Child Care & Early Education
RESEARCH CONNECTIONS

ICPSR 29462

Head Start Impact Study (HSIS), 2002-2006 [United States]

United States Department of Health and Human Services. Administration for Children and Families. Office of Planning, Research and Evaluation

Spring 2003 Center Director Interview

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OMB#: 0970-0229
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Spring 2003

Building Futures

Head Start
Impact Study

CENTER DIRECTOR/SETTING INTERVIEW

Setting Type:	
Setting Name:	
Setting ID:	
Setting Address:	
	Street
	City State Zip
Setting Phone:	( )
Respondent/ Provider Type:	
Respondent/ Provider Name:	
Room Number:	

Date: _____

Interviewer: _____

❑ Interview complete

Westat

INTRODUCTION

The purpose of the *Building Futures:* Head Start Impact Study is to determine how children learn, grow and prepare for school. This study involves approximately 5000 children across the country who are participating in Head Start, preschool, daycare, or other child care programs. The *Building Futures*: Head Start Impact Study will examine how Head Start helps children to improve their readiness for school and their early school performance, compared to children enrolled in other preschool and child care settings. The study will also look at the educational and comprehensive services components that work best for children. Your completed survey will help us to understand more about Head Start and other preschool and child care programs and how they work with parents and children.

This study is sponsored by the U.S. Department of Health and Human Services (DHHS). Your participation is very important to the study and your responses will be confidential. Our interview will take approximately 1 hour.

Before we begin, let me read the following to you:

NOTICE: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB Control Number for this information collection is 0970-0229 (expires 9/30/05). The time required to complete this information collection is estimated to average 1 hour per response, including time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

A. CENTER CHARACTERISTICS

[DETERMINED BY INTERVIEWER] IS THE CENTER A HEAD START OR NON-HEAD START CENTER?

HEAD START 1
NON HEAD START 2

1. Is your center independent or is it affiliated with, sponsored by, or part of another organization(s)?

INDEPENDENT ..... 1 (GO TO Q.2)
AFFILIATED 2

1a. What type of organization(s) is your center affiliated with? *(CIRCLE ALL THAT APPLY)*

a. Community-based social service organization 1
b. Federal, state or local government 2
c. National child care chain 3
d. Public school 4
e. Private school 5
f. Other_____ 6

2. What child care options are provided at the center? *(CIRCLE ALL THAT APPLY)*

a. Full-day 1
b. Part-day 2
c. Home-based 3
d. Other_____ 4
e. Other_____ 5

3. Does your center serve . . .

	YES	NO
a. Infants and toddlers?	1	2
b. School-age children?	1	2

4. Can a child age 5 and under attend your center for 40 hours per week or more, including wraparound and extended day options?

YES 1
NO 2

5. What services does the center provide to children? *(CIRCLE ALL THAT APPLY)*

a.	Child care	1
b.	Extended day care	2
c.	Hearing or vision screening and referrals	3
d.	Health services	4
e.	Nutrition services	5
f.	Mental health services	6
g.	Other _____	7

6. Do you partner with other service providers in the community to help children get the services they need?

YES	1
NO	2

7. What services does the center provide to other family members? *(CIRCLE YES OR NO FOR EACH ITEM)*

		YES	NO
a.	Income assistance, including welfare, SSI, or unemployment insurance	1	2
b.	Help with medical care	1	2
c.	Food and nutrition assistance, including food stamps or WIC	1	2
d.	Help with housing	1	2
e.	Help with utilities (water, heat, electric, telephone)	1	2
f.	Adult education/literacy	1	2
g.	Job training and employment assistance	1	2
h.	Alcohol or drug abuse treatment or counseling	1	2
i.	Family counseling or mental health services	1	2
j.	Help dealing with family violence	1	2
k.	Foster care payments	1	2
l.	Any other service (SPECIFY) _____.	1	2

8. Does the center staff work with every family to identify specific family service needs?

YES	1	
NO	2	(GO TO Q.10)

9. How do center staff meet the service needs of families? *(CIRCLE ALL THAT APPLY)*

a.	Coordinate with outside social or health service provider	1
b.	Connect families to available community services or resources	2
c.	Provide services at center	3
d.	Other (SPECIFY) _____	4

10. Does the center currently receive funding or support from any of the following sources? (*CIRCLE ALL THAT APPLY)*

a.	Head Start	1	
b.	Parent fees	2	
c.	Child and Adult Care Food Program	3	
d.	State Pre-K Program	4	
e.	Child care subsidies	5	
f.	Other (SPECIFY)_____	6	
g.	None	7	(GO TO Q.12)

11. Which of these are the two largest sources of funding and support? [LET ME REPEAT YOUR RESPONSES]

    a. The largest source of funding and support is _____
    (INSERT LETTER FROM Q.10)

    b. The next largest source of funding and support is _____
    (INSERT LETTER FROM Q.10)

12. What is the approximate size of the catchment area you serve (i.e., square miles, blocks, etc)

    _____

13. Describe the catchment area served by the center (neighborhood, city/town, county, other description)?

    _____

14. Does the center provide transportation to children attending preschool services?

YES	1
NO	2

15. What is the center's preschool service capacity?

    NUMBER OF CHILDREN _____

16. Is the center filled to capacity?

ALL THE TIME	1
MOST OF THE TIME	2
SOME OF THE TIME	3
NEVER	4
DON'T KNOW	5

17. What are the center's hours of operation?

a.	Mon.	_____ AM to _____	PM
b.	Tues.	_____ AM to _____	PM
c.	Wed.	_____ AM to _____	PM
d.	Thurs.	_____ AM to _____	PM
e.	Fri.	_____ AM to _____	PM
f.	Sat.	_____ AM to _____	PM
g.	Sun.	_____ AM to _____	PM

18. How much competition from other preschool or pre-k centers is there in your area? Would you say . . . .

a.	Lots	1
b.	Some	2
c.	Not Much	3
d.	None	4

19. What are the race/ethnicity characteristics of the children you serve? *(CIRCLE ALL THAT APPLY)*

WHITE …….	01
BLACK, AFRICAN AMERICAN, OR NEGRO .	02
SPANISH ORIGIN, HISPANIC OR LATINO	03
AMERICAN INDIAN OR ALASKA NATIVE (*SPECIFY*) _____	04
ASIAN INDIAN	05
CHINESE	06
FILIPINO	07
JAPANESE	08
KOREAN	09
VIETNAMESE	10
ASIAN (*NOT FURTHER SPECIFIED*)	11
NATIVE HAWAIIAN	12
GUAMANIAN OR CHAMORRO	13
SAMOAN	14
OTHER PACIFIC ISLANDER (*SPECIFY*) _____	15
ANOTHER RACE (*SPECIFY*) _____	…..16

B. STAFFING AND RECRUITMENT

20. How long (years/months) (have you/ the Center Director) been employed in (your/his/her) current position?

NUMBER _____ MONTHS 1
YEARS 2

21. How long (years/months) (have you/the Center Director) been employed by the center in (your/his/her) current position or other position(s)?

NUMBER _____ MONTHS 1
YEARS 2

22. How many years (have you/the Center Director) worked with the following types of center-based and child care programs?

NUMBER OF YEARS IN:

a. Head Start _____
b. Non-Head Start center-based programs _____
c. Non center-based child care programs _____

23. What is the highest grade or year of school that (you/the Center Director) completed? *(CIRCLE ONE RESPONSE)*

UP TO 8TH GRADE	01	
9TH TO 11TH GRADE	02	
12TH GRADE BUT NO DIPLOMA	03	
HIGH SCHOOL DIPLOMA		
HIGH SCHOOL EQUIVALENT	04	GO TO Q.25
VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT NO VOC/TECH DIPLOMA	05	
VOC/TECH DIPLOMA AFTER HIGH SCHOOL	06	
SOME COLLEGE BUT NO DEGREE	07	
ASSOCIATE'S DEGREE	08	
BACHELOR'S DEGREE	09	
GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE	10	
MASTER'S DEGREE (MA, MS)	11	GO TO Q.24
DOCTORATE DEGREE (PH.D, ED.D)	12	
PROFESSIONAL DEGREE AFTER BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)	13	

24. Is (your/the Center Director's) degree(s) in . . . (*CIRCLE ALL THAT APPLY)*

a. Child Development Or Developmental Psychology 1
b. Early Childhood Education 2
c. Elementary Education 3
d. Other field (SPECIFY) _____ 4

25. What staff positions do you have at the center?

TYPE OF STAFF: (*CHOOSE ALL THAT APPLY*):

a. Lead teacher 01
b. Assistant teacher 02
c. Teacher's aide 03
d. Family service worker 04
e. Home visitor 05
f. Cook 06
g. Assistant in snack/meal preparation 07
h. Bus driver 08
i. Maintenance person 09
j. Administrator (e.g., Center Director, Component Coordinator) 10
k. Other (SPECIFY) _____ 11

26. What is the approximate total number of staff you have at the center?

TOTAL NUMBER OF STAFF _____

The next set of questions asks for information about center staff. For the purposes of answering the questions, the "lead teacher" refers to the person in charge of the classroom. Other staff positions, such as assistant teachers and aide, refer to positions under the supervision of the lead teacher.

27. How many lead teachers are currently employed at the center?

NUMBER OF LEAD TEACHERS: _____

28. How many lead teachers at the center are new this year?

NUMBER OF LEAD TEACHERS NEW TO CENTER: _____

29. Are there currently any unfilled lead teacher vacancies at the center?

YES 1
NO 2

30. Is the job of finding replacement lead teachers *relatively easy, fairly easy, fairly difficult, or very difficult*?

RELATIVELY EASY, ... 1
FAIRLY EASY, ... 2
FAIRLY DIFFICULT, OR 3
VERY DIFFICULT 4

31. Approximately what percentage of lead and assistant teachers in your center have a(n):

a. Child development associate (CDA) credential or state-awarded preschool certificate ..... _____
b. Teaching certificate or license..... _____
c. Associates degree ..... _____
d. Bachelors degree or higher..... _____

32. How many assistant teachers and paid teacher aides are currently employed at the center?

NUMBER OF ASSISTANT TEACHERS: _____

NUMBER OF PAID TEACHERS AIDES: _____

33. How many of these assistant teachers and paid teacher aides are new to the center this year?

NUMBER OF ASSISTANT TEACHERS/AIDES NEW TO CENTER: _____

34. Are there currently any unfilled assistant teacher or paid teacher aide vacancies at the center?

YES..... 1
NO..... 2

35. Do you have staff members at your center who…

	Yes, all	Yes some, but not all	No	Not needed
a. Speak the home/native language of children from non-English speaking or limited English-speaking families?	1	2	3	4
b. Provide guidance on ethnic customs, traditions and values?.....	1	2	3	4

36. Are any of your paid employees the parents of children who now or in the past attended the center?

YES..... 1
NO 2

37. During this year, have you used parent volunteers at the center?

YES..... 1
NO ..... 2 (GO TO Q.39)

38. During this year, have parent volunteers at the center served as. . .
(CIRCLE YES OR NO FOR EACH ITEM)

		YES	NO
a.	Classroom aides?	1	2
b.	Consultants or workshop leaders?	1	2
c.	Providers of guidance on ethnic customs, traditions and values?	1	2
d.	Home visitors?	1	2
e.	Interpreters for non-English speaking or limited English-speaking families?	1	2
f.	Bus monitors or drivers?	1	2
	Have parent volunteers helped with:		
g.	Height and weight measurements?	1	2
h.	Vision or hearing screenings?	1	2
i.	Classroom cleanup?	1	2
j.	Dental care/prevention?	1	2
	Have parent volunteers in your center:		
k.	Assisted other families with food shopping or home management activities?	1	2
l.	Assisted classroom staff during snack/meal times (e.g., serving, eating with children)?	1	2
m.	Assisted in recruiting families?	1	2
n.	Contacted parents to notify them of meetings and other center activities?	1	2
o.	Mentored or encouraged other families to participate?	1	2
	Have parent volunteers in your center helped with:		
p.	Chores and maintenance?	1	2
q.	Curriculum planning?	1	2

C. TEACHER AND STAFF TRAINING

39. Are lead teachers offered the opportunity to observe other classroom settings for learning purposes?

YES 1
NO 2

40. Does the center have mentor teachers to work with teachers in classrooms?

YES 1
NO 2

41. Are there any efforts used to help lead teachers or assistant teachers get their college degrees, CDAs (child development associate credential), or early childhood certification?

YES 1
NO 2

42. How often do you provide training for your [READ TYPE OF STAFF]? Would you say *once every few years, about once a year, every few months, monthly, or weekly*? [ASK Q FOR EACH STAFF TYPE]

	Once every few years	About once a Year	Once every few months	Monthly	Weekly	No training	No staff
a. Lead teachers and assistant teachers	1	2	3	4	5	6	7
b. Family service workers	1	2	3	4	5	6	7
c. Health staff	1	2	3	4	5	6	7
d. Other staff (SPECIFY) ...							
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

[IF NO TRAINING FOR A-D ABOVE, GO TO Q.44, ELSE GO TO Q.43]

43. Who conducts the training? (*CIRCLE ALL THAT APPLY*)

a. Center or grantee staff 01
b. Other community resources 02
c. Local consultants 03
d. Head Start Quality Improvement Center (HSQIC) 04
e. Disability Services Quality Improvement Center (DSQIC) 05
f. National Head Start Association (Heads Up Satellite Training) 06
g. State or national conferences (NAEYC or NHSA) 07
h. Private companies or organizations (e.g., High Scope, Teaching Strategies) 08
i. Other (SPECIFY) _____ 09
j. No Training Provided To Staff 10

D. CURRICULUM AND ASSESSMENT

44. Does your center use a specific curriculum or combination of curricula?

a. Yes, Specific Curriculum 1
b. Yes, Combination 2
c. No ..... 3(GO TO Q.48)

45. If your principal curriculum has a name, what is that name? (*CIRCLE ONLY ONE*)

HIGH REACH 01
HIGH SCOPE 02
MONTESSORI 03
BANK STREET 04
CREATIVE CURRICULUM 05
CREATING CHILD CENTERED CLASSROOMS – STEP BY STEP 06
CURIOSITY CORNER – JOHNS HOPKINS 07
SCHOLASTIC CURRICULUM 08
STATE DEVELOP CURRICULUM (SPECIFY STATE) _____ 09
HOME SCHOOLING CURRICULUM 10
OTHER (SPECIFY) _____ 11

46. If your additional curricula have names, what are they? (*CIRCLE ALL THAT APPLY*)

HIGH REACH 01
HIGH SCOPE 02
MONTESSORI 03
BANK STREET 04
CREATIVE CURRICULUM 05
CREATING CHILD CENTERED CLASSROOMS – STEP BY STEP 06
CURIOSITY CORNER – JOHNS HOPKINS 07
SCHOLASTIC CURRICULUM 08
STATE DEVELOPED CURRICULUM (SPECIFY STATE) _____ 09
HOME SCHOOLING CURRICULUM 10
OTHER (SPECIFY) _____ 11
NO OTHER CURRICULA 12

47. Does the principal curriculum used by your center specify the following? *(CIRCLE YES OR NO FOR EACH ITEM)*

		YES	NO
a.	Goals for children's learning and development.....	1	2
b.	Specific activities for children.....	1	2
c.	Suggested teaching strategies.....	1	2
d.	Suggested teaching materials.....	1	2
e.	Ways to involve parents in their child's learning activities...	1	2

48. What is the extent of involvement in the decisions about the day-to-day plans for children, such as the selection of themes and activities? Would you say [READ TYPE OF STAFF] are *not at all involved, a little involved, or very involved*? [ASK Q FOR EACH STAFF TYPE]

	Not at all	A little	Very involved	Don't know
a. Center Administrators other than Center Director	1	2	3	4
b. Individual Center Director	1	2	3	4
c. Individual teachers	1	2	3	4
d. Someone else (SPECIFY) _____	1	2	3	4

49. How important would you say each of the following goals is for the center? Is each goal *not at all important, a little important, or very important*? *(ASK Q FOR EACH GOAL)*

	Not at all	A little	Very important	Don't know
a. To provide religious instruction for the children	1	2	3	4
b. To provide care for children so parents can work	1	2	3	4
c. To prepare children for school with a strong academic curriculum (ABC's, numbers, etc.)	1	2	3	4
d. To provide education for low income children	1	2	3	4
e. To promote children's overall development (social, language, mental)	1	2	3	4
f. To teach children appreciation for their own or other cultures	1	2	3	4
g. To provide a warm and loving environment for all children	1	2	3	4

50. What type of internal monitoring is done at the center? (*CIRCLE ALL THAT APPLY*)

a. Self-assessment 1
b. Supervision of staff 2
c. Other (SPECIFY) _____ 3

51. Does the center assess children's developmental progress over the course of the year?

YES 1
NO ..... 2 (GO TO Q.53)

52. What areas of development are assessed? (*CIRCLE ALL THAT APPLY)*

a. Cognitive, Intellectual 01
b. Language 02
c. Emergent literacy 03
d. Mathematical 04
e. Artistic, Musical 05
f. Physical growth 06
g. Fine motor skills 07
h. Social 08
i. Emotional 09
j. Other (SPECIFY) _____ 10

53. Which of the following activities do lead teachers and family service workers perform in the center? (*ASK EACH Q FOR LEAD TEACHER, THEN ASK EACH Q FOR FAMILY SERVICE WORKER*) *(CIRCLE YES OR NO FOR EACH ITEM)*

		LEAD TEACHERS		FAMILY SERVICE WORKERS	
		YES	NO	YES	NO
a.	Providing educational experiences to the child	1	2	1	2
b.	Informing parents about the progress of their child	1	2	1	2
c.	Teaching parents about parenting/education/ child development issues including activities to do with their children	1	2	1	2
d.	Conducting family assessments	1	2	1	2
e.	Providing guidance to families to help them meet their goals	1	2	1	2
f.	Providing referral to community services	1	2	1	2
g.	Providing informal counseling or addressing personal issues (e.g., marital stress/family relations)	1	2	1	2
h.	Providing information/referral to parents about educational services	1	2	1	2
i.	Providing assistance with basic needs (e.g., food/housing/clothing/medical care)	1	2	1	2
j.	Obtaining information from parents about their experiences with the center including suggestions for improvement	1	2	1	2
k.	Other (SPECIFY) _____	1	2	1	2
l.	Staff position not applicable	1	2	1	2

54. Which of the three responses above are of highest priority for lead teachers and family service workers? [LET ME REPEAT YOUR YES RESPONSES]

The three highest priority activities for lead teachers are . . .

_____ _____ _____
(INSERT LETTERS FROM Q.53)

The three highest priority activities for family service workers are . . . .

_____ _____ _____
(INSERT LETTERS FROM Q.53)

55. Are visits to children's homes required of any center staff?

YES..... 1
NO 2

56. How many home visits are required per program year?

a. 1 visit..... 1
b. 2-3 visits..... 2
c. More than 3 visits..... 3