ATTACHMENT 1

TELEPHONE SCRIPT AND RECRUITMENT INFORMATION COLLECTION FOR PROGRAM DIRECTORS, REGIONS I-X

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HEAD START FAMILY AND CHILD EXPERIENCES SURVEY 2019

Telephone script for program directors (Regions I–x)

INTRODUCTION

My name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am calling from [Mathematica Policy Research/Juarez and Associates] to talk about your program’s participation in the Head Start Family and Child Experiences Survey, which we refer to as FACES. I am calling about [PROGRAM NAME], which is GRANT NUMBER [#] and PROGRAM NUMBER [#]. We recently sent you a letter informing you that your program was selected to be part of a research project for the Administration for Children and Families of the U.S. Department of Health and Human Services. We included a fact sheet with information about the study. Did you receive a letter about the study and other materials from Dr. Lizabeth Malone, and have you had a chance to go over them? [HAVE LETTER AVAILABLE TO PROVIDE INFORMATION IF PERSON IS NOT FAMILIAR WITH THE STUDY. IF CALLING FROM JUAREZ, EXPLAIN MATHEMATICA’S ROLE IN THE STUDY.]

Is this a good time to talk? I would like to answer any questions you have about FACES and discuss the logistics of the study with you. I would also like to speak with you about your identifying an on-site coordinator for your program. That person will work with the FACES project team to plan the visits to the centers in your program. I would also like to explain more about how centers and participants will be selected for the study. This call should take no more than an hour to complete. [IF ASKED FOR TYPICAL DURATION, SAY AT LEAST 30 MINUTES BUT UP TO 45–60 MINUTES].

[ALLOW TIME FOR QUESTIONS, RESPOND OR DEFER UNTIL LATER IN THE CALL WHEN THE TOPIC IS PRESENTED.]

To begin, I want to let you know that your participation is voluntary. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0970-0151 and it expires xx/xx/xxxx.

**SITE VISIT PURPOSE AND BASIC ACTIVITIES**

First, I would like to briefly review some of the details about the purpose and design of the study described in the letter, and some of the activities that will take place when we visit Head Start centers in your program. Please stop me at any time if you have questions.

* The purpose of FACES 2019 is to provide descriptive information about the characteristics, experiences, and outcomes of children and families served by Head Start and to observe the relationships among family and program characteristics, classroom quality, and school readiness.

[PROGRAMS SELECTED FOR CHILD-LEVEL DATA COLLECTION]

* We will survey the parents of Head Start children and administer a battery of child assessments to children participating in the study. We will also survey Head Start staff and observe selected classrooms.

[PROGRAMS SELECTED FOR CLASSROOM-ONLY DATA COLLECTION]

* We will survey Head Start staff and observe selected Head Start classrooms.

[ALL]

* The information that comes from FACES will be used to identify strategies to improve the effectiveness of Head Start programs. Mathematica will not judge or report on the performance of individual programs, staff, or children.

[PROGRAMS SELECTED FOR CHILD-LEVEL DATA COLLECTION]

If you agree to participate, the study team for FACES will visit your program’s centers on three occasions: fall 2019, spring 2020, and spring 2022.

* During each visit, a team of five or six people will spend about one week in your program, dividing their time between the two centers selected for the FACES study.
* We will work with the on-site coordinator and center staff to limit any disruption that might be caused by our visit.
* In fall 2019 and spring 2020, we will administer a child assessment battery to children in the study. The assessment will measure a range of areas covered by the Head Start Early Learning Outcomes Framework. Members of our staff, who have been specially trained to assess children for FACES 2019, will administer the assessments. Children will be offered a book worth $10.
* Also in fall 2019, and spring 2020, we will ask the teachers from each selected class to supplement the child assessment battery by completing a brief questionnaire about the social and emotional development of each participating child. This questionnaire will be available both on the web and on paper.
* Also in fall 2019 and spring 2020, we will conduct a survey of parents of children participating in the study. As with past rounds of FACES data collection, we expect to provide parents with a gift card after they complete the survey.
* In spring 2020 and spring 2022, we will observe the selected classrooms and ask you, the center directors, and teachers in the selected classrooms to complete surveys.
* In spring 2022, we will select a new sample of classrooms in your program’s selected centers and conduct classroom observations and staff surveys.

[PROGRAMS SELECTED FOR CLASSROOM-ONLY DATA COLLECTION]

If you agree to participate, the FACES 2019 study team will visit your program’s centers on two occasions: spring 2020 and spring 2022.

* In spring 2020 and spring 2022, we will observe the selected classrooms and ask you, the center directors, and teachers of the selected classrooms to complete surveys.
* In spring 2022, we will select a new sample of classrooms in your program’s selected centers and conduct classroom observations and staff surveys.

[ALL]

Now, moving onto three other important points.

 **First, all information collected during FACES 2019 will be kept private to the extent permitted by law.** We will not share the information we collect with anyone outside the research team, including your program staff or parents. Programs, Head Start staff, children, and families will never be identified by name in any data files or reports of the study’s findings. However, we may be required by law to report information regarding child abuse or neglect. The study will obtain a Certificate of Confidentiality from the National Institute of Health to assure participants that the information will be kept private to the fullest extent the law permits.

 **Second, field staff requirements include criminal background checks.** To ensure the safety of our field staff and participants, **Mathematica hiring policy requires all newly hired and rehired field staff to pass a criminal background check.** Sterling Testing Systems will conduct the background checks which will include a Social Security trace, criminal conviction search, sex offender database search, and a department of motor vehicles report. For more information on Sterling Testing Systems, visit its website at http://www.sterlingtestingsolutions.com/.

 Does your program have any local security requirements (such as fingerprinting) or health requirements (such as TB tests) beyond what is covered in Sterling clearance? [IF YES, ASK DIRECTOR TO PROVIDE ANY PAPERWORK ASSOCIATED WITH THE CLEARANCE SO WE CAN HAVE FIELD STAFF COMPLETE THIS AS EARLY AS POSSIBLE.]

 **Third, information collected during this study is not used for accountability or monitoring purposes.** The information collected during this visit will be reported only in aggregate form with information from all 180 Head Start programs in the study. Federal staff will not receive information about specific programs, only for the entire group of programs together.

 Finally, Mathematica has already obtained Institutional Review Board (IRB) approval for the FACES 2019 study. IRB approval ensures that our study meets scientific standards to protect study participants. Are there any additional local IRBs or other entities that will need to review the study prior to the site visit? [LOG ANY LOCAL IRB NEEDS IN THE FACES IRB TRACKING SPREADSHEET.]

 Do you have any questions so far?

 Next, I want to confirm and collect some basic information about your Head Start program. [CONFIRM AND/OR UPDATE THE FOLLOWING IN THE FACES DATABASE]:

* CONFIRM CONTACT INFORMATION: Please confirm the following information: (program director name, physical and mailing addresses, phone numbers, fax numbers, email addresses).
* PROGRAM OPTION: Is your program center based, home based, a mix of the two, or is it locally designed program?
* If center based or mix: I would like to confirm the centers in your program. In FACES, we consider a center to be eligible if it has at least one preschool Head Start classroom with at least one preschool Head Start child. However, child care partnership centers and family child care centers are not eligible. From the Head Start Enterprise System, I see that you have [NUMBER] centers. These include [LIST CENTERS]. Is this correct? Do you operate any additional Head Start centers that I did not mention? Are any of the centers I listed no longer in operation? Are any of these center-based child care partner organizations or family child care centers? [READ IF NECESSARY] The PIR defines a child care partner as an individual child care center, umbrella organization operating multiple child care centers, child care resource and referral (CCR&R) network, or other entity with whom the Head Start program has formal contractual agreements to provide child care services to enrolled children that meet the Head Start Program Performance Standards.
* How many classrooms are in each center? [CHILD-LEVEL PROGRAMS ONLY] How many home visitor caseloads are affiliated with each center? [NOTE: ALL CASELOADS NEED TO BE ASSIGNED TO ONE AND ONLY ONE CLASSROOM-BASED CENTER.]
* Please give me an estimate of the number of children you expect to be enrolled at each Head Start center in fall 2019. [ACKNOWLEDGE THAT THE NUMBER MAY BE HIGHLY PRELIMINARY].
* What is the estimated percentage of dual language learners in each center?
* What days of the week do you operate the children’s classrooms? Is it five days a week, four, or some other schedule? Does it vary by center? [SOME PROGRAMS DO NOT HOLD CLASSES ON MONDAYS OR FRIDAYS].
* When does your 2019–2020 program year start and end?

CENTER, CLASSROOM, AND CHILD SELECTION

[PROGRAMS SELECTED FOR CHILD-LEVEL DATA COLLECTION]

 Finally, I want to explain to you how we will choose the centers, classrooms, and children that will be asked to participate in the study.

* **Center selection.** Typically, two centers will be randomly selected for participation. If a program has only one or two centers, we will include all of them in the study.
* **Classroom selection.** Approximately two classrooms will be randomly selected in each center. If a center has only one or two classrooms, we will include all of them. A Mathematica field enrollment specialist (FES) will visit your program about three weeks before our fall 2019 data collection begins. The FES visit will last about two days per center. During the visit, the FES will ask the OSC to provide a list of all classrooms and home visitor caseloads in each center. We will select classrooms again in 2022.
* **Child selection.** After classrooms have been selected for the sample, children will be randomly selected for the study. The FES will ask for a list of the names, dates of birth, and enrollment date into preschool Head Start for all children in the selected classrooms or home visitor caseloads. We will select approximately 12 children per classroom and will invite these children and their families to participate.

[PROGRAMS SELECTED FOR CLASSROOM-ONLY DATA COLLECTION]

 Finally, I would like to explain to you the way that we will choose the centers and classrooms that will be asked to participate in the study.

* **Center selection.** Typically, two centers will be randomly selected for participation in FACES. If a program has only one or two centers, we will include all of them in the study.
* **Classroom selection.** Two classrooms will be randomly selected in each center. If a center has only one or two classrooms, we will include all classrooms.

Identify On-Site Coordinator

[PROGRAMS SELECTED FOR CHILD-LEVEL DATA COLLECTION]

We will be working with an on-site coordinator from your program—someone you designate—to help us with our preparations. You may designate one person or two people, depending on your preference. This/these coordinator(s) will be responsible for:

* Working with a field enrollment specialist to identify eligible classrooms and children to be sampled for the study.
* Helping us obtain parental consent and track the receipt of consent forms.
* Helping coordinate the visit to each center.
* Scheduling the child assessments.

The OSC will receive an honorarium of $500 for helping us in fall 2019. If there are two coordinators, each will receive $250. The amount of the OSC’s honorarium for spring 2020 and spring 2022 will be $250 each time. We will provide a check as an honorarium for the coordinator’s or coordinators’ help. If you wish, we can give the honorarium directly to the program.

Do you know who you would like this person [these people] to be? I can call you at another time to discuss this if you are not sure. [ENTER THE NAME(S) INTO THE FACES DATABASE. BE SURE TO HAVE A CONTACT PERSON OTHER THAN THE OSC JUST IN CASE THERE IS A CHANGE IN OSC!]

[IF THE ON-SITE COORDINATOR(S) IS (ARE) NAMED] With your permission, I would like to contact the individual(s) to explain our FACES procedures and our expectations of the on-site coordinator(s). [GET THE OSC’S NAME AND CONTACT INFORMATION, BUT WAIT FOR PERMISSION TO CONTACT THEM.]

It is important that we establish a good working partnership with the on-site coordinator(s), as he or she is the person we will work with to ensure that we develop a data collection plan that conforms to your local requirements and minimizes the burden on your program. I will work with the on-site coordinator(s) to develop that plan, and we will send you a copy of the completed plan, which will include:

* The number of Head Start classrooms in each selected center
* A schedule for the field enrollment specialist’s preliminary visit to the program for the purpose of selecting the sample of classrooms and children
* The procedures for obtaining parental consent
* A schedule for the data collection week
* Arrangements for assessment locations

 [PROGRAMS SELECTED FOR CLASSROOM-ONLY DATA COLLECTION]

We will be working with the on-site coordinator from your program to help us with our preparations. This can be one person or two, depending on your preference. This person will be responsible for:

* Working with study staff to identify eligible classrooms to be sampled for the study
* Helping coordinate the visit to each center
* Scheduling the classroom observations

The OSC will receive an honorarium of $250 for helping us in each round of data collection. If there are two coordinators, each will receive $125. A check will be provided as an honorarium for this person’s help. If you wish, this honorarium can be made directly to the program.

Do you know who you would like this person [these people] to be? I will call you at another time to discuss this matter if you are not yet sure. [ENTER THE IDENTIFIED NAME(S) INTO THE FACES DATABASE. BE SURE TO HAVE A CONTACT PERSON OTHER THAN THE OSC JUST IN CASE THERE IS A CHANGE IN COORDINATOR(S)!]

[IF THE ON-SITE COORDINATOR(S) IS (ARE) NAMED With your permission, I would like to contact the individual(s) to explain our FACES procedures and our expectations of the on-site coordinator. [GET THE OSC’S NAME AND CONTACT INFORMATION, BUT WAIT FOR PERMISSION TO CONTACT THE INDIVIDUAL(S).]

It is important that we establish a good working partnership with the on-site coordinator(s). We will work with the on-site coordinator(s) to ensure that we develop a data collection plan that conforms to your local requirements and minimizes the burden on your program. I will work with the coordinator(s) to develop the plan, and we will send you a copy of the completed plan, which will include a schedule for the data collection week.

NEXT STEPS

[ALL]

* [IF ON-SITE COORDINATOR NOT NAMED EARLIER] Once you have identified the on-site coordinator, I would like to send the individual(s)—with your permission—detailed information about the study and arrange a time to discuss coordination responsibilities. It would be helpful if you could soon identify the on-site coordinator(s).
* [IF ON-SITE COORDINATOR NAMED EARLIER] With your permission, I would like to send the on-site coordinator you selected detailed information about the study and arrange a time to discuss his or her coordination responsibilities. It would be helpful if that could be accomplished soon, ideally within one week.
* In case I need to follow up with you for any reason, what is the easiest way to contact you—by phone or email? [CONFIRM THAT THIS PERSON IS THE ONE WHO SHOULD BE YOUR REGULAR PROGRAM-LEVEL CONTACT.]
* Do you have any questions at this point? If questions or concerns come up, please feel free to contact me at [LIAISON PHONE] or [EMAIL].

Thank you for participating in this important study. We appreciate your cooperation, and I look forward to working with your program!