

HEAD START MANAGEMENT FELLOWS PROGRAM

Developed by:

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Head Start Management Fellows Program Follow-up Survey

Thank you for having participated in the Head Start Management Fellows (HSMF) Program, conducted by the UCLA Anderson School of Management. To help ensure the quality of our services, we ask that you complete the following feedback survey about the HSMF Program by reflecting on the program in its entirety and its outcomes. This brief survey is voluntary and all feedback will be kept private. To further protect your privacy, please refrain from including personally identifiable information in open-ended responses.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Through this information collection, we are gathering feedback to improve service delivery. Public reporting burden for this collection of information is estimated to average 10 minutes per respondent, 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. If you have any comments on this collection of information, please contact *[contact info to be added based on cohort]*.

A. Background Information

1. Approximately how many years have you been working in Head Start?
[Reviewer's note: Response options will be provided through a drop-down menu]
2. What is your primary role within your organization?
 - Director
 - Assistant Director / Associate Director
 - Manager / Coordinator
 - Chief Financial Officer
 - Other, please specify: _____
3. How many years have you served in this role?
 - Less than 1 year
 - 1 to 2 years
 - 3 to 4 years
 - 5 to 9 years
 - 10 or more years
4. What is your organization affiliation? (Check all that apply).
 - Head Start Grantee
 - Early Head Start Grantee
 - Migrant and Seasonal Head Start Grantee
 - American Indian Alaskan Native (AIAN) Head Start Grantee
5. Please select which region you work in:
 - Region 1
 - Region 2
 - Region 3
 - Region 4
 - Region 5
 - Region 6
 - Region 7
 - Region 8
 - Region 9
 - Region 10
 - Region 11 (American Indian and Alaska Native)
 - Region 12 (Migrant and Seasonal Head Start)
6. What type of community do you serve?
 - Rural
 - Suburban
 - Urban
7. What type of organization do you work for?
 - Community Action Agency (CAA) Or Community Action Partnership (CAP)

- Single Purpose Agency
- Local Government Agency
- Tribal Government
- Private/Public Non-Profit
- Private/Public For Profit
- Public School System
- Charter School
- Other:_____

B. Impact

8. As a result of participating in the UCLA Head Start Management Fellows Program, please indicate the extent to which you improved your *leadership* ability to do each of the following:

	A great deal	Quite a bit	Somewhat	Very little	Not at all
a. Lead and motivate teams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Diagnose organizational problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Adapt leadership styles to build commitment to goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Make decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Adopt a customer and service orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Adopt a results orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Adopt best practices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Have self-confidence to serve as an effective leader	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Create alliances, partnerships, and networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. As a result of participating in the UCLA Head Start Management Fellows Program, please indicate the extent to which you improved your **management** ability to do each of the following:

	A great deal	Quite a bit	Somewhat	Very little	Not at all
a. Think and plan strategically	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Monitor and evaluate projects and/or programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Manage change initiatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Strengthen and maintain alliances, partnerships, and networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Problem-solve and manage conflict	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Analyze data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. As a result of participating in this program, to what extent did you develop the skills needed to do each of the following?

	To a great extent	To a moderate extent	To a small extent	Not at all
a. Create a vision and identify strategies to guide teams and stakeholders towards that vision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Articulate your vision in a way that inspires and engages others for action	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Utilize the tools and frameworks learned to <i>solve business problems</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Utilize the tools and frameworks learned to <i>enhance personal performance.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

C. Involvement in the Field

11. Have you mentored anyone on leadership and/or management skills or practices since you attended the UCLA Head Start Management Fellows Program?

- Yes
- No

12. How, if at all, has networking with other UCLA Head Start Management Fellows benefitted you and/or your organization? Check all that apply. If it has not benefitted you or your organization, please check the appropriate response.

- It has led to greater service coordination involving my agency.
- It has led to my greater involvement in a professional organization.
- It has led to my greater involvement in the local community.

- It has had another benefit (please elaborate: _____)
- It has not benefited me or my organization.

13. Have you experienced a job change since attending the UCLA HSMFP? (Check all that apply). If you have not experienced any job changes, please check the appropriate response.

- Yes, a lateral move to a new position
- Yes, a promotion to a new position
- Yes, an expansion of responsibilities without a title change
- Yes, a merit-based pay raise
- Yes, I changed employers
- Yes, other (please describe)
- No, I have not experienced any job changes

14. Do you think that this job change was related—at least in part—to your participation in the UCLA HSMFP?

[Reviewer's note: this question will only be displayed if respondent indicates "yes" to Q16]

- Yes
- No

Please elaborate on your response above: _____

15. How has your involvement in the UCLA HSMFP influenced your career plans? (Check all that apply). If you have not experienced any career plan changes, please check the appropriate response.

- It has reaffirmed my commitment to a career in Head Start or Early Childhood Education (ECE)
- It has led me to pursue a different position within the Head Start or ECE field
- It has led me to question whether I should stay in Head Start or ECE field
- Other effect on career plans, please elaborate: _____
- Involvement in the program has had no effect on my career plans

D. MIP Progress

16. Which of the following areas did your MIP address? (Check all that apply.)

- Staff Development
- Retention
- Funding/Program Expansion
- Family Engagement
- Services to Families
- Other, please specify: _____

17. *[Reviewer's note: This question will be displayed, for each area selected in Q20.]* What degree of impact do you believe your MIP achieved in *[name of area]*?

- None
- Minimal
- Moderate
- Large

E. Reflection

18. As a result of your participation in the UCLA Head Start Management Fellows Program, what impact do you think your leadership has had at the organizational level? At the community level?
19. What is the most beneficial change you identify in yourself as a result of participating in the UCLA Head Start Management Fellows Program?