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**ADMINISTRATOR AND TEACHER COVID-19 SUPPLEMENTAL SURVEY QUESTIONS**

The purpose of additional COVID-19 related survey questions is to capture information about how center and classroom programming, as well as administrator and teacher functioning, may have changed due to the COVID-19 pandemic, if there is a need to contextualize findings from the impact evaluation and process study. This instrument is a placeholder that would be collected – as part of the administrator and/or teacher surveys or as part of a separate round of surveys – depending on the circumstances surrounding the COVID-19 pandemic (e.g., a substantial number of participating centers close at some point during the study and/or the landscaping and recruitment process suggests great variation across centers in when and how they close down and open back up). There is also the possibility that we may need to change the mode of data collection for these supplemental items to be collected via phone interviews depending on the circumstances surrounding the COVID-19 pandemic.

# Introduction

Thank you for participating in the Variations in Implementation of Quality Interventions (VIQI) Project! As part of this study, we would like you to answer some questions about yourself and your experiences as [a teacher/an administrator or director of early care and education]. This information is crucial to helping us understand how the COVID-19 pandemic may have affected center and classroom programming in early care and education settings.

Your participation is completely voluntary, and you may skip any questions you do not wish to answer. You may stop the survey at any time. Your responses to these questions will be kept private to the extent permitted by law and will not be shared with your supervisor or other staff. There are no direct benefits to you for participating. Participation does not involve any risks other than what you would encounter in daily life. There is a small risk that your information could be lost, stolen, or misused, even though we follow strict rules to protect your information.  The study team will follow strict procedures to protect your responses, and your responses will only be used for research and program improvement purposes. Your responses will be stored in password protected computer files and in locked research facilities. The data will be used only by the research team and and other researchers bound by the same security requirements described here. We also may share de-identified responses with researchers looking at other education research topics who agree that they will protect your information.

Please complete this questionnaire within the next [X] days. [*If PAPER COPY, INCLUDE:* Once complete, please [send it back to ADDRESS].] The questionnaire will take approximately 36 minutes in total to complete. If you have any questions, please contact your project liaison at [PHONE] or [email].

Thank you!

*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 number for this information collection is 0970-0508 and the expiration date is XX/XX/XXXX.* *Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to [Contractor Contact Name]; [Contractor Contact Address].*

*The following categories and questions are example items we might add to administrator and/or teacher surveys or collect as a separate round of surveys depending on the circumstances surrounding the COVID-19 pandemic and its effect on participating centers in the VIQI impact evaluation and process study. A subset of items would be used to ensure that the total number of questions takes around 15 minutes per respondent.*

**Potential Administrator Survey Supplemental Questions**

***Example questions related to number of classrooms and classroom size***

1. Has enrollment changed in your classrooms serving 3- and/or 4-year-olds since prior to the pandemic?
	1. Yes, it has increased [SKIP XX]
	2. Yes, it has decreased [GO TO X]
	3. No, enrollment has not changed [SKIP XX]
	4. Not sure [SKIP XX]
2. Compared to prior to the pandemic, what percentage of children have disenrolled in your classrooms serving 3- and/or 4-year-olds?
	1. 0
	2. 1-25%
	3. 26-50%
	4. 51-75%
	5. 76-100%
3. Are you serving different populations of children/families in your classrooms serving 3- and/or 4-year-olds than you were before the pandemic?
	1. Yes [GO TO X]
	2. No [SKIP XX]
	3. Not sure [SKIP XX]
4. How are the populations of children/families in your classrooms serving 3- and/or 4-year-olds different due to the pandemic?
5. Have you changed the size or composition of any of your classrooms serving 3- and/or 4-year-olds due to the pandemic?
	1. Yes [GO TO X]
	2. No [SKIP XX]
	3. Not sure [SKIP XX]
6. How has the size or composition of any of your classrooms serving 3- and/or 4-year-olds changed? (select all that apply)
	1. Smaller class sizes
	2. Fewer classrooms
	3. More classrooms
	4. Other (describe)
7. Why did you make these changes to the size or composition of the 3’s and 4’s classrooms? (select all that apply)
	1. Lower enrollment
	2. Higher enrollment
	3. Fewer teachers
	4. Lack of space
	5. To promote social distancing
	6. Other (describe)
8. How many classrooms do you currently have serving children ages 3 and 4 together?
	1. Response options: 0 to 15
9. How many children are currently enrolled in classrooms serving children ages 3 and 4 together?
10. Prior to the pandemic (i.e., March 2020), how many classrooms did you have serving children ages 3 and 4 together?
	1. Response options: 0 to 25
11. How many classrooms do you currently have serving only 4-year-old children?
	1. Response options: 0 to 25
12. How many children are currently enrolled in classrooms serving only 4-year-old children?
13. Prior to the pandemic (i.e., March 2020), how many classrooms did you have serving only 4-year-old children?
	1. Response options: 0 to 25

***Example questions related to center child demographics***

1. What is the approximate percentage of children currentlybeing served who are from low-income families?
	1. How do you define low income?
	2. The percentage of children from low-income families currently being served is \_\_\_\_\_\_ compared to what it was prior to the pandemic.
		1. Higher
		2. Lower
		3. About the same
		4. Not sure
2. What is the approximate percentage of children currentlybeing served who have special needs?
	1. How do you define special needs?
3. What is the approximate percentage of children currently being served who are:
	1. Hispanic or Latino?
	2. African American/Black?
	3. White?
	4. Asian?
	5. Other?
4. What is the approximate percentage of children currently being served who speak a language other than English at home?

***Example questions related to center operations in a prior school year [e.g., 2019-2020 or 2020-2021]***

1. [At some point from March to August 2020/during school year 2020-2021], did your center close its doors completely (no children in the classroom, no remote teaching, staff not working from home) at some point from March to August 2020 due to COVID-19?
	1. Yes
	2. No
	3. Not sure
2. [At some point from March to August 2020/during school year 2020-2021], did your center ever close its doors but allow staff to work due to COVID-19?
	1. Yes
	2. No
	3. Not sure
3. [At some point from March to August 2020/during school year 2020-2021], did your center ever close for some in-person operations (e.g., educational programming for children) but not others (e.g., support services for families, like food distribution) due to COVID-19?
	1. Yes
	2. No
	3. Not sure
4. [At some point from March to August 2020/during school year 2020-2021], did your center ever close its doors for all children **except** children of essential workers due to COVID-19?
	1. Yes
	2. No
	3. Not sure
5. [At some point from March to August 2020/during school year 2020-2021], did your center conduct remote learning (e.g., conduct virtual lessons/activities, such as morning meeting/circle time) with families of children enrolled in classrooms serving 3- to 5-year-olds?
	1. Yes
	2. No
	3. Not sure
6. [At some point from March to August 2020/during school year 2020-2021], did your center ever reopen to all families enrolled in classrooms serving 3- to 5-year-olds?
	1. Yes
	2. No
	3. We never closed
	4. Not sure
7. How many hours of care do your classrooms serving 3- to 5-year-olds provide in a day? About how much of that time is typically instructional time?

***Example questions related to center operations in current school year [2021-2022]***

1. [At some point between September 2021 until now], has your center closed its doors or some aspect of its operation due to COVID-19?
	1. Yes [GO TO X]
	2. No [SKIP SECTION]
2. [At some point between September 2021 until now], did you center close its doors completely (no children in the classroom, no remote teaching, staff not working from home) due to COVID-19?
	1. Yes [GO TO X]
	2. No [GO TO X]
3. What date did your center close its doors completely?
4. [At some point between September 2021 until now], did your center ever close its doors but allow staff to work remotely due to COVID-19?
	1. Yes [GO TO X]
	2. No [GO TO X]
5. What date did your center close its doors but allow staff to work remotely?
6. [at some point between September 2021 until now], did your center ever close some in-person operations (e.g., educational programming for children) but not others (e.g., support services for families, like food distribution) due to COVID-19?
	1. Yes
	2. No
	3. Not sure
7. What date did your center close some in-person operations but not others?
8. [At some point between September 2021 until now], did your center ever close its doors for all children except children of essential workers due to COVID-19?
	1. Yes
	2. No
	3. Not sure
9. What date did your center close its doors for all children except children of essential workers?
10. [At some point between September 2021 until now], did your center conduct remote learning (e.g., conduct virtual lessons/activities, such as morning meeting/circle time) with families of children enrolled in classrooms serving 3- to 5-year-olds?
	1. Yes
	2. No
	3. Not sure
11. What date did your center begin conducting remote learning with families of children enrolled in classrooms serving 3- to 5-year-olds?
12. [At some point between September 2021 until now], did your center ever reopen to all families enrolled in classrooms serving 3- to 5-year-olds?
	1. Yes
	2. No
	3. We never closed
	4. Not sure
13. What date did your center reopen to all families enrolled in classrooms serving 3- to 5-year-olds?
14. How many hours of care do your classrooms serving 3- to 5-year-olds provide in a day? About how much of that time is typically instructional time?
15. Have you made any changes at your center due to COVID-19? (select all that apply)
	1. Staggered schedules so there are smaller classroom sizes (e.g. part-day programming)
	2. Rearranged the structure of classrooms so they are larger and there can be 6+ feet between people
	3. Moved more classes to be held outside
	4. Created one-way hallways
	5. Increased cleaning and disinfecting
	6. Required more frequent handwashing
	7. Required staff and visitors to wear face masks
	8. Required children to wear face masks
	9. Regularly screen staff for potential COVID-19 symptoms
	10. Regularly screen children for potential COVID-19 symptoms
	11. Reduced the number of visitors allowed inside
	12. Other (please specify)
16. Which best describes operations at your center today?
	1. My center is open and running with no significant differences from before the pandemic
	2. My center is open but is serving fewer children than normal
	3. My center is open but its purpose has changed - it now primarily serves children from essential workers' families
	4. My center is open but only for providing families support services (e.g., food distribution) and not for educational programming
	5. My center is closed and transitioned to working remotely
	6. My center has closed down completely
	7. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
17. Do you and your staff going into your center have adequate personal protective equipment (PPE – for example, face masks, gloves)?
	1. Yes
	2. No
18. Has your program received additional funding and/or support in response to COVID-19?
	1. Yes [GO TO X-X]
	2. No [SKIP X]
19. What type of funding and/or support? *Select all that apply.*
	1. Federal grant
	2. State grant
	3. Funding from private organization(s) and/or individuals
	4. In-kind support (e.g., classroom resources, consulting/technical assistance services)
	5. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
20. How is your program using these additional funds? *Select all that apply.*
	1. To pay teachers
	2. To pay center staff other than teachers
	3. To provide families with additional supports
	4. To keep up center operations (e.g. rent, utilities, administrative expenses)
	5. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Example questions about other factors related to COVID-19***

1. Have you changed class schedules to promote social distancing (e.g., by staggering schedules for different groups)?
	1. Yes (describe)
	2. No
2. Are you allowing external visitors in classrooms?
	1. Yes [GO TO X]
	2. No [SKIP TO X]
3. Under what conditions are you allowing external visitors in classrooms?
4. What guidance are you following regarding your early care and education programming due to COVID-19? (select all that apply)
	1. State mandates
	2. CDC guidelines
	3. Other (describe)
5. Are you experiencing any challenges related to teacher retention or turnover due to COVID-19?
6. Have you had to do any of the following? (select all that apply)
	1. Terminate teacher(s)
	2. Furlough teacher(s)
	3. Reduce the hours of teacher(s)
7. Have you had any teachers change their employment status terminate their employment because of COVID-19?
	1. Yes, one or more teachers terminated their employment
	2. Yes, one or more teachers took leave (e.g., sick leave, extended family leave)
	3. No
8. Have you had any teachers terminate their employment because of COVID-19?
	1. Yes
	2. No
9. Are you worried about the current or future sustainability of your center?
10. What are you most worried about?
11. What are you primary federal/state/local funding streams?
12. Have any of these funding streams been affected by COVID-19?
	1. Yes
	2. No
13. If yes, how?
14. Do you currently/did you receive a CARES Act small business loan, Paycheck Protection Program (PPP) loan, or emergency funding related to COVID-19?
	1. Yes
	2. No
	3. Not sure
15. In what ways, if at all, has COVID-19 affected your center's staffing? *Select all that apply.*
	1. We had to lay off one or more staff members
	2. One or more staff members left voluntarily
	3. We had to reduce the working hours of one or more staff members
	4. We have been unable to hire new staff members because of COVID-19
	5. We had to change the work responsibilities of one or more staff members
	6. We made another change to our workforce (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	7. COVID-19 has not affected my center's staffing in any way
16. Has COVID-19 affected the (physical) health of anyone in your early care and education center community?[[1]](#footnote-2) Check all that apply.
	1. Yes, COVID-19 has affected the (physical) health of staff and/or their families at my center [GO TO X]
	2. Yes, COVID-9=19 has affected the (physical) health of children and/or families at my center [GO TO X]
	3. No, as far as I know, COVID-19 has not affected the (physical) health of my staff (or their families) or the health of children and families at my center [SKIP ITEMS ABOUT COVID-19 AFFECTING HEALTH OF STAFF OR CHILDREN/FAMILIES]
17. How, if at all, has COVID-19 affected the health of staff at your center? *Select all that apply.*

Due to COVID-19 or suspected COVID-19...

* 1. Some staff have gotten ill
	2. Families of some staff have gotten ill
	3. One or more staff members have passed away
	4. A family member of one or more staff members has passed away
	5. As far as I know, COVID-19 has not affected the health of staff (or their families) at my center
1. How has COVID-19 affected the health of children and families at your center? *Select all that apply.* Due to COVID-19 or suspected COVID-19...
	1. Some children and/or families have gotten ill
	2. Families of children at my center have gotten ill
	3. One or more children have passed away
	4. One or more family members of children at my center have passed away
	5. COVID-19 has not affected the health of children or families at my center
	6. I don't know

***Example questions about working with/communicating with families***

1. How do staff at your center communicate with children and parents currently? *Select all that apply.*
	1. Virtual contact, such as an online chatroom, app, or email - with multiple families at once
	2. Virtual contact, such as an online classroom, app or email - one-on-one contact with families
	3. By updates on a center or classroom website
	4. Phone calls or texts
	5. Social media
	6. In-person contact
	7. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. How are staff delivering instruction currently? *Select all that apply.*
	1. In-person at center
	2. Pre-recorded video lessons/activities
	3. Providing lessons/activities live, in virtual classrooms (e.g., Zoom, Google classrooms, Instagram) led by your staff
	4. Sending links to online lessons/activities led by people not from your center
	5. Mailing/delivering paper worksheets or packets of lessons/activities for parents to conduct with children
	6. Emailing worksheets or packets of lessons/activities for parents to conduct with children
	7. Staff are not delivering instruction
	8. Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. About what percent of the families in your center typically participate in the remote instruction your center is providing currently?
	1. None
	2. About 25% of families
	3. About 50% of families
	4. About 75% of families or more
	5. I don't know
4. [During the time you were closed/over prespecified period], how are staff at your center communicating with children and parents, if at all? *Select all that apply.*
	1. Virtual contact, such as an online chatroom, app, or email - with multiple families at once
	2. Virtual contact, such as an online classroom, app or email - one-on-one contact with families
	3. By updates on a center or classroom website
	4. Phone calls or texts
	5. Social media
	6. In-person contact
	7. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	8. We have not been communicating with children or parents during this time
5. [During the time you were closed/over prespecified period], how are staff delivering instruction? *Select all that apply.*
	1. In-person at center
	2. Pre-recorded video lessons/activities
	3. Providing lessons/activities live, in virtual classrooms (e.g., Zoom, Google classrooms, Instagram) led by your staff
	4. Sending links to online lessons/activities led by people not from your center
	5. Mailing/delivering paper worksheets or packets of lessons/activities for parents to conduct with children
	6. Emailing worksheets or packets of lessons/activities for parents to conduct with children
	7. Staff are not delivering instruction
	8. Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. [During the time you were closed/over prespecified period], about what percent of the families in your center typically participate in the remote instruction your center is providing?
	1. None
	2. About 25% of families
	3. About 50% of families
	4. About 75% of families or more
	5. I don't know
7. [During the time you were closed/over prespecified period], how are remote instruction and learning materials delivered to children with non-English speaking families?
	1. In English
	2. In the families' home languages
	3. Some instruction and/or materials are in English, and some instruction and/or materials are in the families' home language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Have staff experienced any of the following challenges with remote teaching? *Select all that apply.*
	1. Technology challenges for staff - e.g., learning a new virtual teaching platform, having stable internet connection
	2. Technology challenges for families - e.g., families learning a new virtual teaching platform, remembering to mute themselves, having stable internet connection
	3. Challenges engaging children remotely
	4. Challenges getting families to participate in remote teaching
	5. Challenges thinking up activities to do remotely
	6. Other challenges (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	7. No known challenges
9. How often are staff required to communicate with children and families?
	1. No requirement
	2. A few times per month (less than every other week)
	3. Every other week
	4. Once per week
	5. Twice per week
	6. Three times per week
	7. Four times per week
	8. Five times per week
	9. No requirement
	10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. How are you tracking or monitoring staff's delivery of remote instruction or distribution of family activities? *Select all that apply.*
	1. I am not tracking/monitoring staff delivery of remote instruction or distribution of family activities.
	2. Staff include director(s) on communication with families
	3. Formal check-ins during staff meetings or one-on-one meetings with staff
	4. Informal check-ins with staff
	5. Through an app (such as ClassDojo, Seesaw, Classtag, Bloomz, etc.)
	6. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. Who is responsible for developing remote learning curriculum for children? *Select all that apply.*
	1. Teachers
	2. Center directors
	3. Education coordinator
	4. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. What supports has your center provided staff on teaching during the COVID-19 pandemic (e.g., teaching remotely, supporting families and children in the time of a pandemic)? Select all that apply.
	1. Paid in-service days
	2. Common planning time with teaching teams/other teachers
	3. Guidance/support from center director or other center leadership
	4. Online supports (e.g., virtual coaches, webinars), please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	5. Other support, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	6. We have not provided this kind of support
13. Are these supports being provided new?
	1. Yes, they are new this year
	2. Yes, they are new but in response to the pandemic
	3. No, we provided these supports prior to the pandemic
14. Have staff been provided with training on how to support students and families in the time of a pandemic (e.g., trauma-focused instruction, social-emotional learning)?
	1. Yes, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. No
15. Prior to the time when your center [closed or suspended typical programming due to COVID-19], did you have any concerns about suspected child abuse or neglect for any children at your center?
	1. Yes
	2. No
16. During the time when your [center closed or suspended typical programming due to COVID-19], did you make any reports of suspected child abuse or neglect for any children at your center?
	1. Yes
	2. No
17. During the time when your center [closed or suspended typical programming due to COVID-19], did the number of times you or any staff at your center made a report of suspected child abuse or neglect...
	1. Increase (compared to prior to the pandemic)
	2. Stay the same (compared to prior to the pandemic)
	3. Decrease (compared to prior to the pandemic)

***Example questions about administrator well-being***

1. Which describes your personal current work situation? (select all that apply)
	1. I am working remotely
	2. I am working physically at my center
2. How stressful was your job before COVID-19?
3. Response options: Not stressful 0 to very stressful 10
4. How stressful is your job during COVID-19 (that is, currently)?
5. Response options: Not stressful 0 to very stressful 10
6. How well are you coping with the stress of your job right now?
7. Response options: Not coping 0 to coping very well 10
8. Would you say that in general your health is…?
9. Excellent
10. Very good
11. Good
12. Fair
13. Poor
14. Have you had or suspected you had COVID-19 since March 1, 2020?
15. Yes [GO TO X]
16. No [SKIP X]
17. Have you recovered from your illness?
18. Yes - I have fully recovered
19. Yes - I have recovered but still have lingering symptoms (e.g., fatigue, hard to breath, heart issues, mental fog)
20. No - I am still sick
21. Have you had a family member or close friend die from COVID-19 since March 1, 2020?
	1. Yes
	2. No
	3. Not sure
22. To what extent do you feel like you understand the health recommendations for early care and education centers around COVID-19 (for example, social distancing guidelines)?
23. A lot
24. Somewhat
25. A little
26. Not at all
27. To what extent do you personally agree with the health recommendations for COVID-19 (for example, social distancing guidelines)?
28. A lot
29. Somewhat
30. A little
31. Not at all
32. How has the COVID-19 pandemic affected your personal day-to-day wellbeing? PLEASE SELECT ONE RESPONSE PER ROW.
 How often have you...

| **How often have you…** | **Rarely or none of the time (less than 1 day per week)** | **Some or a little of the time (1-2 days per week)** | **Occasionally or a moderate amount of time (3-4 days)** | **All of the time (5-7 days)** |
| --- | --- | --- | --- | --- |
| **(a) Been bothered by things that usually don’t bother you** |  |  |  |  |
| **(b) Had trouble keeping your mind on what you were doing** |  |  |  |  |
| **(c) Felt depressed** |  |  |  |  |
| **(d) Felt that everything you did was an effort** |  |  |  |  |
| **(e) Felt hopeful about the future** |  |  |  |  |
| **(f) Felt fearful** |  |  |  |  |
| **(g) Had restless sleep** |  |  |  |  |
| **(h) Felt happy** |  |  |  |  |
| **(i) Felt lonely** |  |  |  |  |
| **(j) Felt you could not “get going”** |  |  |  |  |

*Radloff (1977)*

**Potential Teacher Survey Supplemental Questions**

***Example questions about child enrollment and attendance in the classroom***

1. How many hours of care does your classroom provide in a day? About how much of that time is typically instructional time?
2. As of today, how many children are enrolled in your classroom?
3. How does this number compare to the number of children enrolled in your classroom last year/before the pandemic?
	1. It is smaller (GO TO X)
	2. It is larger (GO TO X)
	3. It is about the same
	4. I did not work at this center
	5. I did not teach in a classroom serving 3s and 4s
4. Why is your class size different this year?
5. How has children’s attendance changed due to COVID-19?
6. What percentage of children are attending consistently?
	1. 0
	2. 1-25%
	3. 26-50%
	4. 51-75%
	5. 76-100%
7. Is it a particular subset of children that are not attending regularly?
8. Yes
9. No
10. Not sure
11. How does this compare to child attendance in your classroom last year?
	1. Children are generally attending less often
	2. Children are generally attending more often
	3. Children are generally attending about the same
	4. Not sure
12. What factors do you think are affecting attendance?

***Example questions about teaching and instruction during the time when the center may have closed down during the current school year (2021-2022)***

1. As of today, which of the following learning opportunities are you providing to this class? Select all that apply.
	1. In-person learning
	2. Remote/virtual/online learning [GO TO X]
	3. Distributing worksheets or packets of lessons/activities for parents to conduct with children
	4. Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What type of activities have you sent to or done with families virtually? Select all that apply.
	1. Conducted a virtual, live read aloud
	2. Conducted virtual, live circle time or morning meeting time
	3. Conducted another type of virtual, live activity/lesson
	4. Conducted virtual meetings with individual children/families
	5. Pre-recorded video of a read aloud
	6. Pre-recorded video of a circle time or morning meeting time
	7. Pre-recorded video of another type of activity/lesson
3. Which of the following activities are required for families engaging in remote/virtual/online learning? Select all that apply.
	1. Access the internet
	2. Use a computer or a tablet
	3. None of the above
4. What is the content area of these remote activities? Select all that apply.
	1. Language and literacy
	2. Mathematics
	3. Social studies
	4. Science
	5. Music
	6. Art
	7. Dance/creative movement
	8. Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Are these remote activities from or related to a curriculum? Select all that apply.
	1. Yes, activities were related specifically to Creative Curriculum
	2. Yes, activities were related specifically to Connect4Learning
	3. Yes, activities were related specifically to another curriculum – please specify which curriculum: \_\_\_\_\_\_\_\_\_\_
	4. No, the activities were not related to a curriculum
6. How often have you provided these remote activities during the time when your center [closed/suspended typical programming] due to COVID-19?
	1. One time
	2. A few times
	3. Once a week
	4. A few times a week
7. On average, what percent of the families in your class participated in these remote activities?
	1. None
	2. About 25% of my class
	3. About 50% of my class
	4. About 75% of my class or more
	5. Not sure
8. How much time [do/did] you spend on remote teaching each day, including time spent preparing to teach during the time when your center [closed/suspended typical programming] due to COVID-19?
	1. Less than 1 hour
	2. 1 – 2 hours
	3. 2 – 4 hours
	4. 4 – 6 hours
	5. Over 6 hours
9. Do you currently experience any of the following challenges with remote teaching? Select all that apply.
	1. Technology challenges on your end – e.g., learning a new virtual teaching platform, having a stable wi-fi connection
	2. Technology challenges on families’ end – e.g., families learning a new virtual teaching platform, knowing to mute themselves, having a stable wi-fi connection
	3. Challenges engaging children remotely
	4. Challenges getting families to participate in remote teaching
	5. Challenges thinking of activities to do remotely
	6. Other challenges – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. In what ways are you interacting with the families of the children in this class? Select all that apply.
	1. In-person contact
	2. Virtual contact, such as an online chatroom, app, or email
	3. By updates on a center or classroom website
	4. Phone calls or texts
	5. Social media (e.g., Facebook, Instagram)
11. Have your teaching responsibilities changed due to the COVID-19 pandemic? Select one.
	1. They have not changed – I am still responsible for planning and teaching children in a classroom
	2. I am teaching remotely, but am responsible for determining the curriculum/planning
	3. The center has planned and provided all activities and I am only responsible for distributing activities
	4. I have taken on new responsibilities since the COVID-19 pandemic [GO TO X]
12. What new responsibilities have you taken on since the COVID-19 pandemic?
	1. Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Example questions about other factors related to COVID-19***

1. When you go into your center since the COVID-19 pandemic, have you been given adequate personal protective equipment (PPE), for example, face masks, gloves?
	1. Yes
	2. No
2. How comfortable do you feel about going into your center amid the COVID-19 pandemic?
3. I feel very comfortable.
4. I feel somewhat comfortable.
5. I feel somewhat uncomfortable.
6. I feel very uncomfortable.
7. Prior to [time period], did you have any concerns about suspected child abuse or neglect for any children in your classroom?
	1. Yes
	2. No
8. During the time when your center [closed/suspended typical programming due to COVID-19], did you have any concerns about suspected child abuse or neglect for any children in your classroom?
	1. Yes
	2. No
9. During the time when your center [closed/suspended typical programming due to COVID-19], did you make any reports of suspected child abuse or neglect for any children in your classroom?
	1. Yes [GO TO x]
	2. No
10. During the time when your center [closed/suspended typical programming due to COVID-19], did the number of times you made a report of suspected child abuse or neglect…
	1. Increase (compared to prior to the time when your center [closed/suspended typical programming] due to COVID-19)
	2. Stay the same (compared to prior to the time when your center [closed/suspended typical programming] due to COVID-19)
	3. Decrease (compared to prior to the time when your center [closed/suspended typical programming] due to COVID-19)

***Example questions about teacher well-being***

1. Which describes your personal current work situation? (select all that apply)
	1. I am working remotely
	2. I am working physically at my center
2. How stressful was your job before COVID-19?
	1. Response options: Not stressful 0 to very stressful 10
3. How stressful is your job during COVID-19 (that is, currently)?
	1. Response options: Not stressful 0 to very stressful 10
4. How well are you coping with the stress of your job right now?
	1. Response options: Not coping 0 to coping very well 10
5. Would you say that in general your health is…?
	1. Excellent
	2. Very good
	3. Good
	4. Fair
	5. Poor
6. Have you had or suspected you had COVID-19 since March 1, 2020?
	1. Yes [GO TO X]
	2. No [SKIP X]
7. Have you recovered from your illness?
	1. Yes - I have fully recovered
	2. Yes - I have recovered but still have lingering symptoms (e.g., fatigue, hard to breath, heart issues, mental fog)
	3. No - I am still sick
8. Have you had a family member or close friend die from COVID-19 since March 1, 2020?
	1. Yes
	2. No
	3. Not sure
9. To what extent do you feel like you understand the health recommendations for early care and education centers around COVID-19 (for example, social distancing guidelines)?
	1. A lot
	2. Somewhat
	3. A little
	4. Not at all
10. To what extent do you personally agree with the health recommendations for COVID-19 (for example, social distancing guidelines)?
	1. A lot
	2. Somewhat
	3. A little
	4. Not at all
11. How has the COVID-19 pandemic affected your personal day-to-day wellbeing? PLEASE SELECT ONE RESPONSE PER ROW.
 How often have you...

| **How often have you…** | **Rarely or none of the time (less than 1 day per week)** | **Some or a little of the time (1-2 days per week)** | **Occasionally or a moderate amount of time (3-4 days)** | **All of the time (5-7 days)** |
| --- | --- | --- | --- | --- |
| **(a) Been bothered by things that usually don’t bother you** |  |  |  |  |
| **(b) Had trouble keeping your mind on what you were doing** |  |  |  |  |
| **(c) Felt depressed** |  |  |  |  |
| **(d) Felt that everything you did was an effort** |  |  |  |  |
| **(e) Felt hopeful about the future** |  |  |  |  |
| **(f) Felt fearful** |  |  |  |  |
| **(g) Had restless sleep** |  |  |  |  |
| **(h) Felt happy** |  |  |  |  |
| **(i) Felt lonely** |  |  |  |  |
| **(j) Felt you could not “get going”** |  |  |  |  |

*Radloff (1977)*

1. If yes is selected or perhaps for all centers, we will provide a list of support resources (e.g., crisis text line: <https://www.crisistextline.org/>) [↑](#footnote-ref-2)