



Instrument 3: HSCO Director Survey: Culture of Continuous Learning Landscape Study

Culture of Continuous Learning Landscape Study: Head Start Collaboration Office Director Survey

This survey is intended to gather information regarding ways states 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 professional development activities such as training, technical assistance, coaching and consultation, and other quality improvement activities. For this survey, we are *not* including other quality improvement activities such as the provision of grants or quality awards. We realize that these systems can look different in different states and Head Start regions and we are reaching out to you to help fill in our understanding of the landscape of quality improvement delivery systems in your area. 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]?
 - a. *IF Yes* -> continue to next question
 - b. *IF No* -> end survey text

2. Are you the [STATE] [JOB TITLE]?
 - a. *IF Yes* -> continue to next question
 - b. *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 _____

3. Is this position an interim role or a permanent position?
 - a. Interim
 - b. Permanent

Quality Improvement Infrastructure

4. In addition to annual appropriations of federal Head Start funds, what sources of funding have Head Start programs in [STATE] used to support their professional development and quality improvement in the past 12 months that you are aware of? *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.*
 - a. State Head Start funds
 - b. Early Head Start-Child Care Partnership funds
 - c. Child Care Development Fund (CCDF) funds
 - d. Public PreK funds
 - e. Preschool Development Grants funds
 - f. TANF funds
 - g. Other public funds not specified here
 - h. Private funding
 - i. Something else _____ (please describe)
 - j. I don't know

5. What information do you or your office use to plan, monitor implementation, or evaluate the effectiveness of professional development and quality improvement activities for Head Start programs? *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	Not applicable/
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	effectiveness of activities	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		

6. In addition to the national Training and Technical Assistance Centers, and regional Head Start centers and specialists, who provides training and technical assistance to Head Start grantees and programs in your state? *Select all that apply.*
- a. National Head Start Association
 - b. State Head Start Association
 - c. Department of Human Services or Social Services
 - d. Department of Health
 - e. Department of Education
 - f. Another state-level agency
 - g. Private, for profit, organizations
 - h. Private, non-profit, organizations
 - i. Colleges and universities
 - j. Independent consultants
 - k. Someone else _____ (please describe)
 - l. I don't know

IF any response other than "I don't know" to QX -> Of these organizations or individuals, which are the top 2 in providing training and technical assistance to grantees and programs?

- 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*

7. In what ways, if any, do Head Start grantees in [STATE] have formal or informal connections between quality improvement delivery systems and other pieces of the ECE system (e.g., offering higher subsidy reimbursement rates to programs that participate in QI initiatives)? *Select all that apply.*

- a. Offer higher subsidy reimbursement rates to programs that participate in QRIS training, TA, or coaching
 - b. Offer continuing education credit(s) to those in programs that participate in QRIS training, TA, or coaching
 - c. Waivers of certain requirements to those in programs that participate in QRIS training, TA, or coaching
 - d. Eligibility for COVID-19 relief funds to those in programs that participate in QRIS training, TA, or coaching
 - e. Eligibility for wage supplements or bonuses for staff employed in QRIS-participating programs
 - f. Training, TA, or coaching offered outside of QRIS counts towards QRIS requirements
 - g. Coordinate with other administrators to offer shared professional development to staff across early care and education program types
 - h. Something else _____(please describe)
 - i. I don't know
 - j. None of these
8. What are the considerations or conditions under which Head Start programs can access quality improvement supports provided by the state QRIS (e.g., coaching/technical assistance, financial incentives, quality assessments)? *Select all that apply.*
- a. Head Start programs are eligible for quality improvement supports regardless of their participation in QRIS
 - b. Head Start programs must participate in the QRIS to be eligible for quality improvement supports
 - c. Head Start programs must participate in the QRIS and have a particular rating level to be eligible for quality improvement supports
 - d. Something else _____(please describe)
 - e. I don't know
9. What features has [STATE] put in place to encourage participation in quality improvement activities for Head Start grantees? *Select all that apply.*
- a. Fee reduction as needed/no fee for training itself
 - b. Providing food and refreshments during training
 - c. Reimbursing or providing upfront funds to people for travel costs, parking fees, etc.
 - d. Offering opportunities in multiple languages
 - e. Offering opportunities offered at varying times of the day/week (i.e., nights, weekends, etc.)
 - f. Offering opportunities in a variety of formats (i.e., in-person, virtual, hybrid)
 - g. Offering trainings on-site (e.g., at a child care program) or near work-site
 - h. Offering trainings at community sites (e.g., community centers, schools, churches, etc.)
 - i. Offering opportunities as part of the workday (i.e., participants are paid as they would for regular work activity)
 - j. Offering pay to cover substitute staff
 - k. Using multiple forms of outreach and marketing to advertise opportunities
 - l. Providing training series or options for participants to progress from entry level to more advanced content
 - m. Something else _____(please describe)

- n. I don't know
- o. None of these

Equity in Quality Improvement

10. Has [STATE] done 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.*

- a. Revised the QRIS (or begin a revision process) to update the quality standards
- b. Improved equity of access to financial supports (i.e., grants, quality awards) for providers
- c. Created or continued using established race equity-related goals for quality improvement implementation
- d. Created or continued using established equity-related goals for quality improvement implementation (other than race equity)
- e. Examined ECE program characteristics data to understand patterns of participation in quality improvement and access to quality improvement resources
- f. Collected data from ECE professionals to learn how the QRIS or other quality improvement initiatives have affected them in their programs
- g. Collected data from families to understand their perspective on quality improvement initiatives
- h. Collected data from community partners to understand their perspective on quality improvement initiatives
- i. Collected data related to equity-related goals
- j. Reported disaggregated data by race or ethnicity
- k. Reported disaggregated data by another characteristic (other than race or ethnicity)
- l. Offered equity-related content in training and technical assistance activities
- m. Made efforts to recruit quality improvement staff that are representative of children and families in your area
- n. Increased staff time dedicated to meeting equity-related goals
- o. Something else _____ (please describe)
- p. I don't know

Types of Quality Improvement Activities

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

describe)

IF any response other than “I don’t know” to QX -> Of these types of support, which are the top 2 where Head Start 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.

- a. Program type _____(please describe)
- b. Program location _____(please describe)
- a. Funding source _____(please describe)
- b. Part of a pilot initiative _____(please describe)
- c. Another type _____(please describe)
- d. I don’t know
- e. 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]

Pyramid Model Implementation

12. Does [STATE] support Head Start grantees’ use of Pyramid Model materials or require use of the Pyramid Model framework for at least some programs? *Pyramid Model is a framework designed to promote social and emotional learning/development among young children.*

- a. Yes
- b. No
- c. I don’t know

IF Yes to QX -> In what ways do Head Start grantees in [STATE] use the Pyramid Model framework?

	Head Start
Use written resources about the Pyramid Model	Yes No I don’t know
Use video resources or webinars about the Pyramid Model	Yes No I don’t know
Observe teachers on Pyramid Model practices (e.g., with the Teaching Pyramid Observation Tool, TPOT)	Yes No I don’t know

Participate in official Leadership Training for program-wide implementation of Pyramid Model	Yes No I don't know
Something else ____ (please describe)	Yes No I don't know

13. In what stage of implementation is the use of the Pyramid Model used in [STATE]'s Head Start grantees?
- Pilot initiative or project
 - Initial installation
 - Well-established sites
 - Model sites
 - I don't know

Demographics

14. How long have you been in your current position?
- Drop-down, number of years

15. 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)	

16. Which of the following best describes your gender identity?

- a. Female
- b. Male
- c. Non-binary, Gender fluid, or Gender expansive
- d. Transgender
- e. A gender not listed here
- f. I prefer not to answer

17. Are you of Hispanic, Latino/a, or Spanish origin?

- a. No, not of Hispanic, Latino/a, or Spanish origin
- b. Yes, Mexican, Mexican American, Chicano/a
- c. Yes, Puerto Rican
- d. Yes, Cuban
- e. Yes, Another Hispanic, Latino/a, or Spanish origin
- f. I prefer not to answer

18. What is your race? (select one or more)

- a. American Indian or Alaska Native
- b. Asian Indian
- c. Chinese
- d. Filipino
- e. Japanese
- f. Korean
- g. Vietnamese
- h. Other Asian
- i. Black or African American
- j. Native Hawaiian
- k. Guamanian or Chamorro
- l. Samoan
- m. Other Pacific Islander (please specify) _____
- n. White
- o. Another race (please specify) _____
- p. I prefer not to answer