MATHEMATICA
Policy Research

He‌‌‌‌**rey**

Head Start
family and child experiences survey
FACES 2014-2018
Experiences in Head Start

Introduction

Thank you for taking the time to complete this survey. There are no right or wrong answers to the questions. Questions are not always numbered sequentially, so **please answer questions in the order they appear**, regardless of the question number. Additionally, you may be told to skip some questions because they do not apply to you.

What is your job title or position at this Head Start center/program?

A. Staffing and Recruitment

First, we have some questions about your center, staffing and recruitment. We have several questions about the schedule available for Head Start funded center-based enrollment slots. These questons are focused only on Head Start slots. Please do **NOT** consider Early Head Start slots.

What are the start and end dates of the program year for Head Start funded center-based slots?

		MONTH	YEAR
A0-1a.	Start date		
A0-1b.	End date		

We would like to learn about the number of days per week and hours per day that services are provided for Head Start funded center-based enrollment slots.

How many days per week do Head Start funded slots in your center receive services?

MARK ONE OR MORE BOXES

- ☐₁ 4 days per week
- ☐₂ 5 days per week

[Insert Plus Study duration items here, as items A05a-A07]

How many lead teachers are currently employed in this center?

☐☐ LEAD TEACHERS   **IF 0, GO TO A4, PAGE 3**

How many of these lead teachers were new to the center this year? Would you say it was…

MARK ONE ONLY

- ○₁ None,
- ○₂ One,
- ○₃ Two, or
- ○₄ Three or more?

In the past 12 months, how many lead teachers left and had to be replaced?

MARK ONE ONLY

○₁ None,

○₂ One,

○₃ Two, or

○₄ Three or more?

Does your center serve any children or families who speak a language other than English at home?

○₁ Yes

○₀ No   **GO TO SECTION B, PAGE 5**

Other than English, what languages are spoken by the children and families who are part of your center?

MARK ONE OR MORE BOXES

☐₁₂ Spanish

☐₂₀ Arabic

☐₁₃ Cambodian (Khmer)

☐₁₄ Chinese

☐₁₁ French

☐₁₅ Haitian Creole

☐₁₆ Hmong

☐₁₇ Japanese

☐₁₈ Korean

☐₁₉ Vietnamese

☐₉₉ Other– *Specify*

Do you have any lead teachers or assistant teachers who are bilingual?

○₁ Yes

○₀ No   **GO TO A_C3j, PAGE 4**

Other than English, which of the languages that are spoken by the children and families in your center are also spoken by any lead teachers or assistant teachers in your center?

MARK ONE OR MORE BOXES

- ☐ 12 Spanish
- ☐ 20 Arabic
- ☐ 13 Cambodian (Khmer)
- ☐ 14 Chinese
- ☐ 11 French
- ☐ 15 Haitian Creole
- ☐ 16 Hmong
- ☐ 17 Japanese
- ☐ 18 Korean
- ☐ 19 Vietnamese
- ☐ 99 Other– *Specify*

How do you determine the language proficiency of bilingual lead teachers and assistant teachers in the language(s) other than English that they speak?
Do you. . .

MARK ONE FOR EACH ROW

		YES	NO
1.	Give language proficiency tests?..................................	○ 1	○ 0
2.	Have other staff interview them in their language?.........	○ 1	○ 0
3.	Request documentation for language courses they may have taken?..	○ 1	○ 0
4.	Do anything else? *Specify*	○ 1	○ 0

Are you unable to provide interpreters or translate written materials in any of the languages spoken by children and families that are part of your center because you do not have staff members that speak those languages?

- ○ 1 Yes
- ○ 0 No

B. Staff Education and Training

The next questions are about efforts to promote staff education and training.

Programs and centers can support teachers' professional development in a lot of different ways. Does your program or center offer the following to teachers?

MARK ONE FOR EACH ROW

		YES	NO
1.	Consultants hired to work directly with staff................	$\bigcirc_1$	$\bigcirc_0$
2.	Attendance at regional conferences...........................	$\bigcirc_1$	$\bigcirc_0$
3.	Attendance at state conferences...............................	$\bigcirc_1$	$\bigcirc_0$
4.	Attendance at national conferences...........................	$\bigcirc_1$	$\bigcirc_0$
5.	Paid substitutes to allow teachers time to prepare, train, and/or plan	$\bigcirc_1$	$\bigcirc_0$
6.	Mentoring or coaching...	$\bigcirc_1$	$\bigcirc_0$
7.	Workshops/trainings sponsored by the program.........	$\bigcirc_1$	$\bigcirc_0$
8.	Workshops/trainings provided by other organizations	$\bigcirc_1$	$\bigcirc_0$
9.	A community of learners, also called a professional learning community, facilitated by an expert...............	$\bigcirc_1$	$\bigcirc_0$
10.	Time to participate in Office of Head Start TTA webinars…	$\bigcirc_1$	$\bigcirc_0$
11.	Tuition assistance..	$\bigcirc_1$	$\bigcirc_0$
12.	Onsite A.A. or B.A. couses.......................................	$\bigcirc_1$	$\bigcirc_0$
99.	Other – *Specify*	$\bigcirc_1$	$\bigcirc_0$

How often do the following staff typically participate in professional development activities? Is it every week, 2 or 3 times a month, monthly, once every few months, or once a year or less?

	WEEKLY	2 OR 3 TIMES PER MONTH	MONTHLY	ONCE EVERY FEW MONTHS	ONCE A YEAR OR LESS	NOT APPLIC-ABLE
a1 Center-based lead teachers.....	○₁	○₂	○₃	○₄	○₅	○₆
a2 Center-based assistant teachers..................................	○₁	○₂	○₃	○₄	○₅	○₆
b. Family service workers............	○₁	○₂	○₃	○₄	○₅	○₆
c. Home visitors...........................	○₁	○₂	○₃	○₄	○₅	○₆
d. Family child care providers......	○₁	○₂	○₃	○₄	○₅	○₆
e. Content managers...................	○₁	○₂	○₃	○₄	○₅	○₆

Who conducts the professional development activities?

MARK ONE OR MORE BOXES

☐₁ Center or grantee staff

☐₂ Community resources

☐₃ Consultants

☐₅ National Head Start Association

☐₆ State conferences

☐₇ Regional conferences

☐₈ National conferences

☐₉ Private companies or organizations

☐₁₀ OHS Regional TTA Providers

☐₁₁ OHS National Centers

☐₉₉ Other – *Specify*

☐₀ Do not have trainings

Has your center consulted with a regional T/TA specialist?

- ○₁ Yes
- ○₀ No

B10 **How often have you or other staff in your center used or accessed information or resources provided by or through each of the following? Would you say never, rarely, sometimes, or often?**

MARK ONE FOR EACH ROW

		NEVER	RARELY	SOMETIMES	OFTEN
a.	Early Childhood Learning and Knowledge Center (ECLKC) website	○₁	○₂	○₃	○₄
b.	Office of Head Start National Centers	○₁	○₂	○₃	○₄
c.	Professional Organizations	○₁	○₂	○₃	○₄
d.	Private consultants, private organizations, or commercial vendors	○₁	○₂	○₃	○₄
e.	Regional Training and Technical Assistance Specialists	○₁	○₂	○₃	○₄
f.	Office of Head Start Webinars	○₁	○₂	○₃	○₄
g.	Regional Conferences	○₁	○₂	○₃	○₄

The next questions are about training specifically on your center's curriculum and assessments.

How many hours of training or support related to <u>curriculum</u> are offered to the following staff in a typical year? If none, please record 0.

NUMBER OF HOURS

a. Lead teachers ....

b. Assistant teachers...

f. Home visitors..

g. Family child care providers...

B22

How many hours of training or support related to <u>your assessment tool(s) and ongoing child assessments</u> are offered to the following staff in a typical year? If none, please record 0.

NUMBER OF HOURS

a. Lead teachers...

b. Assistant teachers..

f. Home visitors...

g. Family child care providers...

[Insert Plus Study curriculum implementation support and fidelity items here, B24-B26]

E. Curriculum and Assessment

The next questions are about curriculum and assessment.

[Insert Plus Study curriculum items here, as E2, E3, E12a-E17]

How often are each child's assessment results reported? Is it once at the beginning of the program year, once at the end of the program year, both at the beginning and at the end of the program year, or more often?

MARK ONE FOR EACH ROW

		ONCE AT BEGINNING OF YEAR	ONCE AT END OF YEAR	BEGINNING AND END OF YEAR	MORE OFTEN
a.	Reported to parents..................................	O₁	O₂	O₃	O₄
b.	Reported to Program Administrators.......	O₁	O₂	O₃	O₄
c.	Recorded in child's record.......................	O₁	O₂	O₃	O₄

Now we would like to ask you about strategies your program or center might use to assess the English language abilities of children who are dual language learners. How often do you use any of the following strategies to assess their English language skills?

MARK ONE FOR EACH ROW

		NEVER	ONCE AT BEGINNING OF YEAR	ONCE AT END OF YEAR	BEGINNING AND END OF YEAR	MORE OFTEN
1.	Teacher ratings based on observation.......................................	O₁	O₂	O₃	O₄	O₅
2.	Testing with standardized tests or assessments......................................	O₁	O₂	O₃	O₄	O₅
3.	Parent reports....................................	O₁	O₂	O₃	O₄	O₅
4.	Something else? *Specify*	O₁	O₂	O₃	O₄	O₅

E11e

9

Does your center assess children's abilities in their home language?

○ Yes

○ No

Does your center use a particular parent education or parent support curriculum?

○ Yes

○ No **GO TO SECTION H, PAGE 13**

What curriculum/curricula do you use?

MARK ONE OR MORE BOXES

☐ Second Step

☐ Parents as Teachers (PAT)

☐ Systematic Training for Effective Parenting (STEP)

☐ 21st Century Exploring Parenting (Exploring Parenting)

☐ Home Instruction for Parents Of Preschool Youngsters (HIPPY)

☐ Growing Great Kids, Inc

☐ Positive Solutions for Families (Center on The Social Emotional Foundations for Early Learning)

☐ Second Time Around: Grandparents Raising Grandchildren

☐ Practical Parent Education

☐ Improving Parent-Child Relationships

☐ Parenting Now! Curriculum

☐ Touchpoints

☐ Parents Reaching Out

☐ Other – *Specify*

H. Overview of Program Management

The next questions are about program management.

In the past 12 months, have you participated in the following kinds of professional development?

MARK ONE FOR EACH ROW

		YES	NO
a.	College or university course(s) related to your role as a manager or leader..	$\circ_1$	$\circ_0$
b.	Visits to other Head Start or early childhood programs to improve your own work as a center director..	$\circ_1$	$\circ_0$
c.	Formal mentoring or coaching that is provided by your program.......	$\circ_1$	$\circ_0$
d.	A network or community of Head Start and other early childhood program leaders organized by someone outside of your program, for example a professional organization..	$\circ_1$	$\circ_0$
e.	A leadership institute offered by Head Start......................................	$\circ_1$	$\circ_0$
f.	A leadership institute offered by an organization other than Head Start..	$\circ_1$	$\circ_0$
g.	Training or conferences related to your role as a manager or leader (for example, Head Start governance training, CLASS training)........	$\circ_1$	$\circ_0$

What do you need additional help with to do your job as a center director more effectively? Select the top three.

MARK UP TO THREE (3) BOXES

☐ 4 Program improvement planning

☐ 5 Budgeting

☐ 6 Staffing (hiring)

☐ 10 Data-driven decision making

☐ 7 Teacher evaluation

☐ 8 Evaluation of other program staff

☐ 9 Teacher professional development

☐ 1 Educational/curriculum leadership

☐ 3 Creating positive learning environments

☐ 2 Child assessment

☐ 11 Working with parents and families

☐ 16 Working with and partnering in the community

N. Use of Program and Data Informat

The next questions are about data and information that may be available to you.

Do supervisors, mentors or coaches, or other specialists share and review individual children's data in one-on-one meetings with teachers or in team meetings?

○₁ Yes
○₀ No

Please indicate how much the following areas are barriers to teachers using child-level data to guide instruction and to individualize:

NOTE: By child-level data we mean formal assessments, informal assessments and data on child or fam characteristics.

MARK ONE FOR EACH ROW

		NOT A BARRIER	A LITTLE BARRIER	SOMEWHAT OF A BARRIER	A BARRIER
a.	Lack of understanding what the child-level data mean (data literacy)...............	○₁	○₂	○₃	○₄
b.	Not enough time to use the child-level data to guide instruction.........................	○₁	○₂	○₃	○₄
c.	Inadequate technology resources to track and analyze child data...................	○₁	○₂	○₃	○₄
d.	Lack of staff buy-in to value of data.......	○₁	○₂	○₃	○₄

S. Head Start Program Performance Standards

[Include Plus Study status and challenge items here, as items S1 and S2.]

I. Employment and Educational Background

Now, we'd like to ask you some questions about your professional background and your job with Head Start.

In total, how many years have you been a director…

Please round your response to the nearest whole year.

NUMBER OF YEARS

I0. In <u>any</u> early childhood program..	☐☐
I2a. In <u>any</u> Head Start program..	☐☐
I2b. Of <u>this</u> Head Start center...	☐☐

In what month and year did you start working for <u>this</u> Head Start program?

☐☐ MONTH   ☐☐☐☐ YEAR

In total, how many years have you worked with <u>any</u> Head Start <u>or</u> Early Head Start Program?

Please round your response to the nearest whole year. Note, Head Start has been in existence for 52 years.

☐☐ YEARS

How many hours per week are you paid to work for Head Start?

☐☐☐ HOURS

What is your total annual salary (before taxes) as a center director for the current program year?

$ ☐☐☐ , ☐☐☐ . 0 0 DOLLARS PER YEAR

In your current Head Start position(s), how much do the following make it harder for you to do your job well? Do they make it a great deal harder, somewhat harder, or not at all harder for you to do your job well?

MARK ONE FOR EACH ROW

		GREAT DEAL HARDER	SOMEWHAT HARDER	NOT AT ALL HARDER
a.	Time constraints (not enough hours in the day)..	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
b.	Too many conflicting demands....................	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc$
c.	Not a high enough salary for the job demands..	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
d.	Lack of support staff....................................	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc$
e.	Not enough training and technical assistance for professional development….	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
f.	Not enough support and communication from administration......................................	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc$
g.	Not enough funds for supplies and activities	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
h.	Dealing with a challenging population..........	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc$
i.	Staff turnover...	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
j.	Lack of parent support.................................	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
k.	Lack of qualified teaching staff....................	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$
l.	Anything else? *Specify*	$\bigcirc_3$	$\bigcirc_2$	$\bigcirc_1$

What is the highest grade or year of school that you completed?

MARK ONE ONLY

- ◯₁ Up to 8th Grade
- ◯₂ 9th to 11th Grade
- ◯₃ 12th Grade, but No Diploma
- ◯₄ High School Diploma/Equivalent
- ◯₅ Vocational/Technical Program after High School
- ◯₆ Some College, but No Degree   **GO TO I14, PAGE XX**
- ◯₇ Associate's Degree
- ◯₈ Bachelor's Degree
- ◯₉ Graduate or Professional School, but No Degree
- ◯₁₀ Master's Degree (MA, MS)
- ◯₁₁ Doctorate Degree (Ph.D., Ed.D.)
- ◯₁₂ Professional Degree after Bachelor's Degree (Medicine/ MD, Dentistry/ DDS, Law/JD, etc.)

In what field did you obtain your highest degree?

MARK ONE ONLY

○ 1 Child Development or Developmental Psychology

○ 2 Early Childhood Education

○ 3 Elementary Education

○ 4 Special Education

○ 5 Education Administration/Management & Supervision

○ 6 Business Administration/Management & Supervision

○ 99 Other field – *Specify*

Did your schooling include 6 or more college courses in early childhood education or child development?

○ 1 Yes **GO TO I15a**

○ 0 No **IF YOU COMPLETED SOME COLLEGE, BUT DO NOT HAVE A DEGREE, GO TO I15a, OTHERWISE GO TO I15**

Have you completed 6 or more college courses in early childhood education or child development since you finished your degree?

○ 1 Yes

○ 0 No

Have you completed an entire course on dual language learner children?

○ 1 Yes

○ 0 No

Do you currently hold a license, certificate, and/or credential in administration of early childhood/child development programs or schools?

○ 1 Yes

○ 0 No

Do you have a Child Development Associate (CDA) credential?

○ 1 Yes

○ 0 No

Do you have a state-awarded preschool certificate?

○ 1 Yes

○ 0 No

Do you have a teaching certificate or license?

○ 1 Yes

○ 0 No

What is your gender?

○ 1 Male

○ 2 Female

In what year were you born?

☐☐☐☐ YEAR

Are you of Spanish, Hispanic, or Latino origin?

○ 1 Yes

○ 0 No　　**GO TO I28, PAGE XX**

Which one of these best describes you . . .

MARK ONE OR MORE BOXES

☐ 1 Mexican, Mexican American, Chicano,

☐ 2 Puerto Rican,

☐ 3 Cuban, or

☐ 99 Another Spanish/Hispanic/Latino group? – *Specify*

What is your race? You may mark more than one if you like.
MARK ONE OR MORE BOXES
☐ 11 White
☐ 12 Black or African American
☐ 13 American Indian or Native American
☐ 14 Asian Indian
☐ 15 Chinese
☐ 16 Filipino
☐ 17 Japanese
☐ 18 Korean
☐ 19 Vietnamese
☐ 20 Other Asian
☐ 21 Native Hawaiian
☐ 22 Guamanian or Chamorro
☐ 23 Samoan
☐ 24 Other Pacific Islander – *Specify*

☐ 99 Another race – *Specify*

Do you speak a language other than English
○ 1 Yes
○ 0 No   **GO TO Z1, PAGE XX**

What languages other than English do you speak?
MARK ONE OR MORE BOXES
☐ 12 Spanish
☐ 20 Arabic
☐ 13 Cambodian (Khmer)
☐ 14 Chinese
☐ 11 French
☐ 15 Haitian Creole
☐ 16 Hmong
☐ 17 Japanese
☐ 18 Korean
☐ 19 Vietnamese
☐ 99 Other– *Specify*

Z. Paper Versus Web

Why did you choose to complete the paper survey rather than complete the survey on the Web?

MARK ONE OR MORE BOXES

☐₁ Did not have access to a computer

☐₂ Computers were in use by others at the times I wanted to do the survey

☐₃ Started the survey but experienced technical problems such as:

    ☐₃ₐ Screen frozen

    ☐₃ᵦ Took too long to load the first page

    ☐₃ᵪ Took too long to load subsequent pages

☐₄ Tried to log into Web address, but an **error message** appeared…

    ☐₄ₐ "Invalid password"

    ☐₄ᵦ "This page has expired"

    ☐₄ᵪ "This website is busy, please try again later"

☐₅ Computer screen too small to read questions, such as required too much scrolling—up or down, side to side

☐₆ Unable to read the questions on the screen because of the color scheme on the computer

☐₇ Chose to complete the paper survey because it was readily available

---

What kind of help could we have given you to make it easier to complete this survey on the web?

End

Thank you very much for participating in FACES!