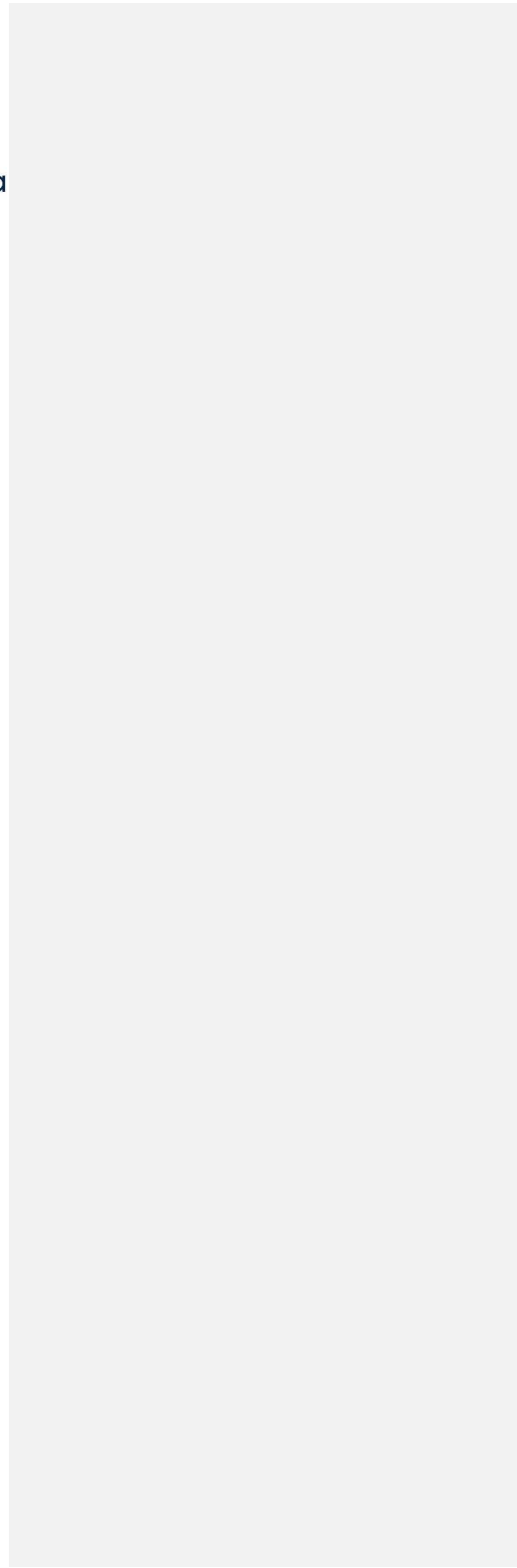


OMB No.: 0970-0515  
Expiration Date: XX/XX/20XX



**Study of Coaching Practices in Early Care and Education Settings 2021: Follow-up**

Coach Survey  
Spring 2021



PROGRAMMER NOTES:

**Preload from SMS:**

- Coach
- Coach first and last name
- Coach type = Teacher or Family Child Care (FCC)

**[Include the following soft check for any non-response to a question:** Your responses are very important. Please provide an answer to the question, or click “Next” to go to the next question.]

[If the question has a soft check for non-response and the respondent does not enter an answer, please code M.]

[If the question has an “Other (Specify)” response and the respondent selects it but does not specify, soft check.]

[If an item is left blank move to the next question unless the specs specifically route blank answers to a different question.]

**Introduction.** Welcome to the 2021 Coach Survey. This survey is part of the Study of Coaching Practices in Early Care and Education Settings: Follow-up (SCOPE), a study being conducted for the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) by Mathematica.

You may remember completing a coach survey for this study in 2019. This is a follow-up survey that will ask about your experience working as a coach within early care and education (ECE) settings since COVID-19 began in early 2020; even if you are no longer coaching, we would still like you to answer a few questions. When we refer to coaching or coaches in this survey, we mean individuals who work with teachers and/or family child care (FCC) providers one-on-one or with a teaching team on a regular basis to provide feedback and guidance to help them improve their practices. You may be working remotely, in-person, or both. In addition, the teachers or FCC providers you are working with could be teaching in a variety of ways (remotely, in-person, or both). You may tend to use other terms for coaching, such as mentor, mentor-coach, or consultant. For the purposes of this survey, we use the word “coaching” to apply to all of these roles.

If you have any questions about the study or your participation, please email us at [CoachSCOPE@mathematica-mpr.com](mailto:CoachSCOPE@mathematica-mpr.com).

**We would like you to know that:**

- The survey takes about 20 minutes to complete and we will send you \$20 as a thank you.
- The information in this study will be used only for research purposes and in ways that will not reveal who you are. We will not provide information that identifies you to anyone outside the study team, except as required by law. You will not be identified in any publication from this study. Data from this study will be transmitted to the Child & Family Data Archive or a similar data archive at the end of the study so it can be used by other researchers. No personal information that could identify you will remain in the files that will be shared with the data archive.
- This survey is voluntary, but your response is critical for producing valid and reliable data. You may skip any questions you do not wish to answer; however, we hope that you answer as many questions as you can. If you have any questions about your rights as a research volunteer, contact Caroline Lauver toll free at 1-844-SCOPE18 (1-844-726-7318). If you would like a copy of this disclosure statement, please email us at [CoachSCOPE@mathematica-mpr.com](mailto:CoachSCOPE@mathematica-mpr.com) or call us toll free at 1-844-SCOPE18 (1-844-726-7318).

Thank you very much for your participation in this survey!

Paperwork Reduction Act Statement: This collection of information 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 valid OMB control number for this information collection is 0970-0515 which expires **XX/XX/XXXX**. The time required to complete this collection of information is estimated to average 20 minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the collection of information. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: Mathematica, 1100 1st Street, NE, 12th Floor, Washington, DC 20002, Attention: Emily Moiduddin.

### How to Complete the Survey

Thank you for taking the time to complete this survey.

- There are no right or wrong answers.
- To answer a question, click the box and choose your response.
- To continue to the next webpage, press the **“Next”** or **“Continue”** button.
- To go back to the previous webpage, click the **“Back”** or **“Previous”** button. Please note that this command is only available in certain sections.
- If you need to stop before you have finished, please exit your browser. The data you provide is securely stored between each question and is available when you return to complete the survey.
- For security purposes, you will be timed out if you are idle for longer than **30 minutes**.
- When you decide to continue the survey, you will need to log in again using the link to the survey we sent you.

**Please click one of the buttons below to begin or exit the survey**

**Begin your survey [BUTTON]**

**EXIT BUTTON**

## Screener

[ALL] As a reminder, in this survey, when we refer to coaching, we mean work that happens on a regular basis with teachers and/or FCC providers one-on-one or with a teaching team to provide feedback and guidance to help them improve their practices. The coaches may be working remotely, in person, or both. In addition, the teachers or FCC providers the coaches are working with could be teaching children remotely, in-person or both. You may use other terms for coaching, such as mentor, mentor-coach, or consultant. For the purposes of this survey, we use the word “coaching” to apply to all of these roles.

When we refer to remote, we mean interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as “virtual.”

When we refer to in-person, we mean interactions that happen in the same physical location, sometimes referred to as “face-to-face.”

First, we would like to ask you about any changes to the work you do as a coach that might have occurred since COVID-19 began in early 2020.

[ALL]

**SC1. Are you currently providing coaching? Mark one only**

- <sup>1</sup>Yes
- <sup>0</sup>No

[IF SC1=0]

**SC1a. Why are you no longer providing coaching? Mark all that apply**

- <sup>1</sup>My organization stopped providing coaching
- <sup>2</sup>My organization still provides coaching, but I moved into a position that does not involve coaching
- <sup>3</sup>I was laid off from my coaching job at my organization
- <sup>4</sup>I resigned from my coaching job at my organization
- <sup>5</sup>I retired from my coaching job
- <sup>6</sup>The center(s)/FCC(s) where I coached are closed/cannot support coaching at this time
- <sup>7</sup>I work independently (not for an organization) and I chose to stop coaching
- <sup>8</sup>Other (*specify*): \_\_\_\_\_

[IF SC1=0]

**SC1b. Was your departure from coaching at least partially a result of COVID-19? Mark one only**

- <sup>1</sup>Yes
- <sup>0</sup>No → [ IF SC1b=0 GO TO SC5]

[IF SC1=1]

**SC2. Between when COVID-19 began in early 2020 and now, have you experienced any of the following changes in your work as a coach? Mark yes or no for each item**

- A. There were times when I took on additional coaching duties: <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- B. There were times when I had fewer coaching duties: <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- C. There were times I took on more non-coaching duties: <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_

- D. I was temporarily laid off or furloughed (with or without pay) from my job as a coach:  
<sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- E. I experienced other types of changes in my work as a coach since COVID-19 began  
<sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_ (IF YES *specify*): \_\_\_\_\_

The following questions are about the **coaching work** you are **currently** doing.

[IF SC1=1]

**SC3. How many of the following settings do you currently work with as a coach?**

- <sup>1</sup> \_\_\_ Total family child care (FCC) classroom(s)
- <sup>2</sup> \_\_\_ Total FCC homes
- <sup>3</sup> \_\_\_ Total center-based classroom(s)
- <sup>4</sup> \_\_\_ Total centers or schools

RANGE FOR ALL: 0-50

SOFT CHECK IF ANY CATEGORY IS BLANK: If you do not work in a particular setting, please enter 0 for that setting.

[IF SC1=1]

**SC3a. Please identify how many of the following staff you currently coach across all of the settings where you coach.**

- <sup>1</sup> \_\_\_ Lead teachers in centers
- <sup>2</sup> \_\_\_ Assistant teachers in centers
- <sup>3</sup> \_\_\_ FCC providers
- <sup>4</sup> \_\_\_ Others (for example, home visitors, administrators, supervisors)

RANGE FOR ALL: 0-50

SOFT CHECK IF ANY CATEGORY IS BLANK: If you do not coach staff from a particular category, please enter zero for that category.

IF SAMPLE LOAD INDICATES THAT COACH WORKED WITH FCCS BUT SC3\_1=0 AND SC3\_2=0, ASK COACH ABOUT TEACHERS THEY WORK WITH INSTEAD [USE THE TEACHER FILL INSTEAD OF PROVIDER FILL].

[IF SC1=1]

**SC4. Of the [FILL TOTAL FROM SC3a\_1, SC3a\_2, SC3a\_3] teachers/providers you work with, how many are you working with primarily remotely, how many are you working with primarily in-person, and how many are you working with both remotely and in-person? Please enter the number for each.**

- <sup>1</sup> Teachers/providers you coach entirely remotely: \_\_\_\_\_ NUMBER
- <sup>2</sup> Teachers/providers you coach entirely in-person: \_\_\_\_\_ NUMBER
- <sup>3</sup> Teachers/providers you coach as a mix of remote and in-person: \_\_\_\_\_ NUMBER

[ALL; IF SC1=1 ASK:]

**SC5. Are you currently providing any of the following types of coaching and/or other professional development (PD) services to teachers and FCC providers who teach and care for preschool-age children? The services could be either remote or in-person. [IF SC1 = 0 DO NOT SHOW A OR B OR C AND ASK:] Are you currently providing any of the following types of professional development (PD) services, either remotely or in-person? Mark yes or no for each item.**

- A. Providing one-on-one coaching to teachers/providers  
<sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- B. Providing coaching to teaching teams from a classroom or FCC  
<sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_

**Commented [CL1]:** Add in pop-up definition of coaching: "Work that happens on a regular basis with teachers and/or FCC providers one-on-one or with a teaching team to provide feedback and guidance to help them improve their practices. The coaches may be working remotely, in person or both. In addition, the teachers or FCC providers the coaches are working with could be teaching children remotely, in-person or both. You may use other terms for coaching, such as mentor, mentor-coach, or consultant."

**Commented [CL2]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual.""

**Commented [CL3]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face."

**Commented [CL4]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual.""

**Commented [CL5]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face."

**Commented [CL6]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual.""

**Commented [CL7]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face."

- C. Providing coaching to groups of teachers across classrooms within the same center <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- D. Providing PD workshops and/or trainings to teachers/providers <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- E. Providing PD workshops and/or trainings to ECE administrators <sup>1</sup>YES \_\_\_  
<sup>0</sup>NO \_\_\_
- F. Facilitating a peer learning group or professional learning community for ECE educators <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- G. Providing other types of technical assistance to centers and/or FCC homes <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- H. Other (specify): \_\_\_\_\_ <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_

→ [IF SC1=0 END SURVEY]

[IF SC5b=1 or SC5c=1]

**SC6. Compared to before COVID-19 began in early 2020, would you say you currently spend more time, less time, or the same amount of time coaching teachers or providers in teams or small groups (instead of alone/one-on-one)? Mark one only**

- <sup>1</sup>More time coaching teams/small groups than before COVID-19 began in early 2020
- <sup>2</sup>Less time coaching teams/small groups than before COVID-19 began in early 2020
- <sup>3</sup>About the same amount of time coaching teams/small groups as before COVID-19 began in early 2020

[IF SC1=1 OR SC1a=1 or 2]

**SC7. Does your work currently involve any of the following tasks? Mark yes or no for each item**

- A. Providing care for children in classrooms or FCC homes <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- B. Providing other types of in-person services for children and families <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- C. Providing remote or virtual services to children and/or families <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- D. Supervising teachers <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- E. Supervising other types of staff <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- F. Other types of administrative work <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_
- G. Other ECE-related work (specify): \_\_\_\_\_ <sup>1</sup>YES \_\_\_ <sup>0</sup>NO \_\_\_

[IF SC5\_A=0 AND SC5\_B=0 AND SC5\_C=0 END SURVEY]

**Commented [CL8]:** Add pop-up definition: "Peer learning group or professional learning community: "these communities bring together groups of teachers or providers to improve practice through peer support and shared knowledge. An expert (such as a coach) guides the discussion."

**Commented [CL9]:** Add pop-up definition for Technical assistance: "Targeted or customized activities and supports to build up the capacity and improve practices of teachers and providers."

**Commented [CL10]:** Add pop-up example of "in-person services": "In-person services include, for example, providing services to families at the center or in their homes."

**Commented [CL11]:** Add pop-up examples of "remote or virtual services": "Remote or virtual services can include virtual instruction for children (one-on-one or in groups), virtual home visits or family meetings, or virtual family activities or events."

## A. Coaching Communication and Interaction

[PRELOAD FROM SMS: COACH TYPE = TEACHER OR FCC. IF COACH TYPE=FCC BUT SC3\_1=0 AND SC3\_2=0 AND SC3a\_3\_0, CHANGE COACH TYPE=TEACHER IF SC3\_3 > 0 OR SC3\_4 > 0 OR SC3a\_1 > 0 OR SC3a\_2 > 0]

Now we'd like to ask you some questions to better understand the different ways in which you might communicate and interact with the teachers/providers you support through coaching. For the remainder of the questions in this survey, please think only about the coaching you provide to [TEACHER: center-based teachers/FCC: family child care providers].

A1. On average, how often do you currently use the following approaches to communicate or interact with a [TEACHER: teacher/FCC: provider] who you coach? Mark one only for each item

		Frequency of Approach					
		Never	Less than once per month	About once per month	About every other week	About once a week	About Daily
A	Regularly scheduled meetings (in-person)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
B	Regularly scheduled meetings (remote)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
C	Brief drop-in visits (in-person)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
D	Brief virtual conversations (video and/or phone)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
E	Text and/or email	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
F	Other (specify)	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

[IF SC1=1]

A2. On average, how frequently do you have regularly scheduled coaching meetings with a [TEACHER: teacher/FCC: provider] or teaching team? Please think about meetings that take place remotely or in-person. Please note the average number of meetings and whether it is every week, every month or every two months.

\_\_\_\_\_ Number of regularly scheduled meetings per individual teacher/FCC provider or teaching team  
 Every WEEK\_\_\_\_ or Every MONTH\_\_\_\_ or Every TWO MONTHS

[IF A2>0]

A2a. Of those [FILL RESPONSE FROM A2] regularly scheduled meetings, what number are currently in-person and what number are currently remote?

A. \_\_\_\_\_ Number of in-person meetings      B. \_\_\_\_\_ Number of remote meetings

[IF SC1=1]

A3. What is the average total amount of time you spend during a month interacting with a [TEACHER: teacher/FCC: provider] or teaching team? Please include time spent during both remote and in-person interactions such as meetings, drop-in visits, brief virtual conversations, or texting and emailing. Please do NOT include time observing or preparing for meetings. Please enter hours or minutes for total time.

\_\_\_\_\_ Hours OR \_\_\_\_\_ Minutes

**Commented [CL12]:** Add in pop-up definition of coaching: "Work that happens on a regular basis with teachers and/or FCC providers one-on-one or with a teaching team to provide feedback and guidance to help them improve their practices. The coaches may be working remotely, in person or both. In addition, the teachers or FCC providers the coaches are working with could be teaching children remotely, in-person or both. You may use other terms for coaching, such as mentor, mentor-coach, or consultant."

**Commented [CL13]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual."

**Commented [CL14]:** Add pop-up definition for in-person: interactions that happen in the same physical location, sometimes referred to as "face to face".

**Commented [CL15]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual."

**Commented [CL16]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face".



[IF A2a\_A>0]

**A4. On average, how much time do you spend in a typical in-person coaching meeting interacting with a [TEACHER: teacher/FCC: provider] or teaching team whom you coach? Please do NOT include time or meetings focused only on observing the [TEACHER: teacher/FCC: provider] or teaching team. Please enter hours or minutes for length of time.**

\_\_\_\_\_ Hours OR \_\_\_\_\_ Minutes

**Commented [CL17]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face".

[IF A2a\_B>0]

**A5. On average, how much time do you spend in a typical remote coaching meeting interacting with a [TEACHER: teacher/FCC: provider] or teaching team whom you coach? Please do NOT include time or meetings focused only on observing the [TEACHER: teacher/FCC: provider] or teaching team. Please enter hours or minutes for length of meeting.**

\_\_\_\_\_ Hours OR \_\_\_\_\_ Minutes

**Commented [CL18]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual.""

[IF A2a\_B>0]

**A6. Thinking about the amount of time you spend coaching remotely now compared to before COVID-19 began in early 2020, would you say you spend more time, less time, or about the same amount of time coaching [TEACHER: teachers/FCC: providers] remotely? Mark one only**

- <sup>1</sup>More time than before COVID-19 began in early 2020
- <sup>2</sup>Less time than before COVID-19 began in early 2020
- <sup>3</sup>About the same amount of time as before COVID-19 began in early 2020

**Commented [CL19]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual.""

[IF SC1=1]

**A7. Thinking about both the regularly scheduled coaching meetings and all the other ways you interact or communicate with the [TEACHER: teachers/FCC: providers] you coach, which three topics do you currently spend most of the time discussing with them? Choose the three topics from the list below and rank them from 1 to 3 with 1 being the topic you spend the most time discussing with the [TEACHER: teachers/FCC: providers] you coach.**

- \_\_\_\_\_<sup>1</sup>Children's learning/academic development (literacy, math, etc.)
- \_\_\_\_\_<sup>2</sup>Children's social-emotional development and well-being
- \_\_\_\_\_<sup>3</sup>Culture, diversity and equity
- \_\_\_\_\_<sup>4</sup>Family engagement
- \_\_\_\_\_<sup>5</sup>Child health and safety
- \_\_\_\_\_<sup>6</sup>Child trauma, stress, and coping
- \_\_\_\_\_<sup>7</sup>Staff health and safety
- \_\_\_\_\_<sup>8</sup>[TEACHER: teacher/FCC: provider] stress and coping
- \_\_\_\_\_<sup>9</sup>Family stress and coping
- \_\_\_\_\_<sup>10</sup>COVID-19 related procedures for centers or FCCs
- \_\_\_\_\_<sup>11</sup>Ways to provide virtual support to children and their families
- \_\_\_\_\_<sup>12</sup>Other (specify): \_\_\_\_\_

## B. Coaching Activities

Now we would like to learn more about the types of things you currently do with the [TEACHER: teachers/FCC: providers] you support through coaching.

[IF SC1=1]

**B1. When providing coaching to a typical [TEACHER: teacher/FCC: provider] or teaching team, how often do you currently do the following activities during your interactions?** [IF B1\_A, B1\_B, B1\_C OR B1\_G=2, 3, 4 OR 5 ASK] Please note if you are currently doing each activity **in-person, remotely, or both**. Mark one only for each item.

		Frequency of Activity					In-person or remote activity		
		Never	Rarely	Sometimes	Often	Almost always	In-person	Remote	Both in-person and remote
A	Problem solve on personal issues	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
B	Provide emotional support or work on stress reduction	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
C	Help with [TEACHER: classroom/FCC: provider] preparation of materials, lesson plans, scheduling	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
D	Facilitate opportunities for other professional development	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5			
E	Help the [TEACHER: teacher/FCC: provider] connect to COVID-19 related resources	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5			
F	Help the teacher interpret CDC and/or other health and safety guidelines related to COVID-19	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5			
G	Other (specify): _____	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3

**Commented [CL20]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face".

**Commented [CL21]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual."

[IF B1\_A\_1=2,3,4,5 AND B1\_A\_2=2 or 3. Repeat for B1\_B, B1\_C, B1\_G]

**B1a. Have any of these activities been more difficult to do remotely than in-person?** Mark one only for each item

		Difficulty of doing activity remotely compared to in-person		
		More difficult	No difference	Less difficult
A	Problem solve on personal issues	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
B	Provide emotional support or work on stress reduction	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
C	Help with [TEACHER: classroom/FCC: provider] preparation of materials, lesson plans, scheduling	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
G	Other coaching activity (specify): _____	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3

**Commented [CL22]:** Add pop-up definition "interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as "virtual."

**Commented [CL23]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as "face to face".

[IF SC1=1]

**B2. When providing coaching to a typical [TEACHER: teacher/FCC: provider] or teaching team, how often do you currently use the following *practice and modeling* strategies during your interactions? [IF B2\_A OR B2\_B=2,3,4 OR 5 ASK] Is this strategy currently done **in-person, remotely, or both**? Mark one only for each item.**

		Frequency of Strategy					Strategy used remotely or in-person		
		Never	Rarely	Sometimes	Often	Almost always	In-person	Remote	Both in-person and remote
A	Demonstrate/model skills and strategies with children	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>
B	Demonstrate/model skills and strategies by using video exemplars (either to watch together or on own)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>

**Commented [CL24]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as “face to face”.

**Commented [CL25]:** Add pop-up definition “interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as “virtual.””

[IF SC1=1]

**B3. When providing coaching to a typical [TEACHER: teacher/FCC: provider] or teaching team, how often do you currently use the following *observation/reflection and feedback* strategies during your interactions? Mark one only for each item.**

		Frequency of Strategy					
		Never	Less than once per month	About once per month	About every other week	About once a week	About daily
A	Conduct in-person observation of [TEACHER: teacher's/FCC: provider's] work	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>
B	Conduct remote (live) observation of [TEACHER: teacher's/FCC: provider's] work	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>
C	Watch a pre-recorded video of the [TEACHER: teacher's/FCC: provider's] practice	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>
D	Discuss with the [TEACHER: teacher/FCC: provider] about how they implemented the observed practice	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>
E	Provide verbal or written feedback on [TEACHER: teacher/FCC: provider] strengths or areas for growth	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>
F	Ask [TEACHER: teachers/FCC: providers] to discuss what went well and what did not go well when using skills and practices targeted in coaching	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>
G	Ask [TEACHER: teacher/FCC: providers] what makes it difficult to use the skills or practices targeted in coaching.	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>	<input type="radio"/> <sub>6</sub>

[IF SC1=1]

**B4. Do you currently set formal, specified goals with [TEACHER: teachers/FCC: providers] whom you work with **in-person, remotely, or both**? Mark one only**

- No, my work with [TEACHER: teachers/FCC: providers] does not involve setting formal specified goals.
- <sup>1</sup>Only with teachers/providers I work with in-person
- <sup>2</sup>Only with teachers/providers I work with remotely
- <sup>3</sup>With teachers/providers that I work remotely and those I work with in-person

**Commented [CL26]:** Add pop-up definition: interactions that happen in the same physical location, sometimes referred to as “face to face”.

**Commented [CL27]:** Add pop-up definition “interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as “virtual.””

[IF SC4\_1>0 OR SC4\_3>1]

**B5. How prepared do you currently feel to provide coaching remotely?** *Mark one only*

- <sup>0</sup>Not at all prepared
- <sup>1</sup>Somewhat prepared
- <sup>2</sup>Prepared
- <sup>3</sup>Very prepared

**Commented [CL28]:** Add pop-up definition “interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as “virtual.””

[IF SC4\_1>0 OR SC4\_3>1]

**B6. Overall, do you feel you are currently able to have constructive communication with the [TEACHER: teachers/FCC: providers] you coach remotely so they can apply the guidance you’ve discussed?** *Mark one only*

- <sup>0</sup>Not at all
- <sup>1</sup>Some of the time
- <sup>2</sup>Most of the time
- <sup>3</sup>All of the time

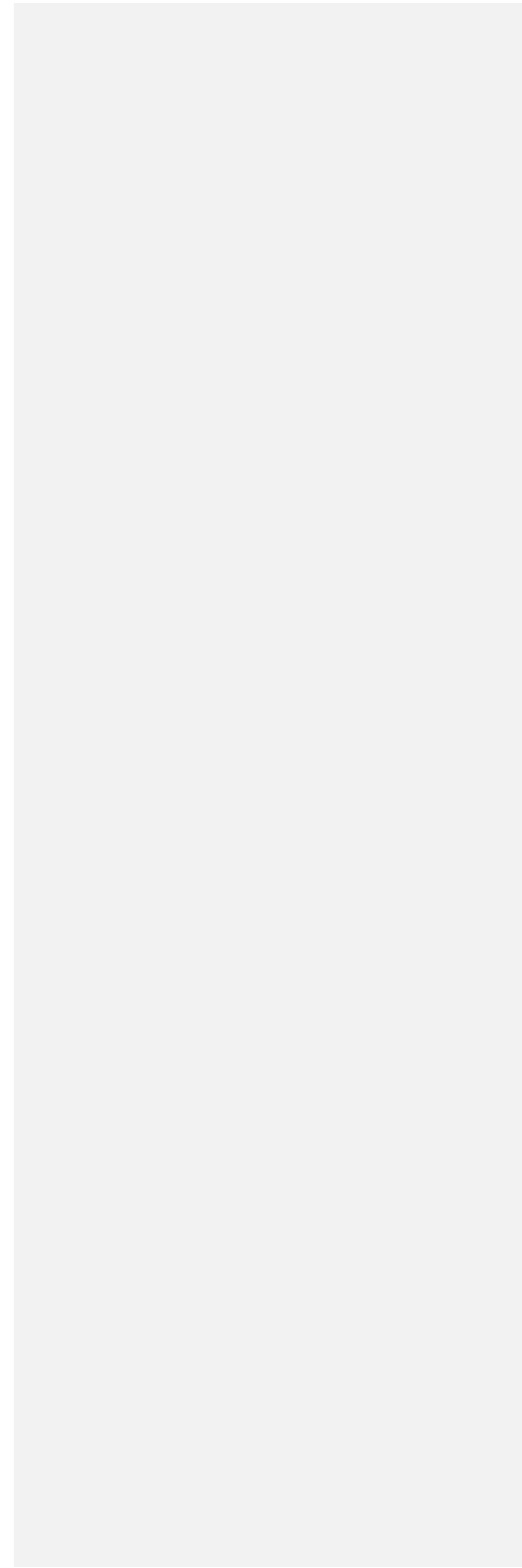
**Commented [CL29]:** Add pop-up definition “interactions that happen by phone calls, texting, online, or through video conference; sometimes these activities are referred to as “virtual.””

[IF SC1=1]

**B7. To what extent are the following factors currently challenging to you as a coach?**

	How challenging is...	Never or hardly ever challenging	Sometimes challenging	Often challenging	Always challenging	NA or I have never encountered these challenges
A	[TEACHER] Level of support from center or program director	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
B	[TEACHER] Teacher turnover	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
C	[TEACHER] Staff/coach ratio (too many teachers and too few coaches)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
D	[TEACHER: Teacher/FCC: Provider] resistance to the coaching process	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
E	Lack of coach time for coach-[TEACHER: teacher/FCC: provider] meetings	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
F	Lack of teacher release time for coach-[TEACHER: teacher/FCC: provider] meetings	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
G	Technology problems (such as internet access, availability of technology)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
H	Communication challenges with [TEACHER: teachers/FCC: providers] (including lack of resources in other languages – not technology issues)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>
I	[TEACHER: teacher/FCC: Provider] personal	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	<input type="radio"/> <sub>5</sub>

	crises, stress or mental health issues					
J	Lack of training or professional development for coaching	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
K	[TEACHER: Teacher/FCC: Provider] discomfort with observation	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
L	Building a relationship with the [TEACHER: teacher/FCC: provider]	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
M	Providing [TEACHER: teachers/FCC: providers] with the emotional support they need	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5



### C. Coach Workload and Support

Finally, we would like to ask you some questions about your workload as a coach and any training you might be receiving to support your work as a coach.

[IF SC1=1]

**C1. How many hours do you work in a typical week? Please think about all work that you do, including coaching activities and activities not related to coaching.**

\_\_\_ HOURS

[IF C1>0]

**C1a. Of those [FILL HOURS IN C1] hours, how much of that time is related to your work as a coach?**

*You may answer in hours or in percentages.*

\_\_\_ HOURS OR \_\_\_ PERCENTAGE

[IF ANY SC5\_D – SC5\_H=1 ]

**C1b. Of the [FILL HOURS IN C1] hours you work in a typical week, how much of your time is spent providing other types of professional development (for example, trainings or workshops) to ECE teachers/providers? You may answer in hours or in a percentage.**

\_\_\_ HOURS OR \_\_\_ PERCENTAGE

[IF SC7\_A=1]

**C1c. Of those [FILL HOURS IN C1] hours, how much of your time is spent working in classrooms, centers or FCC homes to teach and care for children? You may answer in hours or in a percentage.**

\_\_\_ HOURS OR \_\_\_ PERCENTAGE

[IF SC1=1]

**C2. Have you received training on any of the following topics since COVID-19 began in early 2020?**

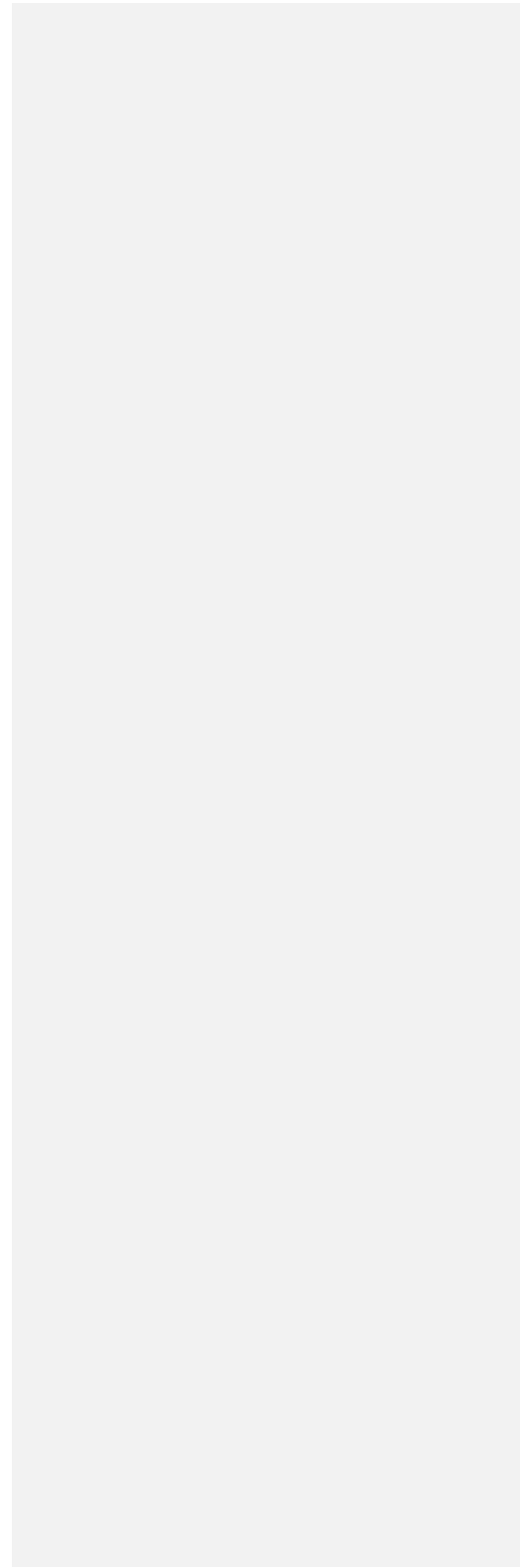
*Mark yes or no for each topic*

	Topic	Yes, received training on this topic after COVID-19 began	No, did not receive training on this topic after COVID-19 began
A	Coaching practices (structure, implementation, goals, strategies, communication, planning)	<input type="radio"/> 1	<input type="radio"/> 0
B	Assessments and observation tools for coaching	<input type="radio"/> 1	<input type="radio"/> 0
C	How to coach teachers/providers in specific school readiness content area domains (for example, curriculum, literacy development, children's social-emotional development)	<input type="radio"/> 1	<input type="radio"/> 0
D	Classroom health and safety	<input type="radio"/> 1	<input type="radio"/> 0
E	Working with families	<input type="radio"/> 1	<input type="radio"/> 0
F	Managing stress for teachers	<input type="radio"/> 1	<input type="radio"/> 0
G	Managing classroom trauma	<input type="radio"/> 1	<input type="radio"/> 0
H	COVID-19 procedures/guidelines	<input type="radio"/> 1	<input type="radio"/> 0
I	Use of technology in coaching	<input type="radio"/> 1	<input type="radio"/> 0
J	How to conduct coaching remotely	<input type="radio"/> 1	<input type="radio"/> 0
K	How to support teachers in their remote instruction	<input type="radio"/> 1	<input type="radio"/> 0
L	Culture, diversity, and equity	<input type="radio"/> 1	<input type="radio"/> 0
M	Other ( <i>specify</i> ) _____	<input type="radio"/> 1	<input type="radio"/> 0

[IF SC1=1]

**C3. Since the start of COVID-19 in early 2020, how often have you participated in training or other professional development to support your coaching? *Mark one only***

- <sup>0</sup>Never
- <sup>1</sup>Once or twice
- <sup>2</sup>Three to four times
- <sup>3</sup>More than four times



## **D. Conclusion**

**D1. Thank you for your participation in this survey. Please provide the mailing address to where we should send your \$20 thank you Visa gift card. Please note that we may reach out to you to invite you to participate in a 45-minute telephone interview so we can learn more about your experiences. Participation in such an interview would be completely voluntary.**

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Street Address Line 1: \_\_\_\_\_  
Street Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_

I do not wish to receive a Visa gift card

**Thank you for completing the SCOPE Coach Survey.  
END**