



National Survey of **Early Care & Education**

Center-Based Provider
Screenener – revised 11/28/2011

CENTER-BASED PROVIDER SCREENER: PROGRAM LIST UPDATING

We will need to add two new preloads or flags to the quex. The first will be a sample preload flag to indicate if a case is QED (K-6) only (called the QED flag.) These QED cases will not be loaded as programs that will show up in A6. QED=1=skip to A8. QED=0=will have program(s) in A6. (see skips below). If there are multiple programs at a site and only one is QED the case will be marked as QED=0

Variable in roster confirmation file. The second flag will be an eligibility flag. This flag will indicate whether a pre-loaded program should be allowed to be eligible for the final organization selection (eligibility flag) Non-School-age programs will be flagged to be eligible for the final selection. Eligibility=1=should be considered eligible. Eligibility=0=should not be considered eligible.

[IF CAPI/CATI: GO TO A1. ELSE GO TO A2]

A1. My name is _____ and I am from NORC at the University of Chicago. We are conducting a study about organizations offering services to children under age 13 such as child care centers or before/after-school programs. The study is being paid for by the U.S. Department of Health and Human Services, and is designed to help the government understand how private decisions and public policies affect the supply and demand of child and school-age care in our country. I have a few questions about the childcare organizations at your address.

1. CONTINUE-->GO TO A3

A2. Thank you for taking this survey, which is conducted by NORC at the University of Chicago for the U.S. Department of Health and Human Services. This survey is designed to study organizations offering services to children under age 13 such as child care centers or before/after-school programs. The study is designed to help the government understand how private decisions and public policies affect the availability and use of child and school-age care in our country,

You should have received a personal identification number (PIN) and a password by mail or e-mail. Please enter them in the fields below, and then click the "Continue" button.

1. CONTINUE-->GO TO A4

A3. INTERVIEWER INSTRUCTION: IS THE ROSTER CONFIRMATION BEING DONE IN PERSON OR OVER THE PHONE?

1. IN PERSON-->GO TO A8 if QED flag=1 and single site. Else go to A6.

2. OVER THE PHONE

A4. Our records have the address (ADDRESS). Would you be able to tell me about programs for children under age 13 that are offered at that address?

1. YES-->GO TO A8 if QED flag=1. Else go to A6.
2. NO
3. DK/refuse

WEB ONLY: If A4=2 flag case as needs to be visited in person

WEB ONLY: If A4=blank proceed to A8 if QED flag=1. Else go to A6

A5. [IF A3=2 AND A4=2 or DK/Refused, SAY: "Thank you very much. That is all I have."
HANG UP AND GO VISIT THE ADDRESS]

A6. We have been checking various records like licensing lists, Head Start program lists, and other records to identify programs for young children that may be located at [ADDRESS]. I'd like to quickly review what we've found listed at this address. Does [PROGRAM] serve children under 13 at this location?

[PROGRAMER NOTE: ALL PROGRAMS SHOULD BE LISTED HERE INCLUDING THE
SELECTED PROGRAM]

	Does [PROGRAM] serve children under 13 at this location [or is it part of another program on this list]?
[INSERT PROGRAM FROM SAMPLING FRAME]	1. YES, AT THIS LOCATION 2. YES, AT THIS LOCATION, DUPLICATE PROGRAM AS _____ 3. YES, AT THIS LOCATION, PART OF PROGRAM_____ 4. NO, DOES NOT SERVE CHILDREN AT THIS LOCATION-Mark as ineligible 5. DK/REF/BLANK
[INSERT PROGRAM FROM SAMPLING FRAME]	1. YES, AT THIS LOCATION 2. YES, AT THIS LOCATION, DUPLICATE PROGRAM AS _____ 3. YES, AT THIS LOCATION, PART OF PROGRAM_____

	4. NO, DOES NOT SERVE CHILDREN AT THIS LOCATION-Mark as ineligible 5. DK/REF/BLANK
[INSERT PROGRAM FROM SAMPLING FRAME]	1. YES, AT THIS LOCATION 2. YES, AT THIS LOCATION, DUPLICATE PROGRAM AS _____ 3. YES, AT THIS LOCATION, PART OF PROGRAM _____ 4. NO, DOES NOT SERVE CHILDREN AT THIS LOCATION –Mark as ineligible 5. DK/REF/BLANK
[INSERT PROGRAM FROM SAMPLING FRAME]	1. YES, AT THIS LOCATION 2. YES, AT THIS LOCATION, DUPLICATE PROGRAM AS _____ 3. YES, AT THIS LOCATION, PART OF PROGRAM _____ 4. NO, DOES NOT SERVE CHILDREN AT THIS LOCATION –Mark as ineligible 5. DK/REF/BLANK

[KEEP A LIST OF ELIGIBLE PROGRAMS AND IF DUPLICATE OR PART OF ANOTHER PROGRAM SELECTED ON THE LIST, ASK A7].

A7. So it seems like <list duplicates/part of programs> are all one program. What is the best name to use for this program ?

_____PROGRAM NAME

DK/REF/BLANK

A8. A3_under13

Multi-provider sites: Besides the programs we just discussed, are there any other programs...

Single site QED=0: Are there any other programs...

QED=1: Are there any programs...

at this address offering early child care or school-age services to children under age 13?

We are not asking about regular elementary school, grades kindergarten and up, but we do

want to know about pre-kindergarten, Head Start programs, or about before or after school programs for elementary school children.

1. YES→ASK A9
2. NO→GO TO instruction above A11
3. DK/REF/BLANK →GO TO A11

A9.

Please (CAPI: tell me/WEB: enter) the name of any other programs at [ADDRESS] that provides services such as pre-school, Head Start, pre-kindergarten, or before or after-school care for school-age children. If there is more than one program, please (CAPI: tell me/WEB: enter) the name of one of the programs first.

A10.

And what kind of program is that: A Head Start, public Pre-Kindergarten, other pre-school, or before or after school program for k-6 children? If the program falls under more than one response option, please choose the first applicable category in the list.

1. Head Start→ GO TO instruction above A11
 2. Public Pre-Kindergarten→ GO TO instruction above A11
 3. Other Pre-school
 4. Before or After School program for K-6 children
 5. OTHER (SPECIFY: _____)
- DK/Refuse/Blank

Soft check if select DK/Refuse/Blank: Show on top “Your response is very important to us, please indicate which of these categories comes closest to describing this program.” If select DK/Refuse/Blank again skip to instruction before A 11.

[IF A10=4 OR 5, ASK A10A. ELSE GO TO INSTRUCTION BEFORE A10B]

A10a. Some organizations provide a single type of activity for children. These could include tutoring programs, sports, or music or dance lessons. Would you say this program offers a single type of activity or more than one type of activity?

1. Single type activity
2. More than one type of activity
3. DK/Refuse/Blank

Soft check if select DK/Refuse/Blank: Show on top “Your response is very important to us, please indicate which of these categories comes closest to describing this program.” If select DK/Refuse/Blank again skip to instruction before A10b.

[IF A10= 3 OR 5, ASK A10B. ELSE GO TO INSTRUCTION BEFORE A11]

A10b. Does <PROGRAM> offer services on a drop-in basis only or is enrollment required?

1. Drop in basis only
2. Enrollment is required
3. DK/Refuse/Blank

Soft check if select DK/Refuse/Blank: Show on top “Your response is very important to us, please indicate which of these categories comes closest to describing this program.”

INSTRUCTIONS FOR MARKING PROGRAMS ELIGIBLE FOR FINAL SELECTION:

1. FOR PRE-LOADED PROGRAMS;

- IF ELIGIBILITY FLAG=0, INELIGIBLE FOR FINAL SELECTION. EXCLUDE FROM FINAL LIST OF ELIGIBLE PROGRAMS.
- IF ELIGIBILITY FLAG=1, AND A6=1, ,5, ELIGIBLE FOR FINAL SELECTION. INCLUDE IN THE FINAL LIST OF ELIGIBLE PROGRAMS.
- IF ELIGIBILITY FLAG=1 AND A6=4, INELIGIBLE FOR FINAL SELECTION, EXCLUDE FROM FINAL LIST OF ELIGIBLE PROGRAMS.

2. FOR NEW PROGRAMS ADDED AT A10

- IF A10= 1 or 2 (HS or public Pre-k) OR DK/REF/BLANK, they are eligible FOR FINAL SELECTION, INCLUDE IN FINAL LIST OF ELIGIBLE PROGRAMS,
- IF A10=4, THE PROGRAM SHOULD BE MARKED AS INELIGIBLE, EXCLUDE FROM FINAL LIST OF ELIGIBLE PROGRAMS
- IF A10= 5 AND A10A=1, PROGRAM SHOULD BE MARKED AS INELIGIBLE FOR FINAL SELECTION AND EXCLUDE FROM FINAL LIST.
- IF A10=5 AND A10A=2 OR 3, PROGRAM SHOULD BE MARKED ELIGIBLE FOR FINAL SELECTION AND INCLUDE IN FINAL LIST
- IF A10=3 or 5 (other pre-school or other) AND A10B=1 PROGRAM SHOULD BE MARKED AS INELIGIBLE FOR FINAL SELECTION AND EXCLUDE FROM FINAL LIST

- IF A10= 3 or 5 AND A10B=2 OR 3 PROGRAM SHOULD BE MARKED AS ELIGIBLE FOR FINAL SELECTION AND INCLUDE IN FINAL LIST.

KEEP A LIST OF ALL ELIGIBLE PROGRAMS. IF ZERO OR ONE UNIQUE AND ELIGIBLE PROGRAM LEFT AT ADDRESS, SKIP TO A16 PROGRAM SELECTION.

IF MULTIPLE PROGRAMS REMAINING, GO TO A11.

A11. Are all of these programs run by the same organization? [LIST UNIQUE, ELIGIBLE PROGRAMS.] INTERVIEWER: READ LIST OF PROGRAMS.

1 YES [SKIP TO END]

2 NO

A12. What organization do you work for?

NAME _____

A13. Which of the programs for children under age 13 are run by your organization?

[LIST UNIQUE ELIGIBLE PROGRAMS TO SELECT FROM]

ADD A CHECKBOX "NONE OF THE ABOVE"

A14. What organization runs [SELECT ONE REMAINING PROGRAM NOT SELECTED AT A13 OR PREVIOUSLY AT A14.]?

NAME _____

A15. Does [ORGANIZATION FROM A14] run any of the other programs at this site?

[LIST UNIQUE ELIGIBLE PROGRAMS TO SELECT FROM]

[IF ANY PROGRAMS STILL UNASSIGNED TO AN ORGANIZATION, RETURN TO A14 UNTIL ALL PROGRAMS ASSIGNED TO AN ORGANIZATION.]

[INSTRUCTION: DISPLAY ORGANIZATIONS RUNNING AT LEAST ONE UNIQUE AND ELIGIBLE PROGRAM AT ADDRESS, AS WELL AS ASSOCIATED UNIQUE AND ELIGIBLE PROGRAMS]

A16. <PROGRAM SELECTION>. IF ZERO UNIQUE AND ELIGIBLE PROGRAMS, GO TO A18. IF ONE UNIQUE AND ELIGIBLE ORGANIZATION, GO TO A19. IF MULTIPLE UNIQUE AND ELIGIBLE ORGANIZATIONS GO TO A19.

A18. Thank you very much for your time. Those are all of our questions. TERMINATE AND DISPOSITION THIS ADDRESS AS “INELIGIBLE FOR THE SURVEY.”

A19. SELECT ONE ORGANIZATION FROM THE LIST AND SAY: Thank you very much for your time. We have additional questions about [SELECTED ORGANIZATION]. LAUNCH MAIN INTERVIEW.