



Child Care Connections (C3) Provider Training Follow-Up Survey

Date: _____

Provider First Name

Provider Last Name

We would like to know your feedback on the C3 Provider Trainings. This survey includes questions on what you have learned in the trainings and changes you may have made to your child care environment. The information you provide will be used to help improve the program. Thank you very much for your time and thoughtfulness!

Feedback on the Trainings

1. How satisfied or dissatisfied are you with the trainings thus far?

- Very Satisfied
- Somewhat Satisfied
- Neither
- Somewhat Dissatisfied
- Very Dissatisfied

Please explain your rating above:

2. What do you hope to get out of the C3 program?

3. What have you liked most about the trainings thus far?

4. What suggestions do you have for improving the next trainings?

Parents and Staff: Family Partnerships

5. Which of the following statements about partnering with parents are **true**? *(Please check all that apply)*
- Forming partnerships with parents helps ease children’s transition from home to school.
 - Parents are welcome to visit the classroom only during specified time periods.
 - Child care providers should work to understand parents and their needs.
 - Child care providers must balance parents’ needs with their own classroom routines and needs.
 - None of the above.
6. Which of the following is the **most effective** way to communicate with parents? *(Please check one)*
- Post information in class-room (e.g. child care schedules, calendar of events, meal menus)
 - Send information home with child (e.g. hand-outs, parent handbook)
 - Speak directly with parents during drop-off/pick-up time
 - Communicate in different ways, using all of the above
 - None of these are effective ways to communicate with parents.

Your Child Care

The following questions on changes you may have made at your child care home are divided into each sub-scale of the Early Childhood Environment Rating Scale-Revised (ECERS-R). You may have made changes in those sub-scales already covered in a training, or you may have made changes in sub-scales yet to be presented in a training. For each indicator, please indicate changes you have made or check the “No changes yet” box..

7. Space and Furnishings

Indoor Space: <input type="checkbox"/> No changes yet	
Furniture for care, play and learning: <input type="checkbox"/> No changes yet	
Furnishings for relaxation: <input type="checkbox"/> No changes yet	
Room arrangement: <input type="checkbox"/> No changes yet	

Space for privacy: <input type="checkbox"/> No changes yet	
Child-related display: <input type="checkbox"/> No changes yet	
Space for gross motor: <input type="checkbox"/> No changes yet	
Gross motor equipment: <input type="checkbox"/> No changes yet	
Other changes regarding Space and Furnishings: <input type="checkbox"/> No changes yet	

8. **Personal Care Routines**

Greeting/departing: <input type="checkbox"/> No changes yet	
Meals/snacks: <input type="checkbox"/> No changes yet	
Nap/rest: <input type="checkbox"/> No changes yet	
Toileting/diapering: <input type="checkbox"/> No changes yet	

Health practices: <input type="checkbox"/> No changes yet	
Safety practices: <input type="checkbox"/> No changes yet	
Other changes regarding Personal Care Routines: <input type="checkbox"/> No changes yet	

9. **Language-Reasoning**

Books and pictures: <input type="checkbox"/> No changes yet	
Encouraging children to communicate: <input type="checkbox"/> No changes yet	
Using language to develop reasoning skills: <input type="checkbox"/> No changes yet	
Informal use of language: <input type="checkbox"/> No changes yet	
Other changes regarding Languages-Reasoning: <input type="checkbox"/> No changes yet	

10. **Activities**

Fine motor: <input type="checkbox"/> No changes yet	
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<p>Art:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Music/movement:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Blocks:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Sand/water:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Dramatic play:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Nature/science:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Math/number:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Use of TV, video and/or computers:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Promoting acceptance of diversity:</p> <p><input type="checkbox"/> No changes yet</p>	
<p>Other changes regarding Activities:</p> <p><input type="checkbox"/> No changes yet</p>	

11. Interaction

Supervision of gross motor activities: <input type="checkbox"/> No changes yet	
General supervision of children: <input type="checkbox"/> No changes yet	
Discipline: <input type="checkbox"/> No changes yet	
Staff-child interactions: <input type="checkbox"/> No changes yet	
Interactions among children: <input type="checkbox"/> No changes yet	
Other changes regarding Interaction: <input type="checkbox"/> No changes yet	

12. Program Structure

Schedule: <input type="checkbox"/> No changes yet	
Free play: <input type="checkbox"/> No changes yet	
Group time: <input type="checkbox"/> No changes yet	

Provisions for children with disabilities: <input type="checkbox"/> No changes yet	
Other changes regarding Program Structure: <input type="checkbox"/> No changes yet	

13. **Parents and Staff**

Provisions for parents: <input type="checkbox"/> No changes yet	
Provisions for personal needs of staff: <input type="checkbox"/> No changes yet	
Provisions for professional needs of staff: <input type="checkbox"/> No changes yet	
Staff interaction and cooperation: <input type="checkbox"/> No changes yet	
Supervision and evaluation of staff: <input type="checkbox"/> No changes yet	
Opportunities for professional growth: <input type="checkbox"/> No changes yet	
Other changes regarding Parents and Staff: <input type="checkbox"/> No changes yet	

Almost done!

14. Have you encountered any barriers to making changes in your child care environment?

Yes

No

If yes, what are those barriers?

15. Do you have any additional feedback on the trainings so far?

Thank you for your time!