning and Development Programs funded under Title I of the ESEA; and

(5) Early Learning and Development Programs receiving funds from the State's CCDF program;

(b) Implementing effective policies and practices designed to help more families afford high-quality child care and maintain the supply of high-quality child care in areas with high concentrations of Children with High Needs (*e.g.*, maintaining or increasing subsidy reimbursement rates, taking actions to ensure affordable co-payments, providing incentives to high-quality providers to participate in the subsidy program); and

(c) Setting ambitious yet achievable targets for the numbers and percentages of Early Learning and Development Programs that will participate in the Tiered Quality Rating and Improvement System by type of Early Learning and Development Program (as listed in (B)(2)(a)(1) through (5) above).

*In the text box below, the State shall write its full response to this selection criterion. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and*

*Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

*Additionally, the State must provide baseline data and set targets for the performance measure under (B)(2)(c).*

**(B)(2) Promoting participation in the State's Tiered Quality Rating and Improvement System**

Florida will maximize participation in TQRIS by taking the system statewide and include all legally operating program types starting in 2015. To prepare providers for this, we will offer comprehensive early childhood educator campaign that includes web-based resources, summaries of the standards, standardized training (available in multiple languages throughout 2014) for differing early learning and development program types.

*(B)(2)(a) Implementing effective policies and practices to reach the goal of having all publicly funded Early Learning and Development Programs participate in such a system*

Through RTT-ELC funding Florida will accomplish the following:

- All legally operating early learning and development program types in Florida will participate in the improved, validated TQRIS by 2015
- Fully preparing early childhood educators for statewide implementation of TQRIS.

*Current Status*

Existing Phase I TQRIS projects are voluntary. While they include good representation from all early learning and development program types in the state, they may not represent the various early learning and development program types in any community.

*Plans for Transformative Reform*

With RTT-ELC funding, more than 10,000 early learning and development programs will be assessed by 2015 with the validated TQRS standards. We will launch a statewide outreach

and education campaign for programs that offer care to subsidized children and Children with High Needs in years 2 and 3 of this grant including: presentations at conferences, information sharing at all trainings, opportunities to review and provide feedback to the proposed standards and levels, incentives such as scholarships and other professional development support (see Section D), business operations support through shared services website and PLATINUM (see Section B(4)(a)) and CLASS and ERS training (see Section (B)(3)(a)).

Early learning coalitions will be funded to provide these supports and complete the program assessments in year 4 of the RTT-ELC grant with strategic capacity building throughout the four grant years.

#### Early Learning and Development Programs receiving funds from State's CCDF program

During the 2010 fiscal year, more than 236,000 children received child care subsidies (called School Readiness Funding) and were served in 6,560 centers, 3,049 family child care homes and 966 public schools and 819 religious-exempt programs. A total of \$637 million is invested in child care subsidies annually; this includes \$494 million in federal CCDBG and TANF funds and \$143 million in state funding. Receipt of RTT-ELC funding will enable Florida to require programs receiving child care subsidies participate in TQRIS; this represents 75% of all centers and 55% of all family child care homes.

#### State funded preschool programs

Florida has one of three universal, VPK programs and nationally has the highest number of children enrolled of any pre-K program and the highest percentage of eligible children enrolled. In November 2002, Florida's voters passed a constitutional amendment to offer free, VPK programs to every 4 year old in the state. In 2010-2011 157,072 4 year olds, or about 76.2 percent of the eligible population, now participate in this program, with an appropriation of \$404,372,806.

While Florida has a solid foundation, enhancements to the current model would help Florida more fully deliver on the promise of a high-quality preschool education. A total of 74% of VPK providers also receive child care subsidies, and will therefore participate in the state's



TQRIS.

Early Head Start and Head Start programs

Federal Head Start funding supports 37,245 children ages 3-5 and Early Head Start funding supports 5,248 children ages birth to age 3. These children are served in diverse settings, including 717 center-based Head Start funded programs, 225 center-based Early Head Start programs, 281 family child care homes and 775 home-based programs. Additionally, 285 pregnant women are served by 39 Head Start and 31 Early Head Start grantees. All Head Start and Early Head Start programs in the state have agreed to participate in TQRIS as it is expanded statewide in 2015.

Early Learning and Development Programs under section 619 of Part B of IDEA and Part C of  
IDEA

Developing a system that ensures children with special needs attend high-quality early learning programs is a priority for Florida's RTT-ELC application. With RTT-ELC funding and support, new partnerships will be developed with the Department of Education, Local Education Agencies (LEA) and early learning coalitions for Part B and with the Department of Health, Early Steps entities and early learning coalitions for Part C. Any time a child has an education plan tailored to his or her specific needs that includes placement in, or early intervention services delivered in a highly-rated program. Our goal is to have all children with special needs served by 4 and 5 star programs. If the family would like to use a program that is not currently 4 or 5 star program, a partnership will be developed between the early learning coalition and the program to support quality improvements. PLATINUM and the Early Learning Data System (see Section (B)(1)(a)) will support these referrals and to help families and children with special needs.

Early Learning and Development Programs funded under Title I of the ESEA

In many parts of the state there are already precedents for school district-based programs to participate in TQRIS. DOE has committed to reach out to school districts implementing early childhood programs funded through Title I to encourage their participation in TQRIS.

Other Early Learning and Development Programs

For the TQRIS expansion that will take place during RTT-ELC funding, other early learning and development programs can choose to participate in TQRIS. Priority for assessment will be based on programs serving the highest proportion of Children with High Needs.

*(B)(2)(b) Implementing effective policies and practices designed to help more families afford high-quality child care and maintain the support of high-quality child care in areas with high concentrations of Children with High Needs*

Through RTT-ELC funding Florida will accomplish the following:

- Implement a more effective targeted program support system to ensure families that have Children with High Needs can access high-quality programs at no increased cost.
- Map supply, quality and resources and target supports to improve access to quality programs for High Need children.

#### Current Status

Florida provides child care subsidies to more than 236,000 children statewide. These subsidies are paid at 73% of the market rate. Providers that have made up front investments in quality qualify for higher subsidy reimbursement (up to 20%) if they have a Gold Seal Quality Care Designation.

#### Plans for Transformative Reform

Through the Gold Seal Quality Care Program, Florida will implement a more effective tiered reimbursement system that will both provide a ladder to quality improvement for providers, better supporting their small businesses, while also enabling more families to afford better quality care without having that cost passed on to them. See Section (B)(4)(a).

The searchable website and smart-phone apps outlined in Section (B)(3)(b) will enable Florida to create geo-coded maps that show the total supply of early learning and development programs in each community.

For planning purposes, we will then overlay the supply of care by Star-rating and/or Gold Seal Quality Care Programs; with the availability of funding (to include child care subsidies, VPK, Head Start/EHS funding, local tax levy funding through Children's Services Councils,

other local funding as appropriate); and data regarding High Need children and families. This will help leadership in local communities and at the state level identify areas where the need is greatest but where the supply of high-quality programs is lacking and/or subsidy funds are in short supply. Using this information, we will target resources strategically to programs in these areas. Strategies may include:

- Targeting supports, financial bonuses and other incentives aimed at increasing the supply of higher star-rated programs in these areas (see Section (B)(4)(b));
- Using private funding, seeding the development of Shared Service Alliances in these areas – via a statewide request for proposals aimed at finding Hub agencies with a proven track record of providing high-quality child development services to Children with High Needs and that are willing to expand these services in targeted communities in which there is a large proportion of Children with High Needs using a shared services approach; based on successful, self-sustaining (within three years) alliances.
- Developing training for technical assistance providers and other intermediary agencies to strengthen their capacity to improve program quality in areas where many Children with High Needs live. Special emphasis will be placed on addressing issues of race, culture, diversity and isolation.

Strategies will be developed based on needs and available resources. Active state and local monitoring of capacity and provider type will ensure full parental choice.

*(B)(2)(c) Setting ambitious yet achievable targets for the numbers and percentages of Early Learning and Development Programs that will participate in the Tiered Quality Rating and Improvement System by type of Early Learning and Development Program*

Through RTT-ELC funding Florida will accomplish the following:

- Implement a statewide TQRIS that includes all legally operating early learning and development program types in Florida.

*Current Status*

The baseline and annual targets for expanding participation in Florida's TQRIS is outlined in the chart below.

**Performance Measures for (B)(2)(c): Increasing the number and percentage of Early Learning and Development Programs participating in the statewide Tiered Quality Rating and Improvement System**

Type of Early Learning and Development Program in the State	# of programs in the state	<i>Baseline and Annual Targets – Number and percentage of Early Learning and Development Programs in the Tiered Quality Rating and Improvement System</i>									
		Baseline (Today)		Target – end of calendar year 2012		Target – end of calendar year 2013		Target – end of calendar year 2014		Target – end of calendar year 2015	
		#	%	#	%	#	%	#	%	#	%
State-funded preschool Specify:	6,249	852	17	1,562	25	2,312	37	3,125	50	4,624	74
Early Head Start and Head Start	1,223	137	11	306	25	612	50	917	75	1,223	100
Programs funded by IDEA, Part C	16 Local Entities (LES) <sup>23</sup>	64		100		200		300		400	

<sup>23</sup> Florida’s Early Steps Program ensures services are provided to eligible infants and toddlers and their families in accordance with Part C of IDEA through contract with 16 local entities. Through contract each local entity services are delivered to children in “natural context” in early learning programs and schools. *Florida Part C Performance Plan 2005-2013*.

Programs funded by IDEA, Part B section 619	67 Local Education Authorities (LEAs) <sup>24</sup>	132		200		300		400		500	
Programs funded under Title I of ESEA	2,978	80	3	100	3	150	5	225	8	300	10
Programs receiving from CCDF funds	9,609	1,324	14	1,950	20	2,460	27	3,843	40	9,609	100

*Baseline numbers are actual and were gathered through a self-report survey of the TQRIS pilot site directors. Part C is operated by 16 local entities (LES) working independently in early learning programs. Part B is operated by 67 local education authorities (LEAs). Projections were estimated based on current data on program quality and experience to date expanding access to TQRIS and completing CLASS assessments on a representative group of providers in small-scale pilots. Participation in 2015 based on current number of programs that receive child care subsidies and other public funding.*

*Plans for Transformative Reform*

Florida will expand a strengthened TQRIS in Phase V of RTT-ELC funding to include all early learning and development program types. To phase this in realistically, all programs that receive child care subsidy funds will participate starting in 2015; this includes 6,560 centers, 3,049 family child care homes and 966 school-based programs serving approximately 236,000 high-need children. To ensure the needs of high-need children are met, all Head Start and Early Head Start programs in the state have also committed to participate starting in 2015.

Other programs that choose to participate may elect to do so. Assessments will be prioritized based on number of high-need children served.

<sup>24</sup> Florida's Part B IDEA program is administered through classrooms within school across Florida's 67 Local Education Authorities. *Florida Department of Education*

**(B)(3) Rating and monitoring Early Learning and Development Programs. (15 points)**

The extent to which the State and its Participating State Agencies have developed and implemented, or have a High-Quality Plan to develop and implement, a system for rating and monitoring the quality of Early Learning and Development Programs participating in the Tiered Quality Rating and Improvement System by--

(a) Using a valid and reliable tool for monitoring such programs, having trained monitors whose ratings have an acceptable level of inter-rater reliability, and monitoring and rating the Early Learning and Development Programs with appropriate frequency; and

(b) Providing quality rating and licensing information to parents with children enrolled in Early Learning and Development Programs (e.g., displaying quality rating information at the program site) and making program quality rating data, information, and licensing history (including any health and safety violations) publicly available in formats that are easy to understand and use for decision making by families selecting Early Learning and Development Programs and families whose children are enrolled in such programs.

*In the text box below, the State shall write its full response to this selection criterion. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

**(B)(3) Rating and monitoring Early Learning and Development Programs**

Florida has a high-quality plan to build on its existing TQRIS. As outlined below, Florida has been a leader in ensuring ERS and CLASS tools and training are available in Spanish to make certain early childhood educators whose preferred language is Spanish, can access quality improvement tools and resources.

*(B)(3)(a) Using a valid and reliable tool for monitoring, having trained, reliable monitors, and monitoring programs with appropriate frequency*

Through RTT-ELC funding Florida will accomplish the following:

- Integrate existing validated tools using reliable assessors into TQRIS' standards.
- Train additional assessors in areas of the state where capacity is not currently sufficient.
- Implement effective reliability practices to ensure assessments are all reliable and of high-quality.
- Assess programs at an appropriate frequency.

*Current Status*

Florida has significant reliable assessor capacity on the two validated tools necessary to implement TQRIS statewide.

- *Environment Rating Scales (ERS)*: Twenty-one of the 31 local early learning coalitions already actively use the ERS and possess significant early childhood educator and assessor capacity; coalitions complete over 2,900 ERS assessments annually as part of child care subsidy contracts (this is in addition to the TQRIS assessments completed annually). These coalitions have access to at least 122 reliable assessors whom they work with regularly.
- *CLASS assessments*: All of the Head Start grantees are actively using the CLASS to inform program improvement and professional development strategies; collectively they have over 200 reliable pre-K CLASS assessors. Further, 28 of the 31 coalitions have agreed to implement the Pre-K CLASS starting in the spring of 2012 and the toddler CLASS when it is available. Many of the TQRIS projects in the state were already moving toward a model of incorporating the CLASS in the TQRIS and at least 15 assessors are already trained and reliable.

### Plans for Transformative Reform

The core of the state's TQRIS will be the CLASS tools, the ERS, validated formative assessment tools and information that will include family engagement, cultural competence, health and workforce data (validated as part of the Pilot and Validation studies (see (B)(5)). The strategies for creating and sustaining assessor capacity are outlined in the description of each tool; the assessors reliable on the CLASS and ERS will form the state's cadre of TQRIS assessors for 2015. Assessors will have reliability checked and provided with additional training/mentoring as needed to achieve and sustain reliability; all assessors who provide assessments for the statewide rating in 2015 must achieve and sustain reliability for at least three months prior to the end of 2014. All assessors who complete TQRIS assessments will also be trained in PLATINUM in 2014 (as noted in Section (B)(3)(a); providers will start receiving training on PLATINUM at the end of 2012 so they are familiar with the system prior to 2015.

Programs in TQRIS will be assessed every 24-48 months, depending on program quality or unique circumstances (e.g., director leaving, number of violations, etc.). The timeline and triggers for reassessment are outlined at the end of Section (B)(3)(a).

### Classroom Assessment Scoring System (CLASS)

Florida will use both CLASS tools: Pre-K CLASS (for children 36-60 months) and the toddler CLASS (for children 15-36 months) when it is published. The CLASS has proven validity and reliability<sup>25 26</sup>

Given its strong commitment to Dual Language Learners and providers who speak Spanish as their first language, Florida has also been a leader in ensuring CLASS materials are available in Spanish. The Early Childhood Initiative Foundation has translated the following CLASS tools into Spanish: Looking at CLASSrooms, Teachstone's online, self-paced professional development program and the on-line introduction to the CLASS; funding was provided to shoot original video in Spanish, video scripting in Spanish for sections with voice

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25 La Paro, K. M., Pianta, R. C., Stuhiman, M. (2004). The Classroom Assessment Scoring System: Findings from the prekindergarten year. *The Elementary School Journal* Volume 104, Number 5, 404-426.

26 Ritchie, S., Howes, C., Kraft-Sayre, M., & Weister, B. (2001). *Emerging Academics Snapshot*. Los Angeles: University of California at Los Angeles.



overs, translating, Spanish narration and written material translation. A total of \$100,000 in free subscriptions to the Spanish speaking materials will be available free of charge to providers in Florida to support their use of the CLASS.

Prior to the RTT-ELC announcement, Florida procured train-the-trainer instruction to significantly build its CLASS assessor capacity. By the end of 2012, there will be dozens of additional CLASS assessor trainers available in Florida. In turn these trainers will train 150 CLASS assessors throughout the state in 2013.

Through its existing contract with Teachstone, Florida already developed CLASS reliability protocol to test for reliability independently online after training. Reliability testing must be completed within two weeks of training. Testing involves watching and accurately coding five master-coded video segments. To pass, trainees need to score within 1 point of the master code on 80% of all codes given and demonstrate the ability to code reliably across all ten CLASS dimensions. Trainees have three opportunities to pass the reliability test; typically, approximately 80% of trainees pass within these three opportunities. Teachstone will provide support to those trainees who do not meet minimum reliability standards after the first and second testing opportunities. This support may include phone calls, webinars and score analysis.

After CLASS Observation Training and Certification, those who pass the CLASS Reliability Test are certified for one year to use the CLASS tool to observe and code in classrooms. All CLASS observers must recertify annually. Teachstone will provide calibration services to support accurate use of the CLASS tool. Each quarter, CLASS observers will have access to the Teachstone calibration system, which allows observers to watch and code a master-coded classroom video. Teachstone will provide calibration videos four times a year. In addition, Teachstone Quality Assurance staff will provide quarterly calibration webinars for observers who need support.

Florida has developed a formula for determining assessor capacity and needs based on current assessment practice throughout the state.<sup>27</sup> Based on current capacity and the planned capacity expansion in 2012, 200 more assessors are needed statewide to complete reliable CLASS assessments; this training will start in 2013 using CLASS assessor trainers trained through current Train the Trainer work. Reliable assessor capacity will be reevaluated in early 2014 and additional assessors will be trained on the ERS tools, CLASS tools or both as needed. Further, reliable assessors that will assist with the TQRIS assessments in 2015 will receive training on the other checklists and PLATINUM in the last two quarters of 2014 to ensure they can complete full TQRIS assessments and upload the results seamlessly.

### Environment Rating Scales

Florida will use the Environment Rating Scale tools, to include the Infant-Toddler Environment Rating Scale (ITERS-R) for classrooms serving children ages birth to 30 months, the Early Childhood Environment Rating Scale (ECERS-R) for classrooms serving children ages 30-60 months, the School-Age Environment Rating Scale for programs serving school-age children (SACERS) and the Family Child Care Environment Rating Scale (FCCERS-R) for family child care homes. Given its strong commitment to Dual Language Learners and providers who speak Spanish as their first language, Florida has also been a leader in ensuring ERS materials are available in Spanish. While the scales are available in Spanish, the critical support materials of the All About books have never been translated. The Early Childhood Initiative Foundation has paid to have the All About ITERS-R and All About ECER-R translated into Spanish through a partnership with the Kaplan Early Learning Company. Through this creative, public-private partnership, early childhood educators in Florida will receive a discount on the All About books in Spanish and no shipping charges. These translations will be completed in early 2012 and sold by Kaplan nationwide, benefitting the entire field.

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<sup>27</sup> Formula assumes 50% of assessors are full time employees/contractors who will complete an estimated 5 assessments completed every two weeks (assessment + report writing and uploading results into PLATINUM) and working 45 weeks a year (factoring time in for vacation training, etc.). The other 25% of assessors will work part time and complete approximately 50% of this number of assessments annually; the final 25% of assessors will work part time and complete approximately 25% of this number of assessments annually. This will enable local coalitions to repurpose and/or use existing resources to to meet their local needs, while offering sufficient quality control to ensure reliability and strong assessment skills.

These tools have proven reliability and validity.<sup>28</sup> Reliability will be re-determined at least every 20 ratings, with a double rating completed alongside a master assessor. The reliability schedule was determined through current reliability of assessors, with more frequent reliability checks completed on less reliable assessors. Required reliability will be 85% for an assessor to continue independent ratings. If an assessor's reliability is below 85% the assessor will receive one-on-one mentoring for a master assessor and/or a trained ERS trainer to ensure an increase in reliability of no less than 85% before independent ratings are resumed. Assessors who require this one-on-one mentoring will complete reliability checks every 10 assessments until reliability is sustained at no less than 85% for three reliability checks. At this time the reliability check schedule will resume on regular schedule.

Prior to the RTT-ELC announcement, Florida had started to procure training to further build its existing ERS assessor capacity. By the end of 2012, there will be ERS assessor training that will train approximately 75 additional assessors to reliability on the different ERS tools. Florida also procured train-the-trainer to cultivate highly reliable assessors who are also good trainers enabling Florida to continue to grow its own assessor capacity more cost effectively. As part of the pilot and validation study the state will assess the effectiveness of the subscales in predicting positive child outcomes in order to minimize assessment of inputs and maximize assessments leading to the greatest child outcomes.

Florida has developed a formula for determining assessor capacity and needs based on current assessment practice throughout the state.<sup>29</sup> Based on current capacity 75 more assessors are needed statewide to complete reliable ERS assessments; this training will start in 2013 using ERS assessor trainers trained through current Train the Trainer work. Reliable assessor capacity will be reevaluated in early 2014 and additional assessors will be trained on the ERS tools, CLASS tools or both as needed. Further, reliable assessors that will assist with the TQRIS

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28 Administration for Children and Families, Office of Planning, Research, and Evaluation. Program implementation and Quality Instruments. [http://www.acf.hhs.gov/programs/opre/ehs/perf\\_measures/reports/resources\\_measuring/res\\_meas\\_imp.html](http://www.acf.hhs.gov/programs/opre/ehs/perf_measures/reports/resources_measuring/res_meas_imp.html).

29 Formula assumes 50% of assessors are full time employees/contractors who will complete an estimated 5 assessments completed every two weeks (assessment + report writing and uploading results into PLATINUM) and working 45 weeks a year (factoring time in for vacation training, etc.). The other 25% of assessors will work part time and complete approximately 50% of this number of assessments annually; the final 25% of assessors will work part time and complete approximately 25% of this number of assessments annually. This will enable local coalitions to repurpose and/or use existing resources to meet their local needs, while offering sufficient quality control to ensure reliability and strong assessment skills.

assessments in 2015 will receive training on the other checklists and PLATINUM in the last two quarters of 2014 to ensure they can complete full TQRIS assessments and upload the results seamlessly.

Formative Assessment Tools

Florida will integrate formative assessment models into its TQRIS. The Office of Early Learning and Department of Education will identify approved formative evaluation systems for provider use. (see Section C for fuller description).

Checklists for Family Engagement and Health Promotion

The assessment and research team will develop checklists on family engagement and health promotion, heavily relying upon the Head Start Performance Standards, the U.S. Department of Defense standard operating procedures for family engagement and health, and the American Academy of Pediatrics, et al national health and safety performance standards.

*Timeline for Assessment*

Florida’s TQRIS will follow the assessment timeline below.

Draft Assessment Schedule	
Star 1	<ul style="list-style-type: none"> <li>• Program meets licensing standards</li> <li>• If a program would like to seek a 2 Star rating it can submit the required documentation.</li> </ul>
Star 2	<ul style="list-style-type: none"> <li>• Optional self-assessment annually on TQRIS program standards with incentives available for completion</li> </ul> <p><i>All self and formal assessment results documented in PLATINUM</i></p>
Star 3	<ul style="list-style-type: none"> <li>• Self-assessment annually on TQRIS program standards</li> <li>• Gold Seal Accreditation must remain current OR formal program assessment using TQRIS standards year four of RTT-ELC</li> <li>• As appropriate, re-assessment every 24* months or upon request from program if self-assessment indicates a 4 star or greater</li> </ul>

	<i>All self and formal assessment results documented in PLATINUM</i>
Star 4	<ul style="list-style-type: none"> <li>• Self-assessment annually on TQRIS standards</li> <li>• Gold Seal Accreditation must remain current AND 4 Star CLASS score required OR formal program assessment using TQRIS standards year four of RTT-ELC</li> <li>• As appropriate, re-assessment every 36 months* or upon request from program that indicates possibility of being a 5 star</li> </ul> <p><i>All self and formal assessment results documented in PLATINUM</i></p>
Star 5	<ul style="list-style-type: none"> <li>• Self-assessment annually on TQRIS standards</li> <li>• Gold Seal Accreditation must remain current AND 5 Star CLASS score required OR formal program assessment using TQRIS standards year four of RTT-ELC</li> <li>• Re-assessment every 48 months*</li> </ul> <p><i>All self and formal assessment results documented in PLATINUM</i></p>
<p>* The following conditions will trigger a reassessment sooner than the above schedule:</p> <ul style="list-style-type: none"> <li>• <i>Director leaving</i></li> <li>• <i>Change of owner</i></li> <li>• <i>Change of location</i></li> <li>• <i>More than 50% staff turnover</i></li> <li>• <i>Flag from licensing for more than one class I violations within two years</i></li> </ul>	

(B)(3)(b) *Providing quality rating and licensing information to parents with children enrolled in Early Learning and Development Programs*

Through RTT-ELC funding Florida will accomplish the following:

- Develop multi-media strategy for getting information on high-quality early learning programs and their importance to children’s development to families, including using smart-phone apps, creating resources in multiple languages and specifically targeting the children with high needs and their families.

### Current Status

Florida's Child Care Licensing Information System is nationally recognized as one of the most complete, fully integrated, and up-to-date technology systems in the country. The Child Care Licensing Information System is a comprehensive web-based resource for parents interested in locating quality child care arrangements. Parents can access early childhood provider demographic data, maps displaying the location of child care resources within each community and the actual compliance/noncompliance inspection report history of licensed child care facilities and homes statewide. More information can be found at: [www.myflorida.com/childcare](http://www.myflorida.com/childcare).

Florida's TQRIS model builds from significant local work, including the development of extensive marketing and promotional materials designed to help families choose high-quality early learning programs; these are available in English, Spanish and Haitian/Creole. These materials were carefully developed by marketing experts with input from providers and families and communicate the importance of quality early learning and development programs to children's development. The materials available include: posters, radio spots, TV ads, newspaper ads for families and are available in multiple languages. These will be adjusted as needed for statewide expansion.

### Plans for Transformative Reform

Florida will strategically utilize child care resource and referral to ensure families have high-quality information on their child's development (based on birth date), have tools to locate quality early learning and development programs and learn more about the importance of high-quality early learning experiences for their children's development. Information distributed through Child Care Resource and Referral will be developed in multiple languages to ensure it meets the needs and communication styles (e.g., reading level) of High Need families.

Florida proposes to enhance the automated Child Care Resource and Referral (CCR&R) that will be part of the Early Learning Data System to create an inventory and corresponding smart-phone application that will enable families to answer questions about family values, individual temperament and learning styles of their children, preferred curriculum and various other personalized supports to assist parents with the selection of a quality early learning programs that meets their child and family's needs. This will be available in English and

Spanish.

With both the enhanced CCR&R functionality within the Early Learning Data System and the smart-phone app, families will be prompted to answer a brief, simplified series of questions that will assist with narrowing early learning options that are a fit for the needs of their family. These questions will be designed to help families identify individual child needs and guide families to prioritize meeting these needs based on their family priorities. Individuals accessing the system will first select the age of their child(ren): in utero, infant, toddler, preschooler, and/or school-age. Based on the response, the individual will be provided with a series of questions. For expectant families, or those with young infants, the system will focus on family culture, values, expectations, and needs. For families with toddlers, preschoolers, and/or school-age children, questions will also include questions about learning styles, temperament, and development.

The system will then generate information about early learning program options based on family needs and priorities. For example, a parent of a young toddler that is an only child, overwhelmed by large social scenes, and has parents that value having a caregiver that can nurture the child's development in a personal, intimate setting would be given information on the benefits of a family child care home. The system would then provide multiple locations that match the family's geographic needs with corresponding costs and ratings of the TQRIS. Explanation of the star ratings and benefits of higher ratings would be provided to the family.

This system will be developed as part of Florida's online CCR&R system within the Early Learning Data System and linked to the State licensing website and the websites of community partners (United Ways, children's services councils, community action organization, faith-based programs), with corresponding applications that can be accessed via smart-phones. Additionally, families without technology will be able to access this service through Florida's 31 early learning coalitions serving all communities in Florida. Child Care Resource and Referral specialists will be trained to walk families through the system, provide additional child development consultations, and assist families in need of additional support services.

Further, research shows that in order for the TQRIS ratings to have the greatest impact on parental behavior and the choices they make as they select care for their children, parents need to better understand the importance of the early years of life and the critical impact quality early care and education have on children's development. A comprehensive family education

campaign will be implemented that includes affordable paid media (plan to be developed Year 1 of RTT-ELC funding), social media and earned media. The state's existing *Everyone's a Teacher* campaign will serve as this campaign's foundation. Through this approach, families will have more information to make more informed choices about child care and will receive good information on child development and the importance of choosing a quality setting. Families will also be able to access information on Florida's prekindergarten and subsidy programs and other resources available in their community, such as parent education and support programs.

Social media is an effective and inexpensive way to connect with families with young children. Our social media outreach will focus on using tools such as Facebook, Google+, YouTube and Twitter. These tools will allow us to connect with families in a way that will provide information that is easy to use. Through a partnership with the John S. and James L. Knight Foundation, this work will be informed by the leading experts in the field of civic engagement, particularly of high need families and children.

Through the extensive network of relationships the Children's Movement has with editorial boards and newspaper outlets throughout Florida, the Movement will work with media outlets over the course of the grant to rally support from residents and raise awareness of the critical importance of the early years.

(B)(4) Promoting access to high-quality Early Learning and Development Programs for Children with High Needs. (20 points)

The extent to which the State and its Participating State Agencies have developed and implemented, or have a High-Quality Plan to develop and implement, a system for improving the quality of the Early Learning and Development Programs participating in the Tiered Quality Rating and Improvement System by--

(a) Developing and implementing policies and practices that provide support and incentives for Early Learning and Development Programs to continuously improve (*e.g.*, through training, technical assistance, financial rewards or incentives, higher subsidy reimbursement rates, compensation);

(b) Providing supports to help working families who have Children with High Needs access high-quality Early Learning and Development Programs that meet those needs (*e.g.*, providing full-day, full-year programs; transportation; meals; family support services); and

(c) Setting ambitious yet achievable targets for increasing--



(1) The number of Early Learning and Development Programs in the top tiers of the Tiered Quality Rating and Improvement System; and

(2) The number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs that are in the top tiers of the Tiered Quality Rating and Improvement System.

*In the text box below, the State shall write its full response to this selection criterion. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

*Additionally, the State must provide baseline data and set targets for the performance measures under (B)(4)(c)(1) and (B)(4)(c)(2).*

**(B)(4) Promoting access to high-quality Early Learning and Development Programs for Children with High Needs**

*(B)(4)(a) Developing and implement policies and practices that provide support and incentives to Early Learning and Development Programs to continuously improve*

Through RTT-ELC funding Florida will accomplish the following:

- Provide targeted capacity building support for programs to prepare them for statewide implementation of TQRIS in 2015.
- Develop and implement policies and practices that provide support and incentives for Early Learning and Development Programs to continuously improve. These strategies, which include increasing the number of programs achieving Gold Seal Quality Care Designation, will be expanded for statewide implementation.
- Focus existing quality improvement funding to make them more effective and support activities that are proven to improve children's outcomes.

### Current Status

Florida has a strong track record of implementing effective strategies for improving the quality of Early Learning and Development Programs participating in TQRIS. TQRIS pilot communities have developed many local innovations, including developing highly-effective practices that support programs in the most cost effective and efficient ways. This has resulted in more funding for early learning small businesses. For example, many local TQRIS initiatives have developed different levels of support and funding based on program quality and the degree to which programs serve Children with High Needs. The supports that will be provided statewide are heavily informed by these strategies, particularly those that are most effective at improving the quality of programs that serve Children with High Needs.

### Plans for Transformative Reform

Florida will implement targeted, effective and outcomes-based investments in quality improvement activities in partnership with early learning and development programs to best support their quality improvement goals.

There will be some universally available supports to every program that participates in TQRIS. These will include:

- *Tiered reimbursement:* Florida's tiered reimbursement system recognizes providers that have made up front investments in quality so that they may qualify for higher subsidy reimbursement (up to 20%) if they have a Gold Seal Quality Care Designation. Programs with Gold Seal Accreditation also have their property taxes waived, which is a significant savings for businesses. The Gold Seal Quality Care Program will serve as the foundation of tiered reimbursement to ensure high-quality programs serving high need populations receive higher payment rates. Florida proposes to embed the existing tiered reimbursement system into the TQRIS to incentivize access to high-quality care for high need families.
- *Customized quality improvement plan:* Each program that participates in TQRIS will receive an automated, detailed strengths and needs report. Through PLATINUM, early learning programs will have access to customizable, individualized quality improvement plans based on their strengths and needs. Programs can independently manage their own

quality improvement work through the PLATINUM portal and track their progress over time; they have access to technical assistance specialists and career advisors and help prioritizing needs related to achieving higher TQRIS levels.

- *Access to the Shared Services Florida website:* To facilitate participation in and use of PLATINUM, all programs that attend two PLATINUM orientation trainings, complete Registry enrollment for all staff and log on at least quarterly will receive a free subscription to the ECE Shared Services Florida website (a branded version of [www.ecesharedresources.org](http://www.ecesharedresources.org), which will be launched in November 2011).

The shared services website was developed by CCA Global and helps programs save time and money, and strengthening administrative practices. Cost savings accrue through bulk purchasing, discounts on commonly used services, reduced rates for business operations like credit card processing and payroll administration, insurance, etc. Time savings accrue through customizable templates that support typical business functions, such as parent handbooks, employee policies, forms, job descriptions, interview guides, marketing tools that help identify and send direct mail to prospective families in the neighborhood, budget tools and templates, and more. Additionally, documents on the website will be strategically linked to the TQRIS standards, enabling providers to easily obtain resources for compliance. The Early Childhood Initiative Foundation has already paid to have [www.ecesharedresources.org](http://www.ecesharedresources.org) customized for Florida. The website is currently being translated into Spanish for completion in January 2012.

Early learning and development programs in other states have found that the website saves them so much that they are willing to pay the small service fee (approximately \$25/year); programs could decide if they would like to continue the subscription after the startup funding RTT-ELC provides is completed.

- *Access to marketing materials:* The TQRIS pilot projects have developed a world-class provider marketing tool kit, which will be provided to participating TQRIS programs. This marketing tool kit was designed with and for providers and allows programs to insert their own logos and program information and brands them as a participating TQRIS program. The marketing tool kit provides templates for brochures, newsletters,

parent letters, media release templates, signage, and other tools for customization; these will be provided on CDs. All of the marketing materials communicate the importance of quality early learning programs to children's development. A professional advertising and public relations agency has designed the materials and created the strategies to execute these efforts. These will be adjusted as needed for statewide implementation and made available to all participating TQRIS sites to assist them with marketing their services to families.

- *Deeper supports for lower quality programs:* Based on the lessons learned from the TQRIS pilot projects, targeted supports will be available to programs who have rated themselves low on the self-assessment and programs serving children in the Child Welfare System or children with special needs as well as providers in high-risk neighborhoods as identified by the state's Maternal, Infant, and Early Childhood Home Visiting application  
[http://www.doh.state.fl.us/Admin/General\\_Services/Purchasing/FA11-004.pdf](http://www.doh.state.fl.us/Admin/General_Services/Purchasing/FA11-004.pdf).

Targeted supports will include:

- *Technical Assistance:* Based on the star rating, programs will identify and receive time-limited and task-specific technical assistance. A technical assistance specialist and the early learning program leadership will together develop a plan with clearly identified responsibilities, time lines and expectations. Particular attention will be provided to ensuring a good match, with care taken to be responsive to culture, diversity, socio-economic status, curriculum philosophy and other characteristics to ensure there is a good match between mentors and mentees.

Through RTT-ELC Florida will develop a new model to build the skills of technical assistance specialists by creating a Technical Assistance Specialist Credential. This training will be built from the Technical Assistance Specialist Core Competencies; details on this training and credential are outlined in Section (D)(2). As part of this training/credential, technical assistance staff will receive Leading for Racial Equity training, a research and outcomes-based model for heightening awareness and skills of professionals to implement a strengths-based approach to diversity and inclusiveness.

Technical assistance specialists will also receive support through the Teachstone

resources for technical assistance specialists during all four years of the RTT-ELC grant. Following RTT-ELC funding coalitions will be responsible for ensuring on-going training. This will allow coalitions to repurpose staff who currently provide technical assistance strategically. These resources, along with targeted training, will ensure they have the skills to effectively support quality improvement in programs, particularly those serving children with high needs.

- *Scholarships:* Information on scholarship support is provided in Section (D)(2).
- *Career Counseling:* Information on career counseling is provided in Section (D)(2).
- *Targeted accreditation supports:* Providers wishing to advance in the TQRIS, including achieving Gold Seal Accreditation, will be offered specialized training and technical assistance. The formation of specialized communities of practice will support cohorts of programs going through self-assessment toward achieving accreditation. Additionally, targeted funds will be provided during the RTT-ELC grant period to offset the cost of obtaining accreditation. Programs serving children in the Child Welfare System, children with special needs and programs in high-risk communities (rural and urban) as identified by the state's Maternal, Infant, and Early Childhood Home Visiting application will be prioritized to ensure they receive this support if they desire.
- *Access to Teachstone resources for providers:* Teachstone has an extensive video library and other materials to build the interaction and instructional skills of early childhood educators. Providers who complete a CLASS orientation training and a self-assessment on at least one classroom in their program *annually will* have free access to the web-based resources offered by Teachstone. These will be available to programs that serve high-need children to assist them with improving their interactions and instruction practices. The model for delivery will be determined by local early learning coalitions.
- *Partnerships with Head Start:* in many of the Highest Need communities in the state Head Start is already operating effective partnerships and has strong programs. Through RTT-ELC funding partnerships will be created that will leverage this existing track record and community relationships to improve the quality of other High Need community programs and provide more intensive services for High Need children. These partnerships will vary based on community needs and resources.

Consistent, equitable and appropriate strategies for determining what supports are provided at each level, the amount of supports and the timelines for receiving supports will be developed as part of the overall reforms proposed in this application.

Currently, local early learning coalitions make substantial quality investments, totaling over \$54 million annually not including the Gold Seal Quality Care Program differential. Through the RTT-ELC opportunity, Florida with local buy-in will more effectively target quality improvement investments. Early learning coalitions will work individually and together to direct their quality funds toward those activities that support TQRIS standards and improving program ratings, particularly those serving children with high needs.

*(B)(4)(b) Providing supports to help working families who have Children with High Needs access high-quality Early Learning and Development Programs that meet those needs*

Through RTT-ELC funding Florida will accomplish the following:

- Provide effective and targeted supports to programs serving children with high needs.
- Embed the state's tiered reimbursement system in the TQRIS to ensure higher reimbursements are based on standards related to improved children's outcomes.

#### Current Status

Florida already prioritizes child care subsidies for children at risk of abuse, neglect, or exploitation, foster care and children of working families receiving Temporary Cash Assistance; they automatically receive subsidies regardless of any waiting list.

#### Plans for Transformative Reform

Through RTT-ELC funding community-based partnerships between Head Start, early learning coalitions, Part B and Part C providers will be deepened to coordinate the delivery of services for high-need children as eligibility allows. All partners are committed to this vision and local strategies will be created in 2012 and 2013.

Florida will ensure that families know about high-quality early learning and development programs and know how to access them for their children. As outlined in Section (B)(2)(a), reforms will be implemented via RTT-ELC to programs serving Children with High Needs who

receive public investments to ensure they maintain high quality or are on a path of quality improvement. Also as outlined in Section (B)(2)(a), partnerships will be created to ensure children with special needs attend high-quality programs.

Targeted, more extensive quality improvement supports will be provided to programs serving the Highest Need children and located in the Highest Need communities (see Section (B)(4)(a)).

As outlined in Section (B)(2)(b), strategies to improve the affordability of care in the Highest Need sections of communities will be implemented to ensure the availability of programs for High Need children.

*(B)(4)(c)(1) Setting ambitious yet achievable goals for increasing the number of Early Learning and Development Programs in the top tiers of the Tiered TQRIS*

Through RTT-ELC funding Florida will accomplish the following:

- Gradually expand participation in TQRIS in the early years of RTT-ELC funding.
- Assess all programs receiving child care subsidies in the 4<sup>th</sup> year of RTT-ELC funding using the new, validated TQRIS standards.

*Current Status*

There are currently 1,614 programs participating in the TQRIS pilots throughout Florida. The spread of the star quality levels is outlined in Table (B)(4)(c)(1).

**Performance Measure for (B)(4)(c)(1): Increasing the number of Early Learning and Development Programs in the top tiers of the Tiered Quality Rating and Improvement System.**

	Baseline (Today)	Target – end of calendar year 2012	Target – end of calendar year 2013	Target – end of calendar year 2014	Target – end of calendar year 2015
Total number of programs covered by the Tiered Quality Rating and Improvement System	1614	2350	3000	4000	9,609
Number of programs in Tier 1	113	165	210	260	150
Number of programs in Tier 2	275	400	500	680	2,649
Number of programs in Tier 3	532	775	990	1,320	3,770
Number of programs in Tier 4	468	680	870	1,320	2,290
Number of programs in Tier 5	226	330	430	1,740	750

*Baseline numbers are actual and were gathered through a self-report survey of the TQRIS pilot site directors. Projections were estimated based on current data on program quality and experience to date expanding access to TQRIS and completing CLASS assessments on a representative group of providers in small-scale pilots.*

*Plans for Transformative Reform*

Through the TQRIS pilot communities and the Pilot and Validation studies, there will be significant information on program quality from more than 2,000 programs, with the majority of these serving Children with High Needs. Early learning coalitions will receive training for technical assistance specialists, professional development supports (see Section D) and support



in more effectively targeting their quality investments through RTT-ELC. Early learning coalitions will receive additional quality improvement funds through the RTT-ELC grant period to jumpstart this work and invest in targeted strategies to improve the quality of programs serving children with high needs. The effectiveness of these investments will be documented and analyzed through PLATINUM. Coalitions will problem solve and refine these strategies together through communities of practice (see Section (D)(2)); successful practices will be refined during the first three years of this grant and made statewide during the last year.

Programs that are already participating in the pilot TQRIS programs will have special support to transition them to the new standards. They will receive training on the new standards, with a specific focus on how the new standards and scoring may change their rating. As outlined, training and resources will be specifically provided in years 2013-2015 on the CLASS instruments to ensure providers are prepared to use this new tool. A transition strategy will be created among the TQRIS sites and OEL leadership to ensure a smooth transition from the old to the new standards. The planning will take place in 2013 and implemented in 2014-2015. Partnerships will be developed with the Children's Services Councils, early learning coalitions, providers and other funding partners to ensure the smoothest transition possible of existing TQRIS participants into the new system.

*(B)(4)(c)(2) Setting ambitious yet achievable goals for increasing the number and percentage of Children with High Needs who are enrolled in Early Learning and Development Programs that are in the top tiers of the Tiered TQRIS*

Through RTT-ELC funding Florida will accomplish the following:

- Provide targeted supports to programs serving a high percentage of Children with High Needs in order to move programs into the top tiers of the TQRIS.
- Provide support to increase the number of programs with Gold Seal accreditation.
- Provide capacity building support to early learning and development programs on the CLASS to achieve higher levels on the TQRIS.



funded by IDEA, Part B section 619	22,758	458	2	1,365	6	2,048	9	2,731	12	4,552	15
Programs funded under Title I of ESEA	9,600	210	2	384	4	576	6	768	8	960	10
Programs receiving from CCDF funds	243,000	13,553	6	26,730	11	41,310	17	55,890	23	77,760	32
<p><i>Baseline numbers are estimated based on projected participation in each program among High Need Children. Projections were estimated based on current data on program quality and experience to date expanding access to TQRIS and completing CLASS assessments on a representative group of providers in small-scale pilots.</i></p>											

*Plans for Transformative Reform*

As outlined in Section (B)(1)(b) and (B)(4)(a), the first step to ensuring more children are in the upper tiers of the TQRIS in Florida will be to increase the number of programs that have Gold Seal accreditation. This will be accomplished through providing technical assistance, grants for materials and support to paying accreditation fees. This will be highly supportive of businesses as it will eliminate property taxes and enable tiered reimbursement. There will also be significant opportunities for programs to become familiar with and build capacity around the CLASS tools; these resources are outlined in Section (B)(4)(a). While the cut points by star level will be determined through the Pilot and Validation studies, early support on using the CLASS and improving scores on the CLASS will be important to programs' building program quality and improving children's outcomes, particularly of Children with High Needs.

By 2015, an estimated 170,990 children will be in early learning programs rated star 4 or higher. Through working with local coalitions to most effectively direct quality investments, it is expected that these numbers will continue to improve following the end of RTT-ELC funding.

**(B)(5) Validating the effectiveness of the State Tiered Quality Rating and Improvement System.**  
*(15 points)*

The extent to which the State has a High-Quality Plan to design and implement evaluations--working with an independent evaluator and, when warranted, as part of a cross-State evaluation consortium--of the relationship between the ratings generated by the State's Tiered Quality Rating and Improvement System and the learning outcomes of children served by the State's Early Learning and Development Programs by--

(a) Validating, using research-based measures, as described in the State Plan (which also describes the criteria that the State used or will use to determine those measures), whether the tiers in the State's Tiered Quality Rating and Improvement System accurately reflect differential levels of program quality; and

(b) Assessing, using appropriate research designs and measures of progress (as identified in the State Plan), the extent to which changes in quality ratings are related to progress in children's learning, development, and school readiness.

*In the text box below, the State shall write its full response to this selection criterion. The State may also include any additional information it believes will be helpful to peer reviewers. If the State has included relevant attachments in the Appendix, these should be described in the narrative below and clearly cross-referenced to allow the reviewers to locate them easily.*

*In scoring the selection criterion, peer reviewers will determine, based on the evidence the State submits, whether each element of the selection criterion is implemented or planned; the quality of the implementation or plan (see the definition of a High-Quality Plan for the components reviewers will be judging); the extent to which the different types of Early Learning and Development Programs in the State are included and addressed; and the extent to which the unique needs of the State's special populations of Children with High Needs are considered and addressed. The State is responsible for providing clear and detailed information to assist the peer reviewers in making these determinations.*

**(B)(5) Validating the effectiveness of the State Tiered Quality Rating and Improvement System**

Florida has a high-quality plan to design and implement rigorous evaluations of the relationship between the ratings generated through TQRIS and children's outcomes. Through RTT-ELC funding Florida will accomplish the following:

- Validate that standards and levels of TQRIS meaningfully differentiate program quality.
- Ensure standards and levels related to improved child outcomes.

As outlined in the timeline in the opening Summary of Section B, the draft standards for

the TQRIS in Florida will be finalized by August 2012, followed by a Pilot Study in Phase III (September 2012-August 2013) and a Validation Study in Phase IV (September 2013-August 2014) completed by an independent evaluator. The Pilot and Validation studies will be designed to ensure Florida's TQRIS has strong psychometric properties like construct validity (the items measure what they are intended to measure); predictive validity (higher scores on TQRIS mean better child outcomes); inter-rater reliability (two assessors looking at the same program come to the same conclusion about the rating); and sensitivity (the assessment can pick up relatively small differences in program quality). To ensure Florida's TQRIS standards and levels are designed with these psychometric properties in mind, the Pilot and Validation studies are necessary to ensure that the standards and levels meet these goals and are meaningfully connected to children's outcomes.

The Pilot Study in Phase III (from September 2012-May 2013) will ensure the standards are appropriate, the weighting of the different elements are correct, the cut points between levels are accurate, the different tiers are predictive of improved child outcomes, and elements such as the state's early learning and developmental standards are fully and appropriately integrated into the program standards and workforce qualification expectations of TQRIS. The standards and levels will be refined based on the Pilot Study results for the Validation Study.

The Validation Study in Phase IV (September 2013-May 2014) will specifically evaluate the degree to which the standards and levels are valid related to culture, diversity and equity. The standards, tiers and weighting will then be revised as needed based on the results of the validation study.

The Pilot and Validation studies will be completed by an independent evaluator. The team that will oversee the study design and implementation and revision of the standards based on the results will include researchers, psychometricians and recognized experts in program quality and child outcomes. The full methodology is outlined below.

In addition to this comprehensive Pilot and Validation studies, the evolution of this system will be documented by an independent researcher throughout the grant to inform a detailed case study of effective early childhood systems reform to document the effect of the innovations on program quality, children's outcomes and system reform. This report and its

findings will be widely shared with the early learning field and other states to inform their work.

*(a) Validating, using research-based measures, as described in the State Plan, whether the tiers of the State's Quality Rating and Improvement System accurately reflect differential levels of program quality and (b) Assessing, using appropriate research designs and measures of progress (as identified in the State Plan), the extent to which changes in quality ratings are related to program in children's learning, development and school readiness.*

The first purpose of the pilot phases of this proposed project are to identify teacher, classroom, center, and program quality indicators for inclusion in the quality composite scores, and to do so based on their relationship to child outcomes. The second purpose of the pilot phases of this project is to adjust and validate the cut scores on the quality composite measures so that quality level designations are based on empirical evidence and maximize differences in child outcomes between the levels. The unique strengths of our design are as follows: (1) child outcomes and growth will be assessed across domains of development within a well-designed and carefully implemented sampling strategy designed to represent geographical regions of the state, program types, and quality levels, (2) valid potential quality indicators will be collected by trained and reliable external observers who will be following carefully designed observational protocols that include indicators at the teacher, classroom, center, and program levels; and (3) advanced statistical methods will be used to obtain empirical evidence indicating relationships between quality and child outcomes.

**Design, Sample, and Statistical Power:** The overall proposed design for the pilot study phases of the project is similar to a cluster randomized trial. We will conduct three level hierarchical linear models (HLM) to predict child growth from quality indicators. These analyses will include child growth as the level one outcome and child demographics as predictors. Child growth will be defined as gain from fall to spring on each child outcome measure. The level two models will include classroom and teacher level characteristics and quality indicators as predictors and the level three models will include program level characteristics and quality indicators as predictors. In this design the power to detect an association between a particular proposed quality indicator and child growth is a function of the following parameters: alpha, number of level two cluster clusters (classrooms), the number of

level three clusters (centers), sample size of children for each classroom, the expected treatment effect magnitude, the intraclass correlation coefficients, and the residual variance terms including the effect of covariates. For our calculations, alpha was set at the traditional level of .05, the number of level two clusters (classrooms) was set at 360, and the number of level three clusters (centers) was set at 120. We assumed an average rate of three classrooms per center. We set the cell size, the average number of children per classroom, at 17 based on the experience of the research team with preschool settings in the state. This design will result in an average of 51 children assessed per center ( $3 \times 17$ ), for a total of 6,120 children in the study. We set the interclass correlation coefficients for levels two and three (tau pi and tau beta) at .10 based on our experience with this type of analyses in preschool settings. These values mean that we expect approximately 10% of the total variability in the dependent variable to be between classrooms and approximately 10% between centers. In order to determine the statistical power of the proposed design, we used the *Optimal Design* software package (Spybrook, Raudenbush, Liu, & Congdon, 2006).

It should be noted that the stratified sampling plan whereby we will attempt to represent the different geographic regions of the state, program setting types, and quality levels based on existing quality indicators, is expected to create some heterogeneity between strata of centers while creating greater within strata homogeneity. Once the variance due to the stratification center characteristics is accounted for in the analysis, this homogeneity should enhance the statistical power of the design. Previous research designed to demonstrate the associations between classroom, center, and program quality have often found very modest associations between quality indicators and child outcomes. We therefore set effect sizes at .16, .18, and .20. Effect sizes in this range can be considered small according to the recommendations set forth by Cohen (1988). However, it is important to note that effect sizes of smaller magnitude are often worth detecting in early childhood research. Furthermore, both realizing effect sizes of this magnitude or larger in field research, and making interpretations of such effect sizes that designate them as “small” or “moderate”, are highly context dependent. Factors such as program and community conditions, consistency of implementation for particular quality indicators, the actual power and efficacy of the quality indicators within a particular context, and issues related to the selection and use of outcome measures all contribute to the actual results of field studies

(Spybrook, Raudenbush, Liu, & Congdon, 2006). We therefore wanted to be sure that our design would be suitable for detecting effects that while considered small in some research contexts, might translate into meaningful components of an overall quality system where multiple indicators are used within a composite quality score.

Our power calculations resulted in estimates of the probability that we will detect effect sizes of the specified magnitude or larger and find them to be statistically significant, given that they actually exist, that ranged from .81 to .93. These values apply to the detection of a relationship between a given quality indicator and child growth. For an effect size of .16, power equals .81, for an effect size of .18, power equals .88, and for an effect size of .20 power equals .93. According to Cohen (1988), power of .8 or higher is considered adequate for this type of field research. It is important to note that these power estimates are likely to be conservative estimates that are lower bound estimates of the actual power of the design. We plan to include child level covariates that are likely to decrease between-student residual variance such as gender, disability status, English Language Learner status, and age. In addition, we plan to intentionally oversample low quality programs serving high needs children, adding another 20 centers, 60 classrooms, 1,020 children. This would bring the total number of centers to 140, classrooms to 420, and children to 7,140, thereby also raising statistical power.

**Data Analysis:** To address the research questions regarding the associations between quality indicators and child growth, we will use a special case of HLM, three level organizational effects model, through the HLM software. This approach will be used to examine potential quality indicators for inclusion in the quality composite to be developed and will facilitate selection of quality indicators based on their associations with growth in child outcomes. While a complete description of the details of both the advantages and properties of HLM is beyond the scope of this proposal, the reviewer is referred to several references for a further description of the techniques to be used in analyzing the data from this project (Arnold, 1992; Bryk & Raudenbush, 1987; Bryk & Raudenbush, 1992; and Osborne, 2000). Descriptions of the process of application of this class of strategies to educational research can be found in (Burchinal, Bailey, & Snyder, 1994; Burchinal, 1999; Bradley, Corwyn, Burchinal, McAdoo, & Coll, 2001). In the proposed research application of HLM, the level one model will consist of child outcome fall to spring gains scores as the dependent variable. The level two models will be comprised of



classroom and teacher characteristics and quality indicators and the level three model will be used in the same way at the center level. The level three models will be comprised of contextual characteristics of the centers including the stratification variables (geographic region of the state, program type, and quality level) and will include the center level quality indicators. Children will be nested within their respective classrooms, which will be nested within their respective centers. Child characteristics such as gender, disability status, English Language Learner status, and age will be used as level one covariates. These predictors are expected both to reduce residual variance and thereby increase statistical power, and to account for their potential association with the observed growth patterns in the child outcomes. In addition, statistical power will be much higher for any effects that are larger than the very conservative values selected for these power calculations.

The three level HLM analytical strategy will allow offer several important advantages. First, separate models will be created for each outcome measure, allowing researchers to examine whether some quality indicators are more related to specific domains of child development. Second, the researchers will be able to estimate and begin to understand where the variability in child growth can be found within the state in several important ways. The unconditional models, the first step in analyzing the data for each outcome, include no predictor variables and simply provide variance decomposition to identify the proportion of the variance in child growth that can found between children within classrooms, between classrooms with centers, and between centers. These analyses will provide valuable information regarding the most appropriate strategies for targeting quality improvement programs. For example, if there is not variability between classrooms within centers for a particular outcome, but there is variability between centers, then working with whole centers will be more meaningful than with particular teachers within centers. Third, this analytical strategy will allow the researchers to simultaneously examine each of the following effects:

- The associations between child and family attributes and child growth across developmental domains
- The associations between teacher characteristics and child growth
- The associations between classroom structural characteristics and quality indicators and child growth

- The associations between the quality of teaching processes and teacher child interactions and child growth
- Differences in child growth across centers in different geographic regions, program types, and quality levels
- The associations between center structural characteristics and quality indicators and child growth.

Each of these effects occur within a particular level in the design and will lead directly to decisions to retain specific quality indicators in the quality composite scores. The researchers will also be able to use this proposed analytical strategy to test cross level interaction effects that may have important implications for the creation of the quality composite. The three level HLM organizational effects model allows the researcher to model whether quality indicators and organizational characteristics from one level in the model are associated with the slopes in another level in the model. Specifically, we will test:

- The relationships between teacher characteristics and the associations between child and family attributes and child growth
- The relationships between classroom structural characteristics and quality indicators and the associations between child and family attributes and child growth
- The relationships between the quality of teaching processes and teacher child interactions and the associations between child and family attributes and child growth
- The relationships between center structural characteristics and quality indicators and the associations between classroom and teacher quality indicators and child growth.

These more complex effects are often not easily included in HLM analyses. However, in the proposed design of this project they will be facilitated by the large sample size, high statistical power, and diversity of the sample across geographic regions, program types, and quality levels. Previous studies of the relationships between classroom and center quality and child outcomes may have failed to detect potentially important effects by leaving out these more complex interactions. For example, if there are center level quality indicators that do not have a direct effect on child growth, but that are found to influence child growth outcomes indirectly through their effects on teachers and their ability to support child growth, they may still be important

contributors to the overall quality composite measure.

Once the quality indicators are selected and the quality composite scores begin to be assigned to centers in the third year of the study, we will again select a sample of centers and classrooms for an additional validation study. We will use the same sampling plan to conduct two level HLM analyses in order to directly test the associations between the quality levels assigned to centers, based on the quality composite scores, and child growth. The level one model will include child gain scores as the dependent variable and child and family characteristics as the independent variables. Center quality designation will be the independent variable at level two to examine whether the quality levels are associated with differential patterns of child growth. Children will be assessed within their centers and the sampling plan will be modified to create a balanced sample across the quality levels. The results of these models will be used to modify and adjust the cut scores from the quality composite measure that are used to create the quality level designations in order to maximize differences in child outcomes between the quality levels.