



Application Overview

Congratulations! By choosing to participate in BrightStars, you are demonstrating a commitment to quality care and learning for young children. The *BrightStars Interim Star Rating Renewal Application for Family Child Care Providers* was developed in response to the COVID-19 pandemic to streamline quality improvement processes. **The following document, though simplified, does not reflect any change in the BrightStars Standards.** Rather, the *BrightStars Interim Star Rating Renewal Application for Family Child Care Providers* serves as a method for data collection on the state of quality in Rhode Island’s child care system. BrightStars reserves the right to return to its full application and processes when deemed appropriate by state partners. Regardless, BrightStars is committed to supporting you through the star rating application process. For questions or support in completing this document, please reach out to your assigned BrightStars Navigator, email info@riaeyc.org, or call (401) 739-6100.

The following forms are included in this application packet:

- Program Overview
- Standard 1 – Learning Environment
- Standard 2 – Minimum Staff-Child Ratio
- Standard 3 – Educator Qualifications
- Standard 4 – Continuous Quality Improvement
- Standard 5 – Curriculum
- Standard 6 – Child Assessment
- Standard 7 – Inclusive Classroom Practices
- Standard 8 – Family Communication and Involvement
- Checklist and Signature Page

General Instructions

Please complete all fillable forms *in full* before submitting your application to BrightStars. Detailed instructions are included. Please read these carefully.

BrightStars assesses program quality by two methods: document review and observation. For each standard, the required documentation to achieve each level is noted.

BrightStars has entered a data sharing agreement with the Department of Human Services to obtain current licensing statuses of BrightStars programs, including publicly available monitoring reports. No additional documentation related to DHS Licensing is required for this application. This application is intended to be used in conjunction with the *BrightStars Family Child Care Quality Framework*. Please contact BrightStars with any questions.

Application Submission

In an effort to maintain social distancing, electronic submission of complete applications is preferred. Applications may be emailed directly to your program’s BrightStars Navigator or to info@riaeyc.org, or faxed to (401) 739-6101.

Alternatively, this application may be printed after completing the fillable forms and mailed or hand- delivered to:

Rhode Island Association for the Education of Young Children
501 Centerville Road, Suite 202
Warwick, RI 02886

Application type

Applying to BrightStars for the first time
 Applying for a 3-year renewal
 Re-applying after withdrawal or expiration

Program's current overall Star Rating:
 Not rated 1 Star 2 Stars 3 Stars 4 Stars 5 Stars

I am applying for an *overall* Star Rating of:
 1 Stars 2 Stars 3 Stars 4 Stars 5 Stars

<input type="checkbox"/> I am applying to be rated by standard*: <i>If your program is not currently rated, please put "N/A" in the Current Rating column</i>	Standard		Current Rating	Requested Rating
	1	Learning Environment		
	2	Minimum Staff-Child Ratio		
	3	Educator Qualifications		
	4	Continuous Quality Improvement		
	5	Curriculum		
	6	Child Assessment		
	7	Inclusive Classroom Practices		
	8	Family Communication and Involvement		

Program Overview

Provider information

Provider name (full, legal name, as it appears on the license):	
Previous names:	
Program name (if applicable):	
DHS Provider ID (bottom left of license):	
License type:	<input type="checkbox"/> Approve-Regular <input type="checkbox"/> Provisional <input type="checkbox"/> Probationary
License expiration date:	
Physical address:	
Mailing address (if same as above, put "N/A"):	
Email address:	
Phone number:	
Has any of this information changed in the last three years?	
Preferred method of communication:	<input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Either/both
Preferred contact language:	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> _____
Do you offer weekend care?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you offer evening care?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you open in the summer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If open in the summer, is programming different?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If closed in the summer, when is your last day of regular programming?	Date closed: _____
If closed, when do you reopen for regular programming?	Reopen date: _____

Hours of operation

	Open	Close
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Capacity and enrollment

Age Group	Do you serve this age group?	Licensed Capacity	Current Enrollment	# of current enrollment CCAP
Infant (birth-18 months)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Toddler (18-36 months)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Preschool (36 months-K entry)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
School Age (out-of-school care)	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Standard One: Learning Environment

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	Program is compliant with all DHS licensing regulations. -AND- Relevant Learning Environment Training. (LET)	Program is compliant with all DHS licensing regulations. -AND- Relevant Learning Environment Training. (LET) -AND- FCCERS-3 score of 3.0 or greater.	Program is compliant with all DHS licensing regulations. -AND- Relevant Learning Environment Training. (LET) -AND- FCCERS-3 score of 4.0 or greater.	Program is compliant with all DHS licensing regulations. -AND- Relevant Learning Environment Training. (LET) -AND- FCCERS-3 score of 5.0 or greater.

Required Documentation:

- Please attach a copy of your **DHS license**
- Please attach a copy of your **FCCERS Learning Environment Training (LET)** (required at levels 2-5).
- I acknowledge that **BrightStars will conduct a site visit** to perform a FCCERS-3 observation (levels 3-5).

Standard Two: Minimum Staff-Child Ratio

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	Program is compliant with all DHS licensing regulations. -AND- Minimum Staff-Child Ratio is clearly posted.			

BrightStars will use information obtained from DHS full Monitoring Visits to collect information pertaining to ratio requirements. To receive credit, providers must be in full compliance with all DHS Child Care Licensing requirements, and visits must have been conducted after June 1, 2020. This replaces the need for an additional on-site observation to confirm ratio and group size compliance.

Required Documentation:

No additional documentation is required for Standard 2.

Standard Three: Educator Qualifications

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	<p>Program is compliant with all DHS licensing regulations.</p> <p style="text-align: center;">-AND-</p> <p>The educator has a written Individual Professional Development Plan (IPDP) aligned with RI's Workforce Knowledge and Competencies.</p>	<p>The educator has a written Individual Professional Development Plan (IPDP) aligned with RI's Workforce Knowledge and Competencies.</p> <p style="text-align: center;">-AND-</p> <p><i>Formal Education:</i> The educator has a CDA</p> <p style="text-align: center;">-OR-</p> <p>3 college credits in ECE/related field.</p>	<p>The educator has a written Individual Professional Development Plan (IPDP) aligned with RI's Workforce Knowledge and Competencies.</p> <p style="text-align: center;">-AND-</p> <p><i>Formal Education:</i> The educator has at least 12 credits in ECE/related field</p> <p style="text-align: center;">-AND-</p> <p>RIELDS Certificate relevant to this position.</p>	<p>The educator has a written Individual Professional Development Plan (IPDP) aligned with RI's Workforce Knowledge and Competencies.</p> <p style="text-align: center;">-AND-</p> <p><i>Formal Education:</i> The educator has at least 24 credits in ECE/related field</p> <p style="text-align: center;">-AND-</p> <p>an Associate's Degree or higher/60+ college credits</p> <p style="text-align: center;">-AND-</p> <p>RIELDS Certificate relevant to this position (Level II, "Implementing a Standards-Based Curriculum," if serving preschoolers).</p>

Required Documentation:

- Please attach an **Individual Professional Development Plan (IPDP)** for the educator (levels 2-5).
- Please attach a copy of **CDA/degree** for the educator (levels 3-5, if applicable).
- Please attach a copy of **college transcripts** for the educator (levels 3-5, if applicable).
- Please attach a copy of a **RIELDS Certificate** for the educator (levels 4-5, if applicable).

Standard Four: Continuous Quality Improvement

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	Program is compliant with all DHS licensing regulations. -AND- The program uses at least 2 methods of self-assessment to continually improve program quality. <i>*Complete the self-assessment form below.</i>	The program uses at least 2 methods of self-assessment, <i>plus FCCERS findings</i> (if available), to continually improve program quality. <i>*Complete the self-assessment form below.</i>	The program uses at least 3 methods of self-assessment, <i>plus FCCERS findings</i> (if available), to continually improve program quality. <i>*Complete the self-assessment form below.</i>	The program uses at least 3 methods of self-assessment, <i>plus FCCERS findings</i> (if available) <i>and family survey results</i> , to continually improve program quality. <i>*Complete the self-assessment form below.</i>

A Program Self-Assessment is a comprehensive evaluation of the program’s strengths and areas of improvement as observed by those working within or in partnership with the program. The self-assessment involves gathering information about different aspects of the program’s environment and practice. To complete this form, your program will need to identify 2-3 sources of evidence. Common examples of sources for evidence are listed below:

- DHS Monitoring Report
- Child Assessment Information
- Family Survey Results
- Educator Professional Development Plans (IPDPs)
- LISC Self-Assessment Tool
- Formal ERS Observation Results
- Informal ERS Self-Assessment

Required documentation:

Please complete the self-assessment form below if applying for **Level 2-5.**

What is your first source of evidence? <i>*(required at levels 2-5)</i>	
What did that evidence tell you?	
How will you use this information to improve the quality of your program?	
What is your second source of evidence? <i>*(required at levels 2-5)</i>	
What did that evidence tell you?	
How will you use this information to improve the quality of your program?	
What is your third source of evidence? <i>*(required at levels 4-5)</i>	
What did that evidence tell you?	
How will you use this information to improve the quality of your program?	
How does your program use <i>FCCERS findings</i> to improve program quality? <i>*(required at levels 3-5, if available)</i>	
How does your program use <i>family survey results</i> to improve program quality? <i>*(required at level 5)</i>	

Standard Five: Curriculum

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	Program is compliant with all DHS licensing regulations.	The program has a written curriculum outline aligned with the RIELDS.		The program has a curriculum framework aligned with the RIELDS.

Required documentation:

- Please attach a copy of 2 weeks' worth of lesson plans for each age group served (levels 3-5).
- Please attach a copy of your program's **curriculum outline** aligned with the RIELDS (levels 3-4).
- Please attach a copy of your program's **curriculum framework** aligned with the RIELDS (level 5).

Standard Six: Child Assessment

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	<p>Program is compliant with all DHS licensing regulations.</p> <p style="text-align: center;">-AND-</p> <p>The program provides written information to families about developmental screenings available through health care settings or Early Intervention (if serving infants/toddlers), and Child Outreach (if serving preschoolers).</p>		<p>The program provides information to families about developmental screenings,</p> <p style="text-align: center;">-AND-</p> <p>The program gathers assessment information about each child using two (2) or more methods (e.g. child observation, developmental checklists, family surveys or interviews, etc.) to inform classroom instruction.</p> <p style="text-align: center;"><i>*Please complete child assessment form below</i></p>	<p>The program provides information to families about developmental screenings,</p> <p style="text-align: center;">-AND-</p> <p>collaborates with Child Outreach to provide on-site developmental screenings or provides families with specific dates and locations for screenings,</p> <p style="text-align: center;">-AND-</p> <p>The program gathers assessment information about each child using three (3) or more methods (e.g. child observation, developmental checklists, family surveys or interviews, etc.) to inform classroom instruction.</p> <p style="text-align: center;">-AND-</p> <p>The program uses systematic assessment tools to inform curriculum planning.</p> <p style="text-align: center;"><i>*Please complete child assessment form below</i></p>

Required documentation:

- Please fill in **all applicable sections** in the table below based on requested star rating (levels 2-5).
- I acknowledge that **BrightStars will complete a site visit** to assess data collection in child files (levels 4-5).

Required at Levels 2, 3, 4, and 5: How does your program connect and inform families about Child Outreach and Early Intervention services specifically during pandemic times?

THIS PAGE IS ONLY REQUIRED IF YOU ARE APPLYING FOR AN OVERALL RATING of 4 or HIGHER

Required at Levels 4 and 5: What methods does your program use to collect comprehensive child assessment data and how often is this data collected? Checkall that apply.

Assessment Type		Frequency (required at Level 4 and 5) If choosing "other" please indicate how often data is collected								
Written Anecdotes/ Running Records	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Children's Work Samples	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Assessment Information from EI/Child Outreach	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Developmental Checklists	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Photos/Videos	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Family Questionnaire	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Preschool Formative Assessment	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Valid and reliable Reports (TSG)	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____
Other (please describe)	<input type="checkbox"/>	Daily	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>	Other_____

THIS PAGE IS ONLY REQUIRED IF YOU ARE APPLYING FOR AN OVERALL RATING of 4 or HIGHER

Required at Levels 4 and 5: How does your program document that the child assessment data collected aligns to the RIELDS?

Required at Levels 4 and 5: How is the child assessment data you collect shared with families?

Required at Level 5: How does your program accommodate diverse populations, such as dual language learners or children with special needs?

Required at Level 5: How does the program utilize information from developmental screenings, such as Child Outreach or Early Intervention?

Required at Level 5: How does your program use child assessment data to inform curriculum planning?

Standard Seven: Inclusive Classroom Practices

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	Program is compliant with all DHS licensing regulations.	<p>The program supports children and families of all abilities; modifies the program; makes reasonable accommodations; and collaborates with key partners to support children with developmental delays and disabilities in inclusive/integrative classroom settings.</p> <p><i>*Complete the program philosophy form below.</i></p>		<p>The program supports children and families of all abilities; modifies the program; makes reasonable accommodations; and collaborates with key partners to support children with developmental delays and disabilities in inclusive/integrative classroom settings.</p> <p style="text-align: center;">-AND-</p> <p>Educators are available to collaborate with IEP/IFSP teams by attending meetings, participating in relevant training, and/or sharing information (e.g. child assessment results) to support children with developmental delays or disabilities and their families.</p> <p><i>*Complete the program philosophy form below.</i></p>

Required documentation:

- Please complete the Program Philosophy form below if applying for **Level 2-5**.

<p>How does your program support children and families of differing abilities? <i>*(required at levels 3-5)</i></p>	
<p>How does your program modify and make reasonable accommodations for children/families of differing abilities? <i>*(required at levels 3-5)</i></p>	
<p>How does your program collaborate with key partners (e.g. Child Outreach) to support children with developmental delays and disabilities in inclusive/integrative classroom settings? <i>*(required at levels 3-5)</i></p>	
<p>How does your program make time for the educator to collaborate with IEP/IFSP teams? What types of meetings or trainings can staff participate in to support children with IEPs/IFSPs? How is information (such as child assessment results) shared to support children with developmental delays or disabilities and their families? <i>*(required at level 5)</i></p>	

Standard Eight: Family Communication

Summary of Requirements:

Level 1	Level 2	Level 3	Level 4	Level 5
Program is licensed by DHS.	<p>The program is compliant with all DHS licensing regulations.</p> <p style="text-align: center;">-AND-</p> <p>The program offers two (2) or more of the below methods of family communication.</p> <p><i>*Please complete the below family communication form.</i></p>	<p>The program offers two (2) or more of the below methods of family communication.</p> <p style="text-align: center;">-AND-</p> <p>The program offers family-teacher conferences at least twice annually.</p> <p><i>*Please complete the below family communication form.</i></p>	<p>The program offers two (2) or more of the below methods of family communication.</p> <p style="text-align: center;">-AND-</p> <p>The program offers family-teacher conferences at least twice annually.</p> <p style="text-align: center;">-AND-</p> <p>The program conducts an annual family survey.</p> <p><i>*Please complete the below family communication form.</i></p>	<p>The program offers three (3) or more of the below methods of family communication.</p> <p style="text-align: center;">-AND-</p> <p>The program offers family-teacher conferences at least twice annually.</p> <p style="text-align: center;">-AND-</p> <p>The program conducts an annual family survey.</p> <p><i>*Please complete the below family communication form.</i></p>

Required documentation:

- Please **complete the Family Communication form below** if applying for more than 1 Star in Standard 8.
- Please attach a copy of your program's **Family Handbook** for review.

THIS PAGE IS ONLY REQUIRED IF YOU ARE APPLYING FOR A RATING of 2-5 Stars in this Standard

FAMILY COMMUNICATION FORM

Please indicate which methods of family communication your program utilizes *Two methods required at levels 2-3; three methods required at levels 4-5	<input type="checkbox"/> Monthly newsletter (3 required)	Date:	Date:	Date:
	<input type="checkbox"/> Social event (4 required)	Date:	Date:	Date:
	<input type="checkbox"/> Ideas/suggestions (4 required)	Date:	Date:	Date:
	<input type="checkbox"/> Supports transitions	Event:		Date:
	<input type="checkbox"/> Connects to communities	Event:		Date:
	<input type="checkbox"/> Online communication tool (Brightwheel, Tadpoles, HiMama, Dojo, etc.)	Tool:		

<input type="checkbox"/> Family-teacher conferences (required at levels 3-5)	Date:	Date:		
<input type="checkbox"/> Family survey (required at levels 4-5)	Date:			
<input type="checkbox"/> Family advisory board (required at level 5)	Date:	Date:	Date:	Date:

Checklist and Signature

I acknowledge that it is my responsibility to submit copies of the following documentation along with this completed application as requested by BrightStars:

Standard 1: Copy of current **DHS license**

Copy of relevant **Learning Environment Training**

Standard 3: Copy of **Individual Professional Development Plan**.

Copy of **CDA/degree** for the educator (if applicable).

Copy of **college transcripts** for the educator (if applicable).

Copy of a **RIELDS Certificate** for the educator (if applicable).

Standard 5: Copy of 2 weeks' worth of **lesson plans** for each age group served (levels 3-5).

Copy of your program's **curriculum outline** aligned with the RIELDS (levels 3-4).

Copy of your program's **curriculum framework** aligned with the RIELDS (level 5).

Standard 8: A copy of your **Family Handbook**

By signing this BrightStars application, I verify/agree to the following (please check all):

I have read Information and Policies for the BrightStars Quality Rating and Improvement System. I understand and will adhere to all policies contained within.

All of the information contained in this application is accurate and true.

I will post my BrightStars rating certificate in my program in a place highly visible to families/the public.

I understand BrightStars Confidentiality Policy: A program's star rating, the level achieved for each BrightStars standard, and other basic program information (address, phone number, ages served, etc.) will be made available on the BrightStars or DHS hosted websites. Information submitted as part of your BrightStars application will be shared within the state data system with state agency partners, including the RI Department of Human Services (DHS), the RI Department of Education (RIDE), the RI Department of Children, Youth and Families (DCYF), the RI Department of Health (DOH), and The Center for Early Learning Professionals (CELP) at an aggregate level for the purposes of data reporting. Identifiable and specific information about your program may be shared with state agency representatives for the purposes of record keeping, data analysis and program assessment in a situation where a program applies for RIDE Comprehensive Early Childhood Education (CECE) Approval. Identifying information may be shared with others only with your specific, signed permission.

BrightStars participation is required for programs participating in the Department of Human Services (DHS) Child Care Assistance Program (CCAP) and ending your participation in BrightStars will be communicated to DHS. The Department of Human Services has access to all data gathered and stored by BrightStars.

I understand that BrightStars will use information obtained from DHS full Monitoring Visits or BrightStars COVID Review Visits to collect information pertaining to ratio and group size requirements.

I will notify BrightStars in writing within 10 days of a change to my program's license status.

Printed Name and Date: _____

Signature: _____