



Massachusetts Quality Rating and Improvement System (QRIS)

Field Experiences with and Impressions of QRIS: Findings and Recommendations from the 2013 Provider Survey

A project funded by the Massachusetts Department of Early Education and Care with funding from a US Dept. of Education Race to the Top – Early Learning Challenge Grant

March 2014



MASSACHUSETTS
Department of Early Education and Care

Introduction and Background

The Massachusetts Quality Rating and Improvement System (QRIS) is a tool to assess, improve, and communicate the level of quality in early education and care settings throughout the Commonwealth. Developed by the Massachusetts Department of Early Education and Care (EEC) and the Massachusetts Board of EEC in collaboration with members of the early education and care community, the system is composed of four quality tiers or levels. Early education and care programs and providers achieve a level by meeting standards for each level in five categories: curriculum and learning; safe, healthy indoor and outdoor environments; workforce development and professional qualifications; family and community engagement; and leadership, administration, and management. Programs and providers progress within the system by working toward and achieving the standards for higher levels.

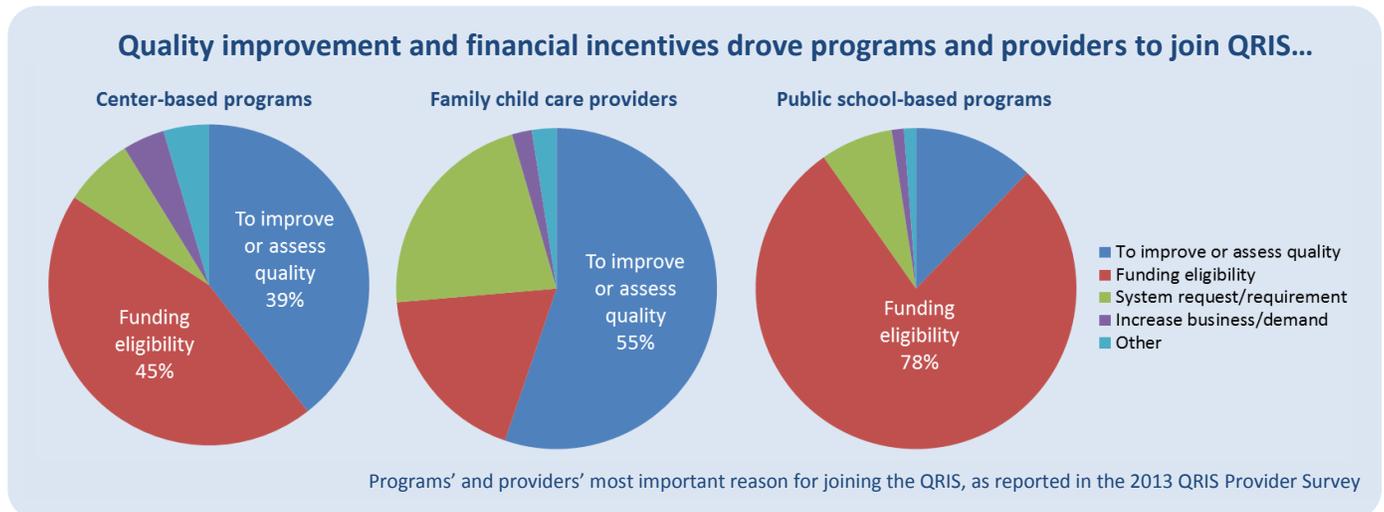
Reflecting EEC's ongoing commitment to engaging the early education and care community as it builds and strengthens the Massachusetts QRIS, the Department commissioned a survey of early education and care programs and providers. The purpose of the survey was to gather input and feedback about how the QRIS is working for participating centers, schools, and family child care providers, as well as the ways in which the system and support for the system can be improved. The confidential survey was administered to randomly selected early education and care programs from December 18, 2013, to January 15, 2014, by the UMass Donahue Institute (UMDI), an independent applied research and program evaluation organization working with EEC.

In total, early education and care professionals from more than 600 programs and family child care homes shared their experiences and feedback through the survey. This included 302 centers (a 65% response rate); 92 public school pre-kindergarten programs (a 75% response rate); and 224 family child care providers (a 45% response rate). Random selection of programs and providers, coupled with high response rates, suggests that the views expressed on the survey are reflective of those in the field more generally.

The information gathered through the survey is intended to help inform EEC as it continues to assess, implement, and improve its QRIS. This report summarizes survey findings related to a set of key research questions, offering a series of charts and related discussion for each. It concludes with a set of four major recommendations based on the overarching survey findings for consideration by EEC and others engaged in improving the quality of early education and care in Massachusetts, as well as some specific potential strategies related to each. Finally, three technical reports containing responses to all survey questions individually, as well as summaries of open-ended questions organized by provider type are available as separate documents.

Why did programs and providers join the Massachusetts QRIS?

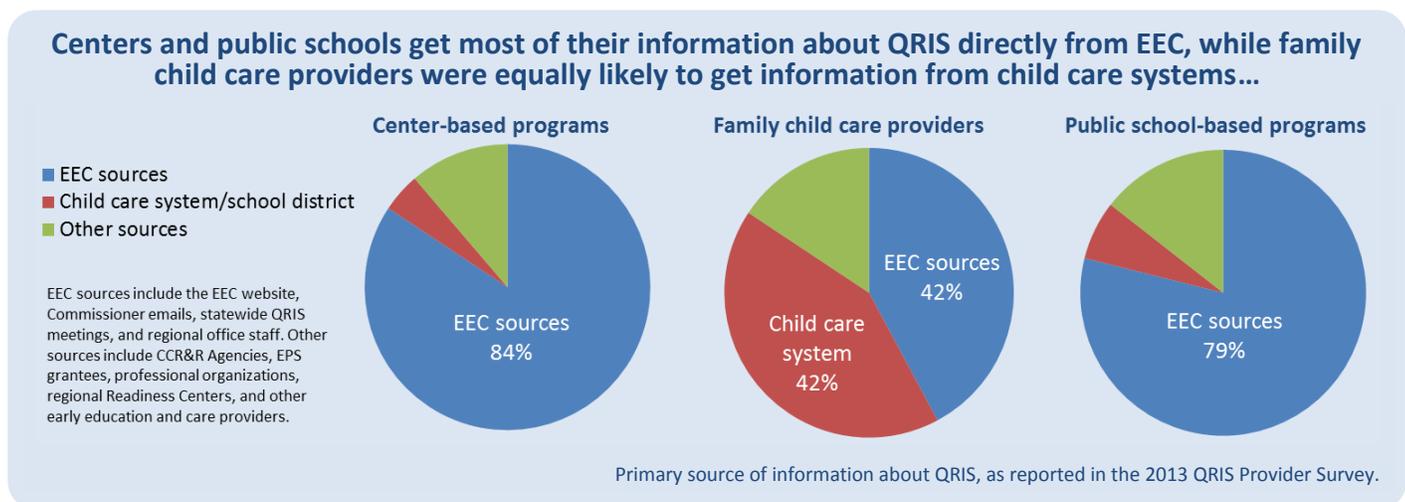
The most common reasons for joining the Massachusetts QRIS include a desire to remain eligible for funding, a desire to improve and/or assess quality, and, in the case of family child care providers, a request or requirement from child care systems that their providers join. The relative importance of these reasons varied across care settings. Family child care providers tended to join the system mainly as a way to improve or assess their quality (55%), while public schools entered primarily to maintain eligibility for EEC grants or other funding (78%). Centers were more mixed in their reasons for joining, with relatively similar proportions doing so to maintain funding eligibility (45%) and to improve or assess their quality (39%).



Increasing business and/or making their programs more attractive to families were secondary considerations for some centers (39%) and family care providers (50%), but were not typically considerations for public schools (9%).

Where do programs and providers get information about QRIS?

Centers and public schools (84% and 79%, respectively) get most of their information about QRIS directly from an EEC source, most often the EEC website. Family child care providers, on the other hand, are as likely to get most of their information about QRIS through their child care systems (42%) as they are to get it directly from EEC (42%), suggesting a more diverse information pathway for this group.

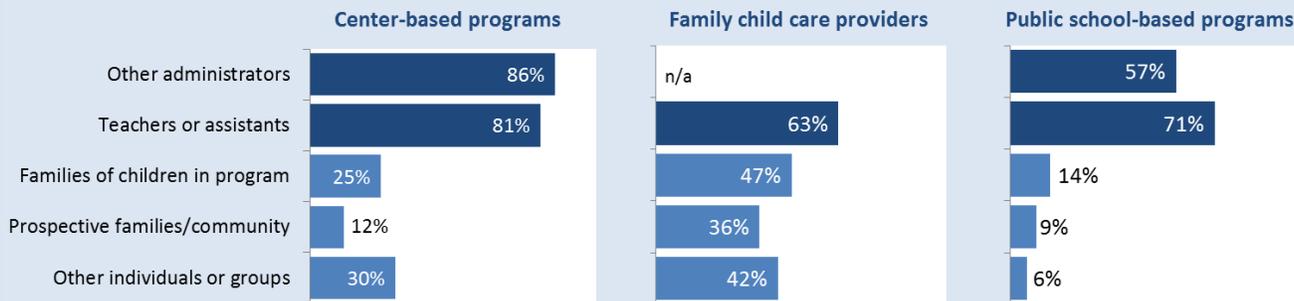


Furthermore, while few center- and school-based respondents said they did not get any information directly from EEC (2% of centers and 10% of schools), about one in three family child care providers did not use an EEC source to get information about QRIS.

Are programs and providers sharing information about their QRIS self-assessments?

In addition to receiving information about QRIS, programs and providers are also sharing information about their QRIS self-assessment. Typically, this information is shared with other administrators and teachers (in centers and public schools) and with assistants (in family child care). Information is less often shared with families and prospective families. Family care providers are more likely to share information with families, and to a lesser extent, prospective families. Other individuals with whom information is commonly shared include boards of directors (centers) and child care systems (family child care providers).

Information about QRIS self-assessments is often being shared with administrators and educators; it is less often shared with families and others in the community...

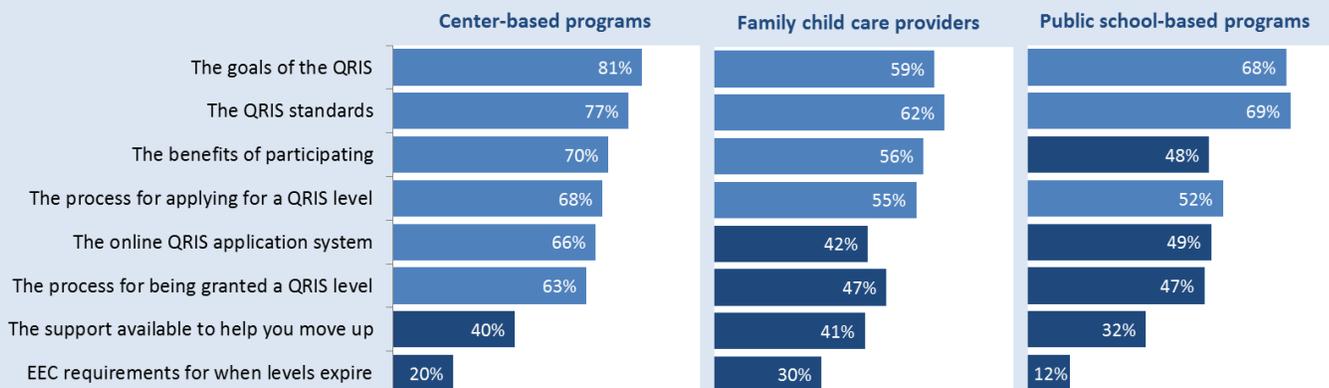


Proportion of respondents sharing "quite a bit" or "a great deal" of information with each group, as reported in the 2013 QRIS Provider Survey.

How well do administrators and providers understand the QRIS system?

At this point, many in the field feel they have a good understanding of the QRIS system's goals and standards. There is typically less understanding about next steps for programs and providers once they are in the system, including support to help them improve and progress in the system and EEC requirements for when levels expire, indicating a widespread need for further communication about these aspects of the QRIS. The need for further outreach and communication appears to be greatest for family child care providers and those in public schools, who reported lower levels of understanding overall, and for whom there were more areas in which a majority of respondents felt they had little to no understanding. These include the online application system, the process for being granted a QRIS level, and in the case of public schools, the benefits of participating.

Survey data show an emerging understanding of the QRIS system, but suggest a need for further outreach and communication, particularly as it relates to next steps...



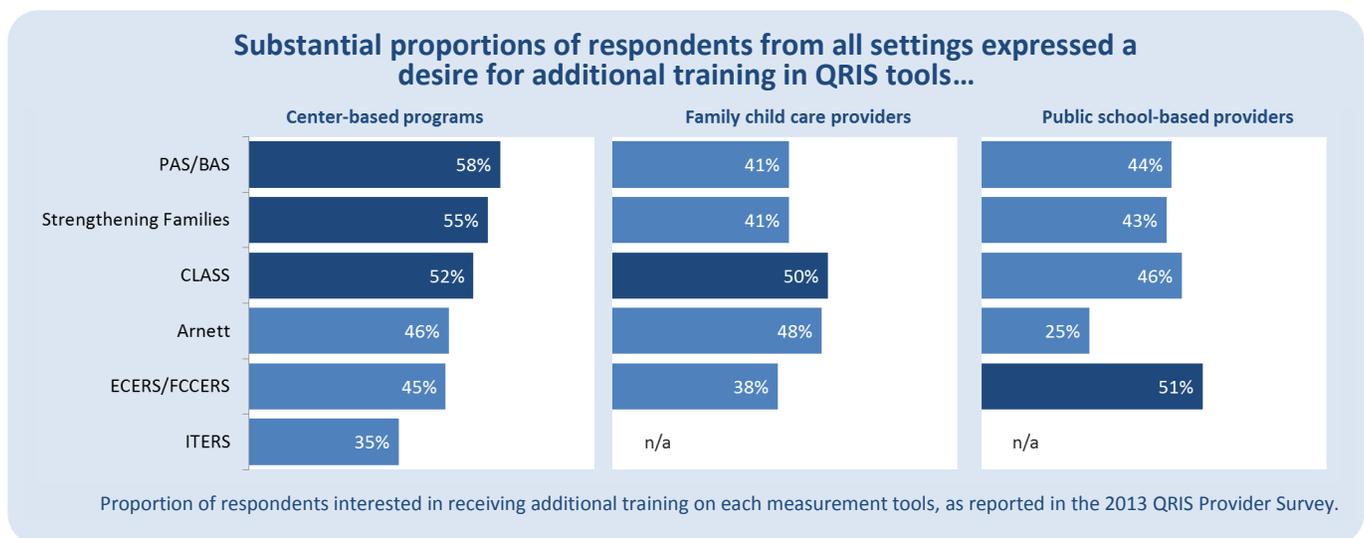
Proportion of respondents indicating they understand each area either "quite a bit" or "completely," as reported in the 2013 QRIS Provider Survey.

Even for the areas where most respondents feel they have a good understanding, very few indicate that they have a complete understanding. This suggests that there are significant opportunities to further build field-level understanding and support among programs and providers of all types as the system matures.

Have providers been trained in QRIS tools? What additional training is desired?

Most respondents from centers and family care settings felt they had received a good amount of training on the Early Childhood Environment Rating Scale or ECERS (53%) and the Family Child Care Environment Rating Scale or FCCERS (72%), two key QRIS measurement tools. Less training was received on the other measurement tools in the system, including the Infant Toddler Environment Rating Scale (ITERS), the Arnett Caregiver Interaction Scale, the Classroom Assessment Scoring System (CLASS), and, in the case of those from center-based programs, the Program Administration Scale (PAS) and Strengthening Families Self-Assessment. Public school-based respondents typically received little or no training in any of the tools included in the QRIS, including the ECERS.

With regard to all tools, sizeable proportions of respondents expressed a desire for additional training, ranging from 25 percent to 58 percent on the various tools. More than half of center-based respondents were interested in additional training in the PAS, the Strengthening Families Self-Assessment, and the CLASS. Public school-based respondents, on the other hand, were most interested in training in the ECERS, although a large portion (45%) of center-based respondents also expressed interest in additional training in this tool. Family child care respondents expressed the greatest interest in additional training in the systems tools to measure interaction, or the CLASS (50%), followed by the Arnett (48%). Those from public schools were much more interested in training in the CLASS (46%) than they were in training in the Arnett (25%).



Do programs and providers see QRIS ratings as accurate reflections of quality?

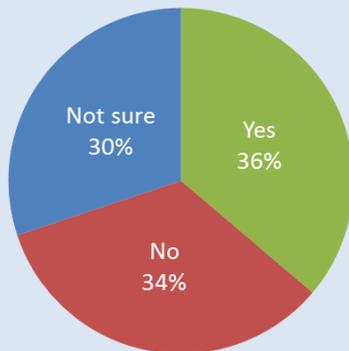
More than half of family care providers believe that QRIS levels accurately reflect an early education and care provider’s quality (54%), while those from centers are relatively evenly split between those who believe the system’s ratings are accurate reflections of program quality (36%), those who believe they are not (34%), and those who are not yet sure (30%). To some extent, the greater degree of buy-in among family care providers could be due to messaging from system representatives, who in UMDI focus groups described emphasizing quality improvement and the benefits of the QRIS to providers, even though they may have had concerns about specific aspects of the QRIS and its standards. Public schools administrators were most often unsure about the accuracy of QRIS ratings (42%), again suggesting a need for outreach to this group about the system overall.

Among those who did not believe the ratings were accurate reflections of quality, the reasons differed across provider types. Those from centers emphasized what they viewed as unrealistic requirements for staff educational attainment in order for programs to progress in the system, as well as the system’s lack of a pathway for veteran

educators with significant experience in the field but no degree. Those from public school-based programs frequently cited a lack of alignment between QRIS standards and Department of Elementary and Secondary Education (ESE) requirements. The administrative burden of applying for the system’s higher tiers—which some felt led programs to remain in the system’s lower tiers despite offering higher quality early education and care—as well as what they viewed as the system’s lack of alignment with National Association for the Education of Young Children (NAEYC) accreditation process were also common concerns among those from centers and schools. Family child care providers, on the other hand, typically expressed concerns that QRIS does not adequately capture what it means to be an effective family child care educator, and felt the system included requirements that do not easily fit a home-based care environment.

Respondents report mixed views about whether QRIS ratings accurately reflect a program’s quality...

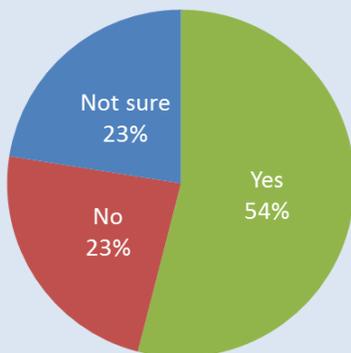
Center-based programs



The most common concerns of center-based respondents indicating no...

- ✓ Staff education requirements and/or the fact that the system does not take into account experience
- ✓ The administrative burden of the QRIS application and/or lack of incentives that has led some programs to remain in lower levels than they would receive if fully rated
- ✓ Lack of flexibility around requirements that do not fit all programs
- ✓ The system has too many requirements and/or places too much emphasis on things not viewed as central to quality
- ✓ The QRIS does not take into account NAEYC accreditation in determining levels

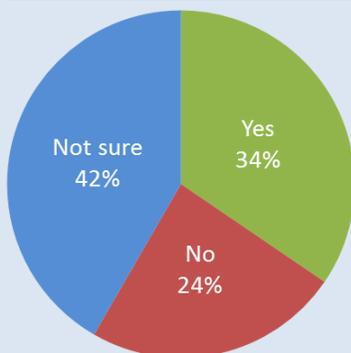
Family child care providers



The most common concerns of family child care providers indicating no...

- ✓ Doesn't adequately capture qualities of a good family child care educator, such as compassion, caring, and nurturing interactions
- ✓ Includes requirements or tools that don't fit the FCC setting
- ✓ Places too much emphasis on education and training over practice
- ✓ Includes too many requirements, or requirements that are overly time-consuming or costly

Public school-based programs



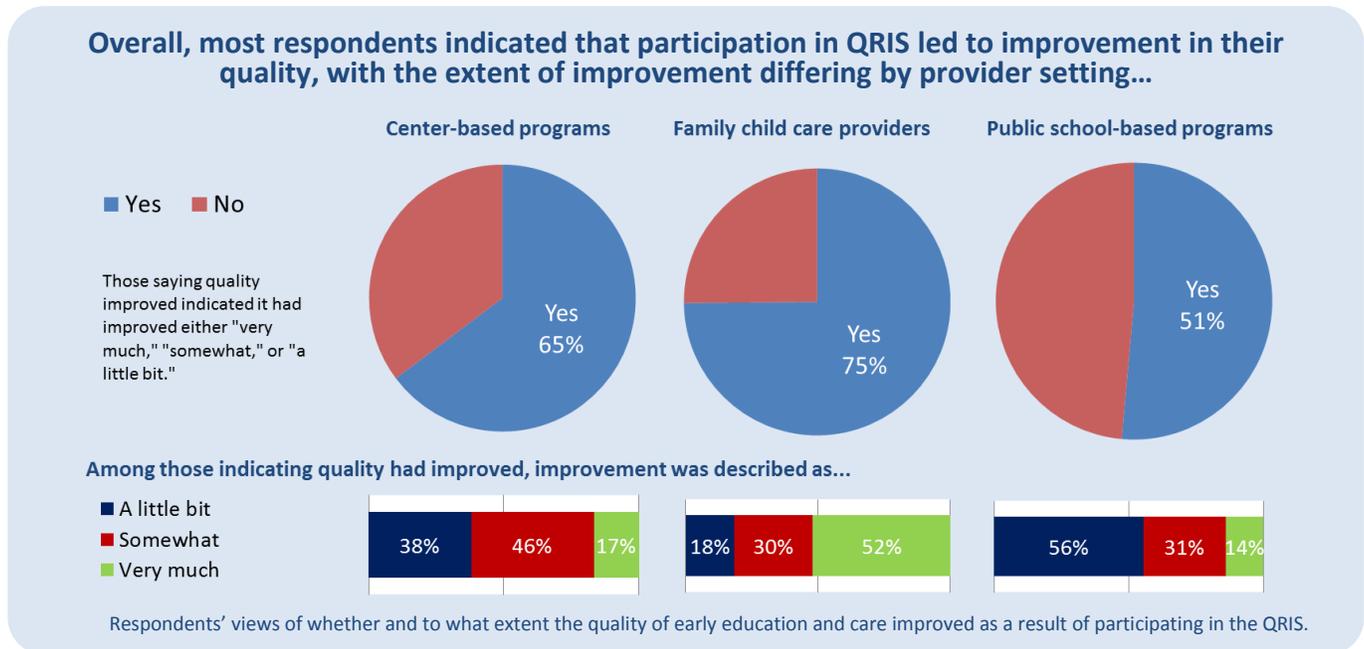
The most common concerns of public school-based respondents indicating no...

- ✓ The system does not account for or align with ESE requirements for Massachusetts public schools
- ✓ The administrative burden of the QRIS application and/or lack of incentives that has led some programs to remain in lower levels than they would receive if fully rated
- ✓ The system does not align with or take into account NAEYC accreditation
- ✓ Issues with system capacity, such as limited access to reliable raters and/or a long wait time to be granted into the system’s higher levels

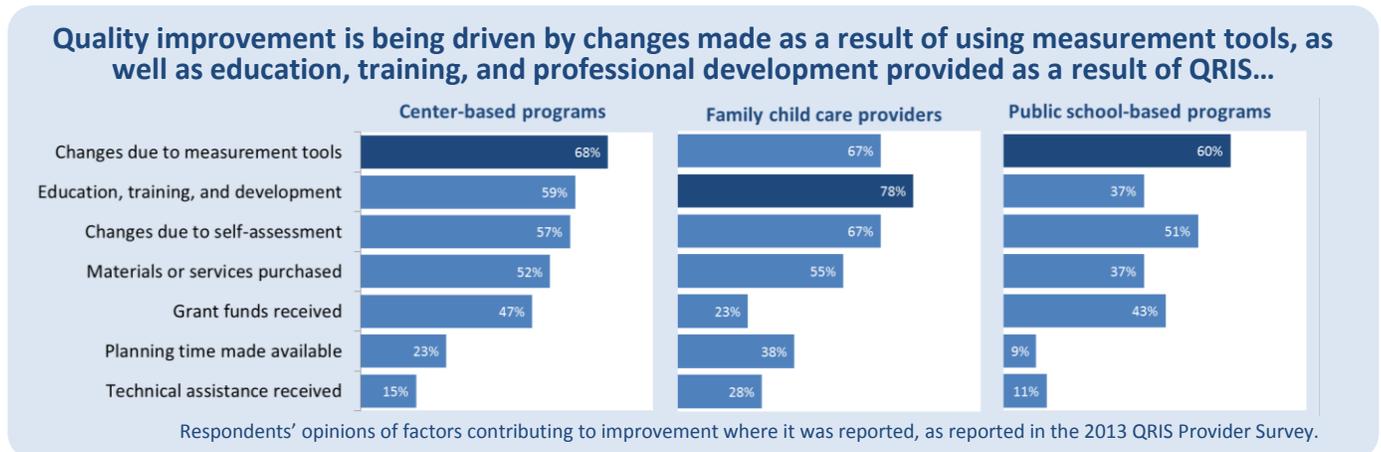
Respondents’ views of whether they believe QRIS ratings accurately reflect a program or provider’s quality, and for those indicating no, the reason(s).

Has QRIS contributed to quality improvement in participating programs and providers?

Most respondents believe their participation in QRIS has led to an improvement in the quality of early education and care they provide, with proportions ranging from 51 percent for public schools to 75 percent for family child care providers. Family care providers generally believed their quality had improved either somewhat or very much so, while for centers, improvement was most often described as little or somewhat. For public schools, among those who reported improvement, in most cases, the extent of improvement was described as a little.



In centers and public schools, improvement in quality was most commonly attributed to changes made as a result of using the measurement tools included in the system, such as the environment rating scales. Changes made as a result of conducting the QRIS self-assessment were also commonly viewed as contributing to quality improvement in both settings, as was professional development and training offered, and materials or services purchased because of QRIS for center-based respondents. Family child care providers were most likely to attribute changes in quality to professional development and training, but also frequently mentioned changes made as a result of using the measurement tools, changes made as a result of the self-assessment, and materials or services purchased because of QRIS.

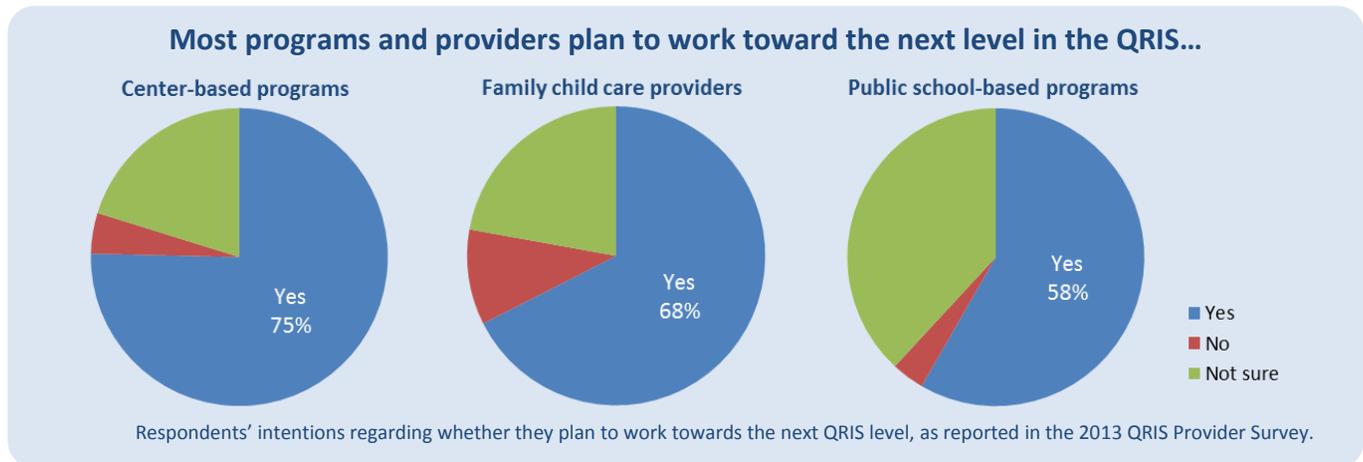


The finding that family care providers were those most likely to view the QRIS as having a positive influence on their quality may be attributable to the fact that many family child care providers described how QRIS helped build their awareness about best practice and offered clear strategies and support, either through their systems or otherwise, to

improve. It also may reflect the fact that centers and public schools typically have more complex infrastructure and support systems, some of which may already have quality improvement as a focus, such that improvement from any single intervention, including QRIS, would be expected to be more gradual.

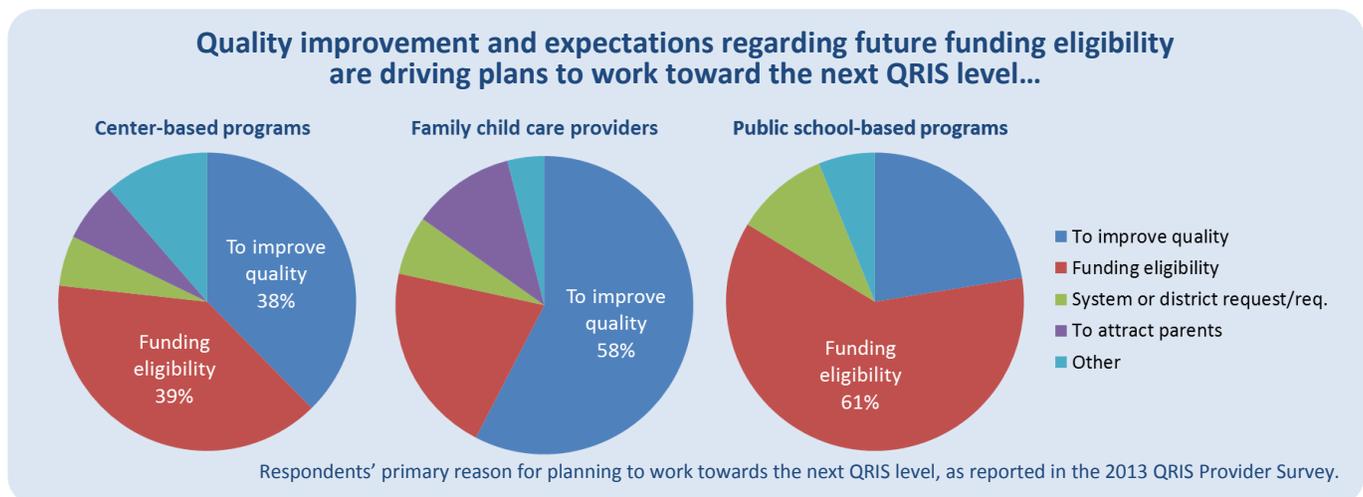
Do programs and providers plan to work toward the next level in the QRIS?

At this point, most surveyed programs and providers plan to work toward the next level in the QRIS. This includes 58 percent of public schools, 68 percent of family child care providers, and 75 percent of centers. Those not currently planning to work toward the next level were typically undecided with regard to their next steps in the system.



Of those who planned to work towards the next level, the vast majority were optimistic about their prospects for achieving that level (ranging from 87% for centers to 96% for public schools), and most expected to submit their self-assessment for the next level within the next year (ranging from 58% for centers to 71% for public schools).

As with initial reasons for joining the system, programs' and providers' primary rationale for pursuing the next level varied across care settings. For example, family child care providers indicated that they planned to do so mainly as a way to improve their quality (58%), while in public schools, plans were generally attributed with an expectation that attainment of the next level would be required to maintain eligibility for EEC grants (61%). Centers were more mixed in their primary motivation for trying to move up in the system, with relatively similar proportions indicating they planned to do so because of expectations regarding funding eligibility (39%) and as a way to improve quality (38%).



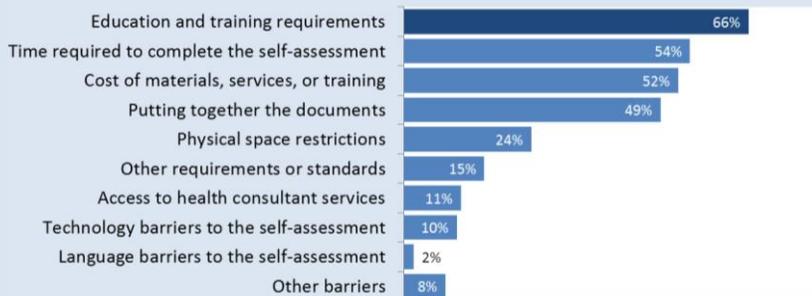
Those who do not plan to work towards the next level, were not sure, or did not expect to achieve the next level in the near future primarily indicated that they were either not sure about their next steps or were waiting for further direction from EEC, their child care system, or their school district (67% across all provider types). Uncertainty about next steps was most prevalent among public schools, where a majority were waiting for further direction (56%).

What barriers do programs face in moving up in the QRIS? How can they be overcome?

Education and training requirements were viewed as the primary barriers preventing centers from moving up to the next QRIS level, with 66 percent of respondents saying that education and training requirements would hinder their advancement in the system. For family care providers, the most frequently cited barriers were the time required to complete the self-assessment (47%); the cost of material, services, or training required (47%); and putting together the documentation (47%). These three barriers—time, cost, and documentation—were also significant barriers for nearly half of centers. In public school-based settings, the primary barriers were time to complete the self-assessment (62%) and putting together the required documents (51%).

Education and training requirements were seen as the primary barriers to move to the next QRIS level. Time and costs were also viewed as challenges...

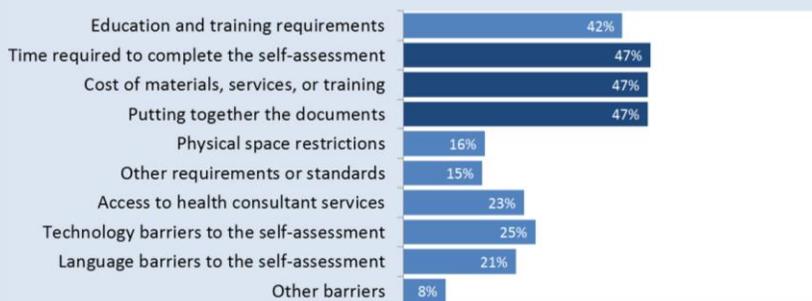
Center-based programs



Most common suggestions from center administrators to overcome barriers:

- ✓ Increased funding opportunities and/or reimbursement rates at higher levels
- ✓ Individualized on-site QRIS consultation and technical assistance
- ✓ More EEC-funded college courses, trainings
- ✓ Greater flexibility in levels and ratings
- ✓ Simplified tools, paperwork, and application

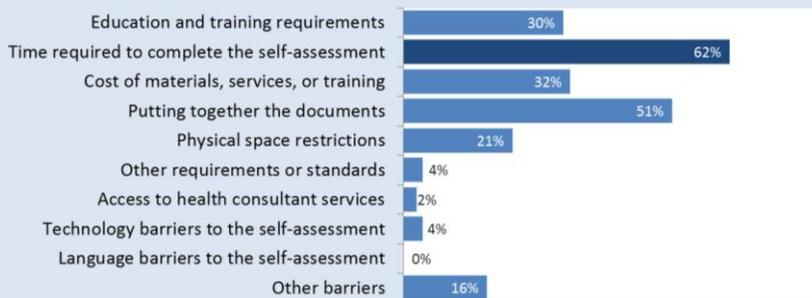
Family child care providers



Most common suggestions from family child care providers to overcome barriers:

- ✓ Increased funding opportunities and/or reimbursement rates at higher levels
- ✓ Individualized on-site QRIS consultation and technical assistance
- ✓ More EEC-funded college courses, trainings
- ✓ Spanish language support

Public school-based programs



Most common suggestions from public school administrators to overcome barriers:

- ✓ Individualized on-site QRIS consultation and technical assistance
- ✓ Increased funding opportunities
- ✓ Simplified tools, paperwork, and application

Proportion of respondents indicating each as a main barrier to moving up to the next or higher level, and the most common responses about support that can help overcome barriers, as reported in the 2013 QRIS provider Survey.

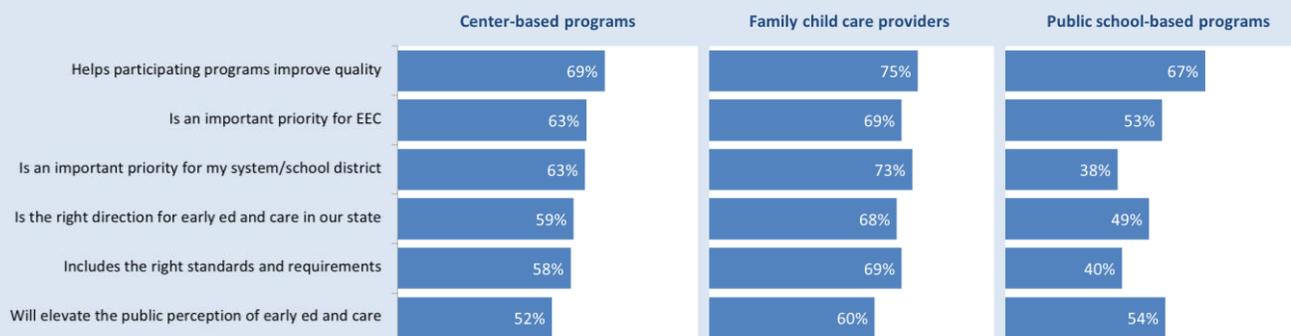
A number of possible strategies were offered to help support centers, schools, and family child care providers in overcoming barriers and advancing in the system. These include increased funding opportunities and/or higher reimbursement rates for providers that reach higher levels; on-site QRIS consultation and technical assistance; simplifying or streamlining the QRIS self-assessment, tools, and paperwork required; and in the case of centers and family care providers, increased access to EEC-funded college courses and trainings. In addition, a number of

respondents from centers suggested a need for greater flexibility in relation to some of the standards or how standards are met so programs are not unnecessarily held back by one or two standards.

What are early educators’ overall impressions of QRIS and its requirements?

Across all settings, a majority of early educators from programs participating in QRIS believe the system helps programs improve, that it is an important priority for EEC, and that it will ultimately help elevate the public perception of early education and care in the state. Family care providers were most positive about the system. Within this generally positive sentiment across all sites, responses also reveal opportunities to further build support for the system moving forward. For example, sizeable minorities—and in some cases a majority of those from public schools—did not yet believe that the system includes the right standards, is the right direction for the state, is an important priority for EEC and their own system and districts, and will have the intended effect of elevating the public perception of early education and care. In fact, only about 38 percent those from public schools indicated that QRIS is an important priority for their school districts, and 40 percent felt that the system’s standards and requirements were the right ones for their setting.

Most early educators believe QRIS helps programs improve, although overall perceptions of the system across provider settings were mixed...



Proportion indicating strongly agree or somewhat agree to each statement, as reported in the 2013 QRIS Provider Survey.

Many of those who expressed skepticism about QRIS standards and requirements attributed this to concerns that progression may be hindered due to one or two criteria because the system requires them to achieve all standards before moving to the next level. It was noted that this led some programs and providers, particularly smaller ones, to become frustrated and disengaged. As indicated elsewhere in this report, education requirements were a particular concern for centers and family care providers, as were some of the aspects of the system related to physical space and environment. Several respondents from public schools and family care settings also felt that some aspects of the system were designed without their settings in mind.

What changes would centers, schools, and family care providers most like to see?

Respondents in all three settings highlighted several changes that they would most like to see made to the QRIS, including the following:

- Expanded access to clear and consistent information about the system, its requirements, and timelines;
- Increased support and technical assistance from EEC, both to enter the system and to improve quality;
- Reduced complexity by decreasing the amount of paperwork required, reducing the number of measurement tools, and/or removing standards not viewed as integral to quality; and
- Greater flexibility and/or alternative pathways by which programs can meet quality standards or attain levels so all programs have an opportunity to succeed.

In most cases, the recommendation about flexibility typically related to a desire for alternative ways to meet one or more specific standards or indicators in measurement tools, such as those related to educational attainment or

physical space. In public school settings, however, many suggested a need for entirely separate and distinct rating system for their programs, which they saw as operating in fundamentally different ways.

In addition, those from centers and public schools also expressed a desire that the system be altered in ways that align with the other existing quality standards and requirements for their programs—for centers, NAEYC accreditation and Massachusetts licensing regulations, and for public schools, NAEYC accreditation and ESE regulations and requirements. Family child care providers additionally emphasized a need for affordable trainings and/or professional development resources, as well as in some cases, availability of trainings in Spanish.

Respondents offered several recommendations for how QRIS could be improved...

From center-based programs

- ✓ Alignment of QRIS requirements with licensing and NAEYC
- ✓ Increased access to clear and consistent information about the system
- ✓ Expanded access to technical assistance and support
- ✓ Alternate pathways to achieve rating requirements, particularly educational attainment
- ✓ A simplified system that minimizes paperwork, reduces the number of measurement tools, and removes standards not integral to quality

One change would be to value the experience teachers have over a couple of extra years of college. A person that stays in this field year after year, meeting all the challenges, does it because they care about their students, parents, and school, and that is what makes a "quality" program....

From family child care providers

Make the requirements more understandable so we can easily refer to the information. I think that I get lost because I don't know where to find information on each QRIS level and the requirements of each level. I always have to follow what others say, which makes it very difficult as there are many opinions.

- ✓ Increased access to clear and consistent information about the system
- ✓ More technical assistance and support
- ✓ A simplified system that minimizes paperwork, reduces the number of measurement tools, and removes standards not integral to quality
- ✓ More affordable trainings and professional development resources
- ✓ Alternate pathways to achieve rating requirements, particularly those related to education and physical space
- ✓ Access to additional funds and resources
- ✓ Availability of trainings in Spanish

From public school-based programs

- ✓ Alignment of QRIS requirements with NAEYC and ESE
- ✓ An alternate rating system that acknowledges the public school context
- ✓ Increased access to clear and consistent information about the system
- ✓ More technical assistance and support
- ✓ A simplified system that minimizes paperwork, reduces the number of measurement tools, and removes standards not integral to quality

Somehow separate out public school programs versus privately run programs. Some of the requirements are met by simply being in a public school setting, others are more difficult to meet [due to our setting and requirements].

Most common responses about the one change respondents would recommend for the Massachusetts QRIS from the 2013 QRIS provider Survey.

While open-ended responses reveal some lingering skepticism and concern about the QRIS among some, many others expressed a commitment to the underlying concept and goals of the system and optimism that, with some changes, the system would ultimately help improve the quality of early education and care in Massachusetts. "I am excited about the work going on to improve the system," said one center director, adding, "[I] think it will be successful." Others noted that they already to see benefits to their own programs and expressed appreciation for the opportunities that the QRIS had provided. "It is a positive step to ensure high quality early child care to ALL children and families," wrote one respondent.

Ultimately there appears to be a strong desire for a QRIS that emphasizes aspects of quality that are most meaningful, offers a realistic and achievable pathway for advancement, and provides support to help programs improve. "I believe [the QRIS] is great and has put early childhood education in the limelight where it should be," noted one center director. "The focus should just be channeled in a more realistic manner. Those of us who continuously strive to be better are growing weary. I would hate to see the passionate educators become complacent because they feel they are doing busy work rather than important work."

Conclusion and Recommendations

Across the Commonwealth, the Massachusetts Quality Rating and Improvement System is helping place early education and care quality and improvement in the spotlight. Responding to financial incentives, as well as their own desire to improve and offer “high quality education for children and their families,” thousands of early education and care programs and providers joined the QRIS since its launch in January 2011. Survey results reveal that a majority of early educators from programs participating in QRIS believe the system helps programs improve, that it is an important priority for EEC, and that it will help elevate the public perception of early education and care in the state.

In addition, most of those participating in the QRIS feel their own quality has begun to improve, with many stating they now have clearer goals and improvement plans, along with better supports and strategies to achieve them, and that participation in the QRIS has increased self-reflection in response to assessments and evaluations. It is clear that, despite some ongoing skepticism and frustration with how QRIS was executed in the past, most programs acknowledge the inherent value in a quality improvement system and are grateful for the push forward.

Most participating programs and providers plan to continue working towards the next or higher QRIS level, including three quarters of centers, two thirds of family care providers, and half of public schools. As such, Massachusetts has a significant opportunity to build on its success in bringing providers into the system by attending to those aspects that pose the greatest challenges to ensure its QRIS can support participating programs and providers in achieving their goal of improved quality. The following recommendations and related strategies are presented for consideration by the EEC and others engaged in improving early education and care quality in Massachusetts.

Recommendation 1: Develop a robust infrastructure to help programs and providers improve and advance.

- **Ensure adequate support is available as programs and providers attempt to advance.** Many of those in the system expect to advance to the next or higher QRIS level, most of whom plan to submit their self-assessment within the next year. Having logistical and technical infrastructure in place to accept, verify, and communicate about these applications in a timely manner will contribute to programs’ and providers’ support for QRIS moving forward.
- **Expand on-site support and technical assistance for programs and providers.** Early educators view the QRIS as offering a pathway to improve quality, but many need outside assistance to succeed. While grants and tiered reimbursement rates were commonly indicated needs, many also believe greater access to individualized QRIS consultation and technical assistance could help accelerate quality improvement.
- **Offer additional training in the measurement tools included in the system to build programs’ and providers’ capacities to effectively use these tools.** Changes made as a result of the QRIS measurement tools are typically considered important catalysts of quality improvement among those who feel the system has helped improve quality. There are still large numbers of early educators who say they have received little, if any, training in some of these tools, and many expressed a desire for additional training. Meeting this need could help accelerate improvement by promoting more widespread and effective use of key tools.
- **Increase access to EEC-funded or reduced-cost college courses and trainings.** Access to additional college courses and trainings required as part of the system was another commonly expressed need. This was a particularly strong concern among family care providers.

Recommendation 2: Simplify and align QRIS with other quality measures and requirements.

- **Where possible, reduce complexity by decreasing paperwork, reducing the number of measurement tools, and removing standards not viewed as integral to quality.** One of the most common concerns about the QRIS relates to the time required to complete the self-assessment. Reducing the paperwork required and focusing on a smaller set of measurement tools were suggested as ways to make the system more user-friendly and encourage participation and progress. Furthermore, many early educators stressed the need for a QRIS that emphasizes aspects of quality that are *most* important so that limited time, attention, and resources can be focused on making changes that will have the greatest impact for children and families.

- **Consider QRIS, NAEYC, and licensing in relation to one another, and where appropriate, align and streamline systems so that they can function in complementary ways.** Many center- and school-based respondents expressed frustration about the need to participate in the QRIS when they were already NAEYC accredited. Others remarked about redundancies, and also in some cases inconsistencies, between the two systems. To a lesser extent, these concerns extended to licensing and perceived redundancies between those systems. Attention to these concerns, with the goal of minimizing redundancy, removing inconsistency, and clarifying how these systems can complement each other, is of utmost importance to early educators.
- **Consider the role of public schools in the QRIS and how the system can be aligned to best support quality improvement in school-based settings.** Those from public schools often expressed that the QRIS does not take their settings into account, and that the system needs to better align with not only NAEYC requirements, but also ESE requirements. To some extent, if public schools continue to be included in the QRIS, they may require a different set of standards developed in partnership with ESE and, if possible, representatives from school-based early educators.

Recommendation 3: Remove or reduce common barriers to maximize success.

- **Address the issue of higher education requirements for centers and family care providers.** For center and family-based educators, current education requirements in QRIS are one of the most contentious issues. Although the benefits of education were acknowledged, many view current QRIS requirements as unrealistic, unnecessary, or unsustainable and pointed to these requirements as the primary barriers hindering progress in the system. Without increases in reimbursement rates, programs are concerned they will be unable to retain, much less attract, early educators with bachelor's degrees. Considering ways to acknowledge the experience and skill of veteran educators who do not have degrees would also help to address these concerns.
- **Consider providing greater flexibility in relation to some of the standards or how the standards are met.** Many in the field were concerned that programs and providers find themselves held back or "stuck" because of just one or two standards or requirements. This inability to advance could lead programs and providers to become disengaged with the QRIS, particularly if the barriers were outside of their control, such as those related to physical space, or where requirements contradicted a particular program's philosophy or program model. To some extent, flexibility in how measurement tools are scored and taken into account for QRIS purposes will likely help alleviate some of these issues. Another option for increasing flexibility could involve alternative approaches to the assignment of levels, such as a point or hybrid system.

Recommendation 4: Enhance communication and messaging to build on initial success of QRIS.

- **Develop focused messaging plans to ensure that programs and providers of all types have access to clear and consistent information about the system, its requirements, and its timelines.** Notably, programs and providers want to take the next steps in the QRIS, yet expressed limited understanding of aspects of the system regarding what to do next. Differences in the communication needs between early education and care settings suggest the need for customized approaches for each type of program that take into account both messaging priorities and the most effective means of communication.
- **Build momentum and enthusiasm by capturing early success stories.** Most of those participating in the QRIS believe the system has helped them improve quality. Hearing successful first-hand experiences from early educators may go a long way toward helping a variety of audiences understand the benefits of the QRIS and build support for the system as a way to ensure high quality early education and care for children and families across the Commonwealth.

The Massachusetts QRIS reflects a critical strategy in the state's efforts to improve early education and care quality for all children, and its ongoing success has been and remains an important priority for EEC. A number of efforts are already underway to improve the system, including the establishment of working groups and active pursuit of several changes in policy. As these efforts continue, sustained attention to those aspects of the system identified by programs and providers as those most in need of improvement, as well as a well-planned and adequately resourced strategy to support QRIS in the years ahead will likely help Massachusetts continue to build on its strong foundation of quality through licensing and further enhance and improve quality across the Commonwealth.