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Head Start Management Fellows Program Follow-up Survey

Thank you for having participated in the Head Start Management Fellows (HSMF) Program, conducted by the UCLA Anderson School of Management. To help ensure the quality of our services, we ask that you complete the following feedback survey about the HSMF Program by reflecting on the program in its entirety and its outcomes. This brief survey is voluntary and all feedback will be kept private. To further protect your privacy, please refrain from including personally identifiable information in open-ended responses.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Through this information collection, we are gathering feedback to improve service delivery. Public reporting burden for this collection of information is estimated to average 12 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control

number. If you have any comments on this collection of information, please contact izuliani@donahue.umass.edu.

A. Background Information

1. Which of the following best describes your current employment situation?
 - ☐ I am currently working in Head Start – respond to 1a
 - ☐ I am currently working outside of Head Start – respond to 1b
 - ☐ I am not currently employed – respond to 1c
 - a. Which of the following best describes your current employment situation?
 - ☐ I am working in the same organization and same position as when I attended the Head Start Management Fellows Program.
 - ☐ I am working in the same organization, but I have changed positions since attending the Head Start Management Fellows Program
 - ☐ I am working in a different organization, but a similar position as when I attended the Head Start Management Fellows Program.
 - ☐ I am working in a different organization AND different position from when I attended the Head Start Management Fellows Program.
 - ☐ I am working in a consulting role related to Head Start
 - b. Which of the following best describes your current employment situation?
 - ☐ I am not working in Head Start, but I am still working in the field of Early Childhood Education
 - ☐ I am working outside of the Early Childhood Education field
 - c. Which of the following best describes your current situation?
 - ☐ I am involuntarily unemployed/retired
 - ☐ I am voluntarily unemployed/retired
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2. Approximately how many years of professional experience do you have in Head Start?
 - ☐ Less than 1 year
 - ☐ 1 to 2 years
 - ☐ 3 to 4 years
 - ☐ 5 to 9 years
 - ☐ 10 or more years

Questions 3-10 will only be displayed for those currently working in Head Start

3. Currently, what is your primary role within your organization?

- ☐ Director
- ☐ Assistant Director / Associate Director
- ☐ Manager / Coordinator
- ☐ Chief Financial Officer
- ☐ Other, please specify: _____

4. How many years have you served in your current role?

- ☐ Less than 1 year
- ☐ 1 to 2 years
- ☐ 3 to 4 years
- ☐ 5 to 9 years
- ☐ 10 or more years

5. What is your organization's affiliation? (Check all that apply).

- ☐ Head Start Pre-School Grantee
- ☐ Early Head Start Grantee
- ☐ Migrant and Seasonal Head Start Grantee
- ☐ American Indian Alaskan Native (AIAN) Head Start Grantee

6. Please select which region you currently work in (Check all that apply):

- ☐ Region 1
- ☐ Region 2
- ☐ Region 3
- ☐ Region 4
- ☐ Region 5
- ☐ Region 6
- ☐ Region 7
- ☐ Region 8
- ☐ Region 9
- ☐ Region 10
- ☐ Region 11 (American Indian and Alaska Native)
- ☐ Region 12 (Migrant and Seasonal Head Start)

7. What type of community do you serve? (Check all that apply)

- ☐ Rural
- ☐ Suburban
- ☐ Urban

8. What type of organization do you work for?

- ☐ Community Action Agency (CAA) Or Community Action Partnership (CAP)
- ☐ Single Purpose Agency
- ☐ Local Government Agency
- ☐ Tribal Government
- ☐ Private/Public Non-Profit
- ☐ Private For Profit
- ☐ Public School System
- ☐ Charter School
- ☐ Other: _____

9. In total, how many children aged 5 and under does your agency serve in all programs? Please include children funded by Head Start as well as those funded by other sources or private paid.

10. In total, how many staff work for your organization / agency?

B. Impact

11. As a result of participating in the Head Start Management Fellows Program, please indicate the extent to which you improved your ability to do each of the following in your role as a leader:

	To a great extent	To a moderate extent	To a small extent	Not at all
a. Lead and motivate teams	☐	☐	☐	☐
b. Diagnose organizational problems	☐	☐	☐	☐
c. Adapt leadership styles to build commitment to goals	☐	☐	☐	☐
d. Make decisions	☐	☐	☐	☐
e. Adopt a customer and service orientation	☐	☐	☐	☐
f. Adopt a results orientation	☐	☐	☐	☐
g. Adopt best practices	☐	☐	☐	☐
h. Have self-confidence to serve as an effective leader	☐	☐	☐	☐
i. Create alliances, partnerships, and networks	☐	☐	☐	☐

12. As a result of participating in the Head Start Management Fellows Program, please indicate the extent to which you improved your ability to do each of the following as a manager:

	To a great extent	To a moderate extent	To a small extent	Not at all
a. Think and plan strategically	☐	☐	☐	☐
b. Manage projects	☐	☐	☐	☐
c. Monitor and evaluate projects and/or programs	☐	☐	☐	☐
d. Manage change initiatives	☐	☐	☐	☐
e. Strengthen and maintain alliances, partnerships, and networks	☐	☐	☐	☐
f. Do accounting and financial management	☐	☐	☐	☐
g. Manage service operations (process management)	☐	☐	☐	☐
h. Do marketing management	☐	☐	☐	☐
i. Problem-solve and manage conflict	☐	☐	☐	☐
j. Analyze data	☐	☐	☐	☐

13. As a result of participating in the Head Start Management Fellows Program, to what extent did you develop the skills needed to do each of the following?

	To a great extent	To a moderate extent	To a small extent	Not at all
a. Create a vision and identify strategies to guide teams and stakeholders towards that vision	☐	☐	☐	☐
b. Articulate your vision in a way that inspires and engages others for action	☐	☐	☐	☐
c. Develop an internal network to leverage the full capacity of the UCLA HSMFP for the benefit of all stakeholders.	☐	☐	☐	☐
d. Utilize the tools and frameworks learned to <i>solve business problems</i>	☐	☐	☐	☐
e. Utilize the tools and frameworks learned to <i>enhance personal performance</i> .	☐	☐	☐	☐

C. Involvement in the Field

14. Have you mentored anyone on leadership and/or management skills or practices since you attended the Head Start Management Fellows Program? (Check all that apply).

- ☐ Yes, on leadership skills/practices
- ☐ Yes, on management skills/practices

- ☐ No, I have not mentored anyone *[Reviewer's note: respondents who selects this option, will not be able to select other two options above]*

15. How, if at all, has networking with other Head Start Management Fellows benefitted you and/or your organization? Check all that apply. If it has not benefitted you or your organization, please check the appropriate response.

- ☐ It has led to more funding for my agency
- ☐ It has led to greater service coordination involving my agency.
- ☐ It has led to increased publicity for my agency.
- ☐ It has led to my greater involvement in a professional organization.
- ☐ It has led to my greater involvement in the local community.
- ☐ It has had another benefit (please elaborate:_____)
- ☐ It has not benefitted me or my organization.

16. Have you experienced a job change since attending the Head Start Management Fellows Program? (Check all that apply). If you have not experienced any job changes, please check the appropriate response.

- ☐ Yes, a lateral move to a new position
- ☐ Yes, a promotion to a new position
- ☐ Yes, an expansion of responsibilities without a title change
- ☐ Yes, a merit-based pay raise
- ☐ Yes, I changed employers
- ☐ Yes, other (please describe)
- ☐ No, I have not experienced any job changes

17. Do you think that this job change was related—at least in part— to your participation in the UCLA HSMFP? *[Reviewer's note: this question will only be displayed if respondent indicates "yes" to Q18]*

- ☐ Yes
- ☐ No

Please elaborate on your response above: _____

18. How has your involvement in the Head Start Management Fellows Program influenced your career plans? (Check all that apply). If you have not experienced any career plan changes, please check the appropriate response.

- ☐ It has reaffirmed my commitment to a career in Head Start or Early Childhood Education (ECE)
- ☐ It has led me to pursue a different position within the Head Start or ECE field
- ☐ It has led me to question whether I should stay in Head Start or ECE field
- ☐ Other effect on career plans, please elaborate:_____
- ☐ Involvement in the program has had no effect on my career plans

19. Please indicate the extent to which you agree with the following statements.

	Strongly Agree	Agree	Disagree	Strongly Disagree
a. The HSMFP was a worthwhile investment in my personal career development	☐	☐	☐	☐
b. The HSMFP was a worthwhile investment for my organization	☐	☐	☐	☐

D. MIP Progress

20. Which of the following areas did your MIP address? (Check all that apply.)

- ☐ Staff Development
- ☐ Retention
- ☐ Funding/Program Expansion
- ☐ Family Engagement
- ☐ Services to Families
- ☐ Other, please specify: _____

21. Did you complete your MIP?

- ☐ Yes
- ☐ No
- ☐ Still in progress

If yes, how long did it take?

- ☐ Less than one year
- ☐ One to two years
- ☐ More than two years

22. [Reviewer's note: This question will be displayed, for each area selected in Q21.] What degree of impact do you believe your MIP achieved in [name of area]?

- ☐ None to slight
- ☐ Slight to moderate
- ☐ Moderate to large
- ☐ Large to extremely

E. Reflection

23. What aspects of the program were most beneficial to your learning?

[Open Response]

24. As a result of your participation in the Head Start Management Fellows Program, what impact do you think your leadership has had at the organizational level? At the community level? (Select all that apply).

Organizational Changes:

- ☐ Improvements to programming
- ☐ Improvements to services
- ☐ Organizational resiliency

- ☐ Development of monitoring systems
- ☐ Increased staff well-being
- ☐ Progress in achieving organizational goals
- ☐ Other: please describe: _____

Changes at the community level:

- ☐ Offered help to other programs to solve challenges
- ☐ Mentored other Head Start Program directors
- ☐ Other: please describe: _____

25. What is the most beneficial change you identify in yourself as a result of participating in the Head Start Management Fellows Program?

[Open Response]