

Early Care and Education Director/Administrator Survey

Please fill out this form and return it in the enclosed self-addressed stamped envelope or send it to:
2087 South Grant Street by May 19, 2006.

This survey has been designed to be a scannable form. Please see guidelines below for completion:

For optimum accuracy, please print in capital letters and avoid contact with the edge of the box. The following will serve as an example:

A	B	C	D	E	F	G	H	I	J	K	L	M
N	O	P	Q	R	S	T	U	V	W	X	Y	Z

For optimum accuracy, please print carefully and avoid contact with the edges of the box. The following will serve as an example:

1	2	3	4	5	6	7	8	9	0
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Shade Circles Like This--> ●

Not Like This--> ⊗ ⊙

1. How many years of experience in early care and education do you have? (check only one)
 1-5 6-10 more than 10
2. What is the highest education level that you have completed? (check only one)
 Less than high school High school Associates Bachelors Masters Ph.D
3. Which of the following describes the early care and education setting in which you work, and the funding source(s) for children in your program? (check all that apply)

Setting <input type="radio"/> Licensed center-based <input type="radio"/> Licensed family child care home <input type="radio"/> Legally exempt from licensing <input type="radio"/> Faith-based <input type="radio"/> For-profit <input type="radio"/> Non-profit <input type="radio"/> Head Start	Funding <input type="radio"/> Parent pay/Tuition <input type="radio"/> Head Start <input type="radio"/> Colorado Preshool Program <input type="radio"/> Colorado Child Care Assistance Program <input type="radio"/> Schools/Education (public) <input type="radio"/> Private Foundation/Private Grant
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4. How many direct service staff/teachers work in your facility/program?

5. How many children attend your facility/program?

6. Over the past 12 months, how many children have been enrolled in your facility/program for the following ages:

<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 0-18 months	<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 18 months-36 months	<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 3 years-6 years
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17. How many staff indicate that challenging behaviors are having a negative impact on their well-being? (check only one)

- None Some Many All

18. What (if known) has been the percentage of turnover in your staff in the past 12 months? %

19. Where do staff go to access information/help with challenging behaviors? (check all that apply)

- Peers
 Administrators
 Consultant(s)
 Internet
 Training

Other (please specify):

20. Do staff have access to ongoing consultative support in their program such as the supports listed in the table below for the challenging behavior?:

- | | | |
|---------------------------|--------------------------|--|
| <input type="radio"/> Yes | <input type="radio"/> No | Understanding child development and appropriate behavior and expectations for children under age 6 |
| <input type="radio"/> Yes | <input type="radio"/> No | Helping to create effective child/parent/teacher interactions |
| <input type="radio"/> Yes | <input type="radio"/> No | Assessing and making changes to the classroom/group environment to promote positive interactions and experiences |
| <input type="radio"/> Yes | <input type="radio"/> No | Mentoring on building the social/emotional skills of children |
| <input type="radio"/> Yes | <input type="radio"/> No | Classroom/group assessment, screening and referrals |
| <input type="radio"/> Yes | <input type="radio"/> No | Individual child assessment, screening and referrals |
| <input type="radio"/> Yes | <input type="radio"/> No | Problem solving strategies for children with challenging behaviors |
| <input type="radio"/> Yes | <input type="radio"/> No | Assistance in working with program administration around classroom and child/family needs |
| <input type="radio"/> Yes | <input type="radio"/> No | Clinical expertise in mental health and/or behavioral interventions |

21. Of the following, what would you like to see your staff learn more about? (check all that apply)

- Understanding child development and appropriate behavior and expectations for children under age 6
 Helping to create effective child/parent/teacher interactions
 Assessing and making changes to the classroom/group environment to promote positive interactions and experiences
 Mentoring on building the social/emotional skills of children
 Classroom/group assessment, screening and referrals
 Individual child assessment, screening and referrals
 Problem solving strategies for children with challenging behaviors
 Assistance in working with program administration around classroom and child/family needs
 Clinical expertise in mental health and/or behavioral interventions

