



Culture of Continuous Learning Project:

A Breakthrough Series Collaborative for Improving Child Care and Head Start Quality

Instrument 12: BSC Implementation Staff and Faculty Background Survey

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Respondents	Time of Data Collection
BSC Implementation Faculty and Staff	Baseline (T1)

Consent information for landing page of REDCap Survey (respondents will have seen all these details earlier in the outreach materials).

Thank you very much for participating in our research. The purpose of this study is to learn about the options for integrating a Breakthrough Series Collaborative (BSC) into early care and education quality improvement systems. The BSC is a specific training approach designed to support learning and improvement among practitioners at all levels of an organization, from directors to teachers who work in a classroom with children. This BSC aims to support children's social and emotional learning practices among staff who work in child care and Head Start settings.

This one-time online survey should take no more than 10 minutes to complete. In this survey we will ask about your background characteristics.

Completing this survey is up to you. There is a chance that you may feel uncomfortable answering some questions. This survey is voluntary. You can skip any question and you can stop the survey at any time. There are no right or wrong answers to any of our questions. There is no direct benefit to you for completing this survey. We hope that the information you provide will benefit the early child care and education field.

Your name and contact information will not be shared outside of our project team. We will separate your name and contact information from your survey responses, and you will not be identified in any reports of study findings. Our report will describe the experiences and viewpoints expressed, but comments will not be attributed to specific individuals. Your responses will not be shared with your employer or have any impact on your employment status. The answers you provide when completing this survey may be made available to other researchers for future study. However, your identity will be kept private and no responses will be able to be attributed to you.

If you would like a copy of this information or have questions, please email us at ktout@childtrends.org or the IRB at irbparticipant@childtrends.org or by phone at 1-855-288-3506.

Do you agree to participate in this survey?

- Yes
- No

The Paperwork Reduction Act of 1995 (Pub. L. 104-13) Statement: This collection of information is voluntary and will be used to assess the feasibility of implementing continuous quality improvement methods in ECE programs and systems to support the use and sustainability of evidence-based practices. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. 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 and expiration date for this collection are OMB #: 0970-XXXX, Exp: 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 Kathryn Tout, ktout@childtrends.org or Child Trends, 708 N 1st Suite #333 Minneapolis, MN 55401 Attention: Kathryn Tout

1. What is your role on the Culture of Continuous Learning BSC Team?
 - a. BSC Faculty
 - b. BSC Quality Improvement Advisor
 - c. BSC Manager
 - d. BSC Coordinator

2. Which of the following best describes your gender identity?
 - a. Female
 - b. Male
 - c. Non-binary, Gender fluid, or Gender expansive
 - d. A gender not listed here (specify) _____

3. Are you of Hispanic, Latino/a, or Spanish origin?
 - No, not of Hispanic, Latino/a, or Spanish origin
 - Yes, Mexican, Mexican American, Chicano/a
 - Yes, Puerto Rican
 - Yes, Cuban
 - Yes, Another Hispanic, Latino/a, or Spanish origin

4. What is your race? (select one or more)
 - American Indian or Alaska Native
 - Asian Indian
 - Chinese
 - Filipino
 - Japanese
 - Korean
 - Vietnamese
 - Other Asian (specify) _____
 - Black or African American

- Native Hawaiian
- Guamanian or Chamorro
- Samoan
- Other Pacific Islander (specify) _____
- White
- Another race (specify) _____

5. Do you speak a language other than English at home?

- Yes
- No

6. If yes to Q5, What is this language?

- Spanish
- Other Language (please specify): _____

7. In what year were you born?

- a. Drop down options in years 1920-2004

8. What is the highest educational level you have completed?

- a. Did not graduate high school
- b. High school diploma or equivalent (for example, a GED)
- c. Some college courses, but no degree
- d. Associate's degree
- e. Bachelor's degree
- f. Some graduate school or some professional school, but no degree
- g. Master's degree (M.A., M.S., M.Ed.)
- h. Doctoral degree in research (Ph.D., Ed.D.) or professional practice (Medicine: M.D.; Dentistry: D.D.S.; Law: J.D., L.L.B., etc.)