

Facilitator ID _____

Interviewer CR SH

Date ____/____/____

National Institute for Literacy
***Our Reading and Writing Journey* Facilitator Interview**

INTRODUCTON: Begin by introducing yourself to the facilitator and explain the purpose of the interview. Tell the facilitator that you are helping RTI International conduct an evaluation of the Pilot K-3 *Our Reading and Writing Journey* curriculum and Parent Activity Guide under a contract with the National Institute for Literacy. Her responses will be used to refine the curriculum further and develop procedures for repeating the pilot in future sites. Then administer the Informed Consent.

INFORMED CONSENT

Section I: Facilitator’s Background, Training, and Overall Impression of Program

BACKGROUND

1. How did you first learn about the *Our Reading and Writing Journey* program? (Probe for who contacted the facilitator: principal, district personnel, Title I Coordinator, etc.)

2. What attracted you to the role of facilitator?

3. Overall, did the program meet your expectations?

___ YES

___ NO (In what ways did the program fail to meet your expectations?)

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4. What has been your experience working with parents in the past?

5. Did you have prior experience or training in reading instruction?

___ YES

___ NO

6. What type of prior education or training would have better prepared you for this position?

7. What personal qualities are essential for someone filling this position? Please explain.

II. TRAINING AND PREPARATION

8. Describe the training you received to deliver the *Our Reading and Writing Journey* curriculum.

[PROBE FOR CONTENT, STRUCURE, AMOUNT OF TIME, ETC.]

9. What features of the training you received was helpful?

10. What did not work or could have been improved?

11. What additional training would have better prepared you for this role?

12. What additional training materials would have been useful?

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13. Based on the training you received, did you feel sufficiently prepared to use the curriculum?

___ YES

___ NO (Please explain why you did not feel sufficiently prepared to use the curriculum)

14. What do you recommend adding to the content of training for facilitators?

15. What could have been done differently?

16. Please describe the type of supports you received to make this program a success. [PROBE FOR DETAILS AND TYPE OF SUPPORT]

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III. LESSON PRESENTATION AND RESOURCES

17. Did the order of the lessons as they were presented in the Facilitator Handbook work well?

___ YES

___ NO (What would you change?)

18. Was the amount of material presented in each lesson adequate for the allotted time?

___ YES

___ NO (What would you change?)

19. What would you do differently with the resources provided to you?

20. What barriers did you face while attempting to present the lessons? For example, did you have adequate time to plan lessons? Were resource materials adequate?

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21. Was the space where classes were held adequate and comfortable?

___ YES

___ NO (If NO, What would you change?)

22. How well did the class schedule work for parents? [PROBE WHETHER 12-WEEKS WAS ENOUGH TIME OR TOO LONG AND WHETHER TIME OF THE DAY WAS A PROBLEM]

23. What strategies did you use to maintain good attendance?

24. Now, thinking about the adults you worked with, please describe how you addressed different learning styles in your classes?

25. What approaches seemed to work well and what did not? (Probe for how well parents worked in small groups or teams, modeling activities, practicing home work activities)

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26. What were the challenges you faced working with the parents in your program? [PROBE FOR SPECIFIC PROBLEMS, I.E., LANGUAGE BARRIERS, DIFFICULTY UNDERSTANDING MATERIALS, ABSENTEEISM]

27. How did you resolve those challenges or overcome barriers?

IV. DELIVERY OF LESSONS

28. Did you feel the lessons allowed for flexibility in the way they were delivered?

___ YES

___ NO (Please explain.)

29. If you were delivering these lessons again, what would you change?

V. IMPACT OF THE PROGRAM ON PARENTS AND CHILDREN

30. What affect do you think the curriculum has had on parents? [PROBE FOR WHETHER PARENTS SEEMED MORE CONFIDENT ABOUT HELPING THEIR CHILDREN WITH SCHOOL WORK]

31. Are you aware of any parents becoming more involved with their children’s class or other school activities, as a result of their participation in the program? If yes, please explain.

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32. How do you think participation in the Reading and Writing Journey program affected their children?

[PROBE FOR OBSERVED CHANGES IN CHILDREN'S LANGUAGE USAGE,
VOCABULARY, INTEREST IN READING, ETC.]

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VI. HOW THE PROGRAM FIT WITHIN THE SCHOOL

33. How do you think the program was viewed by the school administration? [PROBE FOR RESPONSES TO THE PROGRAM OF OTHER TEACHERS OR SCHOOL PERSONNEL

34. Did this program seem to support your school's goals for children?

___ YES

___ NO (What would make it more of a fit?)

35. What are the essential elements that would make this program a success in other settings?

SECTION II: FACILITATOR’S IMPRESSION OF THE LESSON CONTENT

[FACILITATORS NOTE: START FIRST WITH OVERALL IMPRESSION OF ENTIRE TRAINING CONTENT. IF THERE IS TIME, THEN GO TO INDIVIDUAL SESSION QUESTIONS. IF THERE IS NOT ENOUGH TIME, SKIP THE INDIVIDUAL QUESTIONS AND PROCEED TO SECTON III]

Now I would like to ask you about all of the sessions of *Our Reading and Writing Journey* and the Parent Resource Guide as a whole. I would like to know what you like about the sessions. What parts did you enjoy least and why? What was easy or difficult for parents and what you would change?

36. What did you like best about the sessions and lessons? What components worked well for parents?

37. What components of the sessions and lessons did not work well for parents? Probe for problems with lesson content, resource materials, handouts, and sequence of activities)

38. What would you change about the sessions and lessons?

[IF THERE IS TIME TO ASK ABOUT INDIVIDUAL SESSIONS, KEEP GOING AND PROCEED TO QUESTION #40. IF THERE IS NOT ENOUGH TIME STOP HERE AND PROCEED TO QUESTION #76]

Now I would like to ask you about each of the 12 lessons in *Our Reading and Writing Journey* and the Parent Resource Guide. I would like to know what you like about each component of the lessons. What parts did you enjoy least and why? What was easy or difficult for parents and what you would change?

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[PROBE FOR ADDITIONS OR CHANGES NEEDED IN EACH SECTION. ASK THE FACILITATOR TO DESCRIBE SECTIONS THAT SEEMED TOO DIFFICULT FOR PARENTS OR THAT WERE PROBLEMEATIC TO TEACH]

SESSION ONE: Talking and Telling Stories with Children

40. What did you like about this session? What components worked well for parents?

41. What components of this session did not work well for parents? Probe for problems with lesson content, resource materials, handouts, and sequence of activities)

42. What would you change about this session?

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SESSION TWO: Sharing Storybooks

43. What did you like about this session? What components worked well for parents?

44. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, AND SEQUENCE OF ACTIVITIES]

45. What would you change about this session?

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SESSION THREE: Building Knowledge About the World

46. What did you like about this session? What components worked well for parents?

47. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITEIS]

48. What would you change about this session?

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SESSION FOUR: Learning and Using New Words

49. What did you like about this session? What components worked well for parents?

50. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

51. What would you change about this session?

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SESSION FIVE: Learning About Print

52. What did you like about this session? What components worked well for parents?

53. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

54. What would you change about this session?

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SESSION SIX: Listening for Sounds in Spoken Language

55. What did you like about this session? What components worked well for parents?

56. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

57. What would you change about this session?

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SESSION SEVEN: Learning Alphabet Letters

58. What did you like about this session? What components worked well for parents?

59. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

60. What would you change about this session?

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SESSION EIGHT: Connecting Letters to Sounds

61. What did you like about this session? What components worked well for parents?

62. What components of this session did not work well for parents? PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

63. What would you change about this session?

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SESSION NINE: Writing with Children

64. What did you like about this session? What components worked well for parents?

65. What components of this session did not work well for parents? PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

66. What would you change about this session?

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SESSION TEN: Talking About and Understanding What's Read

67. What did you like about this session? What components worked well for parents?

68. What components of this session did not work well for parents? PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

69. What would you change about this session?

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SESSION ELEVEN: Reading Like Talking

70. What did you like about this session? What components worked well for parents?

71. What components of this session did not work well for parents? [PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

72. What would you change about this session?

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SESSION 12: KEEPING IT GOING

73. What did you like about this session? What components worked well for parents?

74. What components of this session did not work well for parents? PROBE FOR PROBLEMS WITH LESSON CONTENT, RESOURCE MATERIALS, HANDOUTS, SEQUENCE OF ACTIVITIES]

75. What would you change about this session?

<p>SECTION II: FACILITATOR'S IMPRESSION OF THE PARENT ACTIVITY GUIDE</p>

76. How helpful was the Parent Activity Guide (the scrapbook)?

77. What features worked well?

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78. What features did not work well?

79. How well did the scrap book support the lessons?

80. Did parents use the scrapbook as intended?

81. Were any concerns raised about the amount of work or level of difficulty with the homework activities?

82. Did you feel the materials in the Parent Activity Guide represented people of diverse backgrounds and cultures?

___ YES

___ NO (How could the Parent Activity Guide be more inclusive of diverse cultures?) [PROBE FOR EXAMPLES OF MATERIALS, ACTIVITIES, RESOURCES, ETC.]

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83. Overall, did parents' response to the curriculum meet or exceed your expectations?

___ Met my expectations

___ Exceeded my expectations

___ Did not meet my expectations Why not?

Paperwork Burden Statement-Facilitator Survey

According to the Paperwork reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **1800-0011 v123**. The time required to complete this information collection is estimated to average **30** minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-4537. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** [insert program sponsor/office], U.S. Department of Education, 400 Maryland Avenue, S.W., [insert building/room number], Washington D.C. 20202-4537.