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**Instrument 7:** **QRIS Administrator or PD Director Survey: Culture of Continuous Learning Landscape Study**

**Culture of Continuous Learning Landscape Study: QRIS Administrator or PD Director Survey**

This survey is intended to gather information regarding the ways in which states, territories, and Head Start regions design, implement, and evaluate their early care and education (ECE) quality improvement delivery systems. For the purpose of this survey, please consider the term “quality improvement” to include a variety of activities like training or professional development, technical assistance, coaching and consultation, and other quality improvement activities. We realize these systems can look different across states, territories, and Head Start regions; we are reaching out to you to help fill in our understanding of the landscape of quality improvement delivery systems across the U.S. Thank you for sharing information on this topic!

This one-time, online survey should take no more than 20 minutes to complete. 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. Your name and contact information will not be shared outside our project team, and they will not be identified in any reports of study findings. Your responses will not be shared with your employer or have any impact on your employment status. Your answers will be combined with information from others who complete the survey.

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.

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

The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to help fill in our understanding of the landscape of quality improvement delivery systems across the U.S. Public reporting burden for this collection of information is estimated to average 20 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 #: 0970-0356, Exp: 02/29/2024. 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.

**Screening**

Please confirm your location and job title below.

1. Do you work for [STATE]?
   1. *IF Yes* -> continue to next question
   2. *IF No* -> end survey text. Thank you for your response!
2. Are you the [STATE] [JOB TITLE]?
   1. *IF Yes* -> continue to next question
   2. *IF No* -> end survey text

*END survey text ->* Thank you for your response. If you know the contact information for the [STATE] [JOB TITLE] please provide their name and work email address below. If you do not know the contact information for the [STATE] [JOB TITLE] please click “Submit” to end the survey.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Is this position an interim role or permanent position?
   1. Interim
   2. Permanent

**Quality Improvement Infrastructure**

1. What sources of funding has [STATE] used to provide professional development and quality improvement, such as training, technical assistance, and coaching in the past 12 months? *For the purpose of this survey, please consider the term “quality improvement” to include a variety of activities like training or professional development, technical assistance, coaching and consultation, and other quality improvement activities.* *Select all that apply.*
   1. Federal Child Care Development Fund (CCDF) funds
   2. State Child Care Development Fund (CCDF) supplemental funds
   3. Federal Head Start funds
   4. State Head Start supplemental funds
   5. Early Head Start-Child Care Partnership funds
   6. Public PreK funds
   7. Preschool Development Grants funds
   8. TANF funds
   9. Other public funds not specified here
   10. Private funding
   11. Something else\_\_\_\_\_\_ (please describe)
   12. I don’t know
2. What information does your [STATE] use to assess needs, monitor implementation, or evaluate the effectiveness of the professional development and quality improvement systems? *For each option, select if you use it for planning, monitoring or evaluation, or that you do not use that type of information for these purposes.*

|  |  |  |
| --- | --- | --- |
| **Information source** | **Use to plan, monitor or evaluate effectiveness of activities** | **Not applicable/**  **Do not use** |
| Data about adherence to federal, state, or local regulations *(e.g., licensing regulations)* |  |  |
| Compliance with requirements set by a privately funded initiative |  |  |
| Data from statewide needs assessments |  |  |
| Data from local community needs assessments |  |  |
| Data from tribal needs assessments |  |  |
| Data from Migrant and Seasonal needs assessments |  |  |
| Data from a quality rating and improvement system (e.g., changes in quality ratings over time) |  |  |
| Input from teachers/providers (e.g., surveys, interviews, focus groups, listening sessions) |  |  |
| Input from families (e.g., surveys, interviews, focus groups, listening sessions) |  |  |
| Input from center directors/program leaders (e.g., surveys, interviews, focus groups, listening sessions) |  |  |
| Input from community members and leaders (including leaders in local social service agencies, schools, advocacy organizations, etc.)  (e.g., surveys, interviews, focus groups, listening sessions) |  |  |
| Data about children’s development (e.g., child assessments; teacher/provider surveys about children) |  |  |
| Data from observations of classrooms and family child care programs |  |  |
| Training attendance or participation information |  |  |
| Training or technical assistance evaluations |  |  |
| Web analytics/Web traffic information |  |  |
| Something else\_\_\_\_\_\_\_(please describe) |  |  |
| I don’t know |  |  |

1. Who provides training, technical assistance, or coaching to child care or Head Start programs participating in your QRIS? *Select all that apply*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Training, technical assistance, or coaching provider** | **Child Care only** | **Head Start only** | **Both** | **Neither/Not applicable** | **I don’t know** |
| Child care resource & referral (CCR&R) |  |  |  |  |  |
| Regional Head Start Office |  |  |  |  |  |
| National Head Start Association |  |  |  |  |  |
| State Head Start Association |  |  |  |  |  |
| State Department of Human Services or Social Services |  |  |  |  |  |
| State Department of Health |  |  |  |  |  |
| State Department of Education |  |  |  |  |  |
| Another state-level agency |  |  |  |  |  |
| Private, for-profit organizations |  |  |  |  |  |
| Private, non-profit organizations |  |  |  |  |  |
| Colleges and universities |  |  |  |  |  |
| Independent consultants |  |  |  |  |  |
| Someone else |  |  |  |  |  |

*IF “Another state-level agency” is selected ->* What state-level agency? (open ended)

*IF “Someone else” is selected ->* Who else? (open ended)

*IF any response other than “I don’t know” to QX ->* Of these organizations or individuals, which are the top 2 providers in supplying training and technical assistance to programs? *Select the top two.*

a. *Pipe in responses from QX*

b. *Pipe in responses from QX*

c. *Pipe in responses from QX*

. *. .*

1. In what ways, if any, does [STATE] have formal or informal connections between participation in QRIS professional development and quality improvement activities, and other pieces of the ECE system at the state or local level? *Select all that apply.*
2. Offering higher subsidy reimbursement rates to programs that participate in QRIS training, TA, or coaching
3. Offering continuing education credit(s) to those in programs that participate in QRIS training, TA, or coaching
4. Waivers of certain requirements to those in programs that participate in QRIS training, TA, or coaching
5. Eligibility for COVID-19 relief funds to those in programs that participate in QRIS training, TA, or coaching
6. Eligibility for wage supplements or bonuses for staff employed in QRIS-participating programs
7. Eligibility for quality awards or other financial awards to those programs that participate in QRIS training, TA, or coaching
8. Training, TA, or coaching offered outside of QRIS counts towards QRIS requirements
9. Something else \_\_\_\_\_\_\_\_(please describe)
10. I don’t know
11. None of these
12. What are the considerations or conditions under which Head Start programs can access quality improvement supports in QRIS? (e.g., coaching/technical assistance, financial incentives, quality assessments) *Select all that apply.*
13. Head Start programs are eligible for quality improvement supports regardless of their participation in QRIS
14. Head Start programs must participate in the QRIS to be eligible for quality improvement supports
15. Head Start programs must participate in the QRIS and have a particular rating level to be eligible for quality improvement supports
16. Head Start programs are not eligible for QRIS supports
17. Something else\_\_\_\_\_\_\_\_\_(please describe)
18. I don’t know

*IF any response other than “I don’t know” to QX* -> Approximately what percentage of Head Start grantees in your [STATE] receive supports through QRIS?

* 1. None
  2. Between 1%-25%
  3. Between 26%-50%
  4. Between 51%-100%
  5. I don’t know

1. What features has your state put in place to encourage participation in quality improvement activities? *Select all that apply.* 
   1. Fee reduction as needed/no fee for training itself
   2. Providing food and refreshments during training
   3. Reimbursing or providing upfront funds to people for travel costs, parking fees, etc.
   4. Offering opportunities in multiple languages
   5. Offering opportunities offered at varying times of the day/week (i.e., nights, weekends, etc.)
   6. Offering opportunities in a variety of formats (i.e., in-person, virtual, hybrid)
   7. Offering trainings on-site (e.g., at a child care program) or near work-site
2. Offering trainings at community sites (e.g., community centers, schools, churches, etc.)
3. Offering opportunities as part of the workday (i.e., participants are paid as they would for regular work activity)
4. Offering pay to cover substitute staff
5. Using multiple forms of outreach and marketing to advertise opportunities
6. Providing training series or options for participants to progress from entry level to more advanced content
7. Something else\_\_\_\_\_\_\_(please describe)
8. I don’t know
9. None of these

**Equity in Quality Improvement**

1. Has [STATE] does any of the following to improve equity in its quality improvement activities? *By improving equity in quality improvement activities, we mean working towards fair inclusion of all providers, especially those who have historically and persistently been marginalized by systemic inequities from opportunities, and prioritizing input from families and communities about the quality improvement system. Select all that apply.*
2. Revised the QRIS (or begin a revision process) to update the quality standards
3. Improved equity of access to financial resources (i.e., grants, quality awards) for providers
4. Created or continued using established race equity-related goals for quality improvement implementation
5. Created or continued using established equity-related goals for quality improvement implementation (other than race equity)
6. Examined ECE program characteristics data to understand patterns of participation in quality improvement and access to quality improvement resources
7. Collected data from ECE professionals to learn how the QRIS or other quality improvement initiatives have affected them in their programs
8. Collected data from families to understand their perspective on quality improvement initiatives
9. Collected data from community partners to understand their perspective on quality improvement initiatives
10. Collected data related to equity-related goals
11. Reported disaggregated data by race or ethnicity
12. Reported disaggregated data by another characteristic (other than race or ethnicity)
13. Offered equity-related content in training and technical assistance activities
14. Made efforts to recruit quality improvement staff that are representative of children and families in your area
15. Increased staff time dedicated to meeting equity-related goals
16. Something else\_\_\_\_\_\_\_\_\_(please describe)
17. I don’t know
18. None of these

**Types of Quality Improvement Activities**

1. QRIS funds in [STATE] support training, technical assistance, and quality improvement for programs. For each topic listed below, please indicate which type(s) of training or coaching have been supported through QRIS funds in the past 12 months that you are aware of. If it would be helpful, you could review language in contracts with professional development partners or vendors to answer this question. *Select all that* apply.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Topic area** | **Training for individuals**  *Staff register and attend on their own. May or may not attend with anyone else they work with.* | **Training for organizations**  *Program staff are trained in a group, and typically attend all together.* | **Coaching for individuals**  *Staff receive one-on-one coaching or technical assistance. Goals may be set by the coach or the individual teacher/staff member.* | **Coaching for organizations**  *Program staff receive support for their classroom or program. Coaching is directed at multiple staff from the program working on a shared goal.* | **Something else**  *Please describe.* | **I don’t know** | **None of these offered for this topic** |
| Business practices | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Child screening & assessments | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Children with disabilities and inclusion practices | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Using curriculum | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Family engagement | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Community engagement | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Nutrition & physical health | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Mental, emotional, behavioral health | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Health & safety | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Social emotional learning | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Language & literacy | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Math & science | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Dual language learners | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Diversity, equity, & inclusion | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Staff wellness | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Pyramid Model | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |
| Something else \_\_\_\_\_(please describe) | Yes  No | Yes  No | Yes  No | Yes  No |  |  |  |

*IF any response other than “I don’t know” to QX ->* Of these types of support, which are the top 2 where QRIS invests the most funds ? *Select the top two.*

a. *Pipe in responses from QX*

b. *Pipe in responses from QX*

c. *Pipe in responses from QX*

d. *Pipe in responses from QX*

e. *Pipe in responses from QX*

*IF any YES response to “Coaching for Organizations” above à* What factors influence whether a

program can participate in organizational coaching?  *Select all that apply.*

1. Program type\_\_\_\_\_\_\_\_(please describe)
2. Program location \_\_\_\_\_\_\_\_(please describe)
3. Funding source \_\_\_\_\_\_\_\_(please describe)
4. Part of a pilot initiative \_\_\_\_\_\_\_\_(please describe)
5. Another type \_\_\_\_\_\_\_\_(please describe)
6. I don’t know
7. None of these

*IF any YES response to “Coaching for Organizations” above* -> Are you able to provide a website where our research team can learn more? Alternatively, you may upload a document that describes coaching for organizations. [text box with file upload option]

**Recent and Future Changes to QI Systems**

1. Are there any changes [STATE] will make to its quality improvement systems in the next 1-3 years in any of the following ways?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Implementation of quality improvement opportunities** | **Yes, we will make these changes** | **We have made these recent changes to the QRIS system since 2020** | **No** | **Exploring this idea** | **I don’t know** |
|  |  |  |  |  |  |
| **About training** |  |  |  |  |  |
| Changes in the mode of training delivery (i.e., in-person, virtual, or hybrid options) |  |  |  |  |  |
| Changes to waivers of training requirements |  |  |  |  |  |
| Changes to training costs to participants (i.e., decreased or increased) |  |  |  |  |  |
| Changes in availability of training |  |  |  |  |  |
| Changes to the availability of training in multiple languages |  |  |  |  |  |
| Changes to training topics |  |  |  |  |  |
| Changes in training staff |  |  |  |  |  |
| **About coaching** |  |  |  |  |  |
| Changes in the mode of coaching delivery (i.e., in-person, virtual, or hybrid options) |  |  |  |  |  |
| Changes to waivers of coaching requirements |  |  |  |  |  |
| Changes to coaching costs to participants (i.e., decreased or increased) |  |  |  |  |  |
| Changes in availability of coaching |  |  |  |  |  |
| Changes to coaching topics |  |  |  |  |  |
| Changes in coaching staff |  |  |  |  |  |
| **Other potential changes** |  |  |  |  |  |
| Changes in resources on racial justice or culturally responsive care |  |  |  |  |  |
| Changes in the frequency of cross-agency collaboration |  |  |  |  |  |
| Something else \_\_\_\_ (please describe |  |  |  |  |  |

*IF Yes to a QX response option ->* What changes will [STATE] make to its implementation of QI activities in the next 1-3 years? [PIPE IN RESPONSE OPTIONS]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Implementation of QI opportunities** |  |  |  |  |  |
| Availability of trainings or coaches | Fewer options available |  |  | More options available | I don’t know |
| Availability of resources on racial justice or culturally responsive care | Fewer options available |  |  | More options available | I don’t know |
| Variety of training or coaching topics | Fewer options available |  |  | More options available | I don’t know |
| Frequency of collaboration | Less collaboration |  |  | More collaboration | I don’t know |

**Demographics**

1. How long have you been in your current position?
   1. Drop-down, number of years
2. What role(s) do you currently have within the Head Start or ECE system in [STATE]? *Select all that apply.*

|  |  |
| --- | --- |
| **Role** | **Currently have** |
| CCDF administrator |  |
| Head Start Collaboration Office director |  |
| Head Start Education Manager |  |
| Head Start Regional Program Manager |  |
| Head Start Regional Manager |  |
| State PreK director |  |
| Local PreK administrator |  |
| Child care licensing staff |  |
| QRIS staff |  |
| Child care subsidy staff |  |
| Part C or Part B of IDEA staff (early childhood special education) |  |
| Child Care Resource & Referral staff |  |
| Professional development/consultant/trainer |  |
| University or community college ECE instructor |  |
| Work at a professional association |  |
| Work in a school district |  |
| Work in an advocacy organization |  |
| Work in a child care center or was a home-based care provider |  |
| Work in a Head Start program |  |
| Other direct service with children and families (e.g., home visitor, nurse, social worker, parent educator) |  |
| Other policy work related to children and families (e.g., health care) |  |
| Something else \_\_\_\_(please describe) |  |

1. Which of the following best describes your gender identity?
2. Female
3. Male
4. Non-binary, Gender fluid, or Gender expansive
5. Transgender
6. A gender not listed here
7. I prefer not to answer
8. Are you of Hispanic, Latino/a, or Spanish origin?
9. No, not of Hispanic, Latino/a, or Spanish origin
10. Yes, Mexican, Mexican American, Chicano/a
11. Yes, Puerto Rican
12. Yes, Cuban
13. Yes, Another Hispanic, Latino/a, or Spanish origin
14. I prefer not to answer
15. What is your race? (select one or more)
16. American Indian or Alaska Native
17. Asian Indian
18. Chinese
19. Filipino
20. Japanese
21. Korean
22. Vietnamese
23. Other Asian
24. Black or African American
25. Native Hawaiian
26. Guamanian or Chamorro
27. Samoan
28. Other Pacific Islander (please specify) \_\_\_\_\_\_\_\_
29. White
30. Another race (please specify) \_\_\_\_\_\_\_\_
31. I prefer not to answer