Survey to Inform Office of Head Start Data Collection Activities and Training and Technical Assistance

Survey Overview and Instructions

The purpose of this survey is twofold. First, it is to inform proposed changes to Office of Head Start (OHS) data collection activities. Second, it is to inform training and technical assistance supports provided by OHS related to vaccines and supporting families accessing certain benefits. Your agency was randomly selected to respond to this survey. Your responses will be kept anonymous and will not be used to assess compliance or to issue monitoring findings and will have no impact on monitoring results. Both the survey and all individual questions are voluntary and there are no negative repercussions for not responding. The results will not be published.

The survey covers three topic areas. The topics covered are not directly related to one another, so each topic area has a separate link in case you prefer someone else in your program to submit responses for a particular part of the survey.

- Data collection activities: This part of the survey invites your feedback on new questions OHS plans to collect from all Head Start grant recipients (3 questions) – {SURVEY LINK}.
- Vaccination rates: This part of the survey aims to better understand your program's approach to collecting vaccination rates and associated challenges (9 to 11 questions) – {SURVEY LINK}.
- Accessing benefits: This part of the survey aims to better understand supports programs have in place to help families access certain benefits (3 questions) {SURVEY LINK}

Attached is a PDF version of the full survey in case you would like to review the questionnaire before submitting a response.

Multi-Grant Agencies: If you have multiple Head Start grants, please include all grants operated by your agency in your responses.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to inform improvements in guidance and assistance communicated and provided to Head Start grant recipients. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0531 and the expiration date is 07/31/2022. If you have any comments on this collection of information, please contact your program specialist *[contact info varies by grant recipient]*

Basic Agency Information

{Q1 and Q2 are repeated for each part of the survey}

- 1. Does your agency operate an American Indian and Alaska Native (AIAN) Head Start grant or Migrant and Seasonal Head Start (MSHS) grant?
 - Yes, an American Indian and Alaska Native Head Start (AIAN) Grant
 - Yes, a Migrant and Seasonal Head Start (MSHS) Grant
 - No / Not Applicable

{Skip Q2 if Q1 = AIAN or MSHS}

2. In what state or territory does your program provide services? If your program operates in multiple states, select the state from the list where most children are primarily enrolled.

Drop-down list

Feedback on Proposed New Information Collections

The Office of Head Start is planning to collect new data from all Head Start grantees. Below are the proposed new questions to provide your program an opportunity to provide feedback.

1.	We propose asking each Head Start grant to report the total number of Part C agencies within the program service area and the number of formal agreements with those agencies to coordinate services of children with disabilities through the Program Information Report (PIR). Do you have any comments or concerns with these two questions?
2.	We propose asking each Head Start grant to report a dollar amount for the "average benefits" provided for certain positions (i.e., classroom teachers, assistant teachers, home-based visitors, and family child care providers) through the PIR; this is similar to how average salary is requested. Benefits would be defined to include leave, supplemental pay, insurance, retirement and savings, and other legally required benefits (e.g., social security, disability, unemployment, workers compensation). Do you have any comments or concerns with this question?
3.	We propose asking each Head Start grant to report their Quality Rating and Improvement System (QRIS) participation and licensing status for each center operated by the program through the centers reporting screen in the Head Start Enterprise System (HSES). Do you have any comments or concerns with these two questions?

Vaccination Rates and Related Challenges

These questions are to better understand the approach to the collection of staff vaccination rates and general feedback to inform training and technical assistance related to vaccines. As a reminder, your responses will be kept anonymous and are not for the purpose of monitoring your program.

St	taff Vaccination Rates
1.	How many 1) staff and 2) contractors whose activities involve contact with or providing direct services to children and families are currently in your program (regardless of funding source)? a. <50 b. 51-100 c. 100-150 d. 151-200 e. More than 200
2.	Has your program collected the vaccination status of any of these staff and contractors? a. Yes i. For about what percent of these staff and contractors? Please indicate a percent between 1-100. You may provide an estimate. b. No, no vaccination status has been collected for any staff or contractors
{s	kip Q3 and Q4 if Q2 = b OR Q2ai < 50%}
3.	What is the vaccination status of staff and contractors whose activities involve contact with or providing direct services to children and families? You may provide estimates. a. Vaccination Status Not collected % {PRE-POPULATED WITH Q2ai RESPONSE} b. Fully vaccinated % c. Exempt from vaccination % d. Not vaccinated %
(Ask t	he following if Q2 = b or Q2ai < 90%}
4.	What are challenges with collecting vaccination rates for all staff and contractors?

Volunteer Vaccination Rates

5.	About	About how many volunteers are working in classrooms or directly with children?							
	a.	<50							
	b.	51-100							
	c.	100-150							
	d.	151-200							
	e.	lore than 200							
6.		ur program collected the vaccination status of these volunteers?							
	a.	a. Yes							
		i. For about what percent of these volunteers? You may provide an estimate.							
	b.	No, no vaccination status has been collected for any volunteers							
{sk	{skip Q7 and Q8 if Q76 = b or Q6ai < 50 percent}								
7.	What is	s the vaccination status of volunteers working in classrooms or directly with children? You							
		ovide estimates.							
		Vaccination Status Not collected							
	b.	Fully vaccinated %							
	c.	·							
	d.	Not vaccinated %							
{Ask th	e follow	ing if Q6 = b or Q6ai < 90%}							
8.	8. What are challenges with collecting vaccination rates for all volunteers?								
Relate	ed Chall	enges							
9.	9. What are the most pressing challenges the program is experiencing related to vaccine								
,,		ements or policies?							
L									
10		e Office of Head Start provided any guidance or policy related to vaccines that has been							
		eneficial to the program (e.g., useful for promoting public health safety)?							
	a.	Yes							
		i. Please describe what guidance or policy has been beneficial and how:							
	b.	No							

i.	Please describe why guidance or policy has not been beneficial:		
•	other comments to provide related to vaccinations for OHS consideration (e.g strategies that have worked in promoting vaccines, feedback on technical ed to vaccines)?		

Program Supports for Families Accessing Benefits

The following questions are on program supports for families to access certain benefits. Please consult your PFCE Managers in responding to the following set of questions. As mentioned earlier, if you have multiple grants, please include all grants operated by your agency in your response.

- 1. Did your program help families access any of the listed benefits below during the 2021-2022 program year? If yes, please check the benefits that apply:
 - 3rd stimulus check
 - Unemployment Insurance
 - Child Tax Credit
 - Child Care and Dependent Credit
 - Emergency Housing vouchers
 - Emergency Energy or Water Assistance
 - Broad Band Benefit
 - Rental Assistance
- 2. About how many families did your agency serve during the 2021-2022 Program Year?
 - a. <100 families
 - b. 100-200 families
 - c. 201-300 families
 - d. 300-500 families
 - e. More than 500 families

{Only the items the grantee indicated in Q1 are displayed in Q3}

3. We understand this may not be data you tracked throughout the year, but please provide a rough estimate of the percentage of all families served that your program helped to access the benefits listed below. If it is not possible to provide a rough estimate, then select "Do not know".

	1 - 25%	26% - 50%	51% - 75%	76% - 100%	Do not know
3rd stimulus check	0	0	0	0	0
Unemployment Insurance	0	0	0	0	0
Child Tax Credit	0	0	0	0	0
Child Care and Dependent Credit	0	0	0	0	0
Emergency Housing vouchers	0	0	0	0	0
Emergency Energy or Water Assistance	0	0	0	0	0
Broad Band Benefit	0	0	0	0	0
Rental Assistance	0	О	0	О	0