

Texas Rising Star 4-year Review Workgroup Follow Up Item – Continuous Quality Improvement (CQI) Framework

A Continuous Quality Improvement (CQI) plan would allow providers to more effectively and efficiently enhance the quality of care provided. This document provides some considerations for the Workgroup when reviewing Texas Rising Star measures and implementation options.

Implementation Considerations

To provide accountability for participation within a CQI, some items to consider are:

1. Require participation within a CQI plan for all Texas Rising Star early learning programs (ELP). Mentors would be tasked with creating the CQI with the ELP and then following up with the ELP to denote if there has been completion of the goals stated within the CQI. A structural measure could be added within Category 1 that simply accounts for a CQI plan being in place and in process.
2. Options for failure to comply: immediate reassessment with possible change to star level or local flexibility to not allow participation in quality activities
3. CQI plans would be created at full assessments and modified at category re-assessments or monitoring visits with options of completion timeframes and minimum mandatory mentoring timeframes (3-month, 6-month, 9-month or 12-month).
4. CQI plans would be reviewed by the assessor at the monitoring visit to denote that the plan is in process. Results from the monitoring visit may require the CQI plan to be modified to assist the ELP in maintaining current star level recognition. CQI plans are meant to be working documents. This would allow for Service Improvement Agreements (SIA) to no longer be needed.
5. CQI plans are leveled (Entry, 2-star, 3-star, 4-star Maintenance Plus), so that they only focus on what is needed for the ELP to advance a star level. This would be specific to the ELP needs and goals set by the mentor and the director.
6. A self-assessment/preliminary assessment is conducted by the ELP Director or the mentor once the ELP expresses interest in Texas Rising Star, for baseline purposes only. A CQI plan is derived from the results of preliminary assessment.
7. For those ELPs assessed at 4-star, they would be provided a “Maintenance Plus” CQI plan which sets goals for an ELP to reach their highest potential for quality care. This level could include indicators that Texas values but recognizes may not be feasible within TRS as this time (wages, benefits, ratios, staff education, etc.)

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Leveled CQI Plan Option example:

CQI Level	Process
Entry Level	<ul style="list-style-type: none"> • A Preliminary Assessment (or self-assessment) is conducted by the mentor (the ELP Director), for baseline purposes only. • An Entry level CQI plan is derived from the results of the preliminary assessment. • The program is provided mentoring to be initially assessed to at least a 2-star level. Timeframe is set based on program and mentor agreement.
2-Star	<ul style="list-style-type: none"> • From the results of a 2-star assessment, mentors will assist the program to create a CQI Plan with the goal to become a 3-star ELP or to maintain current star level. • The program goes through a mandatory minimum of 6 months of mentoring (with the option of up to 3 years) prior to the program’s next full assessment. Goal is to be assessed as at least 3-star. • Monitoring visits would confirm completion of CQI plan goals or reference for modifying CQI plan, instead of SIA placement.
3-Star	<ul style="list-style-type: none"> • From the results of a 3-star assessment, mentors will assist the program to create a CQI Plan with the goal to become a 4-star ELP or to maintain current star level. • The program goes through a mandatory minimum of 6 months of mentoring (with the option of up to 3 years) prior to the program’s next full assessment. Goal is to be assessed as a 4-star. • Monitoring visits would confirm completion of CQI plan goals or reference for modifying CQI plan, instead of SIA placement.
4-Star Maintenance Plus	<ul style="list-style-type: none"> • From the results of a 4-star assessment, mentors will assist the program to create a CQI plan to maintain a 4-star level and set goals to reach their highest potential for quality care. • Monitoring visits would confirm completion of CQI plan goals or reference for modifying CQI plan, instead of SIA placement.

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Measures noted

Category 1: Director and Caregiver Qualifications
<p>S-DQT-02: TRS Director Certification Course Similar to model of Taking Charge of Change-TCC Leadership Academy can count towards annual CCL training hour requirements *Based on availability</p> <p>Note: The TRS Director Certification Course will be developed. Please mark N/A for this item until the course becomes available.</p> <p><i>*Currently a met/not applicable scoring system.</i></p>
<p>S-DQT-04 Director Responsibilities: Ensure all caregiver staff have a written training plan</p> <p><i>Annual caregiver training plans with certificates.</i></p>
<p>P-DEQT-04, Part 4: Director Experience (All facilities but school age) None 2 years of experience = score of 1 3 years of experience = score of 2 4+ years of experience = score of 3</p>
<p>P-DEQT-05, Part 7: Director Experience (School-Age only programs) None 1 years of experience = score of 1 2 years of experience = score of 2 3+ years of experience = score of 3</p>
<p>S-COTQ-03: Caregiver Staff Training An individualized plan provides for a minimum of 30 clock hours of child care related training specific to the age of the children in their care.</p> <p><i>Annual Caregiver Training Plans with Certificates</i></p>
<p>P-CQT-03: Staff Training Alignment Caregiver training topics are aligned with core competencies</p> <ul style="list-style-type: none"> • 0= less than 50% of the training is aligned with core competencies • 1= 50% of the training topics aligned with core competencies • 2= 65% of the training topics aligned with core competencies • 3= 80% of the training topics aligned with core competencies

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Category 3: Lesson Plans and Curriculum – Planning for Special Needs and Respecting Diversity

P-PSNRD-01: Consideration for children in a Bilingual program.

Plan includes specific strategies for using child's home language to support the development of English language skills. This could include supports such as visual and gestural cues to promote learning.

Score 0= <2 strategies per month
Score 1= 2-3 strategies per month
Score 2= 1 strategy per week
Score 3= 2 strategies per week

**Can be marked as NA*

P-PSNRD-02: Consideration for children with disabilities

Plan includes specification on how to make accommodations for children with disabilities. Accommodations should include, but not be limited to, those that support learning for children with visual, motoric, and/or auditory problems.

Score 0= <2 strategies per month
Score 1= 2-3 strategies per month
Score 2= 1 strategy per week
Score 3= 2 strategies per week

**Can be marked as NA*

PSNRD-03: Consideration for children from culturally diverse backgrounds.

Caregiver strategies are included that address the many cultures of children's families that attend the program (e.g., songs, customs, nursery rhymes, books, celebrations, foods).

Score 0= <2 strategies per month
Score 1= 2-3 strategies per month
Score 2= 1 strategy per week
Score 3= 2 strategies per week

**Can be marked as NA*

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Category 4: Nutrition and Indoor/Outdoor Environment
<p>Outdoor Environment P-OLE-04 Natural outdoor environment supports social emotional development including but not limited to areas that invite social gatherings, tummy time, dramatic play, group games, music and movement, and spaces for quiet and calm activities</p>
<p>Nutrition S-N-01: Program Practices Written policies include the following:</p> <ul style="list-style-type: none"> a) liquids and food hotter than 110 degrees F are kept out of reach b) All staff are educated on food allergies and they take precautions to ensure children are protected c) On days that providers serve meals, prepared food that is brought into the program to be shared among children is commercially prepared or prepared in a kitchen that is inspected by local health officials. d) That healthy snacks (as listed by the Teas Department of Agriculture) are available for school aged children as children arrive. e) On days that providers serve meals, milk, fresh fruit and vegetables are available for children who bring lunches from home.
<p>Nutrition S-N-02: Home Lunch Practices</p> <ul style="list-style-type: none"> a) Include in written policies/procedures to ensure the safety of food brought from home, including refrigeration or other means to maintain appropriate temperatures. b) Programs have policies in place outlining strategies to educate children and their parents c) Programs provide parents with information about foods that may cause allergic reactions d) Providers provide sample menus of healthful lunches for parents whose children bring food from home. Parents are encouraged to provide meals with adequate nutritional value.
<p>Nutrition S-N-03: Menu Planning The provider documents one of the following options:</p> <ul style="list-style-type: none"> A. 12 months of menus that have been reviewed and approved by: <ul style="list-style-type: none"> A1. a dietitian licensed by the Texas State Board of Examiners of Dietitians A2. a certified child care health consultant (healthy child care Texas); OR A3. an individual with a Bachelor's or graduate degree with major in human nutrition, food and nutrition, nutrition education, dietetics, or food systems OR B. Provider menu policies are structured to provide children with a variety of foods with different colors and textures to include whole grains, fresh fruits and vegetables; less processed items; and foods that meet the Dietary Guidelines for Americans guidelines established by the USDA. Sample menus must be provided. OR C. The Provider is participating in and in good standing with Child and Adult Care Food Program (CACFP). <p><i>N/A allowed if provider has specific policy about not providing any meals or snacks</i></p>
<p>Nutrition S-N-04: Breastfeeding Education Policies specify that, upon request, a compilation of breastfeeding education and support resources in the community is provided to parents.</p>
Category 5: Parent Education and Involvement
<p>S-PE-02 Parent Communication The provider provides families with opportunities to better understand the child's growth and development</p>
<p><i>*currently met/not met</i></p>