

Vermont STARS Evaluation Study

Key Findings

Vermont's STep Ahead Recognition System (STARS) is the state's Quality Rating and Improvement System (QRIS). STARS was developed in 2003 and provides a quality framework for licensed and registered child care centers and preschools, family child care homes, and school-age programs. Vermont STARS awards points of recognition for program practices in five arenas of quality: Regulatory History; Staff Qualifications and Professional Development; Families and Community; Program Practices; and Administration.

As a recipient of the [Race to the Top – Early Learning Challenge](#) (RTT-ELC), Vermont is committed to evaluating STARS as part of an ongoing process of continuous quality improvement. Child Trends, in partnership with the state of Vermont, conducted validation and evaluation studies of STARS from 2015-2017. The **validation study** measures the extent to which quality ratings assigned in STARS are meaningful and accurate. The **evaluation study** gathers feedback about how well the rating system is working for providers and other key stakeholders. **This brief summarizes findings from the evaluation study.**

Highlights

The purpose of the evaluation study was to **more fully understand how various participants in Vermont including child care providers, mentors, and other key stakeholders perceived STARS.**

- Providers, mentors, and key stakeholders identified **Program Practices, Families and Community, Staff Qualifications and Professional Development** as the most important elements of quality.
- **Respondents reported mixed perceptions of the benefits, fairness, and accuracy of STARS.** Most providers believed STARS had been beneficial to their programs and almost all planned to continue to participate in STARS. But while more than half of providers felt STARS was fair, not all of them agreed that STARS was an accurate recognition system. Mentors and key stakeholders offered similar mixed perceptions of STARS.
- Providers, mentors, and key stakeholders reflected on ways in which the quality improvement supports provided to STARS participants could be improved. **Mentors did not report spending the most time on the activities that they thought were the most important to providers.** About two thirds of providers reported working with mentors, and the activity they mostly worked on involved completing the STARS application. While the majority of key stakeholders agreed that supports provided to programs to help them improve their level in STARS were meaningful, not all said these supports were adequate.
- Participants provided insights about the quality components reflected in STARS and the rating structure. **Providers largely felt that the current STARS quality arenas were appropriate measures of quality, but they also said that additions such as health and wellness or healthy and nutritious meal practices would be beneficial.** Mentors and key stakeholders agreed with this assessment (with the addition of inclusive practices). When asked about the STARS rating structure, providers preferred flexibility (i.e., a points or hybrid system) whereas mentors and key stakeholders preferred continuity across STARS levels (i.e., a block system).

Recommendations

Focus more on fairness, accuracy, and streamlining the application process.

Based on the findings, providers, mentors, and key stakeholders would like to see changes made to the system that would 1) increase fairness and accuracy across all program types, and 2) streamline the application process for providers. These perspectives will be valuable to keep in mind if any changes are made to the quality arenas or indicators.

Consider a “hybrid QRIS” that includes more flexibility and consistency.

Providers valued the flexibility of the current system, saying it allowed them to make choices about where to focus their quality efforts. They also said, however, that the accuracy of program quality between levels is inconsistent. Mentors and key stakeholders agreed that program quality within a STARS level should be more consistent, but they also said they valued flexibility for programs to a lesser extent. One strategy for balancing both flexibility and continuity is a hybrid QRIS that would require certain quality practices across all programs at the entry level(s) of the system, and allow for more flexibility through a points system at higher levels.

Consider investing more resources in the quality improvement supports offered to participating STAR programs.

To ensure greater continuity across the mentor agencies, develop a STARS consultant manual that delineates the roles, responsibilities, expectations, and activities STARS mentors are to engage in with providers. Enhancing the quality improvement supports also includes creating a required STARS mentor training and ongoing professional development opportunities to help mentors strengthen specific skills and competencies needed to work with program directors, classroom educators, and home-based providers. At the state level this may also require examining the investment made in STARS mentoring to ensure that support and compensation provided align with potentially increased expectations of these members of the STARS system.

Methodology and Data

Child Trends surveyed three participant groups in 2015. Table 1 depicts the number of responses and response rates for the surveys.

Table 1: Response Rates for Participants Surveys

Participant Group Surveyed	Number of Responses	Response Rate
Child Care Providers: <i>Includes center-based providers, registered home providers, licensed home providers, Head Start, and school-based providers</i>	596	59%
Mentors: <i>Includes mentors from major mentoring agencies and organizations across Vermont</i>	25	49%
Key Stakeholders: <i>Includes state administrators, licensing specialists, STARS staff, technical assistance or support staff, policymakers/legislators</i>	63	64%