# Draft of Proposed Measure Changes

## Category 1: Director and Staff Qualifications and Training

Revised measures

| **Facility Type/ Age** | **Proposed Measure** | **Description and/or supporting evidence or clarification for TSM** |
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| Center-based only | **Remove and place requirements within CQIP**  **Current Measures (met/Not-Met)**  **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  Note: The TRS Director Certification Course will be developed. Please mark N/A for this item until the course becomes available. | * Remove this measure and infuse more specific training within the CQIP for participating programs or upon initial assessment. * Determine how many total hours are needed prior to application and in what topic areas, such as leadership, strengths-based coaching, organizational climate and managing program operations. |
| Center-based only | **Current Measure (Met/Not Met)**  **S-DQT-04 Director Responsibilities**  Ensure all caregiver staff have a written training plan.  Annual Caregiver Training Plans with Certificates  **Revised Measure (Met/Not Met)**  **S-DQT-04 Director Training**  Director has an individualized plan that provides for a minimum of 36 clock hours of training on an annual basis, to include a minimum of 6 hours in program administration, management and supervision in the director’s file.  Director Training Plan with Certificates  *N/A allowed if Director is a new hire or provider is an initial*  *Applicant.* | Director will be required to obtain at least 6 hours of early learning guidelines training prior to initial assessment. Those currently TRS will be required to obtain by next visit.  Director will provide documentation of an individualized training plan specific to topics that correspond with CCL compliance and includes a minimum of 6 hours of program administration, management and supervision annually.  Failure to provide an individualized plan or obtain at least 36 training hours annually (previous year) will result in the measure being marked n/a.  Measure must be scored and reviewed at first annual monitoring for those who receive N/A.  Documentation may include:   * Training Plan * Training Certificates   TECPDS Workforce Registry report |
| Center-based only | **REMOVE MEASURE**  **P-DEQT-06 Director Training Certificates**  Score of 0: none  Score of 1: Director has 36 hours, a minimum of 6 hours is in  program administration, management and supervision  Score of 2: Director has 36 hours, a minimum of 6 hours is in program administration and 3 hours is in Infant/Toddler or Pre-K guidelines  Score of 3: Director has 36 hours, a minimum of 6 hours is in program administration and 6 hours is in Infant/Toddler or Pre-K guidelines  *N/A allowed if Director is a new hire or provider is an initial*  *Applicant.* | Measure is removed as it was combined into S-DQT-04 and the requirement for early learning guidelines training was infused into the initial applicant requirements and/or CQIP, based on program status (initial applicant or current program) |
| All Facilities (except School-age only) | **Current Measure**  **P-DEQT-04 Director Experience**  Score of 0: none  Score of 1: 2 years of experience in early childhood  Score of 2: 3 years of experience in early childhood  Score of 3: 4 years or more experience in early childhood  **Revised Measure**  **P-DEQT-04 Director Experience**  Score of 0: less than 2 years of experience in early childhood  Score of 1: 2-3 years of experience in early childhood  Score of 2: 4-5 years of experience in early childhood  Score of 3: 6 years or more experience in early childhood | Director experience is validated via one of the following ways:   * Date of hire within program * Resume/Vitae   Years of experience is within the early childhood field and may include experience as a teacher or administrator. Defined within the FARF. |
| School-age only | **Current Measure**  **P-DEQT-05 Director Experience**  Score of 0: none  Score of 1: 1 year of experience in early childhood  Score of 2: 2 years of experience in early childhood  Score of 3: 3 years or more experience in early childhood  **Revised Measure**  **P-DEQT-05 Director Experience**  Score of 0: less than 2 years of experience in early childhood  Score of 1: 2-3 years of experience in early childhood  Score of 2: 4-5 years of experience in early childhood  Score of 3: 6 years or more experience in early childhood | Director experience is validated via one of the following ways:   * Date of hire within program * Resume/Vitae   Years of experience is within the early childhood field and may include experience as a teacher or administrator. Defined within the FARF. |
| All Facility types except RCCH | **Combine Measures S-COTQ-01 and 02**  **Revised measure:**  **S-COTQ-01 STAFF ORIENTATION**  Before beginning child care duties all staff (to include volunteers or substitutes, if applicable) receives documented, in-person, interactive orientation with the director/administrator to improve knowledge of the child care operation, specific job responsibilities and needs of children.  Orientation documentation is dated on/prior to the date the caregiver starts working in the classroom and is observed in the caregiver’s staff file by the TRS assessor and includes the  following topics:  A. Texas Rising Star (TRS) program and criteria  B. Policies of the facility  C. An overview of the developmental needs/expectations of children in the assigned age group  D. The planned daily activities of the facility | All staff includes any person that is counted in ratio at any time (transportation drivers, floaters, substitutes, volunteers, cook, etc.) as applicable.  Documentation may include:   * Signed orientation form/plan by staff   A written orientation process, documents or verbal explanation by administrator may be included as supplemental documentation if the form/plan is insufficient evidence of compliance.  Any staff not meeting this requirement will cause the measure to be marked not met. |
| All facility types except RCCH | **COMBINE MEASURES S-COTQ-01 and 02**  **S-COTQ-02**  **CAREGIVER ORIENTATION, 2**  Before beginning child care duties, all volunteers and substitute caregivers are provided orientation that defines the task to which they are assigned. Orientation documentation is observed  in the caregiver’s staff file by the TRS assessor. It is dated on/ prior to the date the caregiver starts working in the classroom.  Volunteer and Substitute Caregiver Orientation | Measure is combined to streamline the requirements for staff orientation. |
| Center-based only | **COMBINE MEASURES S-COTQ-03 and 06**  **Current Measure:**  **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 children in their care.  Annual Caregiver Training Plans with Certificates  *N/A allowed if provider is an initial applicant or has all new staff*  Revised Measure:  **S-COTQ-03 Staff Training**  An individualized plan provides for a minimum of 30 clock hours of child care related training specific to the age of children in their care. All child care staff participates in training according to the approved plan. The training certificates do align to the individualized written training plan.  Annual Caregiver Training Plans with Certificates  *N/A allowed if provider is an initial applicant or has all new staff* | All Staff must have and participate in an individualized training plan that includes a minimum of 30 training hours specific to the age group the staff works with.  Trainings that do not align with the age group the staff have in their care do not count in the total.  Training hours reviewed are the previous anniversary year (allowance provided for current year if previous year is not met).  Staff hired within 90 days of review are noted as not applicable and will be reviewed at the next monitoring visit.  Initial applicants will be reviewed at the next monitoring visit.  Any staff that does not have a training plan on file or obtained the minimum training hours will cause the measure to be marked not met. |
| Center-based only | **COMBINE MEASURES S-COTQ-03 and 06**  **Current Measure:**  **S-COTQ-06 Caregiver Staff Training**  All child care staff participates in training according to the approved plan. The training certificates  do align to the individualized written training plan.  Annual Caregiver Training Plans with Certificates  *N/A allowed if provider is an initial applicant or has all new staff*  Revised Measure:  **See above** | Measure is combined to streamline the requirements for staff training plans and training hours obtained. |
| All Facilities except Homes | **REMOVE MEASURE**  **Current Measure:**  **P-CQT-03 Caregiver Staff Training**  Caregiver training topics are aligned with core competencies | Remove this measure as the alignment of training certificates is burdensome.  TRS programs will be required to have staff place education, experience and training information into the Workforce Registry (WFR) which will be reviewed at the annual monitoring. Those trainings that do not meet validation requirements of the Registry will not apply to the annual total training hours.  TRS programs will be given a timeframe for WFR compliance (prior to initial, star level evaluation or recertification assessment)  Onboarding programs into the WFR will be done at the Board level and based on priority of assessment noted (initial, recertification and star level evaluation.) |

## Category 3: Lesson Plan and Curriculum

These measures would replace LPC 02 through 15

| **Facility Type/ Age** | **Proposed Measure** | **Description and/or supporting evidence or clarification for TSM** |
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| All  Facility  Types | **Curriculum**  Program utilizes a developmentally appropriate curriculum that aligns with early learning guidelines/standards.  Score of 0: 0-25% of age groups use curriculum when planning  Score of 1: 26–50% of age groups use curriculum when planning  Score of 2: 51-75% of age groups use curriculum when planning  Score of 3: 76-100% of age groups use curriculum when planning | Provider can provide documentation, as referenced, that specified age groups utilize a developmentally appropriate curriculum that aligns with early learning guidelines/ standards to create lesson plans.   1. Curriculum is deemed appropriate by completing the rubric (to be developed). 2. For emergent curriculum, provider would have to show documentation that teachers use the guidelines (citing objective from them) when planning on a consistent basis 3. Documentation could include curriculum on site, review of current classrooms lesson plans, and/or employee handbook discussing curriculum and/or lesson planning process. |
| Facility Types -  LCCC  SAP  Homes – N/A | **Curriculum Planning Supports**  Program provides support to teachers for curriculum planning  Score of 0: no evidence of additional supports or director completes lesson plans for the teachers  Score of 1: 1 support is provided consistently  Score of 2: 2-3 supports are provided consistently  Score of 3: at least 4 supports are provided consistently | Program would provide documentation to attest to the supports provided to teachers when planning.  Directors that complete lesson plans for the teachers would score a 0.  Consistently is defined as weekly or monthly for all teachers depending on support.    Support examples below:   * Planning time (consistent weekly/monthly outside of the classroom) * Resources (tangible/ not online) * Feedback on lesson planning (i.e. curriculum coordinator on staff, team meetings, planning meetings, etc.) * Professional Development (trainings in-house or out) specific to curriculum planning within current and/or previous training year |
| Infant  Toddler  Preschool  School Age – N/A | **Child Assessments**  Program supports the use of assessments (formal and/or informal) that measure children’s developmental progress.  Score of 0: no evidence of assessments (formal or informal) is used.  Score of 1: Teachers only observe developmental progress (there is no formal documentation of this observation).  Score of 2: Teachers use an informal assessment for observing developmental progress.  Score of 3: Teachers use a formal assessment for observing developmental progress. | Program provides teachers with the supports to conduct formal and/or informal assessments, as defined, that measure children’s developmental progress.    Formal assessments are pre-planned, data-based tests that measure what and how well the students have learned. They consist of formal questionnaires or checklists based on research. Training to complete these should be conducted.  Informal assessments those spontaneous forms of assessments that can be easily be incorporated in activities and measure the student progress. They evaluate progress and comprehension of skills and typically do not require training to be conducted. Examples are checklists, program generated assessments, portfolios or anecdotal observations. They evaluate progress and comprehension of skills and typically do not require training to be conducted.    Documentation would be completed assessments for a sampling of children within each classroom within the current and/or previous school year (as defined by the program). |
| All Facility Types | **Child Assessment Policy**  Program encourages and supports teachers to use assessments to guide their instructional planning for the children in their class.  Score of 0: Program does not use assessments.  Score of 1: Evidence of program having a written process for using assessments, but it is not used to inform instruction.  Score of 2: Evidence of program having a formal/written process for using informal assessments, and it is used to inform instruction.  Score of 3: Evidence of program having a formal/written process for using formal assessments, and it is used to inform instruction. | Program has a formal/written process for using child assessments to inform instruction.    Director/Teacher would need to articulate well how they use assessments to inform instruction. (What developmental screenings or assessments do you use? How is this information used?)    To score a 3, there would need to be written documentation of this process and documented evidence by the assessor to confirm.  Evidence could include: written policy in employee/parent handbook, notetaking on lesson plans, and program forms. |

## Category 3: Planning for Special Needs and Respecting Diversity

These measures would replace P-PSNRD -01 through 03; could be placed in Category 5

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| **Facility Type/ Age** | **Proposed Measure** | **Description and/or supporting evidence or clarification for TSM** |
| All  Facility Types | **Accommodating Families and Children**  Program supports families and children who may need additional accommodations, to include home language, special needs/differing abilities and cultural backgrounds.  Met/Not Met | Program have a written policy or process in reference to supporting families and children who may need additional accommodations, to include home language, special needs/differing abilities and cultural backgrounds. These policies/processes should include programmatic policies and classroom accommodations (lesson planning strategies) as applicable. |

## Category 3: Instructional Formats for Approaches to Learning

These measures would revise P-IFAL-02 into 2 separate measures.

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| **Facility Type/ Age** | **Proposed Measure** | **Description and/or supporting evidence or clarification for TSM** |
| All Ages | **Revise the current measure into 2 measures**  **P-IFAL-02a:**  Intentional instructional activities ~~that are both caregiver and child initiated~~ are ~~balanced~~ observed throughout the ~~planned daily activities~~ observation.  Score of 0: No or rare evidence  Score of 1: There is some evidence of intentional instructional activities.  Score of 2: There is moderate evidence or consistent evidence, but no balance of teacher and child-initiated activities.  Score of 3: There is consistent evidence and a balance of both teacher and child-initiated activities. | Rare, Some, and consistent would be defined.  Teacher implements intentional instructional activities consistently during the observation. These can be teacher-initiated or activities that the teacher has set up for the children to do.  Evidence: Assessor will list activities that are observed in the observation and note whether teacher or child-initiated. Then compare the list to the lesson plan. Assessor can consider any of the weeks of the lesson plans.  Interviewing may be allowed to determine why implementation may not be occurring as planned. |
| All Ages | **Adding the following measure**  **P-IFAL-02b:**  ~~Intentional instructional activities~~ Daily schedule demonstrates a balance ~~that are~~ of both ~~caregiver~~ teacher and child initiated ~~are balanced throughout the~~ planned daily activities.  Score of 0: there is no schedule posted  Score of 1: Schedule does not show a balance of activities  Score of 2: Schedule shows a balance of teacher and child-initiated activities, but teacher is inconsistently following it.  Score of 3: Schedule shows a balance of teacher and child-initiated activities, and teacher is consistently following it. | Teacher plans and schedules the daily routine/activities to provide a balance of teacher- and child-initiated activities.  Documentation of daily schedule is reviewed for compliance.    Consistent and inconsistent would be defined.  Assessor should note the times of the settings (e.g, whole group, transition, meal time, outdoor time, etc.) and compare to the written daily schedule to see if it is being implemented. Assessor will also need to determine whether there is a balance of teacher and child-initiated activities. Interviewing may be allowed to determine why implementation may not be occurring as planned. |

## Category 4: Nutrition

These measures would replace/revise S-N-01 through 04; these measures would be placed in Category 5: Parent Education subcategory

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| **Facility Type/ Age** | **Proposed Measure** | **Description and/or supporting evidence or clarification for TSM** |
| All Facility types | **Revise the current measure (paraphrased below)**  **S-N-01: Program Practices**  Written policies are shared with parents and staff to encourage education on nutrition practices, and include the following:  a) liquids and food hotter than 110 degrees F  b) All staff are educated on food allergies  c) commercially prepared or prepared in a kitchen that is inspected by local health officials.  d) That healthy snacks are available for school aged children.  e) On days that providers serve meals, milk, fresh fruit and vegetables are available for children who bring lunches from home | Parent and Staff Handbook are reviewed to determine information denoted is provided.  Additional documentation can be reviewed, such as postings in the program/classroom, articles provided, resource information provided, etc.  ***This could be summarized and added to S-PE-01, “Nutrition education and procedures” with supporting clarification within the TSM.*** |
| All Facility types | **Revise the current measure (paraphrased below)**  **S-N-02: Home Lunch Practices**  Written policies are shared with parents and staff to encourage education on home lunch practices and include the following:  a) Include in written policies/procedures to ensure the safety of food brought from home.  b) Policies outlining strategies to educate children and their parents  c) 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. | Parent and Staff Handbook are reviewed to determine information denoted is provided.  Additional documentation can be reviewed, such as postings in the program/classroom, articles provided, resource information provided, etc.  ***This could be summarized and added to S-PE-01, “Nutrition education and procedures” with supporting clarification within the TSM.*** |
| All Facility types | **Remove the measure (Option 1)**  **S-N-03: MENU PLANNING (summarized)**  The provider documents one of the following options:  A. 12 months of menus that have been reviewed and approved by: 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 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). | Remove the measure as CCL will require programs to meet CACFP requirements for meal planning/service. |
| All Facility Types | **Add a Measure (Option 2)**  Provider demonstrates health and nutrition policies, for children and parents, that are structured to ensure the program supports the whole child’s development.    Score of 0: Provider has no evidence to support planning for the nutritional and health needs of the children they serve.  Score of 1: Provider has minimal evidence (1-2) to support planning for the nutritional and health needs of the children they serve.  Score of 2: Provider has moderate (3-4) evidence to support planning for the nutritional and health needs of the children they serve.  Score of 3: Provider consults with a professional at least annually regarding providing children with nutritional and health activities that support the whole child development OR has consistent (5 or more) evidence to support planning for nutritional and health needs of the children they serve. | The addition of a points-based measure to integrate overall health and wellness  Evidence Examples:   * At minimum a 4-week rotation of meal planning * Oral Health policies and resources * Screen Time usage resources * Breastfeeding policies and resources * Designated breastfeeding area within program/classroom * Farm to ECE policies and resources * Consultations with a professional to review nutrition and health policies * Professional development provided to teachers on nutrition and health best practices (within current year) * Professional development provided to parents on nutrition and health best practices (within current year) |
| All Facility Types | **This depends on the decision of above measure**  **Original measure below**  **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. | Streamline into the revised S-N-03  *N/A allowed for programs who do not serve Infants*  ***This could be summarized and added to S-PE-01, “Breastfeeding education and policies” with supporting clarification within the TSM.*** |