## SURVEY OF HEAD START GRANTEES ON TRAINING AND TECHNICAL ASSISTANCE

## **APPENDIX C.1**

RESPONSE TO COMMENTS RECEIVED ON 60-DAY FEDERAL REGISTER NOTICE FOR SURVEY OF HEAD START GRANTEES ON TRAINING AND TECHNICAL ASSISTANCE

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We received one comment to the 60-day Federal Register Notice for proposed Survey of Head Start Grantees on Training and Technical Assistance. The National Head Start Association expressed support for the survey and provided suggestions for refining the survey to focus on a more limited set of questions.

We are encouraged to see that the research topics prioritized by NHSA as the most important at this time are, in fact, being addressed by the proposed survey. The suggested survey questions (bulleted list on page 2 of NHSA's letter) are currently included in different forms that will yield quantitative data and nationally representative statistics on these topics.

NHSA's suggestions to eliminate questions about grantees' basic experiences searching for, selecting and receiving T/TA rest on assumptions about administrative data ("we expect that the various federally-funded T/TA entities keep records of the requests they receive and the services they provide"). However, currently available administrative data do not provide adequate information to address research goals 2 and 3 (as described in the 60-day FRN). There is a lack of basic, representative information about OHS grantees' selection of and use of T/TA services. We have significantly reduced the survey instruments since the 60-day FRN was published and, therefore, the currently proposed instruments are shorter than the versions reviewed by NHSA. However, we cannot eliminate questions about all the topics suggested by NHSA's comments for a several reasons, including the following:

- Although different administrative data sources address elements of these research questions, the available administrative data are not representative of <u>all OHS grantees</u>.
- Relevant, existing data from various federally-funded sources only provide information about the T/TA services delivered by OHS to grantees. We do not have representative information about <u>all of the T/TA</u> that grantees need, seek, or acquire from other sources.
- Eliminating questions about basic T/TA services that grantees sought and used would prevent ACF from being able to interpret data collected about the topics suggested as "most important" by NHSA, such as: what grantees found helpful, what grantees didn't find helpful, what grantees would suggest to make T/TA better, what T/TA grantees have they not been able to get, the relationship between T/TA received and changes in practice.
- Finally, the OHS T/TA System is complex, multi-layered and multi-pronged. Assessing impact of T/TA services on the practices of grantees and their ability to support children and families is not feasible if ACF does not have basic information confirming that: (1) T/TA procedures are being implemented completely so that OHS-funded T/TA reaches grantees, and (2) grantees are taking-up OHS-funded T/TA services.