Study of Disability Services and Inclusion in Head Start

Attachment G OPRE Responses to Comments

Table 1 List for Attachment G: OPRE Responses to Comments

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COMMENTS AND OPRE RESPONSES: NATIONAL HEAD START ASSOCIATION

The National Head Start Association (NHSA) provided comments (September 14, 2021) on the proposed information collection, the Study of Disability Services Coordinators and Inclusion in Head Start, from the Federal Register (Volume 86, Number 138, page 38722, Thursday, July 22, 2021).

OPRE response to comments:

1. “NHSA would like to see the goal of the study to be expanded to include releasing practical findings to the HS/EHS field. NHSA requests “that the study goals and surveys be amended to ensure that the information collected, and results reported are of practical utility to HS/EHS practitioners.”

We appreciate this input from the NHSA regarding the prospective utilization of the project data. ACF is committed to ensuring that its research and evaluation work is disseminated to a range of relevant audiences throughout the course of project activities. Dissemination is an emphasized goal for every OPRE project. OPRE will make descriptive findings from this study available to the Office of Head Start (OHS), the Training and Technical Assistance system, and to all Head Start and Early Head Start (HS/EHS) directors and staff. We anticipate the data will inform the development of both policy and practitioner guidance. The Training and Technical Assistance centers should find a range of practical information to share with programs. Results are expected to fuel active discussions about the issues of the DSC role and solutions that DSCs and HS have developed to address local and regional challenges.

1. **Recommendations to reduce burden and/or increase the value** of the findings of the study.
   1. ***Eliminate unnecessary background questions***
      1. OPRE has eliminated the questions on gender, English fluency, and speaking additional languages in both the Phase 1 and 2 surveys. Questions on language have been adjusted to address only the use of languages for DSC work (e.g., working with families, receiving training).
   2. ***Relieve burden by providing “an outline”*** *… “in advance so respondents can review questions before inputting responses.”*
      1. OPRE will include the list of modules for each respective survey in the introduction letter along with a link to the OMB page that will host the final survey instruments. We will also include, in recruitment materials and instructions, that the respondent can confer with colleagues.
   3. ***“Address differences in roles and responsibilities*** *for Head Start and Early Head Start programs and also programs that do not have a dedicated DSC.”*
      1. The EHS/HS differentiation. Phase 2 DSC survey asks a separate set of questions to the DSC, depending on whether they are working with infants/toddlers (EHS) or preschoolers (HS) or both. Through these questions, it should be possible to delineate the roles and responsibilities for HS and EHS DSCs.

Formal and non-formal DSCs. Questions in the Phase 1 Director Survey have been clarified to gather names of formally titled DSCs and, if no titled DSC, the names and contact info for staff responsible for those roles and responsibilities.

* 1. ***Responsibility of the LEA*** *include survey items that “specifically detail what both parties are responsible for (including financial responsibility) or what should be included in the LEA agreement. We suggest questions be developed that outline obligations and which party is responsible for the task.”*
     1. The Phase 2 survey includes items asking the DSC to respond about topics included within the Memorandum of Understanding (MOU) or Interagency Agreements (IAs) the program has with Part C and the LEA. The survey also asks about when/the agreement is revisited, how involved the DSC is in the agreement development, if the partners are meeting the needs of the programs children, and if the program was able to meet with the partner when needed. Increasing the level of detail and depth of the data collection on the responsibilities of Part C and the LEA, as NHSA requests, would require a different methodological design and would significantly increase the burden to respondents. It is expected that the study will result in sufficient information to inform policy, training and technical assistance. In addition, the information to be gathered on MOU/IAs may inform future research topics, where details about partner responsibilities could be studied in greater depth.

1. **Specific edits and recommendations** **for surveys**
   1. Phase 1 – Survey of EHS/HS Program Directors
      1. *“Module 2 – DSCINFO 04-e the ONLY is confusing, it doesn’t allow for all programs to present their options. Suggest rephrasing to ask if the DSC has other responsibilities in the program.”*
         1. OPRE has rephrased the original survey item from “Does [Name\_1] work in your program as a DSC “only” when the program is open?” to “How many months per year does [Name\_1] work in your program as a DSC?” to allow for all programs to present their options.
      2. *Module 7 – Remove the Family Service Worker Coordinator “Contact” Information request items.*
         1. OPRE agrees with NHSA and has removed has these items from the survey.
   2. Phase 2 – Survey of EHS/HS Disability Services Coordinators
      1. *Module 2 Section 1 – “Move the entire section to the program directors’ survey. A DSC may not have complete knowledge of ERSEA practices as it relates to how the program identifies, recruits, screens, and refers for evaluation, children with disabilities.”*
         1. OPRE has engaged with stakeholders that include DSCs from multiple Head Start regions at various points in the survey creation and has conducted cognitive tests of the survey. At no point in any of these engagements have we heard concerns that these questions would be challenging for the DSC to complete. Because we have not heard this feedback from the DSCs we have engaged we will leave these questions in the surveys. The questions are shaped to allow the DSC to tell us if these responsibilities are assigned to others or if they don’t know about those responsibilities.
   3. *Allow directors to upload spreadsheets for any large data requests.* 
      1. The survey does not request information that would require a large data presentation or a spreadsheet.
   4. *NHSA requests that the term “coach” is included in any response set that includes types of program staff.* 
      1. Where appropriate, we incorporated “coach/trainer” in as potential staff for fulfilling DSC roles and responsibilities; in addition, we included “coach/trainer (on topics unrelated to disabilities)” as a potential role that a DSC staff could fill outside of their DSC responsibilities.

**COMMENTS AND OPRE RESPONSES: START EARLY**

Start Early provided a set of comments regarding the study (September 20, 2021). Ms. Rauner noted several areas where her organization endorsed the study plan. This includes survey questions on cultural responsiveness, professional development needs for culturally responsive training, and communications with families. The Start Early program also noted several areas where they recommended adjustment of questions and dissemination.

OPRE response to comments:

1. **Instructions to Respondents.** Start Early recommended clearly confirming for respondents that information provided would not impact their ACF funding and would not be shared with supervisors.
   1. OPRE has expanded on the sentences in the Informed Consent forms confirming that responses will not be used for monitoring purposes and will not be shared with supervisors.
2. **Family Communication**. Start Early recommended that a separate survey be developed, or at least a parallel study be developed, that would capture family voices about their experiences with HS and EHS disabilities services.
   1. At this time, the DSC Study gathers program level and DSC-level data about communications with families. Adding an additional survey at this date would be prohibitive in cost and in time delays. It is expected that the DSC Study data will be shared with programs and families, and active discussions will occur to identify policy and practice guidance. In addition, this information is expected to spark future research ideas, and OPRE has taken close note of this suggestion from Start Early to explore more deeply families’ voices in conjunction with program voices regarding disabilities and early childhood services.
3. **Sharing Child Data**. Start Early recommended the addition of a question regarding how easy/hard it is to share child data with partner organizations.
   1. The DSC Survey will ask about challenges sharing and receiving child data with LEA, PART C, and community service providers. In addition to the items already in the survey about challenges with receiving data and reports from LEA and service providers, we added questions about the challenges with sharing data and reports and other information from the EHS/HS program (TRANS 08 h and i; TRANS 015 h and i).
4. **Community Collaboration: Summary Reports.** Start Early recommendedthat, if possible, summary reports be shared.
   1. **At program, state and community level**. The study is being designed so that information may be reported at the national and regional level, when possible while maintaining privacy of programs. Summary reports of the overall dataset will be made available, as will briefs on key priority topics. These will be shared through OHS and OPRE channels, with regional offices and ACF’s ECE Training and Technical Assistance system.
   2. **Inter**-**agency** **level.** We have worked in partnership with Department of Education (Ed) during the development of the survey instruments. The suggestions provided by Start Early, in particular the highlighted questions that they recommend for sharing with ED, will be incorporated into our dissemination plan.
   3. **Case Study reports from interviews**.It is essential that the interview data be carefully utilized. As it will be a small sample of respondents, privacy will be a priority and may limit dissemination options. Once the interview data is available for analyses, OPRE will explore possibilities for case study reports. In addition, this idea will be considered for future research projects.