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OMB No.: 0970-XXXX

Expiration Date: xx/xx/20xx

Head Start REACH

ERSEA Lead Staff Survey

INTRODUCTION

Thank you for participating in the Head Start REACH study. As a reminder, Mathematica is conducting this study for the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services.

The goal of the study is to improve understanding of how Head Start programs recruit, select, and enroll families who can most benefit from comprehensive Head Start services – for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use. The director of your program nominated you to complete this survey about practices used to recruit, select, and enroll families into your program.

Please keep the following in mind when responding to questions in this survey:

* **Head Start** refers to both Early Head Start and Head Start unless otherwise specified.
* **Recruitment** refers to how Head Start programs identify and reach out to families to recruit them (for example, by holding recruitment events in the community or collaborating with partners to recruit families) and how they monitor their recruitment efforts.
* **Selection** refers to how programs develop and carry out their selection criteria including verifying eligibility, reviewing application information to assign points, and selecting families for enrollment.
* **Enrollment** refers to how programs enroll selected families.

We appreciate your time and effort in completing this survey.

Your participation in the study is voluntary and you may refuse to answer any questions you are not comfortable answering. There are no risks associated with participating in this study. Your answers will be private to the extent permitted by law and will not be shared with parents or other staff in your program, or anybody else not working on this study. We will ensure all information is only reported in summary form and will not use your name, your program’s name, or other identifying information. Survey data will be transmitted to the Child & Family Data Archive or a similar data archive at the end of the study so it can be used by other researchers. We will remove any information that could identify you, your program and its staff or parents, or the community partners Head Start works with from the data before sharing it with the data archive.

Head Start REACH has obtained a Certificate of Confidentiality from the National Institutes of Health and been given Institutional Review Board (IRB) approval by Health Media Lab Institutional Review Board. If you have any questions or concerns, please contact Harshini Shah, the survey director, at hshah@mathematica-mpr.com or (617) 674-8360.

The survey will take about 45 minutes of your time to complete. At the end of the survey, you will be able to select a $35 gift card, which will be sent to you electronically.

By clicking on the link below, you are providing consent to participate in the study.

<<LINK>>

|  |
| --- |
| This collection of information is voluntary and will be used to improve understanding of how Head Start programs recruit, select, and enroll families who can most benefit from comprehensive Head Start services]. Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-XXXX, Exp: XX/XX/XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Amanda Coleman ([amanda.coleman@acf.hhs.gov](mailto:amanda.coleman@acf.hhs.gov)). |

SECTION A. RESPONDENT AND PROGRAM BACKGROUND CHARACTERISTICS

Let’s start with a few general questions about you, your community, and your program.

|  |
| --- |
| ALL |

A1. Can you confirm that you are [NAME from PD survey]?

Select one only

m Yes, my name is accurate 1

m No, my name is inaccurate 0

NO RESPONSE M

|  |
| --- |
| A1=0 |

A1A. What is your name?

(FIELD DESCRIPTION)

(STRING (NUM))

NO RESPONSE M

|  |
| --- |
| ALL |

A2. What is your official job title? If your exact title is not reflected in this list, please select “other” and enter your title.

Job Title: [DROP DOWN MENU]

m Program Director

m Center Director

m ERSEA Manager

m ERSEA Coordinator

m ERSEA Specialist

m Family Services Manager

m Family Services Coordinator

m Family Services Specialist/Advocate

m Other (SPECIFY)

Specify (STRING (NUM))

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

Your program director indicated that you are the person most responsible for recruitment, selection, and enrollment activities. In other words, you are the ERSEA lead in your program.

A3. For how many years have you been involved in recruitment, selection, and/or enrollment activities at your program?

Select one only

m Less than one year 1

m 1-2 years 2

m 3-5 years 3

m More than 5 years 4

NO RESPONSE M

|  |
| --- |
| ALL |

A4. What is the percentage of time you spend on recruitment, selection, and/or enrollment activities each week?

Select one only

🔾 0-25% 1

🔾 26-50% 2

🔾 51% to 75% 3

🔾 76% to 100% 4

NO RESPONSE M

SECTION B. STAFFING AND STAFF TRAINING RELATED TO RECRUITMENT, SELECTION, AND ENROLLMENT

This section is about staffing and staff training related to recruitment, selection, and enrollment in your program. The first questions are about staffing.

Please refer to the following definitions for recruitment, selection, and enrollment used on this study to help you answer questions in this survey.

* **Recruitment** refers to how Head Start programs identify and reach out to families to recruit them (for example, by holding recruitment events in the community or collaborating with partners to recruit families) and how they monitor their recruitment efforts.
* **Selection** refers to how programs develop and carry out their selection criteria including verifying eligibility, reviewing application information to assign points, and selecting families for enrollment.
* **Enrollment** refers to how programs enroll selected families.

The next few questions are about training that you and other staff received related to recruitment, selection, and enrollment since September 2023. These could be trainings that you and other staff attended in person or virtually.

|  |
| --- |
| ALL |

B1. Since September 2023, have you received training specific to recruitment, selection, or enrollment?

m Yes 1

m No 0

m Not sure 2

NO RESPONSE M

|  |
| --- |
| B1=1 or 2 |

B2. Since September 2023, what topics related to recruitment, selection, and enrollment processes have you and other staff involved in ERSEA activities received training on?

Select all that apply

o Head Start Program Performance Standards 1

o Early Head Start/Head Start eligibility 2

o Family engagement strategies 3

o Recruitment strategies 4

o Recruitment tracking or keeping records of recruitment efforts, such as

family applications, staff-family contacts, referrals received from partners,

and identifying effective or successful recruitment strategies (that result in

families applying to the program) 5

o Developing selection criteria 6

o Assigning points and selecting families for enrollment 7

o Enrolling families into the program 8

o Enrollment tracking, such as efforts to record the number of accepted families   
who enroll in the program, those who decline an offered spot, and families’   
reasons for declining enrollment 9

o Other (SPECIFY) 99

Specify (STRING (NUM))

o I have not received any of these trainings in the past year 0

o Don’t know D

NO RESPONSE M

|  |
| --- |
| B1=1 or 2 |

B3. Programs sometimes adapt or make adjustments to their recruitment, selection, and enrollment to accommodate families who can most benefit from comprehensive Head Start services and families with different backgrounds. Examples of families who can most benefit from comprehensive Head Start services include those experiencing poverty, homelessness, involvement in the foster care or child welfare system, or affected by substance use. Examples of families from different backgrounds include different racial, ethnic, or cultural groups, languages, or family structures, such as single parent or extended families.

Since September 2023, which of the following topics related to recruiting, selecting, and enrolling families

have you and other staff received training on?

Select all that apply

o Relationship building practices with families 1

o Adapting recruitment strategies for families who can most benefit from

comprehensive Head Start services (for example, those experiencing poverty or

homelessness, involved in foster care or child welfare,

or affected by substance use) 2

o Adapting recruitment strategies for families from different backgrounds, (such as   
different racial, ethnic, or cultural groups, languages, or family structures) 3

o Adapting selection procedures for families who can most benefit from

comprehensive Head Start services 4

o Adapting selection procedures for families from different backgrounds 5

o Adapting enrollment procedures for families who can most benefit from

comprehensive Head Start services 6

o Adapting enrollment procedures for families from different backgrounds 7

o Trauma-informed approaches and communicating with families who have   
experienced trauma 8

o Asking sensitive questions (for example, about substance use, mental health

concerns, domestic violence, child maltreatment, and child welfare) 9

o Communicating with families experiencing poverty 10

o Demonstrating cultural sensitivity when communicating with families 11

o Communicating with families from different language backgrounds 12

o Family resilience and protective factors 13

o Diversity/cultural sensitivity/unconscious bias 14

o Using motivational interviewing techniques 15

o Other (SPECIFY) 99

Specify (STRING (NUM))

o I have not received any of these trainings since September 2023 0

o Don’t know D

NO RESPONSE M

|  |
| --- |
| B2 NE 0 or D or B3 NE 0 or D |

B4. Who provided these trainings to you and to other staff? You may select more than one response.

Select all that apply

o Conferences and workshops 1

o Early Childhood Learning & Knowledge Center (ECLKC) 2

o Consultants or onsite trainers 3

o Staff from your program 4

o Office of Head Start National TA Centers 5

o Office of Head Start Regional TA Specialists 6

o Courses for certification or credit 7

o Local TA or offsite community partners 8

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| B2 NE 0 or D or B3 NE 0 or D |

B5. What was the format of these trainings? Please select all that apply.

Select all that apply

o In-person 1

o Live webinar 2

o Recorded webinar 3

o Self-guided online training 4

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

B6. How does your program leadership, such as your program director, support you in working with families?

Select all that apply

o Engaging in discussions with you about strategies for building relationships with

families 1

o Providing emotional support in working with families with challenging experiences

and circumstances 2

o Discussing effective strategies for recruitment, selection, and enrollment of families

into the program 3

o Discussing how you can adapt strategies for the recruitment, selection,

and enrollment of families who can most benefit from

comprehensive Head Start services 4

o Discussing strategies for communicating with and supporting families from different

cultural backgrounds 5

o Discussing strategies for communicating with and supporting families from different language backgrounds 6

o Identifying need for training and ensuring that you receive training in communicating

and working with families with challenging experiences and circumstances 7

o Checking in with you and helping you troubleshoot issues related to

specific families 8

o Other (SPECIFY) 99

Specify (STRING (NUM))

o My program leadership does not support me in working with families 0

o Don’t know D

NO RESPONSE M

SECTION C: DEVELOPMENT AND USE OF RECRUITMENT, SELECTION, AND ENROLLMENT PRACTICES

These next few questions are about how your program develops and uses its recruitment, selection, and enrollment practices. The first question is about your program’s community needs assessment.

|  |
| --- |
| ALL |

C1. How does your program use data from the community needs assessment?

Select all that apply

o Assess the needs of families in the program’s service area 1

o Develop/refine selection criteria based on the needs of families

in the service area 2

o Determine which families among those who can most benefit from comprehensive

Head Start services (for example, those experiencing poverty or homelessness,

involved in foster care or child welfare, or affected by substance use) to focus on for

program’s recruitment, selection, and enrollment efforts 3

o Update program policies and procedures to provide appropriate services to   
enrolled families 4

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

Recruitment

The next few questions are about recruitment. As a reminder, recruitment refers to how Head Start programs identify and reach out to families to recruit them (for example, by holding recruitment events in the community or collaborating with partners to recruit families) and how they monitor their recruitment efforts.

|  |
| --- |
| ALL |

C2. Does your program have a recruitment plan for the 2024-25 program year?

A formal or informal recruitment plan may include goals for the types of families your program seeks to enroll, and strategies for recruiting families successfully.

m Yes 1

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| C2=1 |

C3. What information did your program use to develop its recruitment plan?

Select all that apply

o Community needs assessment 1

o Program’s self-assessment 2

o Information from parents/caregivers in the program 3

o Information from program staff 4

o Information from community partners 5

o Information from Parent Policy Council 6

o Information from the Governing Board 7

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| C2=1 |

C4. Does your program’s recruitment plan include goals or plans related to the following?

PROGRAMMER: CODE ONE PER ROW

Select one per row

|  | Yes | No | Don’t Know |
| --- | --- | --- | --- |
| a. Achieving or maintaining full enrollment | 1 m | 0 m | DK m |
| b. Enrolling families who can most benefit from comprehensive Head Start services (for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use) | 1 m | 0 m | DK m |
| c. Reserving slots for families with specific needs (for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use) | 1 m | 0 m | DK m |
| d. Enrolling children of specific ages | 1 m | 0 m | DK m |
| e. Enrolling children with disabilities | 1 m | 0 m | DK m |
| f. Geographic locations to focus recruitment efforts on | 1 m | 0 m | DK m |
| g. Recruitment strategies to use | 1 m | 0 m | DK m |

|  |
| --- |
| Any of C4a-g=1 |
| Fill responses from C4 |

C5. How successful is your program in achieving the goals included in your program’s recruitment plan?

PROGRAMMER: CODE ONE PER ROW

Select one per row

|  | Extremely successful | Successful | Somewhat successful | Not at all successful | Don’t know |
| --- | --- | --- | --- | --- | --- |
| a. | 1 m | 2 m | 3 m | 4 m | d m |
| b. | 1 m | 2 m | 3 m | 4 m | d m |
| c. | 1 m | 2 m | 3 m | 4 m | d m |

|  |
| --- |
| ALL |

C6. Which of the following recruitment approaches does your program use?

Select all that apply

o Word of mouth references from friends, family, and community members 1

o Current or former parents/caregivers serve as parent ambassadors 2

o Door-to-door outreach 3

o Conducting outreach at times that are convenient for families 4

o Networking and connecting with community partners 5

o Recruitment events held by program on program premises 6

o Recruitment events held by program in the community 7

o Visiting community spaces (for example, flea markets, parks, apartment complexes,

and libraries) 8

o Attending events in community spaces (for example, block parties, donation drives,

and cultural festivals) 9

o Direct referrals from community partners or other entities 10

o Media and news outlets to advertise the program 11

o Social media websites, such as Facebook and X (formerly known as Twitter) 12

o Text messaging 13

o Developing and distributing outreach materials (such as brochures, informational

videos, or fliers advertising the program) 14

o Deploying recruitment staff with similar backgrounds or lived experiences as

Head Start eligible families 15

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| C6 14=1 |

C7. What languages does your program provide outreach materials in?

Select all that apply

o English 1

o Spanish 2

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C8. Now, think about how your program recruits families who can most benefit from comprehensive Head Start services - for example, those experiencing poverty, homelessness, involvement in the foster care or child welfare system, or affected by substance use. In your experience, which of these strategies are the most successful in recruiting these families?

Select all that apply

o Word of mouth references from friends, family, and community members 1

o Outreach by current or former parents/caregivers 2

o Door-to-door outreach 3

o Conducting outreach at times that are convenient for families 4

o Networking and connecting with community partners 5

o Recruitment events held by program on program premises 6

o Recruitment events held by program in the community 7

o Attending events or going to community spaces (for example, block parties,   
flea markets, parks, apartment complexes, libraries) 8

o Direct referrals from community partners or other entities 9

o Media and news outlets to advertise the program 10

o Social media websites, such as Facebook and X (formerly known as Twitter) 11

o Text messaging 12

o Developing and distributing outreach materials (such as brochures, informational

videos or fliers advertising the program) 13

o Staff recruiting families share a similar background to Head Start eligible families, such as language or culture 14

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C9. How does your program adapt recruitment strategies for families who can most benefit from comprehensive Head Start services - for example, those experiencing poverty, homelessness, involvement in the foster care or child welfare system, or affected by substance use?

Select all that apply

o Focus on specific geographic locations where families who can most benefit from comprehensive Head Start services reside or are likely to visit 1

o More intentional relationship building with these families 2

o Expedited application process for these families 3

o Focus on building partnerships with organizations that serve these families 4

o Develop MOUs with partners serving these families 5

o Leverage connections with partners (for example, by requesting that partner staff   
highlight the benefits of Head Start to these families and refer them to Head Start) 6

o Prioritize referrals from partners serving these families 7

o Emphasize specific services (beyond child care) that these families need 8

o Media and news outlets to advertise the program 9

o Train staff in strategies to recruit families who are most in need of

Head Start services 10

o Other (SPECIFY) 99

Specify (STRING (NUM))

o My program does not adapt recruitment strategies for families who can most benefit from comprehensive Head Start services 0

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C10. How do families apply to your program? Please select all that apply.

Select all that apply

o Families work with Head Start program staff in person to complete application 1

o Families work with Head Start program staff over the phone to complete   
application 2

o Families work with Head Start program staff online to complete application 3

o Families work with staff from partner organization to complete application 4

o Families independently complete applications online 5

o Families independently complete applications in person at the program 6

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C11. Some programs keep records of their recruitment efforts, such as family applications, staff-family contacts, and referrals received from partners. Which recruitment efforts does your program record?

Select all that apply

o Referrals received from partners 1

o Referrals received from other organizations in the community 2

o Word of mouth referrals from other parents/caregivers 3

o Recruitment contacts made by program staff 4

o Status of applications submitted by families 5

o Informal inquiries made by families 6

o Recruitment experiences of families 7

o Information from parents/caregivers about how they first learned about the

program 8

o Other (SPECIFY) 99

Specify (STRING (NUM))

o My program does not keep records of recruitment efforts 0

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C12. The statements below are about your program’s recruitment efforts. Please indicate whether you strongly disagree, disagree, agree, or strongly agree with each statement.

PROGRAMMER: CODE ONE PER ROW

Select one per row

|  | Strongly disagree | Disagree | Agree | Strongly agree | Don’t know |
| --- | --- | --- | --- | --- | --- |
| a. Your Head Start program’s application process is generally easy and streamlined for families | 1 m | 2 m | 3 m | 4 m | d m |
| b. Your Head Start program’s application process is easy and streamlined for families who can most benefit from comprehensive Head Start services - for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use | 1 m | 2 m | 3 m | 4 m | d m |
| c. Program staff focus on relationship building and earn families’ trust to recruit them successfully | 1 m | 2 m | 3 m | 4 m | d m |
| d. Program staff feel empowered and comfortable in communicating with families during the recruitment process | 1 m | 2 m | 3 m | 4 m | d m |
| e. Your program is equipped to communicate with families in all the major languages in the program’s service area | 1 m | 2 m | 3 m | 4 m | d m |
| f. Your program’s schedule suits participating families’ schedules | 1 m | 2 m | 3 m | 4 m | d m |
| g. Your program’s location is convenient for participating families | 1 m | 2 m | 3 m | 4 m | d m |
| h. Your program provides transportation assistance to participating families | 1 m | 2 m | 3 m | 4 m | d m |
| i. Your program offers the services families need to consider Head Start as a convenient option | 1 m | 2 m | 3 m | 4 m | d m |
| j. Your program successfully leverages relationships with partners to recruit families | 1 m | 2 m | 3 m | 4 m | d m |
| k. Your program successfully leverages relationships with partners to serve participating families | 1 m | 2 m | 3 m | 4 m | d m |
| l. Your program successfully leverages relationships with parents/caregivers to recruit other eligible families | 1 m | 2 m | 3 m | 4 m | d m |
| m. Families in the community understand what Head Start is and how it can help them | 1 m | 2 m | 3 m | 4 m | d m |
| n. Partners understand what Head Start is and how it can help families | 1 m | 2 m | 3 m | 4 m | d m |
| o. It is difficult to recruit families because there are other early care and education options in the program service area | 1 m | 2 m | 3 m | 4 m | d m |
| p. It is difficult to recruit families who can most benefit from comprehensive Head Start services--for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use--because it is challenging to earn these families’ trust | 1 m | 2 m | 3 m | 4 m | d m |
| q. It is difficult to recruit families who can most benefit from Head Start services because it is difficult to identify and locate these families | 1 m | 2 m | 3 m | 4 m | d m |
| r. It is difficult to recruit families who can most benefit from comprehensive Head Start services because my program does not have strong relationships with partners who already work with these families | 1 m | 2 m | 3 m | 4 m | d m |

Selection

The next questions are about your program’s selection procedures. As a reminder selection refers to how programs develop and carry out their selection criteria including verifying eligibility, reviewing application information to assign points, and selecting families for enrollment

|  |
| --- |
| ALL |

C13. What information does your program use to develop and update its selection criteria?

Select all that apply

o Community needs assessment 1

o Program’s self-assessment 2

o Information from parents/caregivers in the program 3

o Information from program staff 4

o Information from community partners 5

o Information from Parent Policy Council 6

o Information from the Governing Board 7

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C14. How often does your program review and update its selection criteria?

Select one only

m More than once a year 1

m Once a year 2

m Once every two years 3

m Over two years ago 4

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C15. Does your program assign points for families with the following experiences or circumstances?

PROGRAMMER: CODE ONE PER ROW

Select one per row

|  | Yes | No | Don’t know |
| --- | --- | --- | --- |
| a. Deep poverty (below 50% of the federal poverty threshold) | 1 m | 0 m | d m |
| b. Homelessness (refers to individuals without fixed, regular, and adequate nighttime residence. Examples include living with family or friends due to loss of housing; or living in emergency or transitional shelters) | 1 m | 0 m | d m |
| c. Involved in foster care or child welfare (such as being a foster parent or having a child involved in the child welfare system) | 1 m | 0 m | d m |
| d. Affected by substance use (that is, substance use by a parent/caregiver or another member of the family) | 1 m | 0 m | d m |
| e. Affected by mental health concerns | 1 m | 0 m | d m |
| f. Affected by domestic violence | 1 m | 0 m | d m |
| g. Teen parent/caregiver household | 1 m | 0 m | d m |
| h. Child or family primarily speaks a language other than English | 1 m | 0 m | d m |
| i. Incarceration of a family member | 1 m | 0 m | d m |
| j. Refugee or immigrant family | 1 m | 0 m | d m |
| k. Child with disability | 1 m | 0 m | d m |
| l. Lack of employment or under-employment | 1 m | 0 m | d m |

|  |
| --- |
| ALL |

C16. Does your program adapt eligibility verification requirements for families who can most benefit from comprehensive Head Start services - for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use? For example, by being flexible with documents required for verifying eligibility or obtaining some documents required for eligibility verification from partners?

m Yes 1

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| C16=1 |

C17. How does your program adapt eligibility verification requirements for families who can most benefit from comprehensive Head Start services – for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use? Please select all that apply.

Select all that apply

o Being flexible with timelines for submitting documents required for verification 1

o Using a third party, such as a homeless shelter or other community agency,   
to verify eligibility 2

o Obtaining some documents required for eligibility verification from partners 3

o Other (SPECIFY) 99

Specify (STRING)

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C18. How does your program ensure that staff assign selection points and select families in accordance with selection criteria?

Select all that apply

o Multiple staff members review families’ applications 1

o Multiple staff members are involved in assigning points to each family’s   
application 2

o Selection decisions are made collaboratively with other staff 3

o Selection decisions are reviewed by supervisors and program management 4

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C19. Are there factors other than assigned points that your program considers in selecting families for enrollment?

m Yes 1

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| C19=1 |

C20. Which factors beyond assigned points does your program consider in selecting families for enrollment?

Select all that apply

o Availability of slots in classrooms or home visitor caseloads 1

o Classroom composition, such as number of children with disabilities in each   
classroom 2

o Age range of children in the classroom 3

o Referrals from partners 4

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C21. Does your program currently have a waitlist? This could be at the program or center level.

m Yes, for Early Head Start only 1

m Yes, for Head Start only 2

m Yes, for both Early Head Start and Head Start 3

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| C21=1 |

C22. For families who are currently on your program’s waitlist, how long do you think it will take on average to offer them a slot?

Select one only

m Less than a week 1

m Less than a month 2

m One to three months 3

m Four to six months 4

m Seven to nine months 5

m Ten months to a year 6

m Longer than a year 7

m Don’t know D

NO RESPONSE M

|  |
| --- |
| C21=1 |

C23. How often do program staff contact families currently on the waitlist to provide updates on their position   
on the waitlist?

Select one only

m Once a week or more often 1

m Once every month 2

m Once every couple of months 3

m Once or twice a year 4

m Program staff only contact waitlisted families when they have been selected   
for enrollment 5

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C24. When during the program year do you typically have families on your program’s waitlist?

m Throughout the year 1

m At the start of the program year 2

m Middle of the program year 3

m End of the program year 4

m We do not typically have a waitlist 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C25. When you have families on the waitlist, which of the following supports does your staff provide to them?

While on the waitlist, program staff...

Select all that apply

o …connect families to other child care options in the community 1

o …connect families to other supports or services in the community 2

o ... provide families with some other kind of support (SPECIFY) 99

Specify (STRING (NUM))

o We do not provide any of these supports 0

o We do not typically have a waitlist NA

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C26. The statements below are about your program’s selection processes. Please indicate whether you strongly disagree, disagree, agree, or strongly agree with each statement.

PROGRAMMER: CODE ONE PER ROW

Select one per row

|  | Strongly disagree | Disagree | Agree | Strongly agree | Don’t know | Not applicable |
| --- | --- | --- | --- | --- | --- | --- |
| a. Your program’s selection criteria are effective at prioritizing families who can most benefit from comprehensive Head Start services in your program service area for enrollment | 1 m | 2 m | 3 m | 4 m | d m |  |
| b. Your program’s eligibility verification process is easy and streamlined for families | 1 m | 2 m | 3 m | 4 m | d m |  |
| c. Your program’s waitlist process is easy and streamlined for families | 1 m | 2 m | 3 m | 4 m | d m | NA m |
| d. Your program’s waitlist process is easy and streamlined for families who can most benefit from comprehensive Head Start services- for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use | 1 m | 2 m | 3 m | 4 m | d m | NA m |
| e. Your program’s eligibility verification process is easy and streamlined for families who can most benefit from comprehensive Head Start services | 1 m | 2 m | 3 m | 4 m | d m |  |
| f Program staff feel empowered and comfortable in communicating with families during the waitlist process | 1 m | 2 m | 3 m | 4 m | d m | NA m |
| g. Program staff feel empowered and comfortable in communicating with families during the eligibility verification process | 1 m | 2 m | 3 m | 4 m | d m |  |
| h. Your program successfully leverages relationships with partners to verify families’ eligibility | 1 m | 2 m | 3 m | 4 m | d m |  |
| i. Partners understand how to help families verify eligibility in Head Start successfully | 1 m | 2 m | 3 m | 4 m | d m |  |
| j. It is difficult to select families who can most benefit from comprehensive Head Start services because it is difficult to verify their eligibility | 1 m | 2 m | 3 m | 4 m | d m |  |

Enrollment

The next questions are about procedures your program uses to enroll accepted families into the program. As a reminder, enrollment refers to how programs enroll selected families.

|  |
| --- |
| ALL |

C27. What kinds of assistance does your program offer to support the enrollment of accepted families into the program?

Select all that apply

o Assistance completing enrollment forms 1

o Assistance in gathering enrollment documentation 2

o Connecting with families during the enrollment process (for example, conducting

a home visit) 3

o Highlighting program services that would be helpful to families 4

o Connecting newly enrolled families with families who are already enrolled 5

o Providing extra support to families in early months of enrollment 6

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C28. Does your program conduct the enrollment visit in person or online/by phone?

m In-person only 1

m Online/by phone only 2

m In-person and online/by phone 3

m My program does not conduct enrollment visits 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| C28 NE DK or 0 |

C29. What is the purpose of the enrollment visit?

Select all that apply

o Relationship building with families 1

o Provide information/ answer families’ questions about the program 2

o Obtain additional information about families’ needs 3

o Discuss program options 4

o Fill out/collect enrollment forms 5

o Fill out and collect other paperwork necessary for enrollment 6

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C30. Does your program hold an orientation meeting or open house for newly enrolled families before they begin receiving services?

m Yes 1

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C31. For families who receive classroom-based services, does your program offer newly enrolled families a chance to visit the center before they begin receiving services?

m Yes 1

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C32. How does your program adapt or tailor enrollment procedures for families who can most benefit from comprehensive Head Start services – for example, those experiencing poverty, homelessness, involvement in the foster care or child welfare system, or affected by substance use?

Select all that apply

o Exercise flexibility in documents to verify income and identity 1

o Prioritize the collection of the most important paperwork 2

o Offer flexible locations and/or schedule for conducting the enrollment visit 3

o Collaborate with partners who support families in completing enrollment   
requirements 4

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C33. How do community partners support the enrollment process?

Select all that apply

o Help families fill out enrollment forms 1

o Help families obtain documentation 2

o Provide transportation support to and from the program 3

o Contact families who are not responsive to the program 4

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C34. What does your program do to achieve or maintain full enrollment?

Select all that apply

o Maintain a strong community presence 1

o Make efforts to hire qualified staff 2

o Focus on staff retention 3

o Offer staff wellness supports 4

o Offer staff competitive salaries 5

o Collaborate with community partners 6

o Follow up with families who decline a spot 7

o Monitor attendance and address attendance barriers

to retain families in the program 8

o Strengthen relationships with families to support retention 9

o Offer transportation support to families 10

o Be proactive about conducting outreach to eligible families 11

o Track enrollment data 12

o Conduct outreach to families with younger siblings (of enrolled children) 13

o Collaborate with partners who support families in completing enrollment   
requirements 14

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C35. Does your program keep a record of the following types of data related to enrollment?

Select all that apply

o Reasons families decline an offered spot 1

o Whether child attends first day of school once enrolled 2

o Whether family completes first home visit once enrolled 3

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C36. From what you know and hear, what are the reasons why a family may decline a spot when it is offered to them?

Select all that apply

o Inconvenient program location 1

o Inconvenient program hours of operation 2

o Lack of transportation to or from program 3

o Family did not receive the service option that they wanted 4

o Family found the waitlist process frustrating 5

o Family found paperwork burdensome 6

o Family decided not to enroll child in any child care program 7

o Family chose a different child care option 8

o Family did not feel they could meet Head Start’s attendance requirements 9

o Family was experiencing challenging or difficult circumstances and did not feel like

they could attend 10

o Families did not consider Head Start to be respectful of their culture 11

o Families did not consider Head Start to be respectful of their primary   
home language 12

🞏 Families did not want a program designed for families with low incomes 13

o Family moved outside the program’s service area 14

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| C36 NE DK or Missing |
| Fill responses from C36 |

C37. Which of the reasons do you think are the most common ones in families declining enrollment into your program? Please select up to three.

Select one response per column

|  | 1st most common | 2nd most common | 3rd most common |
| --- | --- | --- | --- |
| a. Response 1 | 1 m | 2 m | 3 m |
| b. Response 2 | 1 m | 2 m | 3 m |
| c. Response 3 | 1 m | 2 m | 3 m |
| d. Response 4 | 1 m | 2 m | 3 m |
| e. Response 5 | 1 m | 2 m | 3 m |
| f. Response 6 | 1 m | 2 m | 3 m |
| g. Response 7 | 1 m | 2 m | 3 m |
| h. Response 8 | 1 m | 2 m | 3 m |
| i. Response 9 | 1 m | 2 m | 3 m |
| j. Response 10 | 1 m | 2 m | 3 m |
| k. Don’t know | d m | d m | d m |

|  |
| --- |
| ALL |

C38. When a family declines a spot, does your program try to work through barriers or offer support that may make it possible for them to attend the program?

m Yes 1

m No 0

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C39. The statements below are about your program’s enrollment efforts. Please indicate whether you strongly disagree, disagree, agree, or strongly agree with each statement.

PROGRAMMER: CODE ONE PER ROW

Select one per row

|  | Strongly disagree | Disagree | Agree | Strongly agree | Don’t know |  |
| --- | --- | --- | --- | --- | --- | --- |
| a. Your Head Start program’s enrollment process is easy and streamlined for families | 1 m | 2 m | 3 m | 4 m | d m |  |
| b. Your Head Start program’s enrollment process is easy and streamlined for families who can most benefit from comprehensive Head Start services – for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use. | 1 m | 2 m | 3 m | 4 m | d m |  |
| c. Program staff focus on relationship building and earn families’ trust to enroll them successfully | 1 m | 2 m | 3 m | 4 m | d m |  |
| d. Program staff feel empowered and comfortable in communicating with families during the enrollment process | 1 m | 2 m | 3 m | 4 m | d m |  |
| e. Your program is equipped to communicate with families in all the major languages in the program service area | 1 m | 2 m | 3 m | 4 m | d m |  |
| f. Your program has useful and timely data to help maintain full enrollment | 1 m | 2 m | 3 m | 4 m | d m |  |
| g. Your program offers the services families need to successfully enroll in Head Start | 1 m | 2 m | 3 m | 4 m | d m |  |
| h. Your program successfully leverages relationships with partners to enroll families | 1 m | 2 m | 3 m | 4 m | d m |  |
| i. Partners understand how to help families enroll in Head Start successfully | 1 m | 2 m | 3 m | 4 m | d m |  |
| j. It is difficult to enroll families who can most benefit from comprehensive Head Start services because it is difficult to get the necessary documentation to verify their eligibility | 1 m | 2 m | 3 m | 4 m | d m |  |
| k. It is difficult to enroll families who can most benefit from comprehensive Head Start services because they often move by the time they are selected from the waitlist | 1 m | 2 m | 3 m | 4 m | d m | NA m |

|  |
| --- |
| ALL |

C40. Most recently, SNAP receipt has been added to the ways in which families are considered categorically eligible for Head Start. Which of the following ERSEA practices in your program have been affected by this change?

Select all that apply

o Recruitment strategies (for example, targeting recruitment from SNAP agencies, incorporating information about SNAP into program outreach materials) 1

o Methods of verifying eligibility (verifying SNAP receipt with SNAP agencies) 2

o Priority point assignment (assigning higher points to families who receive SNAP) 3

o Prioritizing SNAP receipt over income for determining eligibility 4

o Prioritizing SNAP receipt over homelessness for determining eligibility 5

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

Partners

The next few questions are about how your program forms relationships and works with partner organizations to support recruitment, selection, and enrollment.

|  |
| --- |
| ALL |

C41. Head Start programs often form partnerships with community organizations to support their recruitment, selection, and enrollment processes. What are the ways in which your program identifies new   
organizations to partner with?

Select all that apply

o Attending community or networking events 1

o Suggested by existing partner 2

o Searching for partners that provide a service enrolled families need 3

o Partner reaches out directly to program to form a partnership 4

o Partner operates under the same umbrella agency as Head Start 5

o Partner is part of the same government-sponsored collaborative as your Head   
Start program (such as a city-sponsored early care and education working group) 6

o Partner is part of the same community-sponsored collaborative as your Head   
Start program (such as a foundation-sponsored early care and education   
collaborative) 7

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C42. What types of organizations does your program currently partner with for its recruitment, selection, and enrollment activities?

Select all that apply

o Homeless or transitional housing shelters 1

o Housing assistance organizations 2

o Substance use clinic or organizations 3

o Domestic violence shelters or organizations 4

o Mental or behavioral health clinics or organizations 5

o Pre-natal/pregnancy support clinics or organizations 6

o Other health care clinics, hospitals, or organizations 7

o Local WIC offices 8

o Food banks or food assistance organizations 9

o Foster care agencies or organizations 10

o Other social service or economic assistance agencies 11

o Other ECE or child care providers 12

o Organizations serving families with young children 13

o Organizations offering parenting programs 14

o Organizations offering home visiting services 15

o Schools, including K-12 and higher education 16

o Re-entry programs 17

o Immigrant or refugee resettlement programs 18

o Libraries or other public institutions 19

o Religious organizations 20

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |
| Fill responses from C42 |

C43. Which of these partners do you think are most successful at helping your program recruit, enroll, or select families who can most benefit from comprehensive Head Start services – for example, those experiencing poverty or homelessness, involved in foster care or child welfare, or affected by substance use?   
Please select up to three.

Select one response per column

|  | 1st most effective | 2nd most effective | 3rd most effective |
| --- | --- | --- | --- |
| a. Response 1 | 1 m | 2 m | 3 m |
| b. Response 2 | 1 m | 2 m | 3 m |
| c. Response 3 | 1 m | 2 m | 3 m |
| d. Response 4 | 1 m | 2 m | 3 m |
| e. Response 5 | 1 m | 2 m | 3 m |
| f. Response 6 | 1 m | 2 m | 3 m |
| g. Response 7 | 1 m | 2 m | 3 m |
| h. Response 7 | 1 m | 2 m | 3 m |
| i. Don’t know | d m |  |  |

For the remaining questions about community partners, please think about the three partners you indicated as most effective above.

|  |
| --- |
| ALL |

C43. How do you generally communicate with your community partners?

Select all that apply

o Phone 1

o Email 2

o Text message 3

o Virtual meetings 4

o In person at partner’s facility 5

o In person at program 6

o In person at community events that partner also attends 7

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C44. What is the frequency with which you communicate with the partners you work most closely with for recruitment, selection, and enrollment activities?

Select one only

m Daily 1

m Two to three times a week 2

m Once a week 3

m Two to three times a month 4

m Once a month 5

m A few times per year 6

m Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C45. What are the topics that you generally discuss with partners?

Select all that apply

o Needs of families that partner refers to Head Start 1

o Needs of families enrolled in Head Start 2

o Identification of eligible families for recruitment to Head Start 3

o Waitlist procedures for Head Start 4

o Waitlist status of eligible Head Start families 5

o Needs of families on Head Start waitlist 6

o Strategies to work together to promote and sustain family enrollment 7

o Strategies to improve communication between partner and Head Start 8

o New initiatives that partner and Head Start can start together 9

o Strategies to strengthen the partnership 10

o Documentation support for Head Start enrollment of families partner provides   
services to 11

o Other (SPECIFY) 99

Specify (STRING (NUM))1

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C46. What are the strengths of your relationships with your community partners?

Select all that apply

o Clear, frequent communication 1

o Strong, positive relationship 2

o Shared values/goals/vision 3

o Ability to discuss challenges and work through them collaboratively 4

o Ability to partner with each other in service of families with the greatest needs 5

o Staff from partner organizations inform families of their eligibility for Head Start 6

o Head Start program and some partner organizations have a joint application

process 7

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C47. What are the challenges that you generally face in working with your partners?

Select all that apply

o Need to obtain consent from the family before sharing information about

individual families 1

o Need to establish formal MOU before sharing information about individual families 2

o Infrequent communication 2

o Staff turnover at Head Start program 3

o Staff turnover at partner organization 4

o Difficulty scheduling meetings with partner staff 5

o Demand for Head Start slots exceeds what the Head Start program can provide 6

o Partner organization sometimes does not understand the nature of Head Start   
and its services 7

o Other (SPECIFY) 99

Specify (STRING (NUM))

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C48. How does your program leadership, such as your program director, support you in building partnerships and working with partners?

Select all that apply

o Engaging in discussions with you about the types of organizations to partner with 1

o Providing contact information for partner organization staff 2

o Introducing you to partner organization staff 3

o Providing resources and support that allow you to collaborate with partner

organization staff 4

o Facilitating the development of agreements (such as memoranda of understanding)

that allow sharing of information between programs and partner staff 5

o Checking in with you and helping you troubleshoot issues related to

specific partners 6

o Other (SPECIFY) 99

Specify (STRING (NUM))

o My program leadership does not support me in building partnerships or working

with partners 0

o Don’t know D

NO RESPONSE M

|  |
| --- |
| ALL |

C49. Finally, we are interested in learning how programs can improve their recruitment, selection, and   
enrollment processes. Based on your experience, if resources were not a concern, how would you   
improve your program’s recruitment, selection, and enrollment processes?

[OPEN ENDED]

Thank you very much for your participation and cooperation in this important study.