

APPENDIX B

GRANTEE TELEPHONE INTERVIEW GUIDES

Region III Head Start Administration for Children and Families

**Evaluation of the *I am Moving, I am Learning*
Enhancement**

Telephone Interview Guide for Program Managers
Spring 2007
(Estimated interview time: 60 minutes)

INTRODUCTION

Thank you for taking the time to speak with me today. My name is [X] and I am a [TITLE] with Mathematica Policy Research, Inc. (MPR), a nonpartisan research firm that has extensive experience conducting both early childhood and nutrition research. The Office of Planning, Research, and Evaluation (OPRE) under the Administration for Children and Families (ACF) contracted with MPR to conduct an implementation evaluation of the *I am Moving, I am Learning (IM/IL)* enhancement in Region III. This study will examine to what extent grantees are implementing *IM/IL* enhancement activities after attending the spring 2006 regional Training for Trainers (TOT) events.

To that end, during this call we will be discussing what efforts your Head Start program made since attending the regional TOT event to promote physical activity, structured movement, and healthy eating among children and families you serve; your impressions of the TOT event; how changes were implemented; your thoughts on sustainability; and what initial successes and challenges your program has encountered. As part of this evaluation, we are currently in the process of speaking with the person in charge of overseeing *IM/IL* activities and two teachers and/or home visitors from 30 Head Start grantees. Your program was randomly selected to participate in these interviews from among all of the Region III grantees that completed the January 2007 *IM/IL* Evaluation Questionnaire. We have reviewed your responses to that questionnaire and will use this interview to learn more about how you have used what you learned from the *IM/IL* training event.

During our conversation, I would like to hear about your experiences with the *IM/IL* enhancement, and will also ask you about your opinions. Everything you say is confidential. The information we gather will be used to write an interim report for OPRE about programs' experiences implementing *IM/IL* enhancements, including their successes, challenges, and lessons learned. Our interim report will describe experiences and views expressed by staff across the 30 grantees, but comments will not be attributed to specific individuals or programs. Staff members will not be quoted by name.

Do you have any questions before we get started?

A. PROGRAM AND COMMUNITY CONTEXT

Before we get started, I just wanted to ask some quick background questions about your Head Start/Early Head Start program.

1. Do you use mixed-age classrooms, or are classrooms organized by child age?
2. What percentage of enrolled families speak a language other than English at home? Which languages do they speak?
3. What percentage of children have an Individualized Education Plan (IEP)?
4. How common is the problem of overweight among the children in your program? About what proportion of the children in your program are overweight?
5. How common is the problem of underweight among the children in your program? About what proportion of the children in your program are underweight?
6. How common is it for the children in your program to make food choices that make it difficult to maintain a healthy weight? About what proportion of the children make these kind of food choices?
7. How common is sedentary behavior (i.e., little or no physical activity) among the children in your program, such as high levels of television viewing or living in a place that is not conducive to outside play? About what proportion of the children have limited physical activity outside of Head Start?

B. REGIONAL TRAINING EVENT

Now I'd like to talk to you about the spring 2006 regional Training of Trainers (TOT) event.

1. Why did you decide to attend the regional TOT event? Why did this opportunity appeal to your program?
2. Were any materials sent to you in advance of the training?

IF YES: What materials did you receive, and did you have a chance to review them beforehand?

IF NO: Would receiving the materials in advance have made the training a better experience?
3. How helpful were the presentations by guest speakers? Were there specific speakers/topics that you found to be particularly useful? If so, which one(s)?
4. How helpful and complete were the written training materials and resources?

PROBES:

- Which materials/resources were especially useful? What made them useful?
- Were the materials available in Spanish or other languages? If not, would it have been helpful to have materials in Spanish or other languages?
- Were any materials available in electronic form (PowerPoint, Word, PDF)? If not, would it have been helpful to have materials in an electronic format?

5. How similar was the content to what your program had done in the past to promote physical activity and good nutrition, with the overall goal of encouraging health and preventing childhood obesity?

PROBES:

- How much new information and resources on physical activity, good nutrition, health promotion, and childhood obesity prevention did you learn about? What did you learn about?
- Did you learn little new information? Why only a little?
- Did the training reinforce information that your program staff already knew but were not doing?

IF YES, ASK → What factors and/or resources are now in place that enable your program to move toward implementing an *IM/IL* enhancement?

6. Do you think the presentations and materials were presented and targeted appropriately for Head Start? Why or why not?

PROBES:

- Was the content appropriate for your Head Start (and Early Head Start if applicable) staff, and for the populations that you serve?
- Could the materials easily be adapted to your local population (e.g., cultural/ethnic preferences, languages spoken, other demographic factors)?
- What about children with disabilities?

7. What was the most helpful aspect of the training? What was the least helpful?

PROBES:

- What made this the most helpful aspect of training?
- What made this the least helpful aspect of training?

8. Did the regional TOT event adequately prepare participants to return and train local program staff to implement an *IM/IL* enhancement?

PROBES:

- Do you think that the length of training was too long, too short, or the right amount? Why?
- Did you leave the training with concrete ideas/plans for local implementation? What helped make this happen?
- Did you develop a written action plan at the training, or after the meeting? Who helped develop the plan? How detailed was it?
- Did you leave with contact information to follow up with questions or support (e.g., peers from other programs, presenters, Region III staff)? Were you encouraged to do so?
- Did the training leave you with a clear sense of how to provide guidance to other staff on how to promote MVPA, structured movement, and healthy eating among children and families served? If not, why not?
- Are there other types of training or materials that your program did not receive but would be helpful? If so, please describe.

9. Do you have any suggestions for improving the regional TOT event?

PROBE:

- If ACF was to consult with you on planning for the next TOT event for *IM/IL*, what feedback would you give them?

C. DESIGN AND PLANNING

Now let's talk about how your program went about conceptualizing *IM/IL*, identifying the goals, and who was involved in designing the services.

1. Did your program decide to implement any *IM/IL* activities after returning from the regional TOT event?

IF YES: *Skip to question #2 below.*

IF NO: Why did your program decide not to implement any *IM/IL* activities? What barrier(s) did your program face?

PROBES:

- Inadequate technical assistance and support after the TOT?
- Higher priority placed on other focus areas in your program by staff? By the Policy Council? By the Health Services Advisory Committee?
- No time to plan/prepare for any *IM/IL* activities over last summer?
- Program staff did not have time to conduct the local training?
- Program staff did not feel qualified to conduct the local training?
- Limited staff time?
- Costs of materials? Other costs?
- Little or no interest among staff?
- Little or no interest among children and parents?
- Little or no interest among community partners?
- Other?
- What kind of support or resources would your program need to be able to implement *IM/IL*?

Are there any other barriers that would need to be overcome to be able to implement any *IM/IL* activities?

If you were to imagine what that enhancement would look like, what goal(s) would you hope to accomplish?

PROBES:

- What behavior changes would you hope to achieve?
- Which kinds of activities and/or resources would you like to provide to help reach those behavior changes?
- What would your target audience be? Children only? Parents? Staff?
- Which resources, TA, or other support would you need to accomplish this?
- Which staff would be involved, and what would their roles be?
- Would any outside experts or organizations (e.g., TA Specialist or Content Specialist, local community group, local university) play a role?
- How would you measure progress? Track children's BMI or MVPA? Analyze daily breakfast and lunch offerings at Head Start? Observe classrooms to see if teachers were incorporating more structured movement in their routines?

Skip to "Wrap-Up" section at end of protocol.

2. What is/are the main goal(s) of *IM/IL* in your program?

PROBES:

- Did you intend to increase children's MVPA? If not, why not?
- Did you intend to improve the quality of structured movement activities facilitated by adults (e.g., teachers, home visitors, other staff, parents)? If not, why not?

- Did you intend to improve healthy nutrition choices for children every day? If not, why not?
- Did you have any other goals? What were they?

3. How did your program identify *IM/IL* goals and objectives, determine who you would target, and decide which activities to provide/promote? Who was involved in these decisions?

PROBES:

- Approximately how soon after returning from the regional TOT event did your program begin actively planning for an *IM/IL* enhancement?
- What was the rationale for focusing on particular needs and providing specific services? Why were these changes needed?
- Who is the intended audience of your *IM/IL* enhancement? Children? Their families? Staff? Combination? How did your program decide who would receive the *IM/IL* enhancement?
- Did you strategically decide to focus on MVPA/structured movement (physical activity), just healthy eating, or both? If so, why?

4. Did you conduct a needs assessment? If so, who did you consult? Did you do any formal data collection, such as a survey? If not, why not?

5. Did you conduct any “pilot” activities before implementing your goals? For example, did you begin implementation in a few classrooms or with a couple of teachers before you trained everyone?

6. Did you plan to reach all children in the program and in all classrooms? If so, how and over what period of time period?

7. What specific component(s) set this envisioned enhancement apart from what your program was doing before attending the regional TOT event in terms of MVPA, structured movement, and healthy eating?

PROBES:

- Did your program want to place more emphasis on structured play or movement, in terms of frequency and duration?
- Did your program want to place more emphasis on good nutrition, in terms of providing more healthy foods, encouraging healthy food choices, or teaching about healthy eating habits? Were activities targeted at improving children’s behaviors related to healthy eating, parents’ behaviors, or both? What about staff?
- Did your program want to place more emphasis on intentional/targeted obesity prevention efforts? Were activities targeted at improving children’s behaviors related to healthy eating, parents’ behaviors, or both?
- Did your program want to place more emphasis on promoting physical activities and healthy eating to parents? Were activities targeted at improving children’s

behaviors related to physical activity, parents' behaviors, or both? What about staff?

- Did your program want to incorporate a greater variety of activities, games, songs, materials, etc. that promote physical activities and healthy eating?

8. Did you use any materials from the Resource Binder provided at the regional training? For example, did you access any of the websites, like "5 A Day" or the "National Association for Sports and Physical Education"?

IF YES: What did you use? Which resources did you refer to? Were they helpful? Why or why not?

IF NO: Why did you not use the Resource Binder in your *IM/IL* planning? Did you seek out other resources that weren't included or mentioned at the training, and if so, which one(s) and where did you find them?

9. Which specific behavior changes (i.e., intermediate outcomes) did you hope to influence through *IM/IL*?

PROBES:

- What were the primary health promotion and obesity prevention behaviors you hoped to change through your *IM/IL* enhancement? For example, increase physical activity levels among staff and families? Encourage children and families to switch from whole milk and reduced-fat milk (2%) to low-fat milk (1%) and skim milk, for age appropriate groups? Other?
- Who was the target audience for this behavior change? Teachers/home visitors? Other staff? Children? Parents? Other?

10. How did your program hope/plan to achieve these behavior changes and target health promotion and obesity prevention efforts?

PROBES:

- Change curriculum (e.g., introduce a new supplemental curriculum or incorporate the *IM/IL* into existing curricula, increase frequency of MVPA)
- Change classroom or outdoor environment (e.g., types of materials, more play equipment)
- Change program's menu planning (less salty and sugary snacks, more healthy snacks, smaller portion sizes), both during the day and at socialization events
- Change the priority that staff place on health promotion and obesity prevention in their other work for Head Start, such as collaborating with health staff to incorporate *IM/IL* goals into all Head Start services, form an *IM/IL* steering committee, demonstrate links to HSPS and child outcomes
- Change home environment (families and/or staff), such as promoting healthy food purchases at grocery store and preparing healthy meals through cooking classes and recipe sharing, reduce television viewing

- Change physical activity levels among families and staff and facilitate these efforts, such as promoting local resources like community centers, wellness events, free recreational activities

11. Which of the following was involved in your *IM/IL* enhancement design? What role did they play?

- Region III Head Start staff
- Head Start-State Collaboration Office
- Your TA Specialist and/or a Content Specialist *N.B. Prompt for specific content area(s) if mentioned*
- Your Health Services Advisory Committee
- Policy Council or families as a whole
- *IM/IL* listserv set up by Region III
- Other

12. Did you consult with other organizations in the community or seek advice from experts to help design the *IM/IL* enhancement, such as local universities, hospitals, schools, cooperative extensions, or a dietitian or nutritionists?

IF YES: How and why did you approach them? Were they eager to participate, or did they have reservations? Who was involved in the design phase?

13. Did your program develop a written plan for implementation?

IF YES: Who wrote the plan? Was this plan approved by the Policy Council? By the Health Services Advisory Committee? Other?

IF NO: Why not?

14. Did your program select a specific curriculum to support *IM/IL* efforts?

IF YES: Which curriculum are you using? Was it designed by an outside vendor or internal staff? Are you using the curriculum in its entirety or certain parts of the curriculum? Is it a stand-alone curriculum, or did you modify/supplement your primary Head Start curriculum? Did you need to purchase the curriculum, and if so, did you obtain outside funding to do so?

IF NO: Have teachers [and home visitors] found ways to incorporate *IM/IL* activities into the regular Head Start curriculum? For example, is movement and/or healthy eating now integrated into literacy or early math activities? How have staff incorporated *IM/IL* into the existing curriculum? Are transitions now more physically active?

15. Did you develop a manual, reference guide, lesson plans, or similar items for *IM/IL*?

16. Did your program take into account children with IEPs or IHPs in designing the *IM/IL* enhancement?

IF YES: How was this accomplished?

17. Did your program take into account English Language Learners in designing the *IM/IL* enhancement?

IF YES: How was this accomplished?

18. Did your program take into account cultural preferences and/or special dietary needs of children, families, and/or staff in designing the *IM/IL* enhancement?

IF YES: How was this accomplished?

19. Did your program need to acquire materials, equipment, and/or incentives to implement the *IM/IL* enhancement?

IF YES: Which kinds of items (e.g., music cassettes/CDs, coloring books, videos/DVDs, posters, scales, growth charts, cookbooks, jump ropes, exercise mats, balls, other toys that encourage movement, etc.)? Were these items purchased, donated, or were you able to make some of them? If purchased, did you receive outside funding to do so? Are they available for use at the centers only, or can families borrow them through a lending library?

20. What resources were most helpful to you in designing your *IM/IL* enhancement? Why were they helpful?

PROBE:

- *N.B. If program relies on outside experts or organizations for TA (not including Region III TA system), in-kind materials, etc., ask: Do you think it would be possible to successfully implement an *IM/IL* enhancement in your program without the contributions made by these outside experts or organizations?*

21. Would additional technical assistance or other resources have been helpful in designing your *IM/IL* enhancement?

PROBE:

- If so, what specifically, and how would that have been helpful during the planning stage?

22. What were the most challenging aspects of the design and planning process?

PROBES:

- What barriers did your program encounter?
- How did your program address these barriers?
- Did your program overcome these barriers, or do any of them continue?

23. What were the most successful aspects of the design and planning process? What went smoothly?

24. If you could give other Head Start programs advice about the design and planning stage, what would you tell them are the key ingredients they would need to have in place to increase the likelihood of successfully implementing an *IM/IL* enhancement?

PROBES:

- Strong leadership (i.e., “internal champion”) and dedication of staff → *N.B. If program manager mentions strong leadership, ask which qualities this person would exhibit.*
- Interest among staff, children, and families
- Access to TA and/or other resources from outside experts and organizations
- Resources to purchase or make materials or access in-kind items
- Other

25. Looking back, is there anything that you would have done anything differently during the design and planning stage? Is so, what would you have done, and why?

D. STAFFING

Now I’d like to learn about which staff are directly involved in implementing your *IM/IL* enhancement.

1. As the point person for the *IM/IL* enhancement, what are your roles?

PROBES:

- How were you selected?
- What are your responsibilities for oversight?
- Approximately what percentage of your time do you spend on *IM/IL* per month?

2. How many other staff work on the *IM/IL* enhancement? What are their job titles and main duties for *IM/IL*?

3. How receptive were staff to implementing an *IM/IL* enhancement?

PROBES:

- Did staff seem to support the goals behind the *IM/IL* enhancement?
- Did staff voice any concerns about being overweight themselves in terms of being role models or participating with children in structured movement activities? If so, how did you address these concerns?

- Did staff think that other areas in your program were a higher priority? If so, which ones and why?
- Were staff concerned that they did not have the content knowledge to implement an *IM/IL* enhancement?
- Were staff worried that they did not have enough time to incorporate *IM/IL* activities into their daily routines?
- If they were hesitant or had concerns, how did you address them?

4. Has staff turnover affected *IM/IL* implementation?

PROBES:

- Does your program in general experience low, moderate, or high levels of staff turnover?
- Are certain types of positions more prone to turnover? If so, which one(s)?
- Do you have any current vacancies?
- Are there certain *IM/IL* activities that are not taking place and have been put “on hold” because of staff turnover? What strategies is your program using to address this turnover?

5. How well is the staffing structure working so far?

PROBES:

- Are there sufficient staff resources to implement the *IM/IL* enhancement? Enough staff dedicated to work on it?
- If you could, would you change the staffing structure? If so, how and why?

6. Do any outside organizations serve an active role in providing activities for the *IM/IL* enhancement, such as facilitating workshops for children or parents on healthy eating?

IF YES: If so, what are their job titles and what do they do for *IM/IL*?

IF NO: Do you think it is an obstacle for successful *IM/IL* implementation that there aren't outside organizations playing an active role?

E. INITIAL TRAINING

1. Following the spring 2006 TOT event, did staff receive initial training in preparation for *IM/IL*?

IF NO: Skip to question #2 below.

2. Since there wasn't a formal training, did staff receive any special preparation to implement the *IM/IL* enhancement?

PROBES:

IF YES:	Who developed the local training activities?
	Who provided the training? Did you bring in any outside experts to do the training (e.g., presenters from the TOT)?
	When did the training(s) take place? [<i>Specific month(s) is adequate.</i>]
	How many and which types of staff participated? Were any volunteers trained?
	What was the format of the training? What topics were covered? Which types of activities were included? Lecture? Modeling? Breakout sessions? Role play?
	Were written materials distributed, such as a manual, curriculum, lesson plans, or list of resources to be used during implementation? If so, please describe.
	Were staff introduced to Choosy? Did staff learn about how to incorporate the vocabulary of structured movement etc., at the local training?
	Were staff trained on how to monitor progress made by children, such as observations of structured movement or tracking body mass index (BMI)?
	Which part(s) of training did staff find most helpful, and why?
	Was there anything about the training provided to your staff that wasn't helpful? If so, why?
	<i>Skip to question #3</i>

- Did you share the materials from the regional TOT event with staff? Which staff? Was it required that they review it, or was it voluntary? When did you share these materials? [*Specific month(s) is adequate.*]
- Do you plan to offer a local training for staff on the *IM/IL* enhancement? If so, who will be trained and what will be covered? When will the training take place, and how long will it last? If you don't plan to offer an initial training, why not?

3. How long after the training (either formal or informal review of materials) did your program began to implement the *IM/IL* enhancement? [*Specific month is adequate.*]

F. *IM/IL* ENHANCEMENT ACTIVITIES

Now I'd like to talk to you about any enhanced *IM/IL* activities that your program has implemented. We'll be discussing two general topics—physical activity and healthy eating. However, I'll ask you specific questions about the first two goals of *IM/IL* in turn—MVPA and structured movement—even though they are closely linked.

Early Head Start and Home Visits

Note to interviewers: Please keep in mind that some grantees may also be implementing the *IM/IL* enhancement among EHS children and/or families, as well as with children enrolled in the home-based option. Questions are geared towards classroom settings for the most part, as well as for 3 to 5 year-olds. Questions should be modified accordingly to the age group and the environment. For example, instead of asking about higher-level gross motor development such as throwing/catching a ball or hopping, you could ask about tummy time instead. Or, you can ask if expectant and new mothers learn about the benefits of breastfeeding.

1. Did your program have any formal policies in place before you attended the regional TOT, with regard to physical activity and/or healthy eating?

IF YES: Please describe.

2. What new physical activity (MVPA and structured movement) policies, if any, did your program institute to support your *IM/IL* enhancement?

PROBES:

- Require that children spend more time playing outside engaged in MVPA? If so, how often and for how long? Does this amount vary by age level?
- Require that teachers/home visitors incorporate guided, structured movement activities for certain amounts of time each day or week?
- Other policy changes?

3. What new healthy eating policies, if any, did your program institute to support your *IM/IL* enhancement?

PROBES:

- Make changes to types of foods or beverages served during the day? At socializations? At staff trainings?
- Make changes to the portion sizes served to children during the day? To families at socializations? To staff at trainings?
- Other policy changes?

4. What enhancement activities does your program provide as part of its *IM/IL* enhancement, with regard to the three “target areas”?

PROBES:

Physical Activity (MVPA)

- What kinds of MVPA activities are provided? For example, have staff (teachers or home visitors) increased the frequency of MVPA in their daily schedules?
- To whom are MVPA targeted? Children? Families? Staff?

- Is this primarily “free” play that was child-directed, or group physical activities that are facilitated by a teacher?
- On average, how much time (per day or week) do staff devote to MVPA? *N.B. For home visitors, can prompt if it’s addressed at each visit, once a month, etc.*
- Did you think this amount of time is too much, too little, or about right? Why?
- How long do activity “sessions” last (e.g., active outdoor play)?
- Where do MVPA activities take place (e.g., indoors, playground, nearby park)?
- What kinds of equipment or materials are used (e.g., balls, swings)?
- Is the MVPA structured (e.g., group activity led by/modeled by teacher/home visitor) or unstructured (e.g. supervised outdoor play time)?
- What percentage of [centers/classrooms/home visitors] are implementing this area of *IM/IL*?
- Does the frequency/intensity of MVPA vary by classroom/teacher/home visitor?

Structured Movement

- What kinds of structured movement activities are provided? For example, do teachers now integrate structured movement into daily routines?
- Are any of these activities brand new, compared with what your program did before *IM/IL*?
- On average, how much time (per day or week) do staff devote to structured movement? *N.B. For home visitors, can prompt if it’s addressed at each visit, once a month, etc.*
- Did you think this amount of time is too much, too little, or about right? Why?
- How long do activity “sessions” last (e.g., singing songs with body movements)?
- Where do movement activities take place?
- What percentage of [centers/classrooms/home visitors] are implementing this area of *IM/IL*?
- Does the frequency/intensity of MVPA vary by classroom/teacher/home visitor?
- Do Head Start staff members other than classroom teachers or home visitors provide intentional structured movement with children or parents? If so, who and how often? What kinds of movement activities?

Nutrition and Healthy Eating

- What kinds of nutrition activities are provided? For example, has your program omitted and/or added certain foods or beverages to what you serve children and staff? What about food or beverages served at socializations? *N.B. Ask for specific item(s).* Do you give sample menus and recipes to families? Provide information on making healthy choices at the grocery store, how to read labels?
- Are any of these activities brand new, compared with what your program did before *IM/IL*?
- To whom are services provided? Children? Families? Staff?

- On average, how much time (per day or week) do staff devote to promoting healthy eating? *N.B. For home visitors, can prompt if it's addressed at each visit, once a month, etc.*
- Did you think this amount of time is too much, too little, or about right? Why?
- How long do activity "sessions" last (e.g., a cooking class for parents)?
- Where do healthy eating activities take place? Do staff talk to children about healthy foods and encouraging new foods during meal times?
- Do any activities take place at group socializations? Parent meetings?
- What percentage of [centers/classrooms/home visitors] are implementing this area of *IM/IL*?
- Does the frequency/intensity of healthy eating vary by classroom/teacher/home visitor?
- Do any Head Start staff members other than classroom teachers or home visitors teach children or parents about healthy eating practices? If so, who and how often? What kinds of nutrition-related activities?
- Is healthy eating promoted to other audiences, like Head Start staff or families? If so, how did this occur? What kind of promotion is done? What activities take place? How often?

5. Do you modify *IM/IL* activities for children with disabilities? For children/families for whom English is not the primary home language? For families in the home-based option?

6. *N.B. If this is a grantee with delegate agencies:* Are delegate agencies included in the *IM/IL* enhancement? Why or why not?

7. *N.B. If this is a grantee with delegate agencies:* Is/Are your delegate agency/agencies implementing any *IM/IL* activities?

IF YES: Did they receive training on *IM/IL*? Who conducted the training? If they did not receive a formal training, did you share copies of the materials that you received at the regional TOT event?

IF NO: Why not?

8. Does your program offer special incentives or rewards for meeting certain benchmarks (e.g., do parents receive a pedometer when they complete an exercise log after the first month)?

9. Do outside organizations provide any activities for your *IM/IL* enhancement, such as monthly cooking classes that are open to families and/or Head Start staff?

IF YES: How did they get involved? What do they do?

10. The regional TOT event took place approximately a year ago. How much progress do you think your program has made in implementing your *IM/IL* enhancement?

PROBES:

- To what extent do you think the *IM/IL* enhancement resembles what you envisioned during the planning stage?
- What challenges or barriers has your program faced in implementing some or all of these components you targeted?

G. OUTREACH

1. Were any outreach strategies used to promote your *IM/IL* enhancement?

PROBES:

- How did you first communicate with staff, families, and any outside organizations about your *IM/IL* enhancement? Presentations at Policy Council meetings? Informally at socializations?
- Did your program develop brochures, posters, public service announcements, and/or newsletter articles? If so, what were the main messages?
- How widely distributed were these publicity efforts? Who was the audience for these outreach efforts? Children? Parents? Staff? Volunteers? Community organizations? Other?

2. How did you go about getting initial buy-in from staff, families, and any outside organizations?

PROBE:

- What motivated them to want to participate in the *IM/IL* enhancement?

3. How did parents initially react to your outreach efforts?

PROBE:

- Were parents excited, or hesitant? Why?

4. Has your program conducted any parent education activities centered on your *IM/IL* enhancement?

IF YES: What did you do? When did these activities take place? For how long? Who conducted the activities? Were parents engaged? Will there be additional activities and support for parents?

IF NO: Why not? Not part of *IM/IL* goals? No staff time? Lack of interest among parents?

H. ONGOING TECHNICAL ASSISTANCE AND CAPACITY BUILDING

1. Does your program have ongoing training and/or technical assistance to support the *IM/IL* enhancement?

IF NO: Why does your program not provide ongoing training and/or seek TA?

2. Is there any monitoring of your *IM/IL* activities and sharing of feedback? For example, review updated menus; review teacher logs; speak with parents and review meal diaries during home visits to determine if there have been changes in families' eating patterns; conduct classroom observations?

IF YES: What items are reviewed, observed, discussed with staff and/or families? How often does this take place? How is feedback shared?

IF YES: From whom did staff receive support?

What kind of support do staff receive?

What topic(s) are covered? How often is T/TA provided?

Which staff get trained on these topics? How many staff?

Who delivers the T/TA? Region III TA system staff? Outside experts?

Is this T/TA helpful? Why or why not?

Are *IM/IL* topics included during pre-service training?

How frequently are these *IM/IL* topics included during in-service days?

Approximately when was the last time one of these topics was included in a staff development activity?

What was the topic of that training?

Does your program utilize the e-mail distribution list^a created by Region III for those who have attended *IM/IL* training events? If yes, who reviews the e-mail list? How often? Is this distribution list helpful, and if so why? If your program doesn't use the distribution list, why not?

^a The purpose of this list is to distribute resources by e-mail to *IM/IL* grantees for the purposes of sharing successful strategies, stories, and feedback among grantees. It is maintained and monitored by the Region III TA Health Specialist.

3. Is your program tracking *IM/IL* implementation and measuring outcomes?

IF NO: What prevents you from measuring outcomes? Are there any plans in place to do so in the future?

<p>IF YES: Did you develop any assessment tools or monitoring procedures? Or borrow tools from other sources (e.g., use the observation forms shared at the regional TOT event)?</p> <p>How does your program assess height and weight of children? Who does these measurements? Is BMI computed? How often are BMI calculations made? What is done with this information?</p> <p>Do you ask staff for feedback? Track outcomes (e.g., periodically observe progress made in structured movement using the “Choosy Assessment of Motor Patterns”)? Conduct a parent survey of how much they exercise? Do classroom observations? Change the questions you ask families at intake/enrollment? Other?</p> <p>Who is responsible for collecting this information?</p> <p>How often do these assessments take place?</p> <p>Have staff used results of any assessment data to inform individual or group education and/or health goals? If so, how? If not, why not?</p>
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4. To what degree do children and staff incorporate the *IM/IL* vocabulary into their daily routines?

PROBES:

- Are teachers educating children by using structured movement vocabulary, such as “what my body does” and “how my body moves” and “where my body moves”?
- If so, do you hear teachers use this vocabulary with children? If not, why not?
- Do staff teach and use any nutrition slogans in classrooms, like “Crave Your F.A.V.” or “Think Tiny Tummies?” Are children picking up this vocabulary and using it?

5. Do outside organizations or experts provide any resources for your *IM/IL* enhancement?

IF YES:

- How did they initially react when you talked to them about *IM/IL*? Were they excited, or hesitant? Why?
- Do they provide TA? If so, how many and which types of staff are involved? How frequently do they provide TA?

- Do they provide any in-kind materials, play equipment, or space? If so, what kinds of items do they provide?
- Do you think that it would be possible for your program to implement an *IM/IL* enhancement without the support of these outside organizations? Why or why not?

IF NO:

- Do you think it would be difficult for other Head Start agencies to replicate what you have done?

6. Is there any additional training or support that staff need but that they have not received yet?

IF YES: What types of support do they need? Are there specific plans in place to meet these support needs?

I. SUSTAINABILITY AND RESOURCES

1. Has your program been able to implement your *IM/IL* enhancement as planned?

IF NO: How has actual implementation differed from initial plans? In actual activities? Duration? Intensity? In who receives services? What caused a change from the original vision of what the *IM/IL* enhancement would look like in your program?

2. How do you reinforce *IM/IL* goals and go about getting ongoing buy-in from staff? Parents? Community organizations? In other words, how do you keep the momentum moving forward?

PROBES:

- Did you incorporate *IM/IL* goals into Family Partnership Agreements? Community Partnership Agreements? Children's Individual Education Plans (IEP)? Children's Individual Health Plans (IHP)? Ongoing T/TA plans and/or Quality Improvement Plans (QIP)?
- Which *IM/IL* enhancement activities do you envision becoming a permanent part of pre-service and/or in-service training? Why? Which do you not envision in this way? Why?
- Have you shared information about *IM/IL* with the families' health care professionals or your local WIC program, such as a description of planned activities or any data collected?
- Have you shared information about *IM/IL* with Part B or C providers, such as a description of planned activities or any data collected?

3. Has your Health Services Advisory Committee changed the way it addresses health promotion and obesity prevention through physical activity, structured movement, and good nutrition since your *IM/IL* enhancement began? If so, how?

4. Has there been a change in the level of staff commitment to the *IM/IL* enhancement? Is it higher, lower, or about the same since the regional TOT event/since implementation began? Why?

5. Have you observed or experienced challenges in getting targeted audiences to do any of the activities? What challenges have you experienced? (For example, if you sponsor cooking classes to teach family members about easy-to-prepare, nutritious meals, do less than half of those invited attend?)

- If there have been challenges with participation among staff, had you anticipated that some staff would implement *IM/IL* at a higher level of intensity than others? How does service delivery vary, and why? If some staff are doing far less than others, how is this being addressed?
- If there have been challenges with participation among children/families, had you expected these challenges? What factor(s) affect some families participating more than others? Is your program doing anything to encourage participation?
- What factor(s) prevent higher activity levels? Do staff have little time? Which activities have parents noted are difficult to do?
- Has the program used any strategies to encourage participation over time?

6. Describe the start-up costs associated with your *IM/IL* enhancement (e.g., program design, training staff). *N.B. General categories and cost estimates are fine.*

7. What are the ongoing costs associated with *IM/IL*? General categories and cost estimates are fine.

8. How did your program make budget decisions about costs to implement the *IM/IL* enhancement?

PROBE:

- Did you have to redirect service priorities to cover the costs of the *IM/IL* enhancement? Are there any services that have been dropped or decreased in intensity to focus attention on *IM/IL* goals?

9. What percentage of your T/TA funds has been dedicated to your *IM/IL* enhancement?

10. What do you think is the future of your *IM/IL* enhancement?

PROBES:

- At this point, how long do you see the *IM/IL* enhancement continuing?
- Does your program have plans to continue the enhanced services at the current levels, expand services, or reduce services in the future?

- Which barrier(s), if any, could prevent the continuation of the *IM/IL* enhancement? Funding? Staff? Interest?

J. INITIAL SUCCESSES, CHALLENGES, AND LESSONS

1. What have been the most important successes of your *IM/IL* enhancement so far?

PROBES:

- Can you give an example?
- What factor(s) led to that success?

2. What are the most significant implementation challenges associated with your *IM/IL* enhancement so far?

PROBES:

- Needed additional technical assistance
- Other areas in our program were a higher priority *N.B. Ask for which area(s)*
- Children and/or parents were not enthusiastic about the *IM/IL* goals
- Lack of resources (either money or in-kind support) in the community
- High staff turnover
- What strategies have staff used to address these challenges?
- How well do you think these strategies worked?

3. What aspects of *IM/IL* do children like the most? What do they like the least?

4. What aspects of *IM/IL* do staff like the most? What do they like the least?

5. What aspects of *IM/IL* do families like the most? What do they like the least?

6. Do you think the *IM/IL* enhancement has had an effect on the outcomes your program has hoped to achieve (e.g., increased MVPA by 50%)? Do you think it will in the future?

7. What are the most important lessons your program has learned so far about implementing an *IM/IL* enhancement?

8. What changes, if any, do you think should be made to the *IM/IL* enhancement, either the enhancement in your program specifically or the enhancement overall in Head Start?

PROBE:

- Changes in scope? Activities? T/TA? Staffing? Involvement of outside organizations or experts? Other?

9. What advice would you give to another Head Start program that is thinking about implementing an *IM/IL* enhancement?

10. Do you think what you have done with your *IM/IL* enhancement could also be done by other Head Start programs?

PROBES:

- If yes, what would be needed for successful replication?
- If no, what would prevent or hinder replication?
- Is there anything unique about your local community or populations served that help or hinder successful implementation of your *IM/IL* enhancement?

WRAP-UP

Is there anything else you would like to add before we end our discussion?

N.B. MPR should have already received a set of documents from the program in advance of the telephone call, such as the program's most recent T/TA plan and copies of any local IM/IL training materials. If we have not received them, then ask for specific outstanding items as appropriate.

Thank you very much for speaking with me and sharing your experiences and feedback on the *IM/IL* enhancement at your Head Start program.