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Comprehensive Literacy Program Evaluation: Comprehensive Literacy State Development Grant Program

SUBGRANTEE SURVEY APPENDIX

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National Evaluation of the Comprehensive Literacy State Development Grant Program Subgrantee Survey Spring 2021



The National Evaluation of the Comprehensive Literacy State Development (CLSD) Grant Program is examining the implementation and outcomes of the CLSD grants awarded in FY 2019. The purpose of this survey is to learn about how CLSD subgrantees use their funds to support literacy instruction and the support they receive from their state educational agency (SEA). The United States (U.S.) Department of Education, Institute of Education Sciences (IES) is sponsoring this evaluation.

The evaluation, including this survey, is being conducted by the American Institutes for Research (AIR) and its partners, Abt Associates and the National Opinion Research Center (NORC). For questions or more information about this study, you may contact the NORC study team at XXXX@norc.org or call the study's toll-free-number at 1-800-XXX-XXXX.

Paperwork Reduction Act of 1995

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) number. The valid OMB control number for this information collection is 1850-0945. The time required to complete this information collection is estimated to average 30 minutes per survey, including the time taken to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. The obligation to respond to this collection is required to obtain or retain benefit (Education Department General Administrative Regulations, Sections 76.591). If you have any comments concerning the accuracy of the time estimates(s) or suggestions for improving this form, please write to: U.S. Department of Education, 550 12th Street, SW, Washington, D.C. 20024 or email ICDocketMgr@ed.gov and reference the OMB Control Number 1850-0945. Note: Please do not return the completed survey to this address.

Notice of Confidentiality

Information collected for this study comes under the confidentiality and data protection requirements of the Institute of Education Sciences (The Education Sciences Reform Act of 2002, Title I, Part E, Section 183). Responses to this data collection will be used only for statistical purposes. The reports prepared for the study will summarize findings across the sample and will not associate responses with a specific district or individual. We will not provide information that identifies you or your district to anyone outside the study team, except as required by law.

Introduction

This survey includes seven sections, which ask about school operations during the 2020-21 year; the schools and teachers served by your subgrant; how schools and early childhood programs, if applicable, were selected to be part of your subgrant; what reading/English language arts resources and activities you are funding through your subgrant, including follow-up questions about the curricula, assessments, professional development, etc. you are providing (if applicable); and your continuous improvement and monitoring process.

We expect that each district's CLSD project director or manager may be able to complete the survey by herself or himself. However, it may be necessary to consult additional staff given the scope of topics.

[Add any instructions on navigating the web platform and due date]

If you have questions about the survey or the National Evaluation of the Comprehensive Literacy State Development Grant Program, please contact **NAME** at **EMAIL** or **PHONE**.

A. School Operations

Definitions for this section

Hybrid in-person and remote instruction occurs when groups of students receive a mix of in-person, in school instruction and remote instruction on alternating days or weeks.

Most students refers to the largest percentage of students.

Remote instruction is a method of instruction in which teachers and students are in different locations and interact through internet-based or non-internet-based mechanisms. It may include both synchronous (simultaneous, such as in a videoconference or a teleconference) and asynchronous (non-simultaneous, such as via email or paper packets) interaction.

These definitions also are available to respondents by hovering over the words that appear in blue text in the survey.

This section asks how your district is operating in terms of in-person or remote instruction during the 2020–21 school year.

1. **What date did your district start instruction for MOST students in the district this school year (2020–21)?**

Start date for most schools

[Note to NORC: For the paper version, list out separately for each grade band in a table]

[Ask separately for each grade band] Early childhood centers; K-2, 3-5, 6-8, and 9-12

2. During the first **4 weeks of the 2020–21 school year (i.e., fall semester)**, what type of instruction did MOST students receive from schools in your district serving [early childhood centers; K-2 grades; 3-5 grades; 6-8 grades; 9-12 grades]? *(Select one response per grade band.)*
 - In-person only, in the school building
 - Remote instruction only
 - Hybrid in-person and remote instruction
 - Other (*Specify*): _____
3. During the first **4 weeks after the start of 2021 (i.e., spring semester)**, what type of instruction did MOST students receive from schools in your district serving [early childhood centers; K-2 grades; 3-5 grades; 6-8 grades; 9-12 grades]? *(Select one response per grade band.)*
 - In-person only, in the school building
 - Remote instruction only
 - Hybrid in-person and remote instruction
 - Other (*Specify*): _____

4. From the start of this school year in fall 2020 through [today], how many school days was your district closed for in-person instruction in response to the coronavirus for schools serving the following grade bands?

Note: Count the number of school days your district was closed for in-person instruction, *with or without remote instruction*. Do not include school closures due to other emergencies such as weather-related disruptions, or for school holidays or break periods.

Number of school days from start of 2020-21 school year through [today] that your district was closed districtwide for in-person instruction as of [today] for schools serving [early childhood centers; K-2 grades; 3-5 grades; 6-8 grades; 9-12 grades].

B. Schools and Teachers Served by Subgrant

Please tell us about the schools [and early childhood programs, if applicable] you selected to serve with your CLSD subgrant.

5. In the schools you selected as CLSD schools, are all teachers who are responsible for reading, ELA, or writing instruction part of the CLSD program?

- Yes
 No

6. Are teachers who are responsible only for other content areas (e.g., social studies, science) part of the CLSD program?

- Yes
 No

7. Are staff who are responsible for providing extra instruction or support services to struggling readers, English learners, or students with disabilities part of the CLSD program?

- Yes
 No

Is your CLSD program providing services to children in the 0–3 age range or to their parents, guardians, or caretakers?

- Yes GO TO 8a
 No GO TO 9

How is your CLSD program providing services to children in the 0–3 age range? *Check all that apply.*

- Working with childcare centers or family childcare providers serving children 0–3 years
 Working with a home visiting program
 Providing parenting education or engagement activities
 Other: Please specify _____

9. Are there other organizations or agencies beyond schools and early childhood programs that are part of your CLSD program (for example, an afterschool program or public library)?

- Yes GO TO 9a
 No GO TO 10

What other types of organizations or agencies are part of your CLSD program? *Check all that apply.*

- Libraries
- Community centers or youth organizations (e.g., Boys and Girls clubs, YMCA)
- Other: Please specify _____

C. Review Process for Schools and Programs

Are all schools in your district part of the CLSD program?

- Yes SKIP TO Q10
- No

11. *If Q10 = No:* How were schools in your district selected for CLSD funding? *Check one only.*

- Identified through competitive application
- Identified by district based on criteria from state without competitive application
- Identified based on district-chosen criteria without competitive application

12. Which of the following factors were considered in selecting schools to be part of CLSD? *Check all that apply.*

Global Note to NORC: For the paper version, we have formatted this question and several others as a grid to save space. We received some feedback during the pilot tests that this format was overwhelming for respondents. We suggest formatting the grid questions as individual questions, to the extent possible.

Factor	Which of the following factors were considered in selecting CLSD schools? Check all that apply.	If column 2=Checked: How was this factor used? Check one per row.	
Percentage of struggling readers	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for percentage of children scoring below benchmark/below grade <input type="checkbox"/> Ranked schools from lowest to highest on percentage of children scoring below benchmark/grade and took schools from the bottom of the list <input type="checkbox"/> Other: Please specify _____	<p>➔ What was that threshold or cutpoint (e.g., 50% of children below grade)?</p> <p>_____</p>
School's rating on the state accountability system	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for school's rating <input type="checkbox"/> Ranked schools from lowest to highest on school rating and took schools from the bottom of the list <input type="checkbox"/> Other: Please specify _____	<p>➔ What was that threshold or cutpoint (e.g., school rating of C or below)?</p> <p>_____</p>
Percentage of low-income students	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for percentage of disadvantaged students <input type="checkbox"/> Ranked schools from lowest to highest on percentage of disadvantaged students and took schools from the bottom of the list <input type="checkbox"/> Other: Please specify _____	<p>➔ What was that threshold or cutpoint (e.g., 50% of students from low-income families)?</p> <p>_____</p>
Percentage of students identified as English learners	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for percentage	<p>➔ What was that threshold or cutpoint (e.g., 50% of students identified as</p>

		<p>of disadvantaged students</p> <p><input type="checkbox"/> Ranked schools from lowest to highest on percentage of disadvantaged students and took schools from the bottom of the list</p> <p><input type="checkbox"/> Other: Please specify _____</p>	<p>English learners)?</p> <p>_____</p>
Percentage of students with disabilities	<input type="checkbox"/>	<p><input type="checkbox"/> Set a threshold or cutpoint for percentage of disadvantaged students</p> <p><input type="checkbox"/> Ranked schools from lowest to highest on percentage of disadvantaged students and took schools from the bottom of the list</p> <p><input type="checkbox"/> Other: Please specify _____</p>	<p>➔ What was that threshold or cutpoint (e.g., 20% of students with disabilities)?</p> <p>_____</p>
Grade levels served	<input type="checkbox"/>	<p><input type="checkbox"/> Prioritized or required schools serving certain grade levels</p> <p><input type="checkbox"/> Other: Please specify _____</p>	<p>➔ Which grade levels were prioritized or required? <i>Check all that apply.</i></p> <p><input type="checkbox"/> K</p> <p><input type="checkbox"/> 1</p> <p><input type="checkbox"/> 2</p> <p><input type="checkbox"/> ... (improve formatting for programming)</p> <p><input type="checkbox"/> 12</p>
Quality of literacy curriculum or initiatives	<input type="checkbox"/>	<p><input type="checkbox"/> Prioritized schools with high-quality literacy curriculum or initiatives well-aligned with CLSD's definition of comprehensive literacy instruction</p> <p><input type="checkbox"/> Prioritized schools with lower-quality literacy curriculum or initiatives that are less well-aligned with CLSD's definition of comprehensive literacy instruction</p> <p><input type="checkbox"/> Other: Please specify _____</p>	
School leadership's interest in participating	<input type="checkbox"/>	<p><input type="checkbox"/> Prioritized schools with school leaders interested in participating</p> <p><input type="checkbox"/> Other: Please specify _____</p>	
School's capacity to take on a new	<input type="checkbox"/>	<p><input type="checkbox"/> Prioritized schools with more capacity to take on a new initiative</p>	

initiative		<input type="checkbox"/> Other: Please specify _____	
School size	<input type="checkbox"/>	<input type="checkbox"/> Prioritized larger schools <input type="checkbox"/> Prioritized smaller schools <input type="checkbox"/> Other: Please specify _____	
School feeder pattern	<input type="checkbox"/>	<input type="checkbox"/> Prioritized schools within a feeder pattern <input type="checkbox"/> Other: Please specify _____	
Other factor 1: Please specify _____			
Other factor 2: Please specify _____			

13. If CLSD program includes prekindergarten or early childhood education programs: Which of the following factors were taken into consideration in selecting **prekindergarten or early childhood education programs** for CLSD funding? Check all that apply.

Factor	Which of the following factors were considered in selecting CLSD prekindergarten or early childhood programs? Check all that apply.	If column 2=Checked: How was this factor used? Check one per row.	
Program(s) located in one of the CLSD schools	<input type="checkbox"/>		
Percentage of students ready for kindergarten at end of preschool	<input type="checkbox"/>	<input type="checkbox"/> Prioritized programs with a lower percentage of kindergarten-ready students <input type="checkbox"/> Prioritized programs with a higher percentage of kindergarten-ready students <input type="checkbox"/> Other: Please specify _____	
Percentage of low-income students	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for percentage of disadvantaged students <input type="checkbox"/> Ranked programs from lowest to highest on percentage of disadvantaged students and took programs from the bottom of the list <input type="checkbox"/> Other: Please specify _____	<p style="text-align: center;">➔ What was that threshold or cutpoint (e.g., 50% of students from low-income families)?</p> <p style="text-align: center;">_____</p>
Percentage of students identified as English learners	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for percentage of disadvantaged students <input type="checkbox"/> Ranked programs from lowest to highest on percentage of disadvantaged students and took programs from the bottom of the list <input type="checkbox"/> Other: Please specify _____	<p style="text-align: center;">➔ What was that threshold or cutpoint (e.g., 50% of students identified as English learners)?</p> <p style="text-align: center;">_____</p>
Percentage of students with disabilities or delays	<input type="checkbox"/>	<input type="checkbox"/> Set a threshold or cutpoint for percentage of disadvantaged students <input type="checkbox"/> Ranked programs from lowest to	<p style="text-align: center;">➔ What was that threshold or cutpoint (e.g., 20% of students with disabilities or delays)?</p>

		highest on percentage of disadvantaged students and took programs from the bottom of the list <input type="checkbox"/> Other: Please specify _____	_____
Quality of literacy initiatives	<input type="checkbox"/>	<input type="checkbox"/> Prioritized programs with high-quality early literacy initiatives <input type="checkbox"/> Prioritized programs with lower-quality early literacy initiatives <input type="checkbox"/> Other: Please specify _____	
Program leadership's interest in participating	<input type="checkbox"/>	<input type="checkbox"/> Prioritized programs with leaders interested in participating <input type="checkbox"/> Other: Please specify _____	
Program size	<input type="checkbox"/>	<input type="checkbox"/> Prioritized larger programs <input type="checkbox"/> Prioritized smaller programs <input type="checkbox"/> Other: Please specify _____	
Program feeder pattern	<input type="checkbox"/>	<input type="checkbox"/> Prioritized programs within a school feeder pattern <input type="checkbox"/> Other: Please specify _____	
Other factor 1: Please specify _____			
Other factor 2: Please specify _____			

D. Local Needs Assessment

14. When was your most recent local needs assessment conducted?

_____ [year]

- Don't know
- We have not conducted a local needs assessment. SKIP to Q16

15. If Q14 does not equal "We have not conducted a local needs assessment": Based on this assessment, which of the following were identified as district needs related to reading/ELA? Which ages/grades were identified as having each need?

Definition: "Curriculum or supplemental programs" include core reading programs, writing programs, textbooks, guided reading programs, anthologies, and programs focused on phonics, vocabulary, comprehension, etc.

Definition: "Students needing extra support" are students below grade level, English learners, or students with disabilities or delays in their literacy skills.

[NORC: Please program definitions to be rollover each time the terms appear in the online survey.]

	Check if the following was identified as a need. <i>Check all that apply.</i>	<i>If Col 2 = Checked:</i> Was this identified as a need for all grades (preK-12) in the district? <i>Check one per row.</i>	<i>If Col 3= No:</i> For which ages/grades was this identified as a need? <i>Check all that apply.</i>
Curriculum or supplemental programs for general education students (please include core reading programs; writing programs; programs focused on phonics, vocabulary, comprehension, etc.)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Curriculum or supplemental programs for students needing extra support , including students below grade level, ELs, and students with disabilities (please include those used by classroom teachers and those used by reading specialists or interventionists)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Books for students other than those related to a specific curriculum (e.g., trade books, novels, nonfiction materials)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming)

	Check if the following was identified as a need. <i>Check all that apply.</i>	<i>If Col 2 = Checked:</i> Was this identified as a need for all grades (preK-12) in the district? <i>Check one per row.</i>	<i>If Col 3= No:</i> For which ages/grades was this identified as a need? <i>Check all that apply.</i>
			<input type="checkbox"/> 12
Technology (e.g., e-readers, iPads, educational software or computer programs)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Assessments (e.g., for progress monitoring, screening, benchmark assessments)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Instructional coaches (new staff, or additional hours for existing staff)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Reading specialists (new staff, or additional hours for existing staff)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Paraprofessionals or tutors (new staff, or additional hours for existing staff)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Professional development for teachers or administrators (e.g.,	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K

	Check if the following was identified as a need. <i>Check all that apply.</i>	<i>If Col 2 = Checked:</i> Was this identified as a need for all grades (preK-12) in the district? <i>Check one per row.</i>	<i>If Col 3= No:</i> For which ages/grades was this identified as a need? <i>Check all that apply.</i>
classes, webinars, institutes, seminars) including direct costs for staff to attend			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Professional learning communities (PLCs) within or across schools	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Common instructional planning time for reading/ELA	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Parent or community engagement activities (e.g., literacy nights, book challenges)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Parent or family resources or activities to support student literacy (e.g., books for the home, strategies for reading at home, experiences to support literacy development)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Out-of-school-time activities (summer programs, before- or after-school programs)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve

	Check if the following was identified as a need. <i>Check all that apply.</i>	<i>If Col 2 = Checked: Was this identified as a need for all grades (preK-12) in the district? Check one per row.</i>	<i>If Col 3= No: For which ages/grades was this identified as a need? Check all that apply.</i>
			formatting for programming) <input type="checkbox"/> 12
Educational options to create a personalized learning path (e.g., public educational programs or courses, dual enrollment, internships, apprenticeships, credit recovery)	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12
Other activities or resources not listed above: Please specify _____	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12

E. Subgrant Activities

Now we would like to learn more about how your district decided what to do with its CLSD subgrant and what activities or resources you are funding through CLSD. Later, we will ask you to upload your subgrant application so we can get a more detailed sense of what funds you initially expected to spend on various activities.

16. To what extent were the following individuals or groups consulted in deciding what activities and resources to fund with your CLSD grant? *Check one per row.*

	Not at all	A little	Some	A lot
Superintendent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
District reading director or department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K-12 teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K-12 principals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early childhood educators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early childhood program administrators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Parents/families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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17. Which of the following activities or resources involving reading/ELA is your district using its CLSD grant to fund in whole or part?

Reading/ELA-related activities or resources	Provided for CLSD schools/early learning programs through CLSD grant? Check all that apply.	Which three activities or resources were your largest expenses for the grant? Check three.	Programming instructions: If respondent selects item, show the following section
Curriculum or supplemental programs for general education students (please include core reading programs; writing programs; programs focused on phonics, vocabulary, comprehension, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	Section 1
Curriculum or supplemental programs for students needing extra support , including ELs and students with disabilities (please include those used by classroom teachers and those used by reading specialists or interventionists)	<input type="checkbox"/>	<input type="checkbox"/>	Section 2
Books for students other than those related to a specific curriculum (e.g., trade books, novels, nonfiction materials)	<input type="checkbox"/>	<input type="checkbox"/>	Section 3
Technology (e.g., e-readers, iPads, educational computer programs)	<input type="checkbox"/>	<input type="checkbox"/>	Section 4
Assessments (e.g., for progress monitoring, screening, benchmark assessments)	<input type="checkbox"/>	<input type="checkbox"/>	Section 5
CLSD project director or administration	<input type="checkbox"/>	<input type="checkbox"/>	
Instructional coaches (new staff, or additional hours for existing staff)	<input type="checkbox"/>	<input type="checkbox"/>	Section 6
Reading specialists (new staff, or additional hours for existing staff)	<input type="checkbox"/>	<input type="checkbox"/>	Section 7
Paraprofessionals or tutors (new staff, or additional hours for existing staff)	<input type="checkbox"/>	<input type="checkbox"/>	
Professional development for teachers or administrators (e.g., classes, webinars, institutes, seminars) including direct costs for staff to attend	<input type="checkbox"/>	<input type="checkbox"/>	Section 8
Professional learning communities (PLCs) within or across schools	<input type="checkbox"/>	<input type="checkbox"/>	
Common instructional planning time for reading/ELA	<input type="checkbox"/>	<input type="checkbox"/>	
Parent or community engagement activities	<input type="checkbox"/>	<input type="checkbox"/>	
Parent or family resources or activities to support student literacy	<input type="checkbox"/>	<input type="checkbox"/>	

Reading/ELA-related activities or resources	Provided for CLSD schools/early learning programs through CLSD grant? Check all that apply.	Which three activities or resources were your largest expenses for the grant? Check three.	Programming instructions: If respondent selects item, show the following section
Out-of-school-time activities (summer programs, before- or after-school programs)	<input type="checkbox"/>	<input type="checkbox"/>	
Educational options to create a personalized learning path	<input type="checkbox"/>	<input type="checkbox"/>	
Other activities or resources not listed above: Please specify _____	<input type="checkbox"/>	<input type="checkbox"/>	

Definition: “Instructional practices” are specific literacy strategies that can be implemented in a classroom (e.g., explicitly teach narrative language skills to help readers organize information in a logical sequence, teach a set of academic vocabulary words intensively across several days).

Definition of evidence [rollover comment each time evidence levels are referenced as response options]:

- *Strong evidence* (ESSA Tier 1) means a statistically significant effect on improving student outcomes or other relevant outcomes based on at least one well-designed and well-implemented experimental study.
- *Moderate evidence* (ESSA Tier 2) means a statistically significant effect on improving student outcomes or other relevant outcomes based on at least one well-designed and well-implemented quasi-experimental study.
- *Promising evidence* (ESSA Tier 3) means evidence from at least one well-designed and well-implemented correlational study with statistical controls for selection bias
- *Demonstrates a rationale* (ESSA Tier 4) means an activity, practice, intervention, or strategy that has a well-defined logic model or theory of action based on high-quality research findings or positive evaluation that such activity, practice, intervention, or strategy is likely to improve student outcomes.

18. Are you using your CLSD grant to encourage teachers to implement any *specific instructional practices*? Yes/No

If yes, please list up to 3 instructional practices you are using CLSD funds to support:

Instructional Practice	Describe instructional practice in 1-2 sentences	In what grade levels are you encouraging teachers to implement this practice? (Check all that apply)	How are you using CLSD funds to help teachers implement this practice? (Check all that apply)	How did you decide on this practice? (Check all that apply)	How strong is the evidence for this instructional practice? Check one only.
Practice A	[text]	<ul style="list-style-type: none"> • Pre-K 	<ul style="list-style-type: none"> • Purchase new 	<ul style="list-style-type: none"> • State-provided 	<ul style="list-style-type: none"> • Strong evidence

		<ul style="list-style-type: none"> • K-2 • 3-5 • 6-8 • 9-12 	<ul style="list-style-type: none"> • curriculum • Purchase other new materials • Coaching • Other professional development • Other [please specify] 	<ul style="list-style-type: none"> • clearinghouse, compendium, or list of evidence-based practices • Other clearinghouses or compendiums (e.g., Evidence for ESSA) • Journal search • What Works Clearinghouse (WWC) practice guides • Other [please specify] • Don't know 	<ul style="list-style-type: none"> • (Tier 1) • Moderate evidence (Tier 2) • Promising evidence (Tier 3) • Demonstrates a rationale (Tier 4) • No evidence • Don't know
Practice B	[text]	<ul style="list-style-type: none"> • Pre-K • K-2 • 3-5 • 6-8 • 9-12 	<ul style="list-style-type: none"> • Purchase new curriculum • Purchase other new materials • Coaching • Other professional development • Other [please specify] 	<ul style="list-style-type: none"> • State-provided clearinghouse, compendium, or list of evidence-based practices • Other clearinghouses or compendiums (e.g., Evidence for ESSA) • Journal search • What Works Clearinghouse (WWC) practice guides • Other [please specify] • Don't know 	<ul style="list-style-type: none"> • Strong evidence (Tier 1) • Moderate evidence (Tier 2) • Promising evidence (Tier 3) • Demonstrates a rationale (Tier 4) • No evidence • Don't know
Practice C	[text]	<ul style="list-style-type: none"> • Pre-K • K-2 • 3-5 • 6-8 • 9-12 	<ul style="list-style-type: none"> • Purchase new curriculum • Purchase other new materials • Coaching • Other professional development • Other [please specify] 	<ul style="list-style-type: none"> • State-provided clearinghouse, compendium, or list of evidence-based practices • Other clearinghouses or compendiums (e.g., Evidence for ESSA) • Journal search • What Works Clearinghouse (WWC) practice guides 	<ul style="list-style-type: none"> • Strong evidence (Tier 1) • Moderate evidence (Tier 2) • Promising evidence (Tier 3) • Demonstrates a rationale (Tier 4) • No evidence • Don't know

				<ul style="list-style-type: none">• Other [please specify]• Don't know	
--	--	--	--	---	--

19. Did the coronavirus pandemic affect the implementation of CLSD in your district in 2020-21?

Yes/No

If Yes:

Which of the following steps did you take in response to the coronavirus?

- a. We placed more emphasis on purchasing technology than we originally planned
- b. We placed more emphasis on professional development for distance learning in literacy
- c. We postponed purchasing curricula or materials that were part of our plan
- d. We postponed professional development that was part of our plan
- e. We postponed coaching that was part of our plan
- f. We postponed other activities or supports that were part of our plan (please explain)_____

Suggestion for NORC: Add page between the previous question and the next section with the following text:

The following sections ask about activities and resources that are funded by your CLSD grant. Please do not include activities and resources that are not funded at least in part through your CLSD grant.

Section 1: CLSD Reading/ELA Curricula or Supplemental Programs for General Education Students

If “Curriculum or supplemental programs for general education students” selected in Q17: You indicated above that your district is using part of its CLSD grant to fund curricula or supplemental programs for **general education students**. This may include core reading programs, writing programs, programs focused on phonics, vocabulary, comprehension, etc.

20. What curricula or supplemental programs for early childhood or general education K-12 students is your CLSD grant funding? Please include all core reading programs, writing programs, programs focused on phonics, vocabulary, comprehension, etc.

Name of curriculum or program ^a	With which ages/grades is this curriculum or program being used as part of CLSD? Check all that apply.	What were the key factors you considered in deciding to fund this curriculum or program? Check all that apply.	If more than one factor selected in Col 3: Which factor was the most important in your decision? Check one only.	If “Evidence of effectiveness for improving teacher practice” or “Evidence of effectiveness for improving student achievement” selected in Col 3: What resources did you use to assess the level of evidence for this curriculum or program? Check all that apply.	If “Evidence of effectiveness for improving teacher practice” or “Evidence of effectiveness for improving student achievement” selected in Col 3: How strong is the evidence for this curriculum or program? Check one only.
Name #1	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [schools/ early childhood programs] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> State recommendation or selected from state-provided list <input type="checkbox"/> Teacher or principal support for this curriculum or program	<input type="checkbox"/> [Program to only show factors selected in Col 3]	<input type="checkbox"/> What Works Clearinghouse (WWC) <input type="checkbox"/> State-provided clearinghouse, compendium, or list of evidence-based curricula/practices <input type="checkbox"/> Other clearinghouses or compendiums (e.g., Evidence for ESSA) <input type="checkbox"/> Journal search <input type="checkbox"/> Other: Please specify	<input type="checkbox"/> Strong evidence (Tier 1) <input type="checkbox"/> Moderate evidence (Tier 2) <input type="checkbox"/> Promising evidence (Tier 3) <input type="checkbox"/> Demonstrates a rationale (Tier 4) <input type="checkbox"/> No evidence <input type="checkbox"/> Don't know

		<input type="checkbox"/> Information from local needs assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Evidence of effectiveness for improving teacher practice <input type="checkbox"/> Evidence of effectiveness for improving student achievement <input type="checkbox"/> Other: Please specify _____		<hr/> <input type="checkbox"/> Don't know	
<i>Name #...</i>	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... <input type="checkbox"/> 12	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [schools/early childhood programs] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> Teacher or principal support for this curriculum or program <input type="checkbox"/> Information from local needs assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Evidence of effectiveness for improving teacher practice <input type="checkbox"/> Evidence of	<input type="checkbox"/> [Program to only show factors selected in Col 3]	<input type="checkbox"/> What Works Clearinghouse (WWC) <input type="checkbox"/> State-provided clearinghouse, compendium, or list of evidence-based curricula/practices <input type="checkbox"/> Other clearinghouses or compendiums (e.g., Evidence for ESSA) <input type="checkbox"/> Journal search <input type="checkbox"/> Other: Please specify _____ <input type="checkbox"/> Don't know	<input type="checkbox"/> Strong evidence (Tier 1) <input type="checkbox"/> Moderate evidence (Tier 2) <input type="checkbox"/> Promising evidence (Tier 3) <input type="checkbox"/> Demonstrates a rationale (Tier 4) <input type="checkbox"/> No evidence <input type="checkbox"/> Don't know

		<p>effectiveness for improving student achievement</p> <p><input type="checkbox"/> Other: Please specify _____</p>			
<i>Name #n</i>	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... <input type="checkbox"/> 12	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [schools/early childhood programs] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> Teacher or principal support for this curriculum or program <input type="checkbox"/> Information from local needs assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Evidence of effectiveness for improving teacher practice <input type="checkbox"/> Evidence of effectiveness for improving student achievement <input type="checkbox"/> Other: Please specify _____	<input type="checkbox"/> [Program to only show factors selected in Col 3]	<input type="checkbox"/> What Works Clearinghouse (WWC) <input type="checkbox"/> State-provided clearinghouse, compendium, or list of evidence-based curricula/practices <input type="checkbox"/> Other clearinghouses or compendiums (e.g., Evidence for ESSA) <input type="checkbox"/> Journal search <input type="checkbox"/> Other: Please specify _____ <input type="checkbox"/> Don't know	<input type="checkbox"/> Strong evidence (Tier 1) <input type="checkbox"/> Moderate evidence (Tier 2) <input type="checkbox"/> Promising evidence (Tier 3) <input type="checkbox"/> Demonstrates a rationale (Tier 4) <input type="checkbox"/> No evidence <input type="checkbox"/> Don't know

^a Names of reading, writing, phonics, etc. curricula and supplemental programs could be pulled from subgrantees' applications, the What Works Clearinghouse (WWC), major publishers' websites, etc. Respondents should be able to start typing in a curriculum and have it appear as they type (like a search engine).

Section 2: CLSD Reading/ELA Curricula or Supplemental Programs for Students Needing Extra Support

If “Curriculum or supplemental programs for students needing extra support” selected in Q17: You indicated above that your district is using part of its CLSD grant to fund curricula or supplemental programs for **students needing extra support**. This may include curricula or programs used by classroom teachers or those used by reading specialists or interventionists. It also may include reading programs, writing programs, programs focused on phonics, vocabulary, comprehension, etc.

21. What curricula or supplemental programs for **students needing extra support** is your CLSD grant funding? Please include curricula or programs used by classroom teachers and those used by reading specialists or interventionists

Name of curriculum or program ^a	With which ages/grades is this curriculum or program being used as part of CLSD? Check all that apply.	What were the key factors you considered in deciding to fund this curriculum or program? Check all that apply.	If more than one factor selected in Col 3: Which factor was the most important in your decision? Check one only.	If “Evidence of effectiveness for improving teacher practice” or “Evidence of effectiveness for improving student achievement” selected in Col 3: What resources did you use to assess the level of evidence for this curriculum or program? Check all that apply.	If “Evidence of effectiveness for improving teacher practice” or “Evidence of effectiveness for improving student achievement” selected in Col 3: How strong is the evidence for this curriculum or program? Check one only.
Name #1	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... (improve formatting for programming) <input type="checkbox"/> 12	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [schools/early childhood programs] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> State recommendation or selected from state-provided list <input type="checkbox"/> Teacher or principal support for this curriculum or program <input type="checkbox"/> Information from local needs assessment	<input type="checkbox"/> [Program to only show factors selected in Col 3]	<input type="checkbox"/> What Works Clearinghouse (WWC) <input type="checkbox"/> State-provided clearinghouse, compendium, or list of evidence-based curricula/practices <input type="checkbox"/> Other clearinghouses or compendiums (e.g., Evidence for ESSA) <input type="checkbox"/> Journal search <input type="checkbox"/> Other: Please specify _____ <input type="checkbox"/> Don't know	<input type="checkbox"/> Strong evidence (Tier 1) <input type="checkbox"/> Moderate evidence (Tier 2) <input type="checkbox"/> Promising evidence (Tier 3) <input type="checkbox"/> Demonstrates a rationale (Tier 4) <input type="checkbox"/> No evidence <input type="checkbox"/> Don't know

		<input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Evidence of effectiveness for improving teacher practice <input type="checkbox"/> Evidence of effectiveness for improving student achievement <input type="checkbox"/> Other: Please specify _____			
<i>Name #...</i>	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... <input type="checkbox"/> 12	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [schools/early childhood programs] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> Teacher or principal support for this curriculum or program <input type="checkbox"/> Information from local needs assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Evidence of effectiveness for improving teacher	<input type="checkbox"/> [Program to only show factors selected in Col 3]	<input type="checkbox"/> What Works Clearinghouse (WWC) <input type="checkbox"/> State-provided clearinghouse, compendium, or list of evidence-based curricula/practices <input type="checkbox"/> Other clearinghouses or compendiums (e.g., Evidence for ESSA) <input type="checkbox"/> Journal search <input type="checkbox"/> Other: Please specify _____	<input type="checkbox"/> Strong evidence (Tier 1) <input type="checkbox"/> Moderate evidence (Tier 2) <input type="checkbox"/> Promising evidence (Tier 3) <input type="checkbox"/> Demonstrates a rationale (Tier 4) <input type="checkbox"/> No evidence <input type="checkbox"/> Don't know

		<p>practice</p> <p><input type="checkbox"/> Evidence of effectiveness for improving student achievement</p> <p><input type="checkbox"/> Other: Please specify</p> <p>_____</p> <p>_____</p>			
<p><i>Name #n</i></p>	<p><input type="checkbox"/> Early childhood</p> <p><input type="checkbox"/> K</p> <p><input type="checkbox"/> 1</p> <p><input type="checkbox"/> ...</p> <p><input type="checkbox"/> 12</p>	<p><input type="checkbox"/> Cost</p> <p><input type="checkbox"/> Already being used in some [schools/early childhood programs] in your district</p> <p><input type="checkbox"/> Recommendation from head of district reading department</p> <p><input type="checkbox"/> Teacher or principal support for this curriculum or program</p> <p><input type="checkbox"/> Information from local needs assessment</p> <p><input type="checkbox"/> Information from local literacy plan</p> <p><input type="checkbox"/> Evidence of effectiveness for improving teacher practice</p> <p><input type="checkbox"/> Evidence of effectiveness for improving student achievement</p>	<p><input type="checkbox"/> [Program to only show factors selected in Col 3]</p>	<p><input type="checkbox"/> What Works Clearinghouse (WWC)</p> <p><input type="checkbox"/> State-provided clearinghouse, compendium, or list of evidence-based curricula/practices</p> <p><input type="checkbox"/> Other clearinghouses or compendiums (e.g., Evidence for ESSA)</p> <p><input type="checkbox"/> Journal search</p> <p><input type="checkbox"/> Other: Please specify</p> <p>_____</p> <p><input type="checkbox"/> Don't know</p>	<p><input type="checkbox"/> Strong evidence (Tier 1)</p> <p><input type="checkbox"/> Moderate evidence (Tier 2)</p> <p><input type="checkbox"/> Promising evidence (Tier 3)</p> <p><input type="checkbox"/> Demonstrates a rationale (Tier 4)</p> <p><input type="checkbox"/> No evidence</p> <p><input type="checkbox"/> Don't know</p>

		<input type="checkbox"/> Other: Please specify _____ _____			
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^a Names of reading, writing, phonics, etc. curricula and supplemental programs could be pulled from subgrantees' applications, the What Works Clearinghouse (WWC), major publishers' websites, etc. Respondents should be able to start typing in a curriculum and have it appear as they type (like a search engine).

Section 3: Books

If “Books for students other than those related to a specific curriculum” selected in Q17: You indicated that your district is using part of its CLSD grant to provide books for students (other than those related to a specific curriculum).

22. What types of books did you purchase? *Check all that apply.*

- Leveled readers
- Trade books
- Fiction
- Biography or autobiography
- Other: Please specify _____

23. With what ages/grades of children are these books intended to be used? *Check all that apply.*

- Early childhood
- K
- 1
- ... (improve formatting when programming)
- 12

Section 4: Technology

If “Technology” selected in Q17: You indicated above that your district is using part of its CLSD grant to provide technology.

24. What types of technology resources are you providing through your CLSD grant? *Check all that apply.*

- E-readers, iPads, or other physical technology tools
- Educational computer programs
- Other: Please specify _____

25. With what ages/grades of children are these technology resources intended to be used? *Check all that apply.*

- Early childhood
- K
- 1
- ... (improve formatting when programming)
- 12

Section 5: Assessments

If “Assessments” selected in Q17: You indicated above that your district is using part of its CLSD grant to provide assessments or an assessment system.

26. For each assessment that your CLSD grant is providing to CLSD schools or early learning programs, please list the name of the assessment or assessment system, the grades with which it is being used, its primary purposes, and the key factors you considered in deciding to fund this assessment.

Name of assessment or assessment system	With which ages/grades is this assessment being used? Check all that apply.	What is the primary use of this assessment? Check all that apply.	What were the key factors you considered in deciding to fund this assessment or assessment system? Check all that apply.	If more than one factor selected in Col 4: Which factor was the most important in your decision? Check one only.
Name #1	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... (improve formatting when programming) <input type="checkbox"/> 12	<input type="checkbox"/> To help classroom teachers monitor student progress <input type="checkbox"/> To screen children for additional support services <input type="checkbox"/> To help classroom teachers individualize instruction <input type="checkbox"/> To help schools plan their reading/ELA instruction <input type="checkbox"/> To help districts plan their overall approach to reading/ELA instruction <input type="checkbox"/> To assess students' progress for summative purposes <input type="checkbox"/> Other: Please specify _____	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [early childhood programs/ schools] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> Teacher or principal support <input type="checkbox"/> Information from local needs assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> State requirement or recommendation <input type="checkbox"/> Other: Please specify _____	<input type="checkbox"/> [Program to only show factors selected in Col 4]
Name #...	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> ... <input type="checkbox"/> 12	<input type="checkbox"/> To help classroom teachers monitor student progress <input type="checkbox"/> To screen children for additional support services <input type="checkbox"/> To help classroom teachers individualize instruction <input type="checkbox"/> To help schools plan their reading/ELA instruction	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [early childhood programs/ schools] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> Teacher or principal support <input type="checkbox"/> Information from local needs	<input type="checkbox"/> [Program to only show factors selected in Col 4]

		<input type="checkbox"/> To help districts plan their overall approach to reading/ELA instruction <input type="checkbox"/> To assess students' progress for summative purposes <input type="checkbox"/> Other: Please specify _____	assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Other: Please specify _____	
<i>Name #n</i>	<input type="checkbox"/> Early childhood <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> <input type="checkbox"/> 12	<input type="checkbox"/> To help classroom teachers monitor student progress <input type="checkbox"/> To screen children for additional support services <input type="checkbox"/> To help classroom teachers individualize instruction <input type="checkbox"/> To help schools plan their reading/ELA instruction <input type="checkbox"/> To help districts plan their overall approach to reading/ELA instruction <input type="checkbox"/> To assess students' progress for summative purposes <input type="checkbox"/> Other: Please specify _____	<input type="checkbox"/> Cost <input type="checkbox"/> Already being used in some [early childhood programs/ schools] in your district <input type="checkbox"/> Recommendation from head of district reading department <input type="checkbox"/> Teacher or principal support <input type="checkbox"/> Information from local needs assessment <input type="checkbox"/> Information from local literacy plan <input type="checkbox"/> Other: Please specify _____	<input type="checkbox"/> [Program to only show factors selected in Col 4]

Section 6: Instructional Coach(es)

If “Instructional coach(es)” selected in Q17: You indicated above that one of the reading/ELA-related activities your district is supporting with its CLSD grant is an instructional coach or coaches.

27. How many total FTEs (full-time equivalents) of coaches are funded through CLSD?

_____ FTEs

28. For what teachers is coaching being provided through CLSD? *Check all that apply.*

- Early childhood
- K
- 1
- ... (improve formatting for programming)
- 12

29. What were the key factors you considered in deciding to use part of your CLSD grant to fund instructional coaches? *Check all that apply*

- Recommendation from head of district reading department
- Requirement on state subgrant application
- Teacher or principal interest
- Information from local needs assessment
- Information from local literacy plan
- Evidence of effectiveness for improving teacher practice
- Evidence of effectiveness for improving student achievement
- Other: Please specify _____

If more than one factor selected in Q29: Which factor was the most important in your decision? Check one only.

- Program to only show factors selected in Q29

If “Evidence of effectiveness for improving teacher practice” or “Evidence of effectiveness for improving student achievement” selected in Q29: What resources did you use to assess the level of evidence for instructional coaching? Check all that apply.

- What Works Clearinghouse (WWC)
- State-provided clearinghouse, compendium, or list of evidence-based curricula/practices
- Other clearinghouses or compendiums (e.g., Evidence for ESSA)
- Journal search
- Other: Please specify _____
- Don't know

Section 7: Reading Specialist(s)

If “Reading specialist(s)” selected in Q17: You indicated above that one of the things your district is supporting with its CLSD grant is a reading specialist or specialists. When answering the following questions, please think about reading specialists employed by your district as well as external consultants. Please also think about

specialists based at the district as well as those based at individual schools, if applicable. *Do NOT include reading coaches in your answers in this section.*

30. How many FTEs (full-time equivalents) of reading specialists are funded through CLSD?

_____ FTEs

31. What are the primary responsibilities of this reading specialist(s)? *Please rank the top 3.*

____ Selecting or planning curricula

____ Providing professional development to teachers or other school staff

____ Delivering instruction or interventions directly to students, but not as a classroom teacher

____ Screening or assessing students for reading needs

____ Managing screening, assessment, or monitoring process

____ Other: Please specify _____

32. With what grade levels of teachers or students does this reading specialist(s) work as part of the CLSD program? *Check all that apply.*

- Early childhood
- K
- 1
- ... (improve formatting for programming)
- 12

33. What were the key factors you considered in deciding to use part of your CLSD grant to fund a reading specialist or specialists? *Check all that apply.*

- Recommendation by head of district reading department
- Teacher or principal interest or requests
- Information from local needs assessment
- Information from local literacy plan
- Other: Please specify _____

If more than one factor selected in Q33: Which factor was the most important in your decision? Check one only.

- Program to only show factors selected in Q33

Section 8: Professional Development

If “Professional development for teachers or administrators (e.g., classes, webinars, institutes, seminars)” selected in Q17: You indicated above that one of the things your district is supporting through its CLSD grant is professional development.

First, please think about the professional development (PD) your CLSD grant is supporting for **teachers [and/or early childhood educators]** in the 2020–21 school year.

34. What costs of professional development for teachers [and/or early childhood educators] is your district using its CLSD grant to support? *Check all that apply.*

- Trainers, speakers, or consultants for PD
- Stipends for teachers to attend PD
- Costs of substitute teachers
- Registration costs
- Travel costs
- Materials or equipment (e.g., audiovisual equipment) needed to hold PD
- Cost of location where PD is held (e.g., conference center)
- Other: Please specify _____

35. For what teachers is this CLSD-funded PD being provided? *Check all that apply.*

- Early childhood
- K
- 1
- ... (improve formatting for programming)
- 12

36. Which of the following types of PD activities is your CLSD grant providing to teachers? *Check all that apply.*

- Summer institute(s)
- In-person workshops, seminars, or classes during the school year
- Online courses or seminars during the school year
- Other: Please specify _____

37. Which of the following topics has the CLSD-funded PD provided to teachers [and/or early childhood educators] addressed? *Check all that apply.*

- Implementing core reading, ELA, or writing curricula
- Implementing reading, ELA, or writing curricula for students needing extra support
- Evidence-based strategies for instruction on decoding (phonological awareness and phonics)
- Evidence-based strategies for instruction on oral reading fluency
- Evidence-based strategies for instruction on vocabulary
- Evidence-based strategies for instruction on reading comprehension
- Evidence-based strategies for instruction on writing
- Evidence-based strategies for instruction on listening and speaking (oral language)

-
- Evidence-based strategies for instruction on English language mechanics (grammar, punctuation, capitalization)
 - Evidence-based strategies for instruction on spelling
 - Integrating reading and writing into content instruction
 - Use of technology and technology applications to improve teaching and learning
 - Selecting and teaching literary texts
 - Selecting and teaching informational texts
 - Motivating readers
 - Alignment of reading/ELA instruction with state academic standards
 - Alignment of reading/ELA instruction with schoolwide and districtwide educational improvement plans
 - Differentiation and grouping methods based on analysis of student work
 - Using screening and progress monitoring assessments to track student growth and diagnose reading problems
 - Use of data and assessments to inform classroom practice
 - How to provide appropriate instruction and support services to struggling readers
 - How to provide appropriate instruction and support services to English learners
 - How to provide appropriate instruction and support services to children with disabilities or developmental delays, including positive behavioral interventions and supports, multi-tiered system of supports, or use of accommodations
 - Classroom management skills
 - Ways to work effectively with parents and families
 - Ways to improve the transition to elementary school, including issues related to school readiness
 - Other: Please specify _____

38. Is your CLSD grant supporting PD for **school administrators**?

- Yes
- No

39. *If Q38=Yes: What topics are covered in the PD for school administrators? Check all that apply.*

- How to identify and implement literacy curricula, instructional strategies, or models that have been shown to be effective in increasing students' achievement
- How to develop and implement curriculum guides, frameworks, pacing sequences, and/or model literacy lessons aligned with state standards
- Content of reading instruction (decoding, vocabulary, fluency, comprehension, writing, oral language, use of literary text, use of informational text, grammar and punctuation, handwriting)
- How to observe and provide feedback to teachers on their literacy instruction
- How to support students who are struggling readers
- How to use reading research to guide content of instruction
- How to diagnose reading problems
- Strategies for teaching reading to English learners
- Strategies for teaching reading to students with disabilities or developmental delays

-
- How to integrate reading and writing instruction
 - Coordinating the involvement of early childhood education program staff, principals, other instructional leaders, teachers, teacher literacy teams, English as a second language specialists (as appropriate), special educators, school personnel, and specialized instructional support personnel (as appropriate) in the literacy development of children served
 - Other: Please specify _____

F. Continuous Improvement and Monitoring Process

This section asks about your district's process for collecting data and tracking reading outcomes for students in CLSD schools [and early learning programs].

40. What data is your district providing to the state on the reading performance of students in CLSD schools [and early learning programs]? *Check all that apply.*

- Standardized test scores
- Formative assessment data
- Curriculum unit test scores
- Other: Please specify _____
- None of the above

41. What data is your district providing to the state on the implementation of your CLSD activities? *Check all that apply.*

- Assessments of fidelity of implementation of core or supplemental reading/ELA curricula
- Assessments of quality/effectiveness of PD on reading/ELA instructional practice
- Teacher participation in reading/ELA-related PD or coaching
- Other: Please specify _____
- None of the above

42. Is your district using data to make changes to or improve its CLSD program?

- Yes
- No

43. *If Q44=Yes:* What data is your district using to make changes to or improve its CLSD program?

- Student scores on standardized reading tests
- Student scores on formative reading assessments
- Student scores on reading curriculum unit tests
- Assessments of fidelity of implementation of core or supplemental reading/ELA curricula
- Assessments of quality/effectiveness of PD on reading/ELA instructional practice
- Teacher participation in reading/ELA-related PD or coaching
- Other: Please specify _____

-
- None of the above

G. Wrap-Up

44. Have you identified challenges to fully implementing your CLSD grant as planned?

- Yes GO TO Q46
- No GO TO Q45

45. If Q44=Yes: What are the main challenges that you have identified in implementing your CLSD grant as planned?

Challenge	Check all challenges you have identified	Please provide a short description of your plan for remedying this challenge, if a plan has been identified.
Accessing sufficient information about CLSD program guidelines and requirements	•	_____ _____ —
Selecting interventions/practices that meet CLSD evidence requirements	•	_____ _____ —
Providing required data to state for CLSD program	•	_____ _____ —
Hiring sufficient new staff (e.g., coaches, specialists) to support CLSD activities	•	_____ _____ —
Gaining buy-in from teachers and principals for CLSD activities	•	_____ _____ —
Implementing all activities on schedule	•	_____ _____ —
Other: Please specify _____ —	•	_____ _____ —

46. Is there anything this survey did not ask but you think should have been asked, or that you think the [SEA], CLSD program office, or U.S. Department of Education should know about your district's experience with the CLSD program?

[NORC: Ask this of impact study districts only] Please upload your local literacy plan and local needs assessment. We will use this information to get a more detailed sense of what CLSD funds you initially expected to spend on various activities and how these activities align with your local needs and plan.

Thank you very much for your response!



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LOCATIONS

Domestic: Washington, DC (HQ) | Sacramento, and San Mateo, CA | Atlanta, GA | Chicago and Naperville, IL | Indianapolis, IN | Waltham, MA
Frederick and Rockville, MD | Chapel Hill, NC | New York, NY | Cayce, SC | Austin, TX | Arlington, VA | Seattle, WA

International: Ethiopia | Germany (A.I.R. Europe) | Haiti