Survey of Head Start Grantees on   
Training and Technical Assistance

# APPENDIX A.2

# *RESEARCH QUESTIONS, CONSTRUCTS, MEASURES, AND SECTION/ITEM NUMBER:*

# *Head Start Manager/Coordinator Survey (Wave 2)*

**Head Start Manager/Coordinator Survey (Wave 2): Research Questions, Constructs, Measures, and Section/Item Number**

**DOMAINS**: Fiscal Operations; Early Childhood Development and Education; Family and Community Services; Health, Mental Health, and Safety

Below we present information for each of the research questions addressed by the Head Start Manager/Coordinator Survey (Wave 2). We list the constructs measured by the survey items, the stem and number of the survey items (in the measures column). We also highlight any survey items that are intended to collect information that will provide contextual information about grantees and/or potentially serve as covariates in the analyses. *Note that all of the items in the Wave 2 surveys are project-developed.*

**Research Question 1: How are Head Start grantees selecting their training and technical assistance (T/TA)?**

| **Sub-Questions** | **Constructs** | **Measures** | **Section and Item Number** |
| --- | --- | --- | --- |
| 1a. What T/TA needs do Head Start grantees identify and meet from available resources? | Agency T/TA priorities for current program year | For the current program year, what are your agency’s main training or technical assistance priorities in **[DOMAIN]**? Please include professional development for individual staff as well as organizational technical assistance or training priorities*.* | Section IV. Training/technical assistance needs in domain, Item IV.1 |
| Objective of T/TA priorities | Please indicate whether any of the listed priorities can be described as follows: | Section IV. Training/technical assistance needs in domain, Item IV.2 |
| Perceived confidence to achieve T/TA priorities | How confident are you that your agency will be able to achieve its training and technical assistance priorities for **[DOMAIN]** this year? | Section IV. Training/technical assistance needs in domain, Item IV.3 |
| 1b. What T/TA needs do Head Start grantees identify but fail to meet from available resources? | Factors that make it difficult to obtain T/TA | What challenges does your agency encounter in its efforts to obtain the training and technical assistance it would like for **[DOMAIN]**? To what extent do each of the following factors make it difficult for your agency to get the training and technical assistance it would like for **[DOMAIN]**? | Section IV. Training/technical assistance needs in domain, Item IV.4 |
| Training desired but not able to obtain | Is there a type of training or technical assistance in **[DOMAIN]** that you would like to get for your agency but you have not been able to obtain? | Section IV. Training/technical assistance needs in domain, Item IV.7 |
| Please list one type of training or technical assistance you would like to get but have not been able to obtain: | Section IV. Training/technical assistance needs in domain, Item IV.8 |
| Would you describe the type of training or technical assistance you were unable to obtain on (INSERT TEXT FROM IV.8) as … | Section IV. Training/technical assistance needs in domain, Item IV.9 |
| Inability to find training | What is the main reason you have not been able to obtain this training | Section IV. Training/technical assistance needs in domain, Item IV.10 |
| Additional perspectives on T/TA availability | Do you have any other comments about the training and technical assistance available to your agency for **[DOMAIN]** activities? | Section IV. Training/technical assistance needs in domain, Item IV.11 |
| 1c. What types of T/TA are helpful to grantees? | Satisfaction with T/TA available | Please think about your agency’s goals for **[DOMAIN]**. How satisfied are you with the training and technical assistance available to help you achieve these goals? | Section IV. Training/technical assistance needs in domain, Item IV.5 |
| Satisfaction with types of T/TA providers available | How satisfied you are with different types of training and technical assistance providers that may be available to help your agency achieve its goals related to **[DOMAIN]**? Some of these provider types may not be available to you. | Section IV. Training/technical assistance needs in domain, Item IV.6 |
| 1d. How are decisions about T/TA made? | Respondent job title | Please tell me your job title related to **[DOMAIN]** activities | Section I. Structure and Staffing for domain, Item I.1 |
| Level of involvement in domain specific activities | Some of the major areas of **[DOMAIN]** activities in Head Start programs are listed below. For each one, please tell me how much you are involved in those activities: | Section I. Structure and Staffing for domain, Item I.2 |
| Types of staff responsible for implementation | How much are the following types of personnel responsible for **[DOMAIN-SPECIFIC ACTIVTY]** in your Head Start programming? | Section I. Structure and Staffing for domain, Item I.3\_1 |
| Variation in procedures across agency | How much would you say that **procedures** for **[DOMAIN-SPECIFIC ACTIVTY]** vary across your agency? | Section I. Structure and Staffing for domain, Item I.4\_1 |
| Variation in practice across agency | How much would you say that **[DOMAIN-SPECIFIC ACTIVTY] practices** vary across your agency? | Section I. Structure and Staffing for domain, Item I.5\_1 |
| Agency decision-making about T/TA | How are decisions made about the training or technical assistance that staff will receive related to **[DOMAIN-SPECIFIC ACTIVTY]**? | Section I. Structure and Staffing for domain, Item I.6\_1 |

**Research Question 2: What T/TA are Head Start grantees’ staff receiving from all available sources?**

| **Sub-Questions** | **Constructs** | **Measures** | **Section and Item Number** |
| --- | --- | --- | --- |
| 2a. What are the characteristics of the T/TA grantees are receiving? | ***Focal training topic: Useful for practice*** | *Please think about the trainings or technical assistance activities your agency has experienced in* ***[DOMAIN]*** *in the past 12 months. For these next questions, please choose one training or technical assistance activity that you think has been most useful to your agency. You may choose training or technical assistance received by a group of your staff or a single individual.*  (Item II.1) | Section II. Recent Training/Technical Assistance Experiences in domain |
| Training topic | What was the topic of that training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.2 |
| Primary training mode | What was the primary mode of the training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.3 |
| Type of in-person training | [if in-person training] Which of these best describes the type of in-person training this was? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.4a |
| Type of on-line training | [if on-line] Which of these best describes the type of on-line training this was? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.4b |
| Type of phone training | [if by phone] Which of these best describes the type of phone training this was? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.4c |
| Planned follow-up | Was there planned follow-up with the trainer or within your agency to build on this training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.5 |
| Agency relationship to provider | Does your agency have an on-going relationship with this trainer? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.6 |
| Customization of training | Was the training customized to the participants’ needs and abilities? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.6a |
| Inclusiveness and responsiveness of training to cultural, linguistic, and ability differences of children and families | Was the training or technical assistance inclusive and responsive to cultural, language, and ability differences of the children and families you serve? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.6b |
| Inclusiveness and responsiveness of training to cultural, linguistic, and ability differences of staff | Was the training or technical assistance inclusive and responsive to cultural, language, and ability differences of your staff? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.6b1 |
| Total hours spent on training | How many hours total did you receive this training, not including time spent doing homework or reading materials? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.7 |
| Number of training sessions | Over how many separate sessions did the training take place? For example, did you spend 1 hour each week for 3 weeks (i.e., 3 sessions), or was it one 90-minute webinar (i.e., 1 session)? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.8 |
| Training provider | What best describes the person or organization that provided the training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.9 |
| Whether agency incurred costs | Did your agency incur any costs so that staff could receive this training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.10 |
| Types of staff participating in training | What are the roles or job titles of the people from your agency who participated in the training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.11 |
| Goals for staff participation in training | Did your agency have a specific goal in having staff participate in this training, for example, to develop a new policy or improve particular practices? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.12 |
| How would you describe the specific goals for having staff participate in this training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.12a |
| Post-training follow-up steps | Have there been any follow-up steps from this training or activity? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.13a |
| What follow-up steps have you taken from this training or activity? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.13b |
| Usefulness of training | What are the top two reasons you found this training useful to your agency | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.14a |
| ***Focal training topic: Not able to apply*** | *For these next questions, please choose a training or technical assistance activity that your agency has received but was not able to apply to improve practice.* | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.15a |
| Training topic | What was the topic of that training or technical assistance activity? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.15b |
| Primary training mode | What was the primary mode of the training or technical assistance? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.16 |
| Type of in-person training | [if in-person] Which of these best describes the type of in-person training this was? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.17 |
| Availability of planned implementation support | Was there planned implementation support with the trainer or within your agency to build on this training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.18 |
| Customization of training | Was the training customized to the participants’ needs and abilities? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.19 |
| Total hours spent on training | How many hours total did you receive this training, not including time spent doing homework or reading materials? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.20 |
| Number of training sessions | Over how many separate sessions did the training take place? For example, did you spend 1 hour each week for 3 weeks (i.e., 3 sessions), or was it one 90-minute webinar (i.e., 1 session)? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.21 |
| Training provider | What best describes the person or organization that provided the training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.22 |
| Types of staff participating in training | What are the roles or job titles of the people from your agency who participated in the training? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.24 |
| Reason not able to apply training to practice | What is the main reason you found this training hard for your agency to apply to its **[DOMAIN]** work? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.25 |
| 2b. What grantee resources are being expended to receive and support that T/TA? | Whether agency incurred costs | Did your agency incur any costs so that staff could receive this training? = | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.23 |
| Source of funds for T/TA | What was the primary source of these funds? | Section II. Recent Training/Technical Assistance Experiences in domain, Item II.23a |

**Research Question 3: How does T/TA inform practice change within Head Start grantees and how does this differ across the practice areas of interest (i.e., fiscal operations; early childhood development and education; family and community services; and health, mental health, and safety)?**

| **Sub-Questions** | **Constructs** | **Measures** | **Section and Item Number** |
| --- | --- | --- | --- |
| 3a. How does T/TA inform practice change within Head Start grantees and how does this differ across the practice areas of interest? | Specific practice construct | Domain-specific questions on **[DOMAIN-SPECIFIC ACTIVITY]** | Section III. Selected Practice Area |
| **Fiscal Operations: *Strengthening Financial Management Systems*** | How much would you say each of the following describes your agency’s fiscal operations practices?   * Management and/or direct services staff use fiscal policies and procedures to guide program planning and financial decisions. * Data are used for planning and to develop the budget. | Section III. Selected Practice Area, Item III.1a |
| About how often does your agency engage in the following activities?   * Discussions about financial operations take place among all staff who have a fiscal role (including fiscal staff, management staff, and direct services staff). * Fiscal staff receive training and/or technical assistance on implementing fiscal policies and procedures. * Management and direct services staff receive training on fiscal policies and procedures. | Section III. Selected Practice Area, Item III.1b |
| Do you have at least one fiscal officer or manager who has a 4-year college degree or higher in accounting, business, finance or financial management? | Section III. Selected Practice Area, Item III.2a |
| Within the last 3 years, how many clean audits did your agency have? | Section III. Selected Practice Area, Item III.2b |
| **Early Childhood Development and Education: *Teaching practices/ Early Learning Outcomes Framework*** | When you meet with your education staff, how often do you consult the ELOF for guidance on the following?   * To review curriculum and effective instruction and/or assessment practices. * To identify training needs and plan for training and development. | Section III. Selected Practice Area, Item III.1a |
| During this program year (2019-2020), about what percentage of your staff have opportunities to receive:   * Coaching on responsive adult-child interactions * Leadership and/or professional development support for reviewing and interpreting data (such as student assessment data, observation data) | Section III. Selected Practice Area, Item III.1b |
| During this program year (2019-2020), about how often does your education staff have opportunities to engage in the following practices?   * Review assessment data to differentiate child learning goals and instructional activities. * Review classroom /home visiting observation data to adapt children’s physical learning environments. | Section III. Selected Practice Area, Item III.2 |
| **Family and Community Services: *Family Support and Goal Setting*** | When do family and community services staff meet with families to conduct the family assessment and set goals? | Section III. Selected Practice Area, Item III.1 |
| How much would you say each of the following describes how your family and community services staff work with families:   * Staff work with families according to staff availability. * We help families identify manageable steps to achieve their goals. * Our families tend to have the same goals so we organize our work around helping families with the most common goals. * We review and update families’ goals throughout the year. * We set goals for families based on what we think they need. * We use specific tools and checklists for building family partnership agreements. | Section III. Selected Practice Area, Item III.2 |
| **Health, Mental Health, and Safety: *Mental Health Consultation*** | * Does your agency have a mental health consultant (MHC) available to provide support to staff? * Do teachers in center-based programs request support from the mental health consultant? * Do home-based providers request support from the mental health consultant? | Section III. Selected Practice Area, Item III.1 |
| About how often does the mental health consultant engage in the following practices?   * Conduct classroom observations? * Help teachers develop strategies for behavior management? * Share behavior management strategies with parents? * Provide follow-up support for teachers? * Provide referrals for parent or child mental health consultation? * Support teachers engaging in reflective practice? * Provide support on staff wellness such as self-care strategies*?* * Other support provided (specify): ­\_\_\_\_\_\_\_\_\_\_\_\_ | Section III. Selected Practice Area, Item III.2a |
| About how much is budgeted per year for a mental health consultant(s) to provide services? | Section III. Selected Practice Area, Item III.2b |
| In the past year, have you asked a parent to pick up a child early because of problems with the child’s behavior? | Section III. Selected Practice Area, Item III.2c |
| In the past three months, have you moved a child from one program option to another (such as from a center-based to a home-based option) because of problems with the child’s behavior? | Section III. Selected Practice Area, Item III.2d |
| Variation in practice across agency | How much would you say **[DOMAIN-SPECIFIC ACTIVITY]** varies across your agency? | Section III. Selected Practice Area, Item III.3 |
| Change in practice (2017-2018 to 2019-2020) | Please think about your agency’s **[DOMAIN-SPECIFIC ACTIVITY]** during the 2017-2018 program year (two years ago). Which of the following best describe any changes between that year and the current year: | Section III. Selected Practice Area, Item III.4 |
| Primary reason to inform practice change | What is the main source that has informed the agency’s changes to its **[DOMAIN-SPECIFIC ACTIVITY]** in the past two years? | Section III. Selected Practice Area, Item III.5 |
| Primary reason to support practice change | What is the main source that has supported or enabled the agency’s changes to its **[DOMAIN-SPECIFIC ACTIVITY]** in the past two years? | Section III. Selected Practice Area, Item III.5a |
| Challenges in implementing practice | What are the two main challenges the agency has faced or currently faces in **[DOMAIN-SPECIFIC ACTIVITY]**? | Section III. Selected Practice Area, Item III.6 |
| T/TA received on practice | (If III.5=2 or III.5a=2, then skip to III.8. else ask) Last year, did your agency receive any training or technical assistance on **[DOMAIN-SPECIFC ACTIVITY]**? | Section III. Selected Practice Area, Item III.7 |
| T/TA providers | What individuals or organizations provided that training or technical assistance? | Section III. Selected Practice Area, Item III.8 |
| Whether agency incurred costs | Did your agency incur any costs so that staff could receive this training? | Section III. Selected Practice Area, Item III.9 |
| Source of funds for T/TA | What was the primary source of these funds? | Section III. Selected Practice Area, Item III.9a |
| Types of staff participating in training | What are the roles or job titles of the people from your agency who participated in the training? | Section III. Selected Practice Area, Item III.10 |
| Inclusiveness and responsiveness of T/TA to cultural, linguistic, and ability differences of children and families | Was the training or technical assistance inclusive and responsive to cultural, language, and ability differences of the children and families you serve? | Section III. Selected Practice Area, Item III.11 |
| Inclusiveness and responsiveness of T/TA to cultural, linguistic, and ability differences of staff | Was the training or technical assistance inclusive and responsive to cultural, language, and ability differences of your staff? | Section III. Selected Practice Area, Item III.11a |
| T/TA fit | How well did the level of the training or technical assistance match the level of your agency’s participants? | Section III. Selected Practice Area, Item III.12 |
| Satisfaction | Thinking about this training or technical assistance, how satisfied were you with… | Section III. Selected Practice Area, Item III.13 |
| Goals for staff participation in T/TA | Did your agency have a specific goal for participating in that training or technical assistance? | Section III. Selected Practice Area, Item III.14 |
| Achievement of T/TA goal | How well was your agency able to achieve that goal through the training or technical assistance? | Section III. Selected Practice Area, Item III.15 |
| Agency investments to support T/TA | What other investments did the agency make to supporting the training or technical assistance? | Section III. Selected Practice Area, Item III.16 |
| Need for additional T/TA | Do you feel that additional training or technical assistance would help your agency improve its **[DOMAIN-SPECIFIC ACTIVITY]**? | Section III. Selected Practice Area, Item III.17 |

***Covariates.*** Below is a list of items that are intended to collect information that will provide contextual information and/or covariates in the analyses.

| **Sub-Questions** | **Constructs** | **Measures** | **Section and Item Number** |
| --- | --- | --- | --- |
| 1d. How are decisions about T/TA made? | Respondent job title | Please tell me your job title related to **[DOMAIN]** activities | Section I. Structure and Staffing for domain, Item I.1 |
| Level of involvement in domain specific activities | Some of the major areas of **[DOMAIN]** activities in Head Start programs are listed below. For each one, please tell me how much you are involved in those activities: | Section I. Structure and Staffing for domain, Item I.2 |
| Types of staff responsible for implementation | How much are the following types of personnel responsible for **[DOMAIN-SPECIFIC ACTIVTY]** in your Head Start programming? | Section I. Structure and Staffing for domain, Item I.3\_1 |
| Variation in procedures across agency | How much would you say that **procedures** for **[DOMAIN-SPECIFIC ACTIVTY]** vary across your agency? | Section I. Structure and Staffing for domain, Item I.4\_2 |
| Variation in practice across agency | How much would you say that **[DOMAIN-SPECIFIC ACTIVTY] practices** vary across your agency? | Section I. Structure and Staffing for domain, Item I.5\_1 |
| Agency decision-making about T/TA | How are decisions made about the training or technical assistance that staff will receive related to **[DOMAIN-SPECIFIC ACTIVTY]**? | Section I. Structure and Staffing for domain, Item I.6\_1 |