

Name:
Date:
Interviewed by:

Head Start CARES: Grantee/Delegate Agency Director Interview Guide
(Telephone or in-person)

Introductory script:

Hello, my name is _____, and as you know we are conducting the Head Start CARES study and evaluating the implementation of <**program model**>. The purpose of the implementation study is to help inform replication in the field and help interpret the impact of <**program model**>. Your experience and opinions are very important to us, and we want to thank you for taking the time to speak with us.

I. Head Start CARES

1. Why did you agree to participate in the Head Start CARES study?
 - a. What did you hope to learn?
 - b. How did you think it would benefit the Head Start program? The Centers participating?
2. What assistance did this organization provide to the selected Centers to implement their program models?
 - a. Additional staff hired?
 - b. Additional training or technical assistance provided?
 - c. Other resources provided (e.g., additional funding)?
3. To what degree does this assistance complement or displace other technical assistance provided to Centers?
4. How frequently does organization staff communicate with the selected Centers about implementation of the program models?
 - a. What is the nature of the discussions?
 - b. What information is of particular interest to the grantee/delegate agency?
 - c. Do Centers provide regular progress reports (qualitative and/or quantitative) to this organization? If so, what is included?

Name:

Date:

Interviewed by:

5. How does the training and coaching associated with the program models complement or displace professional development for Center staff?
6. What are your impressions of program model implementation to date?
 - a. Are some Centers more successful than others in implementing their program models?
 - b. What seems to affect the success of implementation?
7. Has anything happened this year at the Grantee/Delegate Agency level that may have affected the implementation of Head Start CARES? If so, please explain.
8. Has anything happened this year in your community that may have affected the implementation of Head Start CARES? If so, please explain.
9. Are there other issues that have influenced the implementation of *<program model>*? If so:
 - a. What were these issues?
 - b. How did they arise?
 - c. How were they addressed?
 - d. How, if at all, are volunteers involved in the delivery of *<program model>*?

II. Sustainability

1. At the conclusion of the Head Start CARES study, will you continue to use *<program models>* in your Centers? Why or why not?

(If planning to continue to implement the program models):

- a. What additional resources, if any, are necessary for your agency to continue using the program models (e.g., additional funding, training, coaching)?
- b. What modifications, if any, would you have to make to the program model to continue using it?

Name:

Date:

Interviewed by:

- i. Specifically how will you provide the necessary training and coaching for your teachings?

Name:
Date:
Interviewed by:

III. Additional Comments

1. Is there anything else that you would like to add regarding the Head Start CARES study?
2. Do you have any recommendations for Grantees/Delegate Agencies that will implement social-emotional program enhancements in the future?
3. Do you have any other general comments, concerns, or suggestions?

Closing script:

On behalf of the Head Start CARES evaluation team, we'd like to thank you for your time and efforts in helping with this study.