

Study of Early Head Start–Child Care Partnerships

**OMB Information Collection Request
New Collection**

Supporting Statement

Part A

**September 2015
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Submitted by:
Office of Planning, Research and Evaluation
Administration for Children and Families
U.S. Department of Health and Human Services

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A1. Necessity for the data collection

The Office of Planning, Research, and Evaluation (OPRE) within the Administration for Child and Families (ACF) at the U.S. Department of Health and Human Services seeks approval to collect descriptive information for the new Early Head Start–child care partnership competitive grant opportunity. This information collection is being carried out as part of the Study of Early Head Start–Child Care Partnerships. The purpose of the study is to learn how the partnerships are formed and operated, including the models of partnerships used to deliver high-quality and comprehensive services to infants, toddlers, and their families. In particular, this descriptive study will document the characteristics and features of partnerships and activities that aim to improve professional development and the quality of services and better meet families’ needs. The study will fill a knowledge gap about partnership models implemented in the field, lay the groundwork for future research, and provide information to inform technical assistance and actions aimed at improving the Early Head Start–child care partnerships grant initiative.

Study background

In fall 2013, OPRE within ACF awarded a contract to Mathematica Policy Research to carry out the Study of Early Head Start–Child Care Partnerships. The aims of the study are to assess the knowledge base for early care and education (ECE) partnerships, develop a theory of change model for Early Head Start–child care partnerships, and conduct a descriptive study of the new competitive grant opportunity for expanding high-quality early learning opportunities for infants and toddlers through Early Head Start–child care partnerships grants or Early Head Start.

In March 2015, ACF awarded 275 Early Head Start expansion and Early Head Start–child care partnership grants in 50 states; Washington, DC; Puerto Rico; and the Northern Mariana Islands. The grants support partnerships between Early Head Start programs and local child care centers and family child care providers serving infants and toddlers from low-income families. The partnerships support working families by providing full-day, full-year child care and comprehensive services to children and families, including: (1) health, developmental, and behavioral screenings; (2) health, safety, and nutrition services that meet the Head Start Program Performance Standards (HSPPS); and (3) parent engagement opportunities. The proposed descriptive study will focus on the grantees (including the delegate agencies to which the grantee has delegated all or part of its responsibility for operation of the program) that received funds for Early Head Start and child care partnerships (referred to as “partnership grantees and delegate agencies” herein).

A literature review conducted by the study team found that the research base for how ECE partnerships support quality and meet low-income families’ needs is not well developed (Del Grosso et al. 2014). This review included 78 studies of ECE partnerships, including partnerships between Head Start and Early Head Start grantees and child care providers; school districts and child care providers and Head Start agencies; and other types of partnerships, including partnerships with informal caregivers and early intervention services. Across studies, there was limited rigorous evidence about the elements that are critical for the successful implementation of ECE partnerships. The existing literature demonstrated that no single model of partnerships existed. Rather, partnerships carried out a range of activities that have the potential to support implementation. The literature review also highlighted barriers and challenges to forming and maintaining partnerships.

The literature review also identified four main gaps in the knowledge base on Early Head Start–child care partnerships. First, research is needed on the characteristics and components of partnerships implemented in the field, resources required, and organizational and contextual factors that facilitate the partnerships. Second, more research is needed on child care providers’ perspectives on their motivations to partner, their experiences with partnerships, factors that facilitate partnerships, and partnership successes and challenges. Third, given the prevalence of home-based child care for infants and toddlers, research is needed on strategies for implementing partnerships in home-based settings, the strengths and needs of providers, and the quality improvement supports available to them. Finally, more research is needed on the effectiveness of early childhood partnerships in improving outcomes for children, families, providers, and communities.

Findings from the literature review were used to develop a theory of change for Early Head Start–child care partnerships (Attachment A). It visually depicts how partnership grantees (and their delegate agencies), child care partners, families, and other early childhood systems could potentially work together in a coordinated manner to provide high quality, comprehensive services to low-income infants and toddlers and their families. The constructs in the theory of change informed the selection of constructs to be measured in the proposed data collection.

The proposed descriptive study is designed to develop a rich knowledge base by addressing three of the four gaps identified in the literature review. It will document the characteristics and components of partnerships, incorporate the perspectives of child care partners, and collect information about strategies for implementing partnerships with family child care providers. To collect this information, the study proposes to conduct web-based surveys of 311 partnership grantee and delegate agency directors and a sample of 933 child care directors and family child care providers in winter and spring 2016 (after obtaining OMB approval). The proposed study will also collect in-depth data from case studies of 12 partnerships that vary in their characteristics and approaches to implementing the partnerships (fall 2016 and spring 2017). The information collected will be used to identify and learn about the different models of partnerships implemented by partnership grantees and delegate agencies and the child care providers they partner with to provide services to children and families. Moreover, the information can serve as a foundation for future studies that address the fourth research gap by assessing the effectiveness of partnership models in improving outcomes for children, families, providers, and communities.

Legal or administrative requirements that necessitate the collection

This is a discretionary data collection that falls under the authority of the Consolidated Appropriations Act, 2014 (Pub.L. 113-76), Division H, Title II.

A2. Purpose of survey and data collection procedures

Overview of purpose and approach

To address existing knowledge gaps, the study team will carry out a descriptive study that uses web-based surveys and case studies to build the knowledge base about the characteristics and implementation of Early Head Start–child care partnerships. The surveys, planned for winter and spring 2016 (after obtaining OMB approval), will collect this information from 311

partnership grantee and delegate agency directors¹ and 933 selected child care center directors and family child care providers they partner with to provide services. The study proposes in-depth, follow-up case studies of 12 partnerships representing different partnership models between fall 2016 and spring 2017, with site selection and recruitment taking place in late summer and fall 2016. The case studies are designed to learn more about how each type of partnership model operates, the challenges encountered, and organizational and contextual factors that facilitate the partnerships.

Research questions

The data collection and reporting activities to be conducted as part of the Study of Early Head Start–Child Care Partnerships seek to address seven research questions:

1. What are the characteristics of partnership grantees and their child care partners?
2. What activities do partnerships engage in to improve the quality of child development services?
3. What activities do partnerships engage in to help meet families’ needs?
4. What are the different models that partnerships have implemented?
5. What activities do partnership grantees and child care partners engage in to develop and maintain partnerships?
6. What are partnership grantee and child care partner perceptions of partnership quality?
7. What are the needs of enrolled families, and what are their experiences with partnership services?

The research questions for the proposed study address three of the four research gaps identified by the literature review (Del Grosso et al. 2014) and discussed above. Answering these questions will fill knowledge gaps about the characteristics and components of Early Head Start–child care partnerships and incorporate the perspectives of child care partners, including child care center directors, child care center teachers, and family child care providers. The study will also generate information about strategies for partnering with family child care providers, improving quality in family child care settings, and delivering services in these settings to meet families’ needs.

Study design

Little is known about the implementation of the Early Head Start–child care partnership initiative, and the study team expects that there will be a great deal of variability in how partnerships are implemented. To gain an understanding of this initiative and address the research questions, the study team proposes a descriptive study of the Early Head Start–child care partnership grantees. The descriptive study utilizes quantitative and qualitative data collection strategies in two related components: (1) quantitative data in the form of web-based surveys of partnership grantee and delegate agency directors and a randomly selected sample of

¹ As elaborated in Supporting Statement Part B, ACF has awarded 275 Early Head Start expansion and Early Head Start–child care partnership grants. Two hundred fifty-one grantees are implementing comprehensive services to infants and toddlers through Early Head Start–child care partnerships. We assume that 5 percent of the partnership grantees are states or other large grantees, and that each large grantee has 5 delegate agencies. Thus, we assume a respondent universe of 311 partnership grantee and delegate agency directors.

child care partners will provide information on partnership characteristics and activities, and (2) qualitative data in the form of case study interviews and focus groups will provide in-depth information from purposively selected partnerships (representing differing partnership models) and each of the child care providers they partner with to provide services. These case studies will more fully represent the perspectives of the various entities involved in the selected partnerships, provide follow-up implementation information, and lay the groundwork for future causal studies.

Surveys of partnership grantee and delegate agency directors and selected child care partners

Partnership grantee and delegate agency director survey. The partnership grantee and delegate agency director survey will be web-based and will document the perspectives of 311 partnership grantees and delegate agencies. There are 251 partnership grantees. Several of these are large grantees (for example, states or large cities) that will contract with delegate agencies to carry out grant activities. Based on the review of a small number of grantee applications, we expect approximately 12 large grantees, each with an expected five delegate agencies. Since the study team plans to survey all delegate agency directors, there would be a total of $251 + (12 * 5) = 251 + 60 = 311$ partnership grantee and delegate agency directors.

- **Strengths and limitations of the partnership grantee and delegate agency director survey.** Little is known from the research literature on the models of Early Head Start-child care partnerships, and there is currently no administrative data on these grantees. We anticipate that there will be a great deal of variability in how partnerships implement the provisions of the grant. Due to grant negotiations with ACF, we expect that partnership grantees' plans, including the number and type of child care partners, will change substantially from plans presented in grant proposals. Therefore, we do not have data needed to develop a sampling plan. To ensure we obtain an accurate picture of the full range of partnership characteristics and activities, we plan to survey all partnership grantees and their delegate agencies. This will fill a knowledge gap by systematically capturing comprehensive descriptive information about the characteristics and activities of partnership grantees and delegate agencies and their child care partners, and provide a national picture of this new initiative. The web-based survey application will decrease the burden of data collection. The web-based application will be programmed to route respondents to the next appropriate question based on their answers; this mode of data collection offers the easiest means of providing data while ensuring the data collected are of high quality.

Child care partner survey. The study team will also survey a selected sample of 933 child care partner managers/owners. As part of the partnership grantee and delegate agency director survey, we will ask directors to provide basic information about each of their child care partners, including the type of partner (child care center or family child care home), the number of slots funded through the partnership, and the child care partner's contact information. Based on this information, we will use an explicitly stratified random sampling approach to select 20 percent of partners for each grantee.² We will then invite this subset of partners to complete the child care partner survey.

² Because we plan to select a minimum of one child care partner of each type (child care center or family child care provider), we may end up sampling more than 20 percent of a grantee or delegate agency's child care partners.

- **Strengths and limitations of the child care partner survey.** The goal of sampling child care partners is to describe the different types of partnering agencies (child care centers and family child care providers) across the range of partnership models. Sampling is possible with partners since the partnership grantee and delegate agency director survey will provide information on the universe of their child care partners. The explicitly stratified random sampling approach will ensure that we capture adequate numbers of child care centers and family child care providers. Using this approach, we will sample at least one partner of each type (child care center and family child care provider) from each partnership grantee and delegate agency. A drawback of this approach is that we may have a resulting sample of partners that is not representative of the population of partners. That is, this method may oversample family child care providers, who are expected to be less prevalent than child care center partners. However, oversampling family child care partners is desirable. As noted in Section A1, a review of the literature on early childhood partnerships (Del Grosso et al. 2014) points to a particular need to more fully understand the characteristics and experiences of family child care providers, including strategies for implementing partnerships in these settings, the strengths and needs of providers, and the quality improvement supports available to them.

Case studies of partnership grantees and their child care partners

Based on the analysis of data derived from the partnership grantee and delegate agency director and child care partner surveys (described in more detail in Section A16), we will identify 12 partnerships for in-depth case studies. We will purposively select partnerships that differ along important dimensions (such as the number and types of partners and approaches to combining funding sources, allocating funding across partnering organizations, supporting quality improvement needs, and delivering comprehensive services to families and children) and represent a range of partnership models. For example, partnership models can include one or both types of partners (child care centers and family child care providers), differing approaches to funding (such as using Early Head Start funds for comprehensive services and quality improvement activities, and child care subsidies and other funds to cover the cost of care), and multiple approaches to dividing responsibility across partnering organizations (such as training child care partner staff to conduct child assessments or having partnership grantee staff conduct assessments). The proposed number of case studies is expected to be large enough to capture variability in the characteristics of grantees and delegate agencies and child care partners and in partnership activities. We expect that these case studies will yield rich information about the main partnership models of interest. Delegate agencies will be eligible as case study sites and, if selected, we will treat each as a separate partnership model.

- **Strengths and limitations of the case studies.** The case studies will provide the opportunity to more fully represent the perspectives of the various entities involved within the selected partnerships, including grantees and delegate agencies, child care partner managers/owners, frontline staff, families, and other state and local stakeholders. We will gather information from these respondents using established protocols that incorporate best practices in qualitative methods. As compared to the partnership grantee and delegate agency director and child care partner surveys, the case studies are expected to yield information from a broader group of partnership entities at a later point in time when partnerships are more developed. In addition, the case studies will provide an opportunity to collect data from each of the child care providers the 12 partnership

grantees and delegate agencies partner with to provide services. Based on a review of a small number of grant applications, we expect 15 child care partners, on average, per grantee or delegate agency. This means the study will represent the perspectives of 180 child care partners. By including all child care partners, the study can explore the variability of implementation approaches and relationships and other contextual factors across partners within a partnership. This approach will address a gap in the literature on perspectives of child care providers that participate in early childhood partnerships (Del Grosso et al. 2014).

This qualitative data collection is preliminary and exploratory. While the qualitative methods used in this study do not allow for conclusions of causality or generalizing beyond the case study sample, they will help inform a preliminary understanding of how each type of partnership model operates, the challenges encountered, and the lessons learned about implementing partnerships. Additionally, the information gathered may provide foundational opportunities for future studies designed to explore causal relationships. Specifically, by providing in-depth examples of how different partnership models operate, the case studies might lay the groundwork for future causal studies that assess the effectiveness of the models in improving family and child well-being, child care quality, and school readiness.

Universe of data collection efforts

Clearance is requested for the following data collection activities for the Study of Early Head Start–Child Care Partnerships.³ Table A.1 provides a crosswalk between the study instruments and the specific research questions each is designed to address. To the extent possible, we drew on questions used in previous studies (see Attachment B for additional information about these study instruments). Throughout the partnership grantee and delegate agency director and child care partner surveys and questionnaires, we document the source for questions taken from other surveys and identify new questions developed for this study. Details on the purpose and use of the information collection for each of the study components are summarized in Table A.2.

Table A.1. Research questions addressed by the study instruments

Research questions	Survey		Case studies			
	Partnership grantee and delegate agency director survey	Child care partner survey	Interview topic guide ^a	Focus groups ^b	Partnership grantee and delegate agency director questionnaire ^e	Child care partner questionnaire ^e
1. What are the characteristics of partnership grantees and their child care partners?	x	x			x	x
2. What activities do partnerships engage in to improve the quality of child development services?	x	x	PD, PS	CD, T, F		
3. What activities do partnerships engage in to help meet families' needs?	x	x	PD, PS, ST	CD, F		

³ All data collection instruments and supporting documents to be used with Spanish-speaking respondents will be translated by a certified Mathematica translator.

Research questions	Survey		Case studies			
	Partnership grantee and delegate agency director survey	Child care partner survey	Interview topic guide ^a	Focus groups ^b	Partnership grantee and delegate agency director questionnaire ^e	Child care partner questionnaire ^e
4. What are the different models that partnerships have implemented?	x	x		CD, F		
5. What activities do partnership grantees and child care partners engage in to develop and maintain partnerships?	x	x	PD, ST	CD, T, F	x	x
6. What are partnership grantee and child care partner perceptions of partnership quality?	x	x		CD, T, F	x	x
7. What are the needs of enrolled families and what are their experiences with partnership services?				P		

^a We will conduct semistructured interviews with partnership grantee and delegate agency directors (PD), partnership staff (PS), and state and local stakeholders (ST) from each case study site.

^b We will convene focus groups with child care center directors (CD), child care center teachers (T), and parents (P) from each case study site. We will also conduct focus groups with family child care providers (F) in partnerships that include this type of partner.

1. **Partnership grantee and delegate agency director survey (Attachment C).** This web-based survey will be administered to partnership grantee and delegate agency directors to gather information about the characteristics of grantees and the activities grantees carry out to develop and implement partnership services. To learn about how grantees and delegate agencies developed their partnerships, the survey includes questions about the methods used to recruit partners and the development and content of written partnership agreements. To learn about approaches to implementation, the survey includes questions about the services offered to families, types of activities in place for monitoring the quality of care, the methods for developing quality improvement plans based on these assessments, and the entities responsible for implementing services and monitoring the implementation of quality improvement plans and compliance with the HSPPS in the partnerships. The survey will also ask grantee and delegate agency directors to list their child care partners (including contact information for each) and report on their characteristics (including whether the provider is a child care center or family child care home and the number of infant-toddler slots funded through the partnership). This information will be used to randomly select a subset of partners. For this subset of partners, the survey will then include a series of questions about the partnership agreement process and the quality of the partnership.
2. **Child care partner survey (Attachment D).** This web-based survey will be administered to a randomly selected subset of child care partners, based on information gathered in the partnership grantee and delegate agency director survey. We will collect information from child care partners about their characteristics, the activities they engage in to develop and implement partnership services, and the quality of their partnership with the grantee. Based on respondents' language needs, a trained Mathematica interviewer may administer this instrument by telephone.

Case studies

We plan to conduct 2.5-day site visits to 12 partnerships to learn in more depth about how the partnership models operate, the challenges encountered, and the lessons learned. For each case study, we plan to conduct four staff interviews, four focus groups, and four telephone interviews with state and local stakeholders. We will also administer brief questionnaires to each case study grantee or delegate agency director and to all their child care partners.

3. **Interview topic guide (Attachment E).** We will conduct semistructured interviews with each grantee or delegate agency director and three additional partnership staff.⁴ The interviews will focus on coordinating activities among partners, monitoring compliance with the HSPPS, and providing technical assistance and training. We will also conduct four semistructured telephone interviews with state and local stakeholders who provide support to oversee early childhood systems that interact with the partnerships. For example, these could be staff from child care resource and referral agencies or child care subsidy administrators.
4. **Parent focus group guide (Attachment F).** We will convene focus groups with eight parents in each case study site. Topics will include child care needs and preferences, motivation for enrolling in partnership services, process of selecting a child care provider, experiences receiving services through the partnership, and satisfaction with services received.
5. **Child care center director focus group guide (Attachment G).** We plan to conduct focus groups with eight center directors in each case study site. Topics will include motivations for partnering, directors' roles in and process of partnership development, experiences implementing the partnership in compliance with the HSPPS, experiences collaborating with the grantee agency, challenges encountered, lessons learned, and satisfaction with the partnership.
6. **Child care center teacher focus group guide (Attachment H).** We will conduct focus groups with eight child care center teachers in each case study site. We will discuss receipt of training and support; experiences with implementing the partnership, working with children and families, and collaborating with grantee and other partner staff; challenges encountered; and satisfaction with the partnership.
7. **Family child care provider focus group guide (Attachment I).** We will convene family child care provider focus groups in partnerships with family child care providers (half of the case study sites). Eight family child care providers will participate in each focus group. Topics will include motivations for partnering; receipt of training and support; providers' roles in and process for partnership development; experiences implementing the partnership in compliance with the HSPPS, working with child and families, and collaborating with the grantee and other partners staff; challenges encountered; lessons learned; and satisfaction with the partnership.

⁴ While we expect the staffing configurations of partnership staff to vary across partnership models, we anticipate interviewing staff from both the grantee and child care partner agencies who focus on coordinating activities among partners, monitoring compliance with the HSPPS, and providing technical assistance and training. These respondents may include teachers or staff acting in management or administrative roles.

8. **Partnership grantee and delegate agency director questionnaire (Attachment J).** We will ask partnership grantee and delegate agency directors to complete a brief, self-administered paper questionnaire about the characteristics and quality of their partnerships with each of their child care partners. Case study grantees and delegate agencies will complete one questionnaire for each of their child care partners.
9. **Child care partner questionnaire (Attachment K).** We will ask child care partner center directors and family child care providers to complete a brief, self-administered paper questionnaire about their characteristics, services provided through the partnership, and the quality of their partnership with the grantee or delegate agency. This questionnaire will be administered to all child care partners at each case study site.

Table A.2. Timing, sample, and goal of study instruments

Instrument	Timing ^a	Sample	Overall goal of instrument
1. Partnership grantee and delegate agency director survey	Winter/Spring 2016	311 partnership grantee and delegate agency directors	Describe the characteristics, partnership development activities, quality improvement activities, and services provided to children and families. The survey will also collect information about the characteristics of grantees' child care partners and, for a subset of partners, the quality of partnerships.
2. Child care partner survey	Winter/Spring 2016	Randomly selected sample of 933 child care partner managers/owners	Describe child care partners' characteristics, partnership development activities, quality improvement activities, services provided to children and families, and the quality of their partnerships with the grantees.
3. Interview topic guides <i>Partnership grantee and delegate agency directors</i>	Fall 2016/ Winter 2017	Partnership grantee and delegate agency directors from 12 purposively selected case study sites	Describe partner recruitment, development of partnership agreements, quality improvement activities, monitoring compliance with the HSPPS, providing child development services, and developing and implementing family partnership agreements. We will also discuss challenges encountered, lessons learned, and satisfaction with the partnership.
<i>Partnership staff</i>	Fall 2016/ Winter 2017	Three partnership staff members from each of 12 purposively selected case study sites	Describe coordinating of activities among partners, monitoring compliance with the HSPPS, and providing technical assistance and training.
<i>State and local stakeholders</i>	Fall 2016/ Winter 2017	Four stakeholders from each of 12 purposively selected case study sites	Describe the availability of quality improvement supports and professional development opportunities in the community, as well as efforts to coordinate supports and opportunities with the partnerships. We will also explore barriers to partnerships resulting from rule misalignment across systems (such as between child care licensing requirements and the HSPPS) and efforts to address the barriers at the local and state level.
4. Parent focus group guide	Fall 2016/ Winter 2017	Eight parents from each of 12 purposively selected case study sites	Describe child care needs and preferences, motivation for enrolling in partnership services, process of selecting a child care provider, experiences receiving services through the partnership, and satisfaction with services received.
5. Child care center	Fall 2016/	Eight child care center	Describe motivations for partnering, directors'

Instrument	Timing ^a	Sample	Overall goal of instrument
director focus group guide	Winter 2017	directors from each of the 12 purposively selected case study sites	roles in and process of partnership development, experiences implementing the partnership in compliance with the HSPPS, experiences collaborating with the grantee agency, challenges encountered, lessons learned, and satisfaction with the partnership.
6. Child care center teacher focus group guide	Fall 2016/ Winter 2017	Eight child care center teachers from each of the 12 purposively selected case study sites	Describe receipt of training and support; experiences with implementing the partnership, working with children and families, and collaborating with grantee and other partner staff; challenges encountered; and satisfaction with the partnership.
7. Family child care provider focus group guide	Fall 2016/ Winter 2017	Eight family child care providers from each of the purposively selected case study sites that include this type of partner (estimated to be 6 sites)	Describe motivations for partnering; receipt of training and support; providers' roles in and process for partnership development; experiences implementing the partnership in compliance with the HSPPS, working with child and families, and collaborating with the grantee and other partners staff; challenges encountered; lessons learned; and satisfaction with the partnership.
8. Partnership grantee and delegate agency director questionnaire	Fall 2016/ Winter 2017	Partnership grantee and delegate agency directors from the 12 purposively selected case study sites	Describe the characteristics and quality of grantees' partnerships with each of their child care partners.
9. Child care partner questionnaire	Fall 2016/ Winter 2017	All child care partner managers/owners from the 12 purposively selected case study sites	Describe the characteristics of grantees' partners, services provided through the partnership, and the quality of their partnership with the grantee.

^aAfter obtaining OMB approval.

HSPPS = Head Start Program Performance Standards.

A3. Improved information technology to reduce burden

Web-based instruments used for data collection of partnership grantee and delegate agency director and child care partner surveys will be programmed to automatically skip questions not relevant to respondents, thereby reducing burden. The web-based application also allows respondents to complete the survey at a time convenient to them. In addition to offering the web-based version, respondents may request to complete the survey by phone.

With regard to collecting qualitative data through semistructured interviews and focus groups, activities conducted with each case study site will involve two members of the study team, with one asking questions and a second typing close to verbatim notes capturing key quotes and responses on a laptop. An audio recorder will be used with permission from participants to later confirm direct quotes or other details from the interviews and focus groups. The partnership grantee and delegate agency director and child care partner questionnaires are designed to be self-administered on paper. We do not plan to offer electronic response options for these questionnaires for two reasons: (1) the instruments are designed to be brief and are free of complicated skip patterns, and (2) the expected sample size for these instruments does not justify the costs related to development and maintenance of the web-based applications. As

elaborated in Supporting Statement Part B, child care partners may request to complete the questionnaire by phone.

A4. Efforts to identify duplication

There is no other current or planned effort to collect descriptive information about the characteristics and activities of ECE partnerships in general, or the Early Head Start–child care partnerships operating under the new grants program. None of the study instruments will ask for information that can be reliably obtained from alternative data sources, including administrative data collection. No comparable data have been collected on the inputs to partnerships and how the partnerships are formed and operate, including the models used to deliver high-quality and comprehensive services to infants, toddlers, and their families. Furthermore, the design of the study instruments ensures that the duplication of data collected through each instrument is minimized. For example, the partnership grantee and delegate agency director interviews conducted as part of the case studies will not include questions already asked in the partnership grantee and delegate agency director survey.

A5. Involvement of small organizations

Information being requested or required has been held to the minimum required for the intended use. Most of the organizations included in the study will be small organizations, including community-based organizations (Community Action Agencies), other non-profit organizations, school districts, government agencies, and for-profit organizations.

Burden will be minimized for respondents by restricting the length of interviews to the minimum required, by conducting interviews on-site or on the telephone at times that are convenient to the respondent, convening focus groups in a central location, and by requiring no record-keeping or written responses by respondents.

A6. Consequences of less frequent data collection

This is a one-time data collection.

A7. Special circumstances

There are no special circumstances for the proposed data collection efforts.

A8. Federal Register notice and consultation

Federal Register notice and comments

In accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13) and Office of Management and Budget (OMB) regulations at 5 CFR Part 1320 (60 FR 44978, August 29, 1995), ACF published a notice in the Federal Register announcing the agency’s intention to request an OMB review of this information collection activity. This notice was published on June 5, 2015, Volume 80, Number 108, page 32135, and provided a 60-day period for public comment. A copy of this notice is included as Attachment L (a copy of the 30-day notice is also included). During the notice and comment period, four substantive comments were received; the comments and the study’s responses are also attached (see Attachment L).

Consultation with experts outside of the study

The contractor consulted with experts to complement the knowledge and experience of the team (Table A.3). Consultants included program administrators, policy experts, and researchers. Collectively, these consultants have specialized knowledge in Early Head Start and child care policy and practice; implementing and measuring partnerships in ECE broadly, or direct knowledge and experience with Early Head Start–child care partnerships specifically; and quality improvement and professional development initiatives that enhance early learning and development in infant and toddler care. We also engaged experts with specialized knowledge and skills in the areas of research design and data collection methods relevant to this work.

Table A.3. Study of Early Head Start–Child Care Partnerships expert work group members

Name	Affiliation
Juliet Bromer	Herr Research Center, Erikson Institute
Bill Castellanos	Child, Family, and Youth Services, Community Action Partnership of San Luis Obispo County, Inc.
Betsi Closter	Office for Children, Fairfax County, Virginia Department of Family Services
James Elicker	Department of Human Development and Family Studies, College of Health and Human Sciences, Purdue University
Iheoma Iruka	Buffet Early Childhood Institute at the University of Nebraska
Diane Schilder	Education Development Center, Inc.
Amy Susman-Stillman	Center for Early Education and Development, University of Minnesota
Martha Staker	Project EAGLE at the University of Kansas Medical Center; Children's Campus of Kansas City
Helen Raikes	Child, Youth and Family Studies, University of Nebraska-Lincoln
Kathy Thornburg	Center for Family Policy and Research, University of Missouri
Kathryn Tout	Child Trends
Marty Zaslow	Office for Policy and Communications, Society for Research in Child Development

A9. Incentives for respondents

We propose to offer partnership grantee and delegate agency directors, child care partners, and their staff gifts of appreciation for their time and participation in data collection activities (Table A.4). The gifts of appreciation we will offer are based on similar gifts used effectively in previous projects (such as the Early Head Start Family and Child Experiences Survey and the Head Start Family and Child Experiences Survey).

Table A.4. Proposed respondent payments for data collection activities

Activity/instrument	Length of activity (minutes)	Amount (per respondent)
Surveys		

Activity/instrument	Length of activity (minutes)	Amount (per respondent)
Partnership grantee and delegate agency director survey	60	\$20
Child care partner survey	30	\$20
Case studies		
Parent focus group	90	\$20
Child care center teacher focus group	90	\$20
Child care center director focus group	90	\$20
Family child care provider focus group	90	\$20
Child care partner questionnaire	20	\$20

We propose to provide participants with these gifts of appreciation for two reasons:

1. **To increase response rates and mitigate nonresponse bias.** The knowledge that they will receive an incentive for completion is expected to increase respondents' likelihood of spending the time to complete the data activity. Research has shown that incentives for respondents are effective at increasing response rates. Singer and Kulka (2002) showed that incentives reduced differential response rates and hence the potential for nonresponse bias. The suggested incentive to complete the focus groups is designed to facilitate recruitment. We propose to offer the same amount to partnership grantee/delegate agency directors and child care partners for participating in the survey, even though burden is lower for child care partners, because child care partners are a harder-to-reach population.
2. **To gain study participants cooperation in data collection activities.** The participation of respondents in the study activities is key to ensuring the quality of the information gathered. The target population of partnership grantees and delegate agencies under this initiative is limited, and the lack of participation in the data collection activities would jeopardize the study's goal of describing the national landscape of partnerships and ultimately filling a knowledge gap about the ways in which partnership models are implemented. Furthermore, the completion of the survey by the partnership grantees and delegate agencies is critical for allowing the study to collect data from the child care partners.

A10. Privacy of respondents

Information collected will be kept private to the extent permitted by law. The consent statement provided to all study participants includes assurances that the research team will protect the privacy of respondents to the fullest extent possible under the law, that respondents' participation is voluntary, and that they may withdraw their consent at any time without any negative consequences.

The consent statement for the partnership grantee and delegate agency director and child care partner surveys is provided in the instruments' introductory sections (Attachments C to K). This text will be presented on the first page of the web-based survey after the respondent logs in; for surveys completed by telephone, this information will be read to respondents prior to beginning the survey. For interviews and focus group discussions conducted as part of the case studies, the interviewer or facilitator will read a consent statement that includes assurances that

the information shared will be kept private and reported in a manner that will not identify individual respondents. Consent will be provided verbally by the respondent after the interviewer or facilitator has read the consent statement. Consistent with the approach for the web-based surveys, the consent statements for the partnership grantee and delegate agency director and child care partner questionnaires will be included in the introductory sections of these instruments. All materials to be used with respondents as part of this information collection, including consent statements and instruments, will be submitted to the New England Internal Review Board for approval.

In addition to project-specific training about study procedures, members of the data collection team will receive training that includes general security and privacy procedures. All members of the data collection team will be knowledgeable about privacy procedures and will be prepared to describe them in detail or to answer any related questions raised by respondents.

Data security. The contractor will utilize its extensive corporate administrative and security systems to prevent the unauthorized release of personal records, including state-of-the-art hardware and software for encryption that meet federal standards, physical security that includes limited key card access and locked data storage areas, and other methods of data protection (such as requirements for regular password updating).

The contractor has established data security plans for handling data during all phases of the data collection. This includes a secure server infrastructure for online data collection of the web-based surveys, which features the use of HTTPS encrypted data communication, user authentication, firewalls, and multiple layers of servers implemented to minimize vulnerability to security breaches. Hosting on an HTTPS site ensures that data are transmitted using 128-bit encryption; transmissions intercepted by unauthorized users cannot be read as plain text. This security measure is in addition to standard password authentication that precludes unauthorized users from accessing the web application.

The study will comply with government regulations for securing and protecting paper records, including paper questionnaires and field notes derived from the case study interviews and focus group discussions. The study will assign unique identification numbers to respondents to facilitate the linking of information across data sources (for example, when linking partnership grantee and delegate agency directors to the child care provider partners). Any data elements used for recruitment of case study participants, such as names and telephone numbers, will be destroyed after completion of these activities.

In accordance with the requirements of the Privacy Act of 1974, as amended ([5 U.S.C. 552a](#)), ACF published a Federal Register Notice ([80 FR 17893](#)) on April 2, 2015 that included the announcement of establishment of a system of records for OPRE. The new system is title: 09-80-0361 OPRE Research and Evaluation Project Records, HHS/ACF/OPRE became effective on May 2, 2015. The Office of Planning, Research and Evaluation is in the process of publishing a Privacy Impact Assessment (PIA) to ensure that information handling conforms with applicable legal, regulatory, and policy requirements regarding privacy; determine the risks of collecting and maintaining PII; assists in identifying protections and alternative processes for handling PII to mitigate potential privacy risks; and communicates an information system's

privacy practices to the public. This PIA, titled ACF Research and Evaluation Studies, will be available online through the Department of Health and Human Services.

A11. Sensitive questions

There are no sensitive questions in this data collection.

A12. Estimation of information collection burden

Burden hours

Table A.5 summarizes the estimated reporting burden and costs for each of the study instruments included in this information collection request. The estimates include time for respondents to review instructions, search data sources, complete and review their responses, and transmit or disclose information. This information collection request is for two years. Figures are estimated as follows:

1. **Partnership grantee and delegate agency director survey.** We expect to survey 311 partnership grantee directors and their delegate agency directors. The survey is expected to take 60 minutes on average. Thus, the total annual burden for partnership grantee and delegate agency directors is 156 hours (156 respondents annually completing a single survey 1 hour in duration over 2 years).
2. **Child care partner survey.** We expect to survey 20 percent of each grantee's reported child care partners, or 933 child care partners. We expect the survey to take 30 minutes on average to complete. Thus, the total annual burden for child care partner center directors and family child care providers is 234 hours (467 respondents annually completing a single survey lasting 0.5 hour in duration over 2 years).
3. **Interview topic guide.** For each of the 12 case study sites, we will conduct semistructured interviews with partnership grantee and delegate agency directors, three partnership staff, and four state and local stakeholders.
 - We plan to conduct interviews with 12 *partnership grantee and delegate agency directors*. Each interview is estimated to take 1.5 hours on average. Thus, the total annual burden for grantee directors is 9 hours (6 respondents annually participating in a single 1.5-hour interview over two years).
 - We plan to conduct interviews with 36 *partnership staff* (three from each case study site). Each interview is estimated to take 1 hour on average. Thus, the total annual burden for partnership staff is 18 hours (18 respondents annually participating in a single 1-hour interview over two years).
 - For each of the 12 case study sites, we plan to conduct telephone interviews with four *state or local stakeholders* who provide support or oversee systems that interact with the partnership. Each interview is estimated to take to 1 hour. Thus, the total annual burden for stakeholders is 24 hours (24 respondents annually participating in a single 1-hour interview over 2 years).
4. **Parent focus group guide.** We plan to conduct focus groups with 8 parents in each of the 12 case study sites. We expect these meetings to last 1.5 hours per group. Thus, the total

- annual burden for parents participating in focus groups is 72 hours (48 respondents annually participating in a 1.5-hour focus group session over two years).
5. **Child care center director focus group guide.** We plan to conduct focus groups with 8 child care center directors in each of the 12 case study sites. We expect these meetings to last 1.5 hours per group. Thus, the total annual burden for child care center directors participating in focus groups is 72 hours (48 respondents annually participating in a 1.5-hour focus group session over two years).
 6. **Child care center teacher focus group guide.** We plan to conduct focus groups with 8 child care center teachers in each of the 12 case study sites. We expect these meetings to last 1.5 hours per group. Thus, the total annual burden for child care center teachers participating in focus groups is 72 hours (48 respondents annually participating in a 1.5-hour focus group session over two years).
 7. **Family child care provider focus group guide.** We plan to conduct focus with 8 family child care providers in all case study sites that have partnerships with family child care providers (we have planned for half of the case study sites to include this type of partner). The focus groups will last 1.5 hours per group. Thus, the total annual burden for family child care providers participating in focus groups is 36 hours (24 respondents annually participating in a 1.5-hour focus group session over two years).
 8. **Partnership grantee and delegate agency director questionnaire.** We will ask partnership grantee and delegate agency directors or their designees to complete a self-administered paper questionnaire about the characteristics and quality of their partnership with each of their child care partners. We have assumed that there will be 15 partners per partnership, on average, and that it will take about eight minutes to complete each questionnaire. Thus, the total annual burden for grantee and delegate agency directors completing the questionnaires is 12 hours (2 hours for each of 6 directors annually over two years [15 partners per director at 8 minutes each]).
 9. **Child care partner questionnaire.** We will ask child care partner center directors and family child care providers to complete a self-administered paper questionnaire. The questionnaire will be administered to all partners at each of the 12 case study sites and is expected to take 20 minutes to complete. We have assumed that there will be 15 partners per partnership, on average. Thus, the total annual burden for child care partner center directors and family child care providers is 30 hours (90 respondents annually each completing a single questionnaire lasting 20 minutes over two years).

Table A.5. Total burden requested under this information collection

Instrument	Total number of respondents	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours	Average hourly wage	Total annual cost
Partnership grantee and delegate agency director survey	311	156	1	1	156	\$38.88	\$6,065
Child care partner survey	933	467	1	0.50	234	\$27.70	\$6,482
Interview topic guide							
Partnership grantee and delegate agency directors	12	6	1	1.5	9	\$38.88	\$350
Partnership staff	36	18	1	1	18	\$15.11	\$272
State and local stakeholders	48	24	1	1	24	\$38.88	\$933
Parent focus group guide	96	48	1	1.5	72	\$16.28	\$1,172
Child care center director focus group guide	96	48	1	1.5	72	\$27.70	\$1,994
Child care center teacher focus group guide	96	48	1	1.5	72	\$15.11	\$1,088
Family child care provider focus group guide	48	24	1	1.5	36	\$27.70	\$997
Partnership grantee and delegate agency director questionnaire	12	6	1	2	12	\$38.88	\$467
Child care partner questionnaire	180	90	1	0.33	30	\$27.70	\$831
Estimated Annual Burden Total					735		\$20,651

Total annual cost

Average hourly wage estimates for deriving total annual costs are based on data from the Bureau of Labor Statistics, Current Employment Statistics Survey (2013). For each instrument included in Table A.5, we calculated the total annual cost by multiplying the annual burden hours by the average hourly wage.

For partnership grantee and delegate agency directors, we used the median weekly salary for full-time employees over the age of 25 with a degree higher than a bachelor's degree (\$38.88 per hour). For child care partner managers/owners (child care center directors and family child care providers), we used the median weekly salary for full-time employees over the age of 25 with a bachelor's degree (\$27.70 per hour). For child care center teachers and partnership staff (who may include teachers or staff acting in management or administrative roles), we used the mean salary for child care providers (\$15.11 per hour). For parents, we used the mean salary for full-time employees over the age of 25 who are high school graduates with no college experience (\$16.28 per hour). Finally, for state and local stakeholders, or those individuals who provide support or oversee systems that interact with the partnership, we used the median weekly salary for full-time employees over the age of 25 with a degree higher than a bachelor's degree (\$38.88 per hour).

A13. Cost burden to respondents or record keepers

There are no additional costs to respondents.

A14. Estimate of cost to the federal government

The total cost for the data collection activities under this current request will be \$1,616,131. Annual costs to the federal government will be \$808,066. This includes direct and indirect costs of data collection.

A15. **Change in burden**

This is a new data collection.

A16. **Plan and time schedule for information collection, tabulation, and publication**

Analysis plan

The instruments included in this OMB package will yield data that will be analyzed using quantitative and qualitative methods. These approaches will allow us to identify and learn about partnership models—the configurations of grantees and partners and the activities they carry out to implement the partnership services.

Estimation methods and software for quantitative analyses. The study team will summarize quantitative data from the partnership grantee and delegate agency director and child care partner surveys using basic descriptive methods. In addition, we will test differences in means or proportions between key groups of interest (for example, differences between partnerships that have one or more family child care partners and those that have child care center partners only). To identify different partnership models, we will use cluster analysis to group partnerships according to similarities or differences on key dimensions, such as the presence of family child care partners or whether pre-existing relationships existed between grantees and partners. Findings from the cluster analysis will be used to purposively select a subset of partnerships for participation in the case studies.

Data from the partnership grantee and delegate agency director and child care partner surveys will undergo a common set of steps involving data cleaning, variable construction, computing descriptive statistics, and conducting analyses. To conduct analyses, we will create variables to address the study's research questions. Construction of these analytic variables will vary depending on a variable's purpose and the data source being used. Variables may combine several survey responses into a single scale, aggregate data from a set time period, or compare responses to identify a level of agreement. We anticipate using statistical software packages (such as SAS and Stata) to conduct the quantitative analyses.

Sampling weights. Construction of sampling weights will not be necessary for the partnership grantee and delegate agency director survey because we plan to collect data from all partnership grantees and their delegate agencies. As described in Section B1 of Supporting Statement Part B, we plan to survey all partnership grantee directors, and if the grantee is a large entity such as a state, all the grantee's delegate agency directors on the partnership grant. The partnership grantee director survey will ask grantee and delegate agency directors to list and provide basic information on all their child care partners, allowing us to have data on all child

care partners involved in a partnership at the time of the partnership grantee and delegate agency director survey.

Sampling weights may be needed to weight responses on the child care partner survey so that we can generalize to the population of child care partners. As described in Section B1 of Supporting Statement Part B, the partnership grantee and delegate agency director survey will be programmed to randomly sample 20 percent of a partnership's child care partners, with a minimum of one partner of each type. Using data collected in the partnership grantee and delegate agency director survey and available for all partners (such as partner type and number of children served), we will create sampling weights for the child care partner survey.

Nonresponse weights. We will produce analysis weights for both surveys that account for selection probabilities (child care partners only) and for differential nonresponse patterns (partnership grantees and delegate agencies and child care partners). These weights will be constructed in such a way as to mitigate the risk for nonresponse bias. Should response rates fall below 80 percent, we will conduct a nonresponse bias analysis, in accordance with OMB guidelines.

Qualitative analyses. Mathematica will use standard qualitative procedures to analyze and summarize information from case study semistructured interviews and focus groups conducted using topic guides. Analysis will involve organization, coding, triangulation, and theme identification. For each qualitative data collection activity, standardized templates will be used to organize and document the information and then code this documentation. Coded text will be searched to gauge consistency and triangulate across respondents and data sources. This process will reduce large volumes of qualitative data to a manageable number of topics, themes, and categories (Yin 1994; Coffey, Holbrook, and Atkinson 1996) that can then be analyzed to address the study's research questions.

To code the qualitative data for key subtopics and themes, the evaluation team will first develop a coding scheme based on the interview or focus group questions. Senior members of the evaluation team will refine the initial coding scheme by reviewing codes and a preliminary set of data output to make adjustments and ensure alignment with the topics that emerge from the data. For each round of coding, multiple project team members will be trained to code the data using a qualitative analysis software package, such as ATLAS.ti or NVivo. To ensure reliability across coders, all team members will code an initial document and compare codes to identify and resolve discrepancies. As coding proceeds, the lead team member will review a sample of coded documents from each coder to monitor reliability. Coded data will enable the team to compare responses across respondents within and across partnerships by searching on specific codes. The software will also allow the team to retrieve data on particular codes by type of respondent. To compare information, the evaluation team may retrieve data for subsets of partnerships, such as those with family child care partners.

Time schedule and publications

Table A.6 contains the timeline for the data collection and reporting activities. Data collection is expected to occur between early 2016 and early 2017, after obtaining OMB approval. Mathematica will produce an interim and final report.

- We will prepare a brief interim report based on data from the partnership grantee and delegate agency director and child care partner surveys. We will provide information about the characteristics of partnership grantees and delegate agencies and child care partners and describe partnership development and operations. The format of the report will be accessible to a broad audience and will use graphics and figures to communicate key findings.
- The final report will present more detailed information from the partnership grantee and delegate director and child care partner surveys, as well as the results of the case studies. We will describe the key features of partnership models identified, discuss staff and family experiences with the partnerships, identify challenges encountered, and discuss lessons learned across the case study sites.

Table A.6. Schedule for the Study of Early Head Start–Child Care Partnerships

Activity	Timing ^a
Data collection	
Partnership grantee and delegate agency director survey	Winter/Spring 2016
Child care partner survey	Winter/Spring 2016
Case study site selection and recruitment	Late Summer/Fall 2016
Case study data collection	Fall 2016/Winter 2017
Analysis	
Data processing and analysis for interim report	Spring/Summer 2016
Data processing and analysis for final report	Winter/Spring 2017
Reporting	
Interim report	Fall 2016
Final report	Summer 2017

^aAfter obtaining OMB approval

A17. Reasons not to display OMB expiration date

All instruments will display the expiration date for OMB approval.

A18. Exceptions to certification for Paperwork Reduction Act submissions

No exceptions are necessary for this information collection.

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