

**2013 Delaware Local Child Care Market Rate Study**

*Final Report*

**PART 2: APPENDIX**

*for*

*The Delaware Department of Health and Social Services,  
Division of Social Services*

Submitted by Workplace Solutions  
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## **PART 2: HOW THE STUDY WAS CONDUCTED**

### **Methodology**

The goal of the Market Rate Study was to develop statistically credible information of prices charged by Delaware providers. To meet the goal, the Division and Workplace Solutions carefully planned the study. Both groups collaborated to define the parameters of the study. They addressed many issues about the study that would allow providers to participate in the interviews and enable the Division to utilize the rate-study information. Some of these issues included: types of programs to exclude from the study (e.g., drop-in care, Head Start); prices to collect for part-day school-age care (e.g., 'after-school' care, 'before-school' care, and 'before and after school' care); selection of the methodology for weighting of prices (by the number of private-paying children rather than by slot); and inclusion or exclusion of license-exempt providers in study.

Workplace Solutions implemented the survey to obtain prices for private-paying children in care during the time of the study. The consultants selected a representative sample of providers throughout Delaware. The sample providers were interviewed by telephone and reported the prices for private-paying children currently in care. Utilizing prices obtained from these providers, researchers estimated the 75<sup>th</sup> percentiles of market prices for full-time infant, toddler, and preschool-age care and the 75<sup>th</sup> percentiles of market prices for part-day school-age care. The researchers also provided confidence intervals that indicate the accuracy of the estimated percentiles. These estimates of the accuracy of the 75<sup>th</sup> percentiles of market prices confirm that the 2013 Delaware market rate study achieved a high degree of precision.

### **The Sampling Frame**

Planning of the study included development of an accurate and comprehensive provider list for the design and selection of the sample (sampling frame). It was necessary to develop this comprehensive list of center/school-age and family child care providers to allow all of the providers in the state, that meet the parameters of the study, the opportunity to be selected for the study. This reduced the likelihood of a non-representative sample (sample bias).

The sampling frame consisted of:

- The Delaware Office of Child Care Licensing's data of licensed family child care and large family child care providers as of February 2013, merged with the February 2013 data of licensed family child care providers and large family child care providers from Children and Families First (CFF).

- The Delaware Office of Child Care Licensing's center and school-age data of licensed providers as of February 2013 and the Department's list of license-exempt center and school-age providers, merged with the February 2013 data of licensed center and school-age providers from Children and Families First (CFF).

Both databases were combined and reviewed using Microsoft Access. Merging this data enabled the researchers to design the center sample by age category since Children and Families First maintains age-category information of the providers. The researchers developed the sampling frame by provider site, that is, each site represented a provider. Therefore if a provider had multiple locations, each site was considered to be a separate provider for the study.

### *Cleaning of the Data*

The consultants reviewed each database to develop a complete and accurate sampling frame. Each database was reviewed to identify and delete duplicates and to identify missing information from any of the data elements (e.g., missing phone number). Children and Families First reviewed their provider data to identify any possible duplicates or missing data elements. Workplace Solutions subsequently merged both databases and reviewed the merged data to identify duplicates.

In merging databases, it is possible to encounter duplicates that are not obvious. Workplace Solutions' data manager sorted all of the data fields in the merged database to identify possible duplicates. Each possible duplicate was then visually reviewed by the consultants to determine if the 'duplicate' represented two separate providers or was in fact a single provider. In instances where a duplicate occurred, one of the listings was deleted. If the consultants could not determine if a listing actually was a duplicate, Workplace Solutions would call the provider to clarify the issue.

Consultants reviewed conflicting provider data to resolve any issue. In some instances where conflicting information occurred, Workplace Solutions reviewed the provider data from past Delaware market rate studies to resolve the discrepancy. In addition, a small number of providers appeared in only one database. In this instance, the consultants worked with CFF and the Department to resolve this and also contacted some of the providers to determine if they were still in business.

### *Excluded Programs*

The Division and Workplace Solutions agreed upon a list of categories of providers that should be deleted from the sampling frame because they were outside the parameters of the study. Children & Families First initially reviewed their data, and Workplace Solutions subsequently reviewed the merged provider database to identify providers that should be excluded based on the list of 'excluded' categories. These providers were then deleted from the sampling

frame. If the consultants were unsure of deleting a specific provider, they contacted the provider directly to resolve the issue. Deleted categories included: providers that were closed to the general public (e.g., an employer-supported center operated only for their own employees' children); programs providing services only to a niche in the market (e.g., drop-in care); programs receiving significant federal funding (Head Start); programs that served children for free (e.g., ECASP programs), and programs that did not provide services for the required timeframe (nursery schools).

Excluded categories of providers included:

Head Start programs

Emergency back-up care, drop-in care, ad-hoc care

Holiday care

Sick child care

Programs that only serve children with special needs

Programs that only provide odd-hour care

Camps & Recreation programs

Early intervention programs

Programs that only provide part-time care for younger children

School-age sites that only provide full-time care or vacation-week care for school-age children

Employer-supported programs that only serve their own employees' children

Church or temple-supported programs that only serve their own members

Programs that serve unique populations (teen-age parents, migrant workers' children, etc.)

Informal-care programs (babysitting)

Programs that serve children for free

Relative care

Non-relative exempt care

Programs that are not open to the general public

### *Age Category Information*

To design the sample, the researchers required information about the age categories that each provider served at their site. From this information, they would develop a ‘universe’ for each cell, that is a total number of providers per provider type and county serving each age category. For the center sample, the researchers identified the age categories served by each provider from the data provided by Children and Families First and from age-category information obtained from the 2011 Delaware Market Rate Study. For the FCC sample, the researchers made estimates of the number of FCC providers who served the various age categories based on the outcome of the Delaware 2011 market rate survey. (See *Sample Design Report* in this Appendix for a further explanation.)

### *Development of the Provider Universe*

Subsequent to these steps, providers remaining in the sampling frame were sorted by county, by type of care and by age-categories (centers) to create a list of providers for each of the cells in the study. Based on the comprehensive provider list, Workplace Solutions determined that the total size of the sampling frame for the rate survey was 1226 providers. This included 322 licensed and license-exempt center and school-age providers and 904 licensed family child care and large family child care providers.

### **The Sampling Plan**

The researchers developed a Sampling Plan to select a stratified random sample of the provider population in Delaware. This sample design was based on the previous design developed for the 2011 Delaware Child Care Market Rate Survey. The researchers and the Division agreed upon the sampling plan for the 2013 study. The plan called for a sample of 45% of the providers in the state and was designed for full-time care for centers and family child-care programs and for part-day care for school-age programs. During design of the sample, the researchers determined that the center sample should be increased to 50% of the sampling frame to achieve the desired level of accuracy in the study.

The sampling plan targeted all licensed providers (FCC) and licensed and exempt providers (centers) in the state that met the parameters of the study. This means that the provider needed to: (1) offer full-time care for children up to school-age and/or part-day school-age care; (2) provide services for the general public; (3) not be in a category of ‘excluded providers’.

The sample was segmented by:

- geographic region (3)
- type of care (2)
- age groupings (4)

*Geographic regions* were the three counties in Delaware: Kent County, Sussex County and New Castle County. The *types of care* were: (1) center and school-age care and (2) family child care and large family child care. The *age-groupings* were: infant, toddler, preschool-age and school-age.

This sample segmentation resulted in 24 cells or market segments. These included 1.) Kent, FCC Infants. 2.) New Castle, FCC Infants. 3.) Sussex, FCC Infants. 4.) Kent, FCC Toddlers. 5.) New Castle, FCC Toddlers. 6.) Sussex, FCC Toddlers. 7.) Kent, FCC Preschool. 8.) New Castle, FCC Preschool. 9.) Sussex, FCC Preschool. 10.) Kent, FCC School Age. 11.) New Castle, FCC School Age. 12.) Sussex, FCC School Age. 13.) Kent, CCC Infants. 14.) New Castle, CCC Infants. 15.) Sussex, CCC Infants. 16.) Kent, CCC Toddlers. 17.) New Castle, CCC Toddlers. 18.) Sussex, CCC Toddlers. 19.) Kent, CCC Preschool. 20.) New Castle, CCC Preschool. 21.) Sussex, CCC Preschool. 22.) Kent, CCC School Age. 23.) New Castle, CCC School Age. 24.) Sussex, CCC School Age. These 24 cells are the market segments that would be reported in the final analysis. (CCC=child care centers; FCC = family child care.)

Thus, the sampling plan was designed to take into account these 24 distinct sample "cells". These cells were based on three geographical regions, two types of care, and four age groupings. The economists planned to allocate the sample providers among the cells in such a way as to approximately equalize the accuracy of the estimated prices for each cell. They based this on the expected variance in the price within each cell, the expected response rate, and on the total number of providers in the cell. Estimates of the expected response rates and price variance were based on the findings of Delaware's *2011 Local Child Care Market Rate Study*.

The researchers planned the sample to equalize the accuracy with which the market price is estimated for each type of care. However, this was done somewhat differently for the center sample than for the FCC sample. This is because the researchers knew in advance what age categories each center provider served, whereas for family child care providers this was not known. To meet this goal, a different fraction of providers was selected for each market segment (county, type of care and age category). Sample sizes were smaller for types of care and for regions for which the variability of price was low and expected response rate high. Sampling proportions were larger, (though sample sizes were smaller), for types of care and regions for which the population of providers is small.

For the family child care sample, because the researchers did not know which providers cared for which specific age groups, all that they could do was to choose numbers of observations per county for a total of 45% of the FCC provider sampling frame. They could not equalize sampling variances across all age groups within a county, but they could equalize any single variance across counties. Based on the researchers' knowledge that infant price observations are difficult to obtain and that sampling variances for infant prices tend to be higher than for other age category prices, it was decided to select the countywide sample in such a way as to equalize the sampling variance for infant care. Thus for the FCC sample, even

though the analysis would include 12 cells (3 counties x 4 age categories), the sample design was done at the level of the three counties, in such a way as to equalize the anticipated sampling variance for the infant cells in the final analysis.

The final sample design for the 2013 Rate Study included the number of sample observations allocated to each of the 12 center cells and to 3 county-wide cells for family child care. These included, per county: (1) infants in centers, (2) toddlers in centers, (3) preschool-age children in centers, (4) school-age children in centers and in free-standing school-age programs and (5) FCC providers. Thus the final Sampling Plan included 15 cells. However, the number of sample observations selected for the three county-wide FCC design cells did take into account the fact that there would be 24 cells at the stage of analysis of the data, because the consultants could forecast (based on the 2011 data) the number of observations for each age level that would be yielded by an FCC interview in each of the three counties.

### **The Selection of Providers for the Sample**

Once the researchers developed the sampling frame and designed the sample, they assigned each provider a unique identifying number. The researchers then randomly selected providers from the sampling frame, using random sampling procedures (see *Sample Design Report* in Appendix). A separate random sample was selected for each of the 15 cells in the Sample Plan, with each sample corresponding in size to the Plan.

Based on the timeframe for the project, it was decided to start the family child care interviews as quickly as possible due to the larger size of the FCC sample. The researchers designed and selected the FCC sample so as to equalize the variance of the FCC infant cells. The sample selection consisted of randomly selecting providers from the sampling frame lists, to achieve the desired sample size. However, the researchers knew that it is difficult to obtain prices for various categories of scarce types of care such as infant care and odd-hour care. Therefore, a decision was made to oversample providers of these types of care.

In the second stage, the child-care center/school-age center sample was designed and sample selected to equalize the variances of the center cells, with oversampling of scarce types of center care. For the center sample, certain types of providers were initially selected for the sample to ensure their representation in the study. These were providers who offered care only for one or two age categories. Thus, providers who offered only preschool-age care, or only school-age care, or only preschool-age and school-age care were initially selected for the sample. In all, the sample contained 407 family child care programs and 161 center and school-age programs.



*Total Number of Providers Selected for the Sample*

	<u>FCC</u>		<u>Centers</u>
Sussex	126	Sussex	34
Kent	121	Kent	30
New Castle	160	New Castle	97
<b>TOTAL:</b>	<b>407</b>	<b>TOTAL:</b>	<b>161</b>

The researchers selected a wide range of providers throughout the state. To be more specific, the sample included: family child care providers, large family child care providers, centers serving all age categories, centers serving only one age category, multi-site child care providers, centers that were part of a large national provider, free-standing school-age programs, school-age programs that were part of a multi-age program, school-age programs in elementary schools, for profit programs and non-profit programs.

After selecting providers for the sample, the researchers randomly selected the remaining providers as "back up" sample to allow for obsolescence and other outcomes requiring sample replacement. ("Obsolescence" refers to providers who are no longer providing child care services.) The obsolescence in the family child care market was expected to be higher than in the center market due to the relative ease of entering and exiting the FCC market. All of the providers that were not selected as part of the regular sample were listed in random order and served as a "back-up" for cells needing replacements.

The "back-up" providers were used as replacements for providers who were selected for the study but were found, during the interviews, to have certain outcomes that required that they be replaced. These included: providers who were no longer providing services but had not notified DSS of that status; providers that had disconnected or incorrect phone numbers; providers that had private-paying children that did not qualify for the study (e.g., only younger children attending part-time); providers with all subsidized children; providers who had a language problem; and providers with a 'privacy block' on their phone.

### **The Survey**

The survey was designed to collect accurate and comprehensive price information from providers that had private-paying children enrolled. The researchers would then utilize the collected pricing data to convert all prices to daily prices and to estimate the 75th percentile price for each of the 24 market segments in the study.

The 2013 market rate survey included questions about enrollment and rates (see Appendix: Survey). Workplace Solutions utilized two surveys for this study based on the 2011 surveys: one survey for the center / school-age market, a second survey for the family child care market. Each was designed to be easy for the providers yet still enable the researchers to address the complex pricing strategies of the provider community and the nuances of the market. Both instruments were designed to be utilized as telephone interview surveys.

The Division and Workplace Solutions carefully reviewed the surveys to determine if any adjustments would be required. The surveys collected information about prices and enrollment, but gathered information differently from each of the two groups because of the nature of these two markets. The surveys gathered age-category information that would enable the researchers to report prices by age category. Center providers were asked for their rates by age categories (infants, toddlers, preschool age, school age). Family child care providers were asked for information for each private-paying child in their care, for up to 8 private-paying children. This information included the child's age and price for their care. This is because some of the FCC providers may not have a set rate by age category. The researchers would then analyze the reported data to determine the prices charged by each of the providers for the following age categories:

### **AGE CATEGORIES**

**Infant**

under 12 months of age

**Toddler**

from 12 months up to 36 months of age

**Preschool age**

ages 3 years through 5 years, including the kindergarten year

**School age**

from first grade through 12 years of age

#### *The Center Survey*

The center survey asked the providers to report up-to-date information about their enrollment and rates for private-paying children enrolled at their site.

Center providers were asked to quote full-time prices for private-paying infants, toddlers and preschool-age children as well as part-day prices for school-age children enrolled at their site. In addition, in order to be able to weight the 75<sup>th</sup> percentile price for each cell and determine the purchase prices that parents pay, the researchers included questions in the survey to obtain the number of private-paying children enrolled per age category for each quoted price. Thus if a provider reported that they had private-paying toddlers enrolled, and quoted their price for these children, they also would report the number of private-paying toddlers enrolled at their site. Finally the center survey also included questions about odd-hour care and care for children with special needs.

#### *The Family Child Care Survey*

The FCC survey asked providers to quote individual prices for children in their care. This survey was designed to collect a price-per-child, for up to eight private-paying children attending the provider's program on a full-time basis. In addition, the survey also collected a price for part-day school-age care for a private-paying school-age child or children enrolled part time. Finally, the survey included questions about odd-hour care and care for children with special needs.

#### *School-age Care*

The 2013 Market Rate Survey collected prices for part-day school-age care, which the Division defined as less than 4 hours per day. School-age providers included center programs that offered care for multiple-age categories, free-standing school-age programs, as well as family child care providers that offered care to school-age children.

The center and the family child care surveys included questions about school-age care. These questions asked providers if they had any private-paying school-age child enrolled. School-age for this study is from first grade through 12 years of age. For providers that reported that they did have a private-paying school-age child enrolled, the provider was asked if any private-paying school-age child attended their program part-day, for less than 4 hours-per-day. This could be for 'after-school' care, for 'before-school' care or for 'before & after-school' care. Providers who reported 'yes' were asked to quote their rate for this care.

#### *Screening Questions*

In order to collect *market prices* the surveys included screening questions and directions for the interviewers to identify (1) providers and (2) prices that would meet the criteria of the study. The center and the FCC surveys began with screening questions to determine which providers should be interviewed and what price information should be collected.

These screening questions asked:

- (a) Did the provider have any children enrolled at their site? Were they paid for the children that were enrolled in their care?
- (b) Did the provider had any *private-paying* children enrolled at the time of the interview?
- (c) Did any of the private-paying children qualify for the survey, (i.e., were any infant through preschool-age children enrolled full time, or were any school-age children enrolled part-day)?

*Provider no longer in business:* The survey began with screening questions to screen out providers who were no longer providing services at the time of the interview. A provider was initially asked if they were providing child care services. If a provider answered “no” they were next asked if they had provided child care services within the past month or was any child enrolled for the coming month. A provider was considered to be ‘out of the market’ that was not currently providing care, or did not provide care within the past month or the coming month. If a provider did not offer care during that time frame, the survey would end. Thus the survey only collected information from providers who were presently providing child care services. If a provider was dropped from the sample because they were no longer providing services, another provider was added to the sample from the “back-up” provider list for that cell.

*Provider with all subsidized children:* Providers were next asked questions to determine if they had any state-subsidized children enrolled in their program (Purchase of Care and Purchase of Care Plus). The researchers included these questions to help providers and interviewers identify the private-paying children and private-paying prices that should be collected in the survey. If a provider only had subsidized children enrolled in their program, the provider was determined to be ineligible for the study and would be removed from the sample. A provider with no private-paying child enrolled was considered to be out of the private marketplace. The researchers designed the study to collect market prices for private-paying children actually receiving care. Only those prices would be used to develop the 75<sup>th</sup> percentile prices for the 24 market segment.

*Provider with published rates:* As part of the protocol for the study, the researchers determined that ‘published rates’ would not be collected. Thus if a provider only had children enrolled that were subsidized by the state, but had a private rate if a private-paying child enrolled at some point, these published rates would not be collected. The researchers only used prices for private-paying children actually receiving child care services to estimate the 75<sup>th</sup> percentiles of prices for each market segment.

The researchers included these screening questions since this is a market rate study to determine child care market prices, which are prices charged in a

market transaction between unrelated and unaffiliated parties (called “arms-length prices” by economists). *By including these screening questions the researchers ensured that the collected price reflected an actual private transaction in the marketplace.*

### *Pricing Units*

The surveys were designed to collect information for pricing time-periods actually used by providers (e.g., hourly, daily, weekly, monthly, etc.). At the request of the Division, the researchers would then convert all collected prices to daily rates for all of the market segments. The researchers used the private-paying prices to estimate both the 75<sup>th</sup> percentiles of the market prices and the accuracy with which the 75<sup>th</sup> percentile of prices was estimated.

The center and family child care surveys enabled providers to quote their rates as they actually quote them to parents. To accomplish this, the researchers planned the price questions to be ‘open-ended’. Center providers could quote their prices as hourly, 1/2 day, afternoon, daily, weekly, monthly, semester, school-year, yearly, or an “other” unit. Family child-care providers could quote their rates as hourly, 1/2 day, daily, weekly, monthly, or an “other” unit. The “other” pricing unit enabled the provider to quote their price in *any* unit of time other than those already listed. The open-ended price questions enabled providers to quote their prices in the unit-of-time they actually use for the private-paying children. This lowers response bias in the study since providers were not asked to calculate a rate they did not actually use. (Response bias is inaccurate responses to questions.) Providers were not asked to estimate a “daily rate” when they did not offer such a rate or did not typically use that rate.

### *Price Questions*

The researchers carefully planned the study to collect non-discounted unsubsidized prices that were charged in an actual market transaction. The pricing question included directions for the providers to enable them to quote market prices. As an example, center providers serving private-paying toddlers were asked:

*Using our definition of full-time as 30 hours or more per week, what rate do you charge for your basic full-time rate for private-paying toddlers?*

*In quoting your rate, please do not “add-on” any fees above your regular rate, and please do not deduct for any discounts or subsidies such as a “sibling discount” or a “sliding-fee scale”.*

The second part of the pricing question directs providers to quote their price without adding on any additional fee or without deducting for any discounts. Finally, both surveys only collected information for paid child care. That is, care for which a financial payment is received.

### *Additional Questions*

The Division also required that information be collected for: odd-hour care; care of children with special needs; and weighted prices. Thus, the survey included additional questions: (1) to determine prices for odd-hour care; (2) to address price and cost issues that may be associated with serving children with special needs; and (3) to 'weight' the 75<sup>th</sup> percentile prices to identify the families' purchase prices.

### *Odd-hour Care*

The Division required that odd-hour care rates be reported as part of the rate study. "Odd-hour" care is evening care, overnight care and week-end care. Therefore, as part of the survey, providers reported private-prices for each of the three types of odd-hour care that they offered:

- Evening care:** care during any evening hours, for example from 8 P.M. to 11 P.M.
- Overnight care:** care for any overnight hours, for example 11 P.M. to 6 A.M.
- Weekend care:** Saturday care, Sunday care, or Saturday through Sunday care

Because it was possible for some of these types of odd-hour care to overlap, these definitions were used as guidelines. This study would attempt to develop price percentiles for all three types of odd-hour care if providers reported a sufficient number of prices for each of types of care.

The researchers planned to collect prices for odd-hour care that had recently been provided to private-paying children. Therefore, in the survey, providers were asked if they had provided odd-hour care within the past month to any private-paying child. If a provider answered *yes*, he was asked if he had received a payment for the odd-hour care. These screening questions were included because the Division wanted odd-hour prices only collected for private-paying children and for care that had actually been provided (not just a published rate). Also, some providers offer this type of care but do not charge for it since they consider it to be an amenity for children in their regular program. Therefore, the researchers added these screening questions to identify the providers who had recently provided odd-hour care for private-paying children and had received a payment specifically for the odd-hour care. Once these providers were identified, they were asked to quote the price that they had charged for the type of odd-hour care they had provided.

The researchers planned the odd-hour questions so that they would have the necessary information to convert these prices to one pricing unit. For the regular study, all prices would be converted to a daily unit. This was not possible with

odd-hour care since this care could vary widely. As an example, a parent might have their child attend a family child care program one night per week from 8 P.M. to 11 P.M. A second parent might have their child stay at a provider's home from Saturday morning to Sunday evening. Therefore the final odd-hour prices would be reported to the Division as hourly rates.

Providers were asked open-ended questions about their pricing of odd-hour care and could quote these prices in units they actually charge the parents: hourly, 1/2 day, day, evening, day & evening, overnight, weekend, week, or "other". The economists would then convert these prices to an hourly rate.

#### *Care of Children with Special Needs*

The Division required information concerning the pricing of child care for children with special-needs. The researchers did not include a survey question asking what price providers charged for care of a child with special needs. This is because of the ADA Act, which, in general prohibited providers from charging higher prices for care of these children in child care programs. Therefore, it appears that providers could either pass along possible additional costs for care of children with special needs to *all* of the children in their care, or providers could absorb extra costs for serving these children if extra costs were incurred.

Therefore, for this study, the Division wanted to know: (1) if the provider had a child or children enrolled that had been diagnosed with special needs; (2) if serving children with special needs incurred extra costs for these providers; and (3) if these providers charged higher prices overall than other providers. This might then support the hypothesis that providers were passing along possible higher costs for serving these children to their total enrollment of children. The

researchers included questions in the survey that would enable them to address these issues.

The consultants included the special-needs questions in the surveys in order to:

- 1.) Identify which providers had a child or children diagnosed with special needs enrolled in their program.
- 2.) Inquire if there were *additional costs* to the providers to have children with special needs enrolled in their programs.
- 3.) Identify the estimated additional costs for serving children with special needs, if any.
- 4.) Determine if there is a *differential* in price between providers that were serving children with special needs in their program, and providers that had no children diagnosed with special needs in their program.

Therefore, as part of the survey, providers were asked:

*Are you presently serving any child with special needs in your program, private-paying or state-subsidized? For this survey, "special needs" means a child from infancy through 18 years of age who is diagnosed with physical, emotional, or developmental needs requiring special care.*

If a provider did not know if a child had special needs ("Is an ADHD child a child with special needs?"), the consultants included a 'direction' in the survey for the interviewers. First the interviewers were directed to re-read the definition of "special needs" to the provider, then inform the provider that he would need to determine if any child in the program was a child with special needs.

*Additional Costs:* Providers who reported serving a child or children with special needs were then asked a survey question: 'are there any additional costs to your program to serve these children'. Providers who responded *yes* were asked to estimate how much of an additional cost was incurred to provide these services. They could estimate that the additional cost was: "5% more", "10% more", "15% more", "20% more", or "another amount". If they selected 'another amount', they then would estimate the percentage representing the additional amount.

*Differential Analysis:* From the information collected, the researchers would undertake a differential analysis to evaluate the hypothesis that providers who had children with special needs enrolled in their program charged higher prices to their general population of children to off-set higher costs incurred in serving these children. The questions that the researchers included in the survey would allow them to determine if there were a statistically significant difference in price between providers who were serving children with special needs and providers who had no such children enrolled in their program. If a significant difference did exist, as evidenced by the differential analysis, this could support the hypothesis that providers were in fact passing along additional costs for serving children with special needs to all of the children in their program.

### *Weighting Questions*

The prices discussed to this point are the prices *charged* by providers ('per-provider' prices). The Division also requested that 75<sup>th</sup> percentile prices be weighted. The Division and Workplace Solutions determined that weighted prices would reflect actual child care *purchases* being made by families in Delaware. These are the prices paid by Delaware families. To obtain these prices, the consultants included questions in the surveys that allowed them to weight the 75<sup>th</sup> percentiles of prices by the number of private-paying children reported for each age category. Thus, as an example, when a provider reported their rate for private-paying infants enrolled full-time, the provider was then asked to report the number of the private-paying infants presently enrolled full time at their site. These prices are referred to as "weighted" prices or "purchase" prices and reflect all market transactions paid by private-paying parents.



## The Marketing Steps to Encourage Provider Participation

During the planning phase of the project, the Division and Workplace Solutions planned and implemented various strategies to encourage providers to participate in the study. These included written materials mailed to the providers and meetings held with providers to explain the forthcoming rate study.

- All family child-care providers and center-sample providers received an announcement letter from Elaine Archangelo, Director of the Division of Social Services. The Director's letter informed them of the forthcoming Market Rate Study telephone interview and encouraged providers to participate in the interview if contacted for the study. The letter included telephone numbers for the Division's project coordinator and for Workplace Solutions' project manager. The providers were encouraged to call either of these individuals if they had any questions about the survey.
- As part of the announcement letter, providers also received a simple worksheet to help them prepare for the interview. One worksheet was for center providers and another for family child care providers. (See Appendix: Marketing Materials).
- The Delaware Institute for Excellence in Early Childhood at the University of Delaware included in its spring edition of *Provider Pursuits* an article informing providers of the forthcoming child care market rate survey.
- The Division and Workplace Solutions planned and held two Information Sessions for providers in different locations in the state. At these meetings Division Project Coordinator Barbara McCaffery and Workplace Solutions consultants Professor William Horrace and Marie Sweeney explained the purpose and scope of the rate study and answered providers' questions about the project.
- The Division mailed an announcement letter to all providers in the state informing them of the Information Sessions and briefly explaining the rate study. The Division also included information about the study and the Information Sessions on its LISTSERV.

When contacted for the interview, many providers knew about the study from the provider outreach efforts, especially the Director's announcement letter they received. Thus they were quite willing to participate.

## Response and Non-response Bias

The Division and Workplace Solutions undertook many steps to minimize both response and non-response bias in this study. Response bias arises because of inaccurate responses to questions; non-response bias is errors due to an unrepresentative sample of providers actually being interviewed.

To limit *response bias*, the researchers utilized surveys that were appropriate for the diverse types of providers included in the study. Both surveys had been previously field-tested in past Delaware Child Care Market Rate Studies. In addition, price questions were open-ended allowing the providers to quote their rates in any unit of time they used.

Workplace Solutions' Project Manager trained the interviewers in the goals of the survey and in the terms and definitions used in the survey. All the interviewers used the same survey instruments and had written references for answers to questions the providers might have in the course of the interview. Workplace Solutions worked daily with the interview group to address any questions or issues the providers or interviewers had and also monitored many of the interviews. After the conclusion of the interviews in the field, a consultant called a small number of providers to clarify some of the reported price data, thereby allowing this data to be used in the final analysis.

To limit *non-response bias*, the Division and the firm planned and implemented many communication steps to inform the providers of the forthcoming study and to encourage their participation. In addition, interview procedures included: up to 20 "call attempts" to reach an FCC provider for the interview and up to 10 "call attempts" to reach a center provider; calling at varying times, days and weeks; setting an appointment with providers who requested this; e-mailing some hard-to-reach providers; and calling over an eight-week interval. For a small number of providers that reported to the interviewer that they did not receive the Director's announcement letter and would not do the survey without the letter, Workplace Solutions resent these letters via express mail to these providers to encourage their participation.

### **The Training of the Interviewers**

Workplace Solutions selected a professional telephone interview group, Research America, to conduct interviews in the field. This group also conducted interviews for prior Delaware Child Care Market Rate Studies. Project Manager Sweeney also participated in the interviews. Both Workplace Solutions and Research America trained the interviewers. All of the interviewers received reference materials and training in the survey, as well as training in handling of complex situations or technical questions posed by the providers. Possible difficulties that might arise were described and methods of dealing with these difficulties were indicated. The trainers discussed the protocol for conducting the interviews and for recording the outcome of each 'call-attempt'. Interviewers were directed to refer unusual circumstances or questions to supervisory personnel at Research America, who then reviewed the situation with Workplace Solutions.

During the training sessions, the interviewers reviewed the survey in detail. The interviewers participated in "role playing" with Project Manager Sweeney. As the role-playing progressed, the mock interviews became increasingly difficult to enable the interviewers to practice complex interviews. Workplace Solutions and

Research America recommended effective methods of encouraging respondents to participate and of eliciting accurate responses. Consultants developed the interview protocol to enable the interviewers to be sensitive to the work of the child care providers, which is the education and care of the children.

Interviewers were told of preferred times to reach providers. Family child-care providers were contacted during the day, in the evening, and on weekends. Center providers were contacted during the day, Monday through Friday. If a provider requested to be interviewed at an early or late hour, Project Manager Sweeney conducted these interviews.

### **The Interviews in the Field**

The interviewers used a CATI system (Computer-Assisted Telephone Interviewing) for conducting the interviews and recording the results. As the interviewers asked the survey questions, they entered the providers' responses directly into the computerized database. The CATI system was utilized because of the complexity of the survey, with numerous screening grids and skip patterns.

The interviewers attempted to contact and interview all sample providers including many of the back-up replacement sample (e.g., all FCC back-up providers in Kent and Sussex were ultimately added to the sample). Interviewers made up to 20 'call attempts' to each FCC provider to obtain a completed interview. (Only 10 'call-attempts' needed to be made to the center providers since these providers were easier to reach.) If a provider was reached and it was an inconvenient time, the interviewer would set up an appointment and then call at the agreed-upon time. Project Manager Sweeney was closely involved with the interview process. This included monitoring of the interviews, outreach to sample providers, calls to hard-to-reach providers, and sample management. She monitored many of the interviews with the providers throughout the time in the field. She conferred on a daily basis with the supervisors and interviewers about issues of individual providers, sample management and methods for obtaining completed interviews.

In situations where a provider reported that they were no longer in business, the provider had only subsidized children enrolled, the phone had been disconnected, or the provider had no children enrolled for the required timeframes, the provider was replaced with a "back-up" provider for that cell. If during the interviews it was determined that the provider's phone number was incorrect, Workplace Solutions attempted to locate the correct telephone number through an on-line search. If the correct number could not be located, the provider was replaced with a back-up provider for the same cell. These steps enabled the interviewers to reach and interview many of the providers in the sample. The final respondents included 325 FCC providers and 156 center providers. These respondents reported 1663 prices charged for private-paying children in their care.

The interviews required from 6 to 12 minutes to complete, depending upon the number of age categories a provider served (centers) or upon the number of children served by the provider (FCC). Interviews were conducted with providers from March to May of 2013.

### *Complicating Situations*

Since Workplace Solutions had conducted previous market rate surveys of Delaware child care providers and providers in other states, many complicating situations had already been identified and addressed. However some complications did occur for this study. As an example, for this survey, it was more challenging to reach and interview FCC sample providers. Some of these providers did not seem to answer the phone but let the call go to voice mail. Additional complications include the use of a privacy block on some providers' phones. Because the interview group and Workplace Solutions had experience with privacy blocks, many of those providers were eventually contacted. The constant use of an answering machine was a different matter. Although the interviewers called the FCC providers many times about the survey (many 'call-attempts'), it became a challenge to actually reach some of these providers. Some were ultimately reached by calling at unusual times (Saturday evening, early in the morning, later in the evening) and by ultimately calling them on their cell phones. Remaining in the field for an extended period of time also improved the participation rate of these FCC providers.

### **The Analysis of the Data**

The researchers were provided the interview data in an Excel file containing the interview results. They then reviewed the data, conducted data checks and deleted observations that were outliers. At that point, they proceeded to analyze the data for each county, type of care and age grouping.

### *Data Checks and Outliers*

The researchers performed the following data checks to ensure that inaccurate or inappropriate data were excluded from the study:

1. If a provider quoted a price for care for less than 30 hours per week for infant, toddler, or preschool-age care, the price was removed from the data.
2. If a provider quoted a school-age price for care for 4 hours or more per day, the price was removed.
3. If a price was excessively large or small, the price was removed. (See discussion below for the criteria used.)
4. If data needed to perform conversions to daily prices were missing, prices were disregarded.

After data checks were performed and problematic observations removed, the data were then converted to daily rates and the outliers removed. In general, the removal of outliers *does not affect price percentiles* in the study. The reason is that the study is providing percentiles, not averages, and there are generally enough observations with the same values (ties) that deleting a few observations at either end of the price distribution does not change the value of the various percentiles. They are removed solely for the purpose of improving the accuracy of the reported prices. Outliers would increase the standard errors of the estimated percentiles.

The rules the researchers used to identify outliers follows:

1. Remove daily prices below \$10 per day for full-time center and family child care prices for infants, toddlers, and preschool-age children.
2. Remove prices below \$1.00 for part-day school-age care.
3. Remove prices in excess of 10 times the median deviation from the median price.

The low outlier rule is a "rule of thumb" used by the researchers in previous pricing studies. Daily prices were always \$10 per day or greater, and part-day prices were always greater than \$1.00 per afternoon, so in 2013 there were no prices removed based on these rules.

The high outlier rule is a common method for determining outliers. For FCC and CCC providers, the high outlier rule generally resulted in the removal of prices in excess of \$100 per day. This occurred twice in 1,062 FCC full-time prices and twice in 358 CCC full-time prices. For center part-day school-age care, there were no high outliers in the data, but for FCC part-day school-age care, there were 2 outliers in 131 prices. Total numbers of outliers for each region/type of care are summarized below:

#### 2009 Outliers

Type	Prices	Usable	Kent	New Castle	Sussex	Total	N
FCC: ITP	1,080	1,062	0	0	2	2	1,060
FCC: SA	131	131	0	0	2	2	129
CTR: ITP	358	358	0	0	2	2	356
CTR: SA	94	94	0	0	0	0	94
Total	1,663	1,645	0	0	6	6	1,639

n = prices used to determine the 75<sup>th</sup> percentile prices per cell.

Note: Price counts are "per provider" prices except for FCC ITP (Infant, Toddler, Preschool) where providers can report up to 8 prices for full-time care.

For full-time center care, full-time FCC, and part-day school-age care, there were 6 outliers out of 1,645 usable prices, leading to .4% of the data being outliers and excluded from the study. In all, 1,639 prices were used to determine the 75<sup>th</sup> percentiles of prices for the 24 cells.

### *Conversion of Prices to Daily Prices*

The researchers used the 1,639 prices reported by the respondents to analyze this data and report 75<sup>th</sup> percentile prices as daily rates. They therefore needed to convert prices reported in other pricing units into daily rates. The conversions were made in the following way:

---

#### *Conversion into daily rates*

- |                 |  |
|-----------------|--|
| 1.) hourly:     | hourly price X # of hours-per-day                        |
| 2.) 1/2 day:    | price per 1/2 day / hours per 1/2 day<br>X hours-per-day |
| 3.) weekly:     | weekly price / days-per-week                             |
| 4.) monthly:    | monthly price / 4.33 weeks-per-month / days-per-week     |
| 5.) semester:   | price-per-semester / weeks-per-semester / days-per-week  |
| 6.) school year | price per-school-year / days per-school-year             |
| 7.) year:       | price per-year / days-per-year                           |
| 8.) other:      | price per-other / days-per-other                         |
- 

After completing the conversions, the economists then estimated the 75<sup>th</sup> percentiles of the distribution of daily rates for each market segment. (The 75<sup>th</sup> percentile of price divides price in such a way that 75% of the prices are at or below the 75<sup>th</sup> percentile and 25% are above the 75<sup>th</sup> percentile.) Researchers estimated the 75<sup>th</sup> percentile of each type of care by county and by age group. For center care, they developed a separate percentile by county for each of the four age categories (infant, toddler, preschool age, and school age). For family child care, they developed percentile prices for each of the three counties. In addition, researchers estimated a separate FCC percentile by county for the four age categories: infant, toddler, preschool age and school age.

The methodology for this study maximizes the amount of pricing information obtained in order to lower sampling errors. (Sampling error is a measure of the imprecision with which percentiles are estimated using the sample data.) This is done for centers by collecting prices from providers for the various age categories served by each provider for which a private-paying child is enrolled (infant through school-age). To explain this further, a center facility might be

randomly chosen as part of the infant sample because Children and Families First's provider data listed that provider as serving various age children, including infants. During the sample selection procedure, this center may have been selected as an infant provider for one of the center infant cells. When this provider was contacted, the interviewer obtained prices of private-paying children currently in the program (infant through school-age). In addition, from each family child care provider, researchers obtained prices for up to eight private-paying children attending full time, as well as a price for part-day school-age care if the provider had a private-paying school-age child enrolled for part-day care. Thus, researchers extracted all pricing information available from each provider, for each county and type of care.

### *The Statistical Analysis*

The data from the interviews were sorted using Excel; analyzed using a FORTRAN program previously developed by the researchers; compiled using a Lahey compiler.

### **Calculations of the 75th Percentile**

The 75th percentile of daily prices was calculated for the following:

#### **FAMILY CHILD CARE**

#### **full time**

*[30 hours or more per week]*

KENT COUNTY (ITP)

daily rate

SUSSEX COUNTY (ITP)

daily rate

NEW CASTLE COUNTY (ITP)

daily rate

ITP = infant, toddler and preschool-age prices

full time = daily rate for a full week

daily rate = 6 hours or more per day

full week = 30 hours or more per week

#### **CENTERS & FAMILY CHILD CARE**

#### **full time**

*[30 hours or more per week]*

#### KENT COUNTY

infants

daily rate

toddlers

daily rate

preschool age

daily rate

## SUSSEX COUNTY

infants	daily rate
toddlers	daily rate
preschool age	daily rate

## NEW CASTLE COUNTY

infants	daily rate
toddlers	daily rate
preschool age	daily rate

full time = daily rate for a full week  
 daily rate = 6 hours or more per day  
 full week = 30 hours or more per week

## CENTERS &amp; FAMILY CHILD CARE

**part day**  
*[less than 4 hours per day]*

## KENT COUNTY

school age	part-day rate
------------	---------------

## SUSSEX COUNTY

school age	part-day rate
------------	---------------

## NEW CASTLE COUNTY

school age	part-day rate
------------	---------------

part-day = less than 4 hours per day

## FCC ODD-HOUR CARE

State-wide	hourly rate
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**SPECIAL NEEDS CARE****full time***[30 hours or more hours per week]*

## NEW CASTLE COUNTY (ITP)

regular care (RC) \*

daily rate

special needs/regular care (SNC)\*\*

daily rate

## KENT/SUSSEX COUNTIES (ITP)

regular care (RC)\*

daily rate

special needs/regular care (SNC)\*\*

daily rate

**SPECIAL NEEDS CARE****part day***[less than 4 hours per day]*

## NEW CASTLE COUNTY: (SA)

regular care (RC) \*

part-day rate

special needs/regular care (SNC)\*\*

part-day rate

## KENT/SUSSEX COUNTIES: (SA)

regular care (RC)\*

part-day rate

special needs/regular care (SNC)\*\*

part-day rate

\*RC: the provider is providing care only for children who have not been diagnosed as having special-needs.

\*\*SNC: the provider is providing care for for children who are diagnosed as having 'special-needs' and for children who have not been diagnosed as having 'special-needs'

ITP = infant, toddler and preschool

SA = per day.

**Participation Rates**

**Response Rates**

**Refusal Rates**

**Obsolescence Rates**

**Participation Rates Obtained for The 2013 Delaware  
Local Child Care Market Rate Study**

**PARTICIPATION RATES\***

**Family Child Care**

Kent:	79%
New Castle	73%
Sussex	74%
TOTAL:	75%

**Centers**

Kent:	100%
New Castle	94%
Sussex	97%
TOTAL:	97%

**Centers** 97%

**Family Child Care** 75%

**Total:** 79%

\* Participation Rate: percentage of providers in the sample that agreed to participate in the survey. This includes providers that qualified for the survey and providers that did not qualify for the survey.

**RESPONSE RATES\*\*****Family Child Care**

Kent:	72%*
New Castle	66%
Sussex	64%*
TOTAL:	67%

**Centers**

Kent:	100%
New Castle	97%
Sussex	94%
TOTAL:	97%

**Centers** 97%

**Family Child Care** 67%

**Total:** 74%

\* All FCC providers in Kent and Sussex counties were ultimately included in the study interviews, as either sample or back-up replacement sample.

\*\* Response Rate: percentage of providers in the sample that qualified for the study and reported prices for private-paying children in their care.

**REFUSAL RATES\*****FAMILY CHILD CARE**

Kent County:	7%
New Castle County:	6%
Sussex County:	4%
<b>TOTAL:</b>	<b>6%</b>

**CENTER CHILD CARE**

Kent County:	0%
New Castle County:	2%
Sussex County:	3%
<b>TOTAL:</b>	<b>2%</b>

**TOTAL for Study:** 5%

\* Refusal Rate: providers that refused to participate in the survey when contacted.

**OBSOLESCENCE RATES\*****Family Child Care**

Kent:	8%
New Castle	5%
Sussex	7%
<b>TOTAL:</b>	<b>6%</b>

**Centers**

Kent:	0%
New Castle	0%
Sussex	3%
<b>TOTAL:</b>	<b>.6%</b>

<b>Centers</b>	<b>.6%</b>
<b>Family Child Care</b>	<b>6%</b>
<b>TOTAL</b>	<b>5%</b>

\* Providers who reported that they were no longer providing child-care services.

**TOTAL OUTCOMES****PARTICIPATION  
RATES:**

Centers:	97%
Family Child Care	75%
<b>Total:</b>	<b>79%</b>

**RESPONSE RATES:**

Centers:	97%
Family Child Care	67%
<b>Total:</b>	<b>74%</b>

**REFUSAL RATES:**

Centers:	2%
Family Child Care	6%
<b>Total:</b>	<b>5%</b>

**OBSOLESCENCE  
RATES:**

Centers:	.6%
Family Child Care	6%
<b>Total:</b>	<b>5%</b>

**Report to  
The Delaware Division of Social Services**

**Sampling Design for the  
2013 Local Child Care Market Rate Survey**

Submitted by: Workplace Solutions  
May 2013



## 2013 DELAWARE RATE STUDY - SAMPLE DESIGN

## 1. OVERVIEW

The aim of the project is to estimate the 75th percentile of child care prices for each of a set of populations, and to provide confidence intervals that indicate the uncertainty associated with these estimated percentiles. The populations are defined by a region (e.g., Sussex County), a type of care (e.g., family child care) and an age grouping (e.g., toddlers). This document will refer to the populations as *cells*. The sample design called for 24 such cells, as will be described in detail in the next section.

Suppose that the population size in cell  $i$  ( $i = 1, \dots, 24$ ) is  $N_i$ , and one obtains data on a simple random sample (drawn without replacement) of size  $n_i \leq N_i$ . Suppose that  $f(75\%ile)_i$  is the population density evaluated at the 75th percentile. A standard formula, valid for large  $n_i$ , gives the variance of the estimated 75th percentile (or *sampling variance*) as:

$$(1) \sigma^2(75\%ile)_i = [(.75)(.25)/(n_i f^2(75\%ile)_i)][1 - n_i/N_i].$$

Workplace Solutions' contract with the Delaware Division of Social Services called for a total sample size (total number of interviews) of 45% of the sampling frame. This was to be allocated as 45% of the licensed and exempt centers and 45% of the licensed FCC and large FCC providers in the sampling frame. However, at the time of the sample design it was determined that the center sample would need to be increased to 50% of the center sampling frame to allow for sufficient center prices to attain a high level of accuracy. Therefore, the final sample design for the CCC sample was 161 observations (50% of the licensed and exempt centers). The final FCC sample was 407 observations (45% of the licensed FCC and large FCC providers).

The sample design goal was to allocate these 568 observations across the 24 cells in such a way as to equalize across cells the variances of the estimated 75th percentiles. That is, the intent is to choose the sample sizes  $n_1, \dots, n_{24}$  in such a way that  $\sigma^2(75\text{ile})_i$  is at least approximately equal for all  $i$ , subject to the constraint that  $n_1 + n_2 + \dots + n_{24} = 568$ . However, this was done somewhat differently for the sample of child care centers than for the sample of family child care providers, because for child care centers we know in advance what age groups they serve, whereas for family child care providers we do not.

## 2. DEFINITIONS OF POPULATIONS (CELLS)

Cells were defined by geographic region, by type of care and by age group of the children served. Geographic region was defined by three counties: Kent (K), Sussex (S) and New Castle (NC). Type of care was distinguished by two types of provider: Child Care Centers (CCC) and Family Child Care (FCC). Child Care Centers (CCC) consist of institutional providers of child care that provide care for one or more age groups. This classification includes licensed and exempt center and school-age programs. Family Child Care (FCC) providers care for children of various ages in a home setting. Care was also distinguished by the age of the child. The four age groups used were as follows: Infants (I), age < one year; Toddlers (T), one year  $\leq$  age < three years; Preschool (PS), three years  $\leq$  age  $\leq$  5 years, including kindergarten; School Age (SA), first grade through 12 years of age.

This results in 24 cells for the sample design, as follows. In the sequel, cells will sometimes be referred to by number, as in this list. 1. Kent, FCC Infants. 2. New Castle, FCC Infants. 3. Sussex, FCC Infants. 4. Kent, FCC Toddlers. 5. New Castle, FCC

Toddlers. 6. Sussex, FCC Toddlers. 7. Kent, FCC Preschool. 8. New Castle, FCC Preschool. 9. Sussex, FCC Preschool. 10. Kent, FCC School Age. 11. New Castle, FCC School Age. 12. Sussex, FCC School Age. 13. Kent, CCC Infants. 14. New Castle, CCC Infants. 15. Sussex, CCC Infants. 16. Kent, CCC Toddlers. 17. New Castle, CCC Toddlers. 18. Sussex, CCC Toddlers. 19. Kent, CCC Preschool. 20. New Castle, CCC Preschool. 21. Sussex, CCC Preschool. 22. Kent, CCC School Age. 23. New Castle, CCC School Age. 24. Sussex, CCC School Age. These cells are also listed in order in the first column of Table 1A and 1B at the end of this report.

### 3. DENSITY ESTIMATES

In order to equalize the variance of the estimated 75th percentile across cells, one needs a prior estimate of  $f(75\text{th percentile})$ , the density of the population at the 75th percentile, for each cell, since this quantity enters into the formula given in equation (1) above for  $\sigma^2(75\text{th percentile})$ . The consultants used the density estimates obtained from the 2011 Delaware Rate Study, which are contained in the fifth columns of Tables 1A and 1B.

### 4. ESTIMATED RESPONSE RATES

Workplace Solutions' contract with the Delaware Department of Health and Social Services called for a total sample size of 45% (552) licensed and exempt providers (adjusted to 568 providers). When a contact is attempted, two kinds of problems may occur. First, the provider may no longer be providing child care or may only be serving children subsidized by Purchase-of-Care or Purchase-of-Care-Plus. If this is determined, the plan calls for another provider to be selected from a backup sampling list as replacement for the

sample provider. Second, a provider may never be successfully contacted, despite repeated attempts, or may refuse to provide information. Either of these latter outcomes (failure to contact, or refusal to provide information) constitutes *non-response*; no observation is forthcoming and no replacement sample is selected.

At the point of conducting interviews, it is obviously important to try to minimize non-response. However, based on their previous experience with Delaware rate studies, the consultants had *a priori* estimates of what the response rates and non-response rates would be. These are contained in the third column of Table 1A and the fourth column of Table 1B. (The response rates for FCC in Table 1A are adjusted to incorporate the percentage of providers who reported serving various age groups in each county, calculated for the 2011 Delaware Market Rate Study.) Using the response rates of the 2011 Delaware Market Rate Study, the consultants were able to allocate more interviews to those cells that had lower response rates in 2011. More precisely, suppose that the predicted response rate for cell  $i$  is  $p_i$ . If  $n_i$  interviews are allocated to cell  $i$ , the predicted number of observations that will result is  $n_i^* = n_i p_i$ . The sampling variance  $\sigma^2(75\%ile)_i$ , as given in equation (1) above, obviously depends on the number of observations one obtains, not on the number of interviews scheduled. Therefore, in choosing the  $n_i$  so as to equalize sampling variances across cells, the consultants calculated the sampling variances according to equation (1), but using the predicted number of observations  $n_i^* = n_i p_i$  in place of  $n_i$ .

## 5. SAMPLE SELECTION AND EQUALIZATION OF SAMPLING VARIANCES

The Division's Office of Child Care Licensing provided Workplace Solutions with a list of all licensed providers. The Division of Social Services provided a list of license-

exempt center providers. Children and Families First also provided their list of licensed providers, including age category information for center providers. From this information, the consultants constructed, for each cell, a comprehensive list of providers in that cell. The population size for each of the 12 CCC cells is given in the second column of Table 1B. (Cells 13 and 15 are combined for reasons to be discussed later, so there are only 11 CCC cells with data in Table 1B) However, for FCC the situation is slightly different because we do not know in advance which age groups a given provider serves. Therefore the population size  $N_i$  for a given FCC cell is unknown, and we treat it as infinite in calculating the standard errors using equation (1).

Based on the timeframe of the project, it was imperative to start the family child care interviews as quickly as possible due to the larger size of the FCC sample. Therefore, in consultation with the Division of Social Services, it was decided that the sample design should be done in two stages. In the first stage, the FCC sample would be pulled so as to equalize the variance of the FCC cells using a sample of 407 total interviews (with oversampling of those providers who provided infant care, odd-hour care and/or special needs care in the 2011 survey). In the second stage, the CCC sample would be pulled to equalize the variance of the CCC cells using a sample of 161 interviews (with oversampling of those providers that provided infant care in the 2011 survey). This procedure was also followed in the 2011 Delaware Market Rate Study. As such, the variances across types of care (FCC and CCC) could not be equalized, since the sample designs for FCC and CCC were performed at different times in the project and the total numbers of FCC and CCC interviews were fixed in advance of the sample design. Therefore the sample design sought to equalize variances across the 12 CCC cells and across the 12 FCC cells.

## 5A. CCC SAMPLING DESIGN

We will first discuss the allocation of the observations for the CCC cells. For a given number of interviews in cell  $i$  ( $n_i$ ), one can calculate the sampling variance  $\sigma^2(75\%ile)_i$  as a function of the density  $f(75\%ile)_i$ , the response rate  $p_i$ , and the population size  $N_i$ . It would then be a straightforward task to allocate the observations to approximately equalize  $\sigma^2(75\%ile)_i$  for each type of care.

However, this simple procedure needed to be modified to reflect the fact that many CCC providers offer care for more than one age group (i.e., infants, toddlers, preschool and school age), so that many providers appear on the list for more than one cell. Thus, for CCC providers a single interview may lead to observations in multiple cells. Since the consultants knew (for the most part) the age categories of care that each provider was offering, they chose to modify the simple procedure to take this information into account. (This procedure was also used in past Delaware rate studies.) Also, for the 2011 Delaware study, the CCC infant cells had to be combined for Kent and Sussex counties for the final analysis, so we combined these cells for the sample design in 2013. (The consultants' experience with the price distributions in Kent County and Sussex County suggest that combining of cells in this way is well-justified.)

The procedure ultimately used to allocate 161 interviews to the CCC cells is as follows. Using information provided by the Department and by Children and Families First, population lists were constructed for each cell. Each provider was assigned a unique identification number, so that one could track the same provider across different cells. Each list was then randomly permuted, using a random number generator in a spreadsheet. Providers were selected in order from these randomized lists. For the CCC cells (cells 13-

24), when a provider was selected it was also counted as yielding an observation in all other cells in which it appeared. For example, in cell 16 (Kent, Toddlers), provider KDC3200 was chosen, and was identified as providing care for infants, toddlers, preschool and school-age children; thus in addition to providing an observation for cell 16, it also added an observation to cells 13 (Kent, Inf), 19 (Kent, PS) and 22 (Kent, SA).

The consultants began by choosing a small number of providers from each CCC cell. They then calculated the sampling variance for each CCC cell, and proceeded to add observations to those cells that had the largest sampling variances. The sampling variances were recalculated as observations were added, so that at each step observations were added in such a way as to move the sampling variances toward equality. This procedure continued until 161 providers were identified to be contacted, and resulted in approximate equalization of the sampling variances. The resulting numbers of observations for each cell ( $n$ ) and the resulting standard errors (square root of the sampling variances) are given in the third and sixth columns of Table 1B.

For each county, the consultants also prepared a backup list of providers to be used to replace providers who no longer offer child care or who had no private-paying children in care at the time of the interview. The backup list was a randomly permuted list of the providers in that county that had not been chosen for the sample.

The 161 CCC providers to be interviewed provide a total of 552 expected observations. This calculation ignores non-response. Using the estimated response rates, approximately 461 CCC observations are actually anticipated.

It is clear in Table 1B that there are some substantial differences in the standard errors across the CCC cells. The primary reason is that the consultants deliberately deviated

from the procedure described above to put more observations into the smaller CCC cells to ensure sufficient price observations for credible inference. They also added more observations to the infant cells, where price observations tend to be scarce. In fact for cells 13 and 15 almost all providers in those cells were included in the sample. (A similar procedure was followed in previous Delaware rate surveys.) This resulted in small ex ante standard errors for some cells, but gives more assurance of avoiding serious problems in inference at the stage of analysis of the data. It also protects against a serious lack of data in the event of higher than anticipated non-response.

A secondary reason why the consultants did not equalize standard errors more exactly is that, because providers yield observations for more than one cell, they generally could not add observations to one cell without adding to other cells. Thus, for example, the standard error for cell 20 (New Castle, PS) was somewhat higher than the others, but adding observations to this cell would also have added observations to cell 23 (NC, SA), which had a smaller standard error.

## 5B. FCC SAMPLING DESIGN

In previous studies the FCC sample was designed at the county-level (to equalize variances across counties) and not at the county/age level. This was done because information about the ages of children that FCC providers serve has not been available prior to contacting the provider (unlike CCC). It is still the case that we do not know in advance which age groups are served by specific FCC providers. However, the consultants used information from the 2011 Delaware Market Rate Study to estimate rates that represent the fraction of FCC providers in each county who provide different age categories of care.



These rates were combined with response rates from the 2011 Delaware Market Rate Study and are contained in column 3 of Table 1A. For example, for cell 10 (K SA) the Response Rate is 0.260, indicating that in the 2011 survey after controlling for non-response, 26% of the Kent FCC providers who were interviewed provided school-age care for a private-paying child. (This relatively low percentage does not indicate that we expected a serious problem of non-response at the time of sampling. It simply reflects the fact that many Kent providers do not provide school-age care for private-paying children.)

For a given number of observations at the county level, the cell-specific Response Rate implies a predicted number of observations for the cell. For example, with 126 Kent providers chosen, we predict 33 school-age providers (126 times 0.260). This is the number  $n_i^*$  referred to in section 4 above. Given  $n_i^*$ , formula (1) gives the standard error for the cell. Notice that cells 1 and 3 were combined in the sample design in Table 1A. This is because these cells were combined in the final analysis of the 2011 Delaware study, and we anticipated that they would need to be combined for the current study. Therefore, for infant care in Kent and Sussex counties the combined "County n" is  $126 + 121 = 247$ . For the rest, the "County n" is always 126 (K), 160 (NC) or 121 (S).

Because the consultants did not know which providers cared for which specific age groups, all that they could do is to choose numbers of observations per county, with a total of 407. They could not equalize sampling variances across age groups within a county, but they could equalize any single variance across counties. Based on the consultants' knowledge that infant price observations are difficult to obtain and that sampling variances for infant prices tend to be higher than for other age category prices, it was decided to select the countywide n in such a way as to equalize the sampling variance for infant care. Since

the Kent and Sussex infant cells were combined in the final analysis of the 2011 Delaware study, the consultants designed the sample assuming that this would also have to be done in 2013 as well. The countywide n's for this study are 126, 160 and 121 for Kent, New Castle and Sussex, respectively. However, since Kent and Sussex are combined for the infant sample design, the combined countywide n is  $126 + 121 = 247$ . The countywide n's are given in the second column of Table 1A and lead to approximately equal standard errors (square root of the sampling variances) of 0.868 (K&S), and 0.595 (NC), as given in the last column of Table 1A. It was nearly impossible to get these standard errors any closer, because of a large difference in the response rates (0.160 and 0.435) for K&S infants (combined) and NC infants, respectively.

The total number of observations allocated to FCC is  $126 \text{ (K)} + 160 \text{ (NC)} + 121 \text{ (S)} = 407$ . This produces an anticipated n of 743 (the sum of the entries in column 4 of Table 1A, which is the total anticipated number of price observations). The difference between 407 and 743 observations is due to the fact that many FCC providers, as well as CCC providers, provide care for more than one age group.

**Table 1. 2013 Delaware Rate Study Sample Design.****Table 1A. Family Child Care**

Cell	County n	Response Rate	n	f(75%ile)	Std Err.
1. I, K&S	247	0.160	40	0.0794	0.868
2. I, NC	160	0.435	70	0.0872	0.595
3. I, S	--	--	--	--	--
4. T, K	126	0.561	71	0.0771	0.668
5. T, NC	160	0.819	131	0.0616	0.613
6. T, S	121	0.429	52	0.1555	0.386
7. PS, K	126	0.553	70	0.1158	0.448
8. PS, NC	160	0.785	126	0.0756	0.511
9. PS, S	121	0.446	54	0.0984	0.599
10. SA, K	126	0.260	33	0.0842	0.899
11. SA, NC	160	0.395	63	0.0882	0.617
12. SA, S	121	0.271	33	0.1522	0.497

County n = The number of providers in this county selected for the sample. This number is imputed to each cell in the county.

Response Rate = The rate at which providers in each county produce price observations for that age category while accounting for non-response. Calculated from the 2011 survey results.

n = Response Rate  $\times$  County n. This is the anticipated number of price observations in each cell.

f(75%ile) = anticipated value of the density of the 75<sup>th</sup> percentile price for each cell. Calculated from the 2011 survey results.

Std. Err. = Standard Error. The anticipated standard error for the 75<sup>th</sup> percentile price.

Cells 1 and 3 were combined since they were combined in the final analysis for the 2011 Delaware study.

**Table 1. 2013 Delaware Rate Study Sample Design - Continued.****Table 1B. Child Care Centers**

Cell	N	n	Resp. Rate	f(75%ile)	Std Err.
13. I, K&S	59	49	0.81	0.0420	0.937
14. I, NC	123	81	0.76	0.0244	1.601
15. I, S	--	--	--	--	--
16. T, K	42	24	1.00	0.0577	1.004
17. T, NC	154	81	0.92	0.0363	0.990
18. T, S	39	28	0.85	0.0679	0.821
19. PS, K	54	28	1.00	0.0662	0.858
20. PS, NC	195	91	0.94	0.0338	1.038
21. PS, S	56	32	0.93	0.0499	1.084
22. SA, K	51	26	0.68	0.1038	0.802
23. SA, NC	161	83	0.64	0.0734	0.663
24. SA, S	45	29	0.79	0.0946	0.674

N = Total number of providers designated as providing this type of care in this cell.

n = The number of providers in this cell selected for the sample.

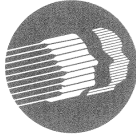
Resp. Rate = Response Rate. The anticipated rate at which the selected providers produce valid price observations. Calculated from the 2011 survey results. Resp. Rate  $\times$  n is the anticipated number of valid price observations in each cell.

f(75%ile) = anticipated value of the density of the 75<sup>th</sup> percentile price for each cell. Calculated from the 2011 survey results.

Std. Err. = Standard Error. The anticipated standard error for the 75<sup>th</sup> percentile price.

Cells 13 and 15 were combined since they were combined in the final analysis for the 2011 Delaware study.

## **MARKETING MATERIALS**



**DELAWARE HEALTH  
AND SOCIAL SERVICES**

DIVISION OF  
SOCIAL SERVICES

TELEPHONE: (302) 255-9500

To Family Child Care Providers:

Delaware Health and Social Services is presently undertaking a *Child Care Market Rate Survey* to determine the child care prices charged by providers throughout the state. This study is being implemented to meet federal requirements and to assist the state with the review of its rates for state-subsidized child care.

A research firm, *Workplace Solutions*, will be contacting many of the child care providers in Delaware to conduct a brief telephone interview. During the interview, family child care providers will be asked about their enrollment and their rates for children in their care.

During the coming weeks, you may be contacted by the interview group to participate in this important survey. I ask for your assistance with this survey if you are called for the interview.

I am including a simple worksheet on the back of this letter to help you prepare for this interview. If you would like more information about the telephone survey, you may call Barbara McCaffery at the Division of Social Services (302) 255-9611. If you prefer to contact the researchers directly with your questions, you may call Marie Sweeney at Workplace Solutions (781) 944-3635.

Thank you in advance for your assistance with this survey.

Sincerely,

A handwritten signature in cursive script that reads "Elaine Archangelo".

Elaine Archangelo  
Director

PS: By participating in the survey, you will be helping providers, parents and children.

### Family Child Care Worksheet

This worksheet will prepare you for the child care telephone interview. **DO NOT MAIL THIS TO US.** Instead, please fill it out and keep it available for the interview.

Please list information about children who attend your program 30 hours or more per week. For school-age children (from first grade through 12 years of age), please list your rate for care for *less than 4 hours per day* if you are providing that care. This can be for 'after-school care', for 'before school care', or for 'before & after-school care'.

If you have children subsidized by Purchase of Care or Purchase of Care Plus, only list the private-paying children. "Private-paying children" can include *self-arranged* care. Please do not include any information about weekend, overnight or evening care.

Child's first Name  (We will not ask you for this.)	Age of child	Rate you charge for this child	Average # of hours per day the child attends your program
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

### Early Care and Education and School-Age Worksheet

This worksheet will prepare you for the telephone interview for the child care market rate survey. **DO NOT MAIL IT TO US.** Instead, please fill it out and keep it available for the phone interview.

For children below first grade, please answer only for children enrolled **30 hours or more per week**. For school-age children (first grade through 12 years of age) please provide information about part-day care (less than 4 hours per day), if you offer that care at this site.

	<b>Infants</b> < 12 months	<b>Toddlers</b> 12 months up to 36 months	<b>Preschoolers</b> 3-5 years including kindergarten	<b>School-age</b> First grade through 12 years <i>(for less than 4 hours/day)</i>
Your basic rate (without discounts or subsidies)*				
Average # of hours per day the children are enrolled				
Estimate the number of private-paying children in this age category at this site				

\* If you have multiple rate structures (for example both by week and by day), answer with the rate most typically used by the parents in the relevant age group above. If some of the parents in your program have government subsidies (Purchase of Care or Purchase of Care Plus) and some do not, use the rate for the private-paying parents.



## **SURVEYS**

**Delaware Family Child Care  
2013 Child Care Market Rate Survey**  
(2/01/13)

1. As a family child care provider, are you presently serving children in your program and receiving payment for your services?

1. no

If "No, continue to 1B

2. yes

If Yes, go to 1A.

- 1A. How many children are enrolled in your daytime program, for whom you receive payment? [PROBE: This does not mean your licensed capacity, but the total number of children enrolled over the course of a week, for the program that you operate during day-time hours. "Day-time hours" means *any hours* between 6 A.M. and 7 P.M.]

"total number of children" means private-paying children and children subsidized by the state.]

\_\_\_\_\_ # of children (GO TO Q2)

- 1B. In your child care program held during the day, have you served any children within the past month or do you expect to serve any children within the next month? [PROBE: "during the day" means *any hours* between 6 A.M. and 7 P.M.]

1. no  If "No", READ      2. yes  If "YES", go to 1C.

Thank you for participating  
in this survey. That's all I need  
to ask of you. Have a nice day.

- 1C. Were you paid for the children you served during the past month... or will you be paid for the children you will serve within the next month?

1. no \_\_\_

If NO, READ

2. yes \_\_\_

If YES, go to 1D.

Thank you for participating in this survey. That's all I need to ask of you. Have a nice day.

**END FINAL DISPOSITION**

- 1D. How many children is this altogether? \_\_\_\_\_  
[PROBE: Please give me the number of children you served within the past month or will serve within the next month... for which you are paid.]

READ: "Throughout this survey please refer to this child or these children when I ask you questions about the children you are serving in your program."

CONTINUE to Q2

2. Do you have the worksheet that we sent to you handy? (If NO, "Let's go ahead anyway. These questions are straightforward.")

Are any of the "X" children in your program subsidized by the state through Purchase of Care or Purchase of Care Plus?

[PROBE: This means that the state directly pays the provider through a contract or voucher. This does not include "self arranged" care.]

1. no \_\_\_

GO to Q 2B3

2. yes \_\_\_

GO to Q2A

- 2A. How many children are subsidized by Purchase of Care or Purchase of Care Plus? [PROBE: subsidies can be referred to as contracted care. This does not include 'self-arranged' care]

\_\_\_\_\_ # of CHILDREN  
(IF "0" go to Q2B3)

2B1. Between 1-99%

READ:

"For the questions I will be asking you in this survey, please give me information and rates ONLY for the children that are not subsidized by Purchase of Care or Purchase of Care Plus. We only want rate information about private-paying children, which can include "self-arranged" care.

Now, if you eliminate the subsidized children from your enrollment, how many children are left?"

\_\_\_\_\_ # of children  
GO to Q2B3

2B3. Of these "X" (private-paying) children, how many attend your program 30 hours or more per week? [PROBE: this generally means 6 hours or more per day.]

\_\_\_\_\_ # of children  
(IF > "0", GO to Q3  
= "0", GO to Q19)

2B2. 100% (ALL)

READ:

Thank you.  
That's all I  
need to ask.  
END.

2. SELECT APPROPRIATE CATEGORY:

1. IF "8" CHILDREN OR LESS

2. IF "9" OR MORE

READ:

For the first part of this survey, please select eight of the children who attend your program full time, 30 hours or more per week, and give me information for those eight children. If possible, also select children of different ages.

I will now be asking you questions about your enrollment and rates for the children who attend your program full time, 30 hours or more per week, for whom you receive payment. PLEASE do not give me information about any child that you serve for free. In addition, for the first part of this survey, please do not give me information about any school-age child. School-age children are from first grade and up.

(If you have your worksheet handy, this would be a good time to use it.)

(IF respondent has over three children, READ:

("If you don't have the worksheet handy, you might want to jot down the names of the children and check off each child as you give me the information.")

## PART 1: YOUR REGULAR CHILD CARE PROGRAM

### CHILD 1

4. Let's start with the first (private paying) child attending your program full time, 30 hours or more per week. What is this child's age?  
[PROBE: "Private paying" means that the parents pay for the care, not the state through Purchase of Care or Purchase of Care Plus.]

\_\_\_\_. \_\_\_\_ MONTHS, \_\_\_\_ . \_\_\_\_ YEARS

- 4a. What rate do you charge for care for this child? In quoting your rate, please do not "add on" any fees that are above your basic rate...and please do not deduct for any discounts. If you have already deducted for a "sibling discount" or a sliding-fee scale, please tell me what the full rate is without the discount.

\$(a) \_\_\_\_\_ per \_\_\_\_\_ (b) (unit)

[DIRECTION FOR INTERVIEWER: If Respondent has two or more children in care from one family and the family pays in one lump sum, say: "Please estimate an amount for this child."]

[DIRECTION FOR INTERVIEWER: If Respondent reports that she has more than one rate for this child, ask for the *most commonly used rate* for this child. If Respondent cannot do this, ask for the highest rate that the provider charges for this child.]

- 4b. [PROBE: FOR THOSE WHO DON'T GIVE A "UNIT", BY SAYING: "Is this amount": then, ASK QUESTION NEXT TO THE UNIT QUOTED BY THE RESPONDENT.

If "unit" is given in 4a ... ask question next to the unit reported.)

- 01) Per hour                      How many hours-per-day does this child usually attend your program? [PROBE: Please estimate an average number of hours per day.]      \_\_\_\_ . \_\_\_\_ HOURS

GO TO Q4C

IF RESPONDENT CANNOT GIVE THIS,  
ASK:

"How many hours was this child in your care  
last week?"

\_\_\_\_\_ . \_\_\_\_\_ HOURS

"How many days did child attend last week?"

\_\_\_\_\_ . \_\_\_\_\_ DAYS

- 02) Per 1/2 day      How many hours per 1/2 day? (av) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of hours  
per 1/2 day.]

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of  
hours-per-full day.]

GO TO Q4C

- 03) Per day      How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of  
hours-per-day the child attends.]

GO TO Q4C

- 04) Per week      How many days-per-week? \_\_\_\_ . \_\_\_\_ DAYS  
[PROBE: What is the average number of days-  
per-week the child attends.]

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of  
hours-per-day the child attends.]

05) Per month      How many days-per-week? \_\_\_\_ . \_\_\_\_ DAYS  
 [PROBE: What is the average number of days-per-week the child attends.]

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of hours-per-day the child attends.]

06) Per other      Please explain: \_\_\_\_\_

How many days in this unit? \_\_\_\_ . \_\_\_\_ DAYS

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of hours-per-day the child attends.]

GO TO Q4C

4C. Does this child attend your program 30 hours or more per week? (average) [PROBE: This usually means 6 hours or more per day.]

\_\_\_\_\_ YES

\_\_\_\_\_ NO

5. **DOES RESPONDENT HAVE A SECOND CHILD IN HER PROGRAM?**

NO \_\_\_\_\_  
 If NO, Go to Q19

YES \_\_\_\_\_  
 If YES, CONTINUE



## CHILD 2

6. For the second (private paying) child attending your program full time.

What is this child's age?

[Full time = 30 hours or more per week.]

\_\_\_\_. \_\_\_\_ MONTHS, \_\_\_\_\_ . \_\_\_\_ YEARS

- 6a. What rate do you charge for care for this child? [PROBE: In quoting your rate, please do not "add on" any fees that are above your basic rate...and please do not deduct for any discounts. If you have already deducted for a "sibling discount" or a sliding-fee scale, please tell me what the full rate is without the discount.]

\$(a) \_\_\_\_\_ per \_\_\_\_\_ (b) (unit)

[DIRECTION FOR INTERVIEWER: IF Respondent has two or more children in care from one family and the family pays in one lump sum, say: "Please estimate an amount for this child."]

[DIRECTION FOR INTERVIEWER: If Respondent reports that she has more than one rate for this child, ask for the *most commonly used rate* for this child. If Respondent cannot do this, ask for the highest rate that the provider charges for this child.]

- 6b. [PROBE: FOR THOSE WHO DON'T GIVE A "UNIT", BY SAYING: "Is this amount": then, ASK QUESTION NEXT TO THE UNIT QUOTED BY THE RESPONDENT.

If, "unit" is given in 6a .... ask question next to the unit reported.)

- 01) Per hour                      How many hours-per-day does this child usually attend your program? [PROBE: Please estimate an average number of hours-per-day.] \_\_\_\_\_ . \_\_\_\_\_ HOURS

GO TO Q6C

IF RESPONDENT CANNOT GIVE THIS,  
ASK:

"How many hours was this child in your care  
last week?"

\_\_\_\_\_ . \_\_\_\_\_ HOURS

"How many days did this child attend last  
week?"

\_\_\_\_\_ . \_\_\_\_\_ DAYS

- 02) Per 1/2 day      How many hours per 1/2 day? (av) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of hours  
per 1/2 day.]

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of  
hours-per-full-day.]

GO TO Q6C

- 03) Per day      How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of  
hours-per-day the child attends.]

GO TO Q6C

- 04) Per week      How many days-per-week? \_\_\_\_ . \_\_\_\_ DAYS  
[PROBE: What is the average number of days-  
per-week the child attends.]

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of  
hours-per-day the child attends.]

05) Per month            How many days-per-week? \_\_\_\_ . \_\_\_\_ DAYS  
 [PROBE: What is the average number of days-per-week the child attends.]

How many hours per day? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of hours-per-day the child attends.]

06) Per other            Please explain: \_\_\_\_\_

How many days in this unit? \_\_\_\_ . \_\_\_\_ DAYS

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of hours-per-day the child attends.]

GO TO Q6C

6C. Does this child attend your program 30 hours or more per week? (average) [PROBE: This usually means 6 hours or more per day.]

\_\_\_\_\_ YES

\_\_\_\_\_ NO

**7. DOES RESPONDENT HAVE A THIRD CHILD IN HER PROGRAM?**

NO \_\_\_\_\_  
 If NO, Go to Q19

YES \_\_\_\_\_  
 If YES, CONTINUE

**CHILD 3**

8. Now for the third (private paying) child attending your program full time, 30 hours or more per week. What is this child's age?

\_\_\_\_. \_\_\_\_ MONTHS, \_\_\_\_ . \_\_\_\_ YEARS

- 8a. What rate do you charge for care for this child? [PROBE: In quoting your rate, please do not "add on" any fees that are above your basic rate...and please do not deduct for any discounts. If you have already deducted for a "sibling discount" or a "sliding-fee scale", please tell me what the full rate is without the discount.]

\$(a) \_\_\_\_\_ per \_\_\_\_\_ (b) (unit)

[DIRECTION FOR INTERVIEWER: IF Respondent has two or more children in care from one family and the family pays in one lump sum, say: "Please estimate an amount for this child."]

[DIRECTION FOR INTERVIEWER: If Respondent reports that she has more than one rate for this child, ask for the *most commonly used rate* for this child. If Respondent cannot do this, ask for the highest rate that the provider charges for this child.]

- 8b. [PROBE: FOR THOSE WHO DON'T GIVE A "UNIT", BY SAYING: "Is this amount": then, ASK QUESTION NEXT TO THE UNIT QUOTED BY THE RESPONDENT.]

If, "unit" is given in 8a ... ask question next to the unit reported.)

- 01) Per hour                      How many hours-per-day does this child usually attend your program? [PROBE: Please estimate an average number of hours-per-day.]
- \_\_\_\_\_ . \_\_\_\_\_ HOURS

GO TO Q8C

IF RESPONDENT CANNOT GIVE THIS,  
ASK:

"How many hours was this child in your care  
last week?"

\_\_\_\_\_ . \_\_\_\_\_ HOURS

"How many days did child attend last week?"

\_\_\_\_\_ . \_\_\_\_\_ DAYS

02) Per 1/2 day      How many hours per 1/2 day? (av) \_\_\_\_\_.\_\_\_\_  
[PROBE: What is the average number of hours  
per 1/2 day.]

How many hours per day? (average) \_\_\_\_\_.\_\_\_\_  
[PROBE: What is the average number of  
hours-per-full-day.]

GO TO Q8C

03) Per day      How many hours-per-day? (average) \_\_\_\_\_.\_\_\_\_  
[PROBE: What is the average number of  
hours-per-day the child attends.]

GO TO Q8C

04) Per week      How many days-per-week? \_\_\_\_ . \_\_\_\_ DAYS  
[PROBE: What is the average number of days-  
per-week the child attends.]

How many hours-per-day? (average) \_\_\_\_\_.\_\_\_\_  
[PROBE: What is the average number of  
hours-per-day the child attends.]

05) Per month                      How many days-per-week? \_\_\_\_ . \_\_\_\_ DAYS  
 [PROBE: What is the average number of days-per-week the child attends.]

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of hours-per-day the child attends.]

06) Per other                      Please explain: \_\_\_\_\_

How many days in this unit? \_\_\_\_ . \_\_\_\_ DAYS

How many hours-per-day? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of hours-per-day the child attends.]

GO TO Q8C

8C. Does this child attend your program 30 hours or more per week? (average) [PROBE: This usually means 6 hours or more per day.]

\_\_\_\_\_ YES

\_\_\_\_\_ NO

**9. DOES RESPONDENT HAVE A FOURTH CHILD IN HER PROGRAM?**

NO \_\_\_\_\_  
 If NO, Go to  
 Q19

YES \_\_\_\_\_  
 If YES, CONTINUE

**CHILD 4 – 8**  
 (Q 10-18)

## SCHOOL AGE

19. Now, I'd like to ask you a question about "school-age" children. For this survey, "school-age" children are from first grade through 12 years of age.

Do any (private paying) school-age children come to your program for *less than 4 hours per day*. This can be for 'after-school care', or for 'before school care', or for 'before AND after school care'.

[PROBE: This does NOT include kindergarten care. "Private-paying" means that the parents pay for the child care, it is not paid by the state through Purchase-of-Care or Purchase-of-Care-Plus.]

1. NO \_\_\_\_\_                      2. YES \_\_\_\_\_  
     IF NO, Go to Q21                If YES, Go to Q20

20. What rate do you charge for (private-paying) school-age children who attend your program less than 4 hours per day? In quoting your rate, please do not "add-on" any additional fees above your regular rate and please do not deduct for any discounts such as a "sibling discount". [PROBE: A discount may also be called a "sliding-fee" scale.]

[DIRECTION TO INTERVIEWER: If Respondent has more than one rate for school-age children for *less than 4 hours per day*, ask for the rate MOST COMMONLY USED for these children. If the Respondent cannot give one rate, ask for the highest rate for *less than 4 hours per day*.]

[DIRECTION FOR INTERVIEWER: If Respondent reports a rate for "full day" care for school-age children, say that we are only asking for a rate *for less than 4 hours per day* and re-read Question 20. If Respondent does not have a school-age rate for *less than 4 hours per day*, skip to Q21]

20b. [PROBE: FOR THOSE WHO DON'T GIVE A "UNIT", BY SAYING: "Is this amount": then, ASK QUESTION NEXT TO THE UNIT QUOTED BY THE RESPONDENT.

If, "unit" is given in Q20. .... ask question next to the unit reported.)

01) Per hour      How many hours-per-day is the school-age child in this program?  
[PROBE: Please estimate an average number of hours-per-day for this program.]

\_\_\_\_\_ . \_\_\_\_\_ HOURS

IF RESPONDENT CANNOT GIVE THIS, ASK:

How many hours-per-week are the school age children in your program? (average)

\_\_\_\_\_ . \_\_\_\_\_ HOURS

How many days-per-week are the school-age children in your program? (average)

\_\_\_\_\_ . \_\_\_\_\_ DAYS

02) Per 1/2 day      How many hours per 1/2 day? (av) \_\_\_\_\_.\_\_\_\_  
[PROBE: What is the average number of hours per 1/2 day for this care.]

03) Per afternoon      How many hours per afternoon is the school-age child in your program? [PROBE: Please estimate an average number of hours-per-day for this program.]

\_\_\_\_.\_\_\_\_





- 20C. How many (private paying) school-age children come to your program for less than four hours per day? (Please estimate). [PROBE: This can be for 'after school' care, and for 'before-school care' and for 'before AND after school' care. 'School-age children' are from first grade through 12 years of age.]
- 

[DIRECTION TO INTERVIEWER: During Spring school-vacation weeks, when schools are closed for vacations, the school-age children may come for *full day* child care. We are not looking for that. We want the number of school-age children who are coming for less than 4 hours per day, when the schools are not closed for vacation weeks.]

### ODD HOUR CARE

21. Now I will be asking you about what we call "odd-hour" care, that is evening care, overnight care, and weekend care. Within the past month, have you provided evening care, overnight care, or weekend care for any private-paying child?

[PROBE: "Private paying" children are those who are not subsidized by the state through "Purchase of Care" or "Purchase of Care Plus". Instead, the parents pay the full rate.]

*Evening care* could be care for any evening hours, for example from 8 P.M. - 11 P.M., for any evening Monday to Friday.

*Overnight care* could be care for any overnight hours, for example 11 P.M. - 6 A.M., for any evening Monday to Friday.

*Weekend care* is Saturday care, Sunday care, or Saturday through Sunday care]

If "yes" go to Q22

If "no" go to Q29

22. Were you paid for providing this odd-hour care? \_\_\_\_\_  
 [PROBE: "Paid" means that you received a payment specifically for the odd-hour care, that you do not provide this odd-hour care for free, or as part of your rate for your regular child care. Odd-hour care does not include "late pick-up" fees. ]

If "yes" go to Q23

If "no" go to Q29

## EVENING CARE

23. Did you provide evening care for any (private paying) child within the past month and receive a payment for that care?  
 [PROBE: "evening care" is care during evening hours, for example from 8 P. M. to 11 P.M, for any evening Monday through Friday.]

a. YES \_\_\_\_\_  
 IF "YES" GO TO Q24

b. NO \_\_\_\_\_  
 IF "NO" GO TO Q25

24. What rate did you charge for this evening care? In quoting your rate, please do not "add on" any additional fees above your regular evening-care rate, and please do not deduct for any discounts or subsidies.

\$(a)\_\_\_\_. \_\_\_\_per (b)\_\_\_\_

[DIRECTION FOR INTERVIEWER: If Respondent has more than one evening-care rate, ask for the rate *most commonly used*. If Respondent cannot give you one rate, ask for the highest evening care rate that is charged to the parents.

This should be a rate for only one child. If a parent pays in a lump sum for more than one child, please ask the Respondent to estimate an amount for one child.}

[DIRECTIONS TO INTERVIEWER: for those who don't give a "unit", say "is this the amount per \_\_\_\_" then ask the question next to the unit quoted by the Respondent. For those who do quote a unit, ask the question next to the unit quoted.]

24b.

01. hour

02. 1/2 day

How many hours of care did you provide for this fee? [PROBE: How many hours per 1/2 day for this evening care?] (average)

\_\_\_\_\_ · \_\_\_\_\_

03. day

How many hours of care did you provide for this fee? [PROBE: How many hours-per-day for this evening care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

04. evening

How many hours of care did you provide for this fee? [PROBE: How many hours-per-evening for this care? (average) ]

\_\_\_\_\_ · \_\_\_\_\_

05. week

How many hours of care did you provide for this fee? [PROBE: How many hours per week for this evening care? (average) ]

06. other

Explain \_\_\_\_\_

How many hours of care did you provide for this fee? [PROBE: How many hours-of-care in this unit?]

\_\_\_\_\_ · \_\_\_\_\_

## OVERNIGHT CARE

25. Did you provide overnight care for any (private paying) child within the past month and receive a payment for that care?  
[PROBE: "overnight care" is care for any overnight hours, for example 11 P.M. - 6 A.M., for any evening Monday to Friday.]

a. YES \_\_\_\_\_  
IF "YES" GO TO Q26

b. NO \_\_\_\_\_  
IF "NO" GO TO Q27

26. What rate did you charge for this overnight care? In quoting your rate, please do not "add on" any additional fees above your regular overnight rate, and please do not deduct for any discounts or subsidies.

\$(a)\_\_\_\_. \_\_\_per (b)\_\_\_

[DIRECTION FOR INTERVIEWER: If Respondent has more than one overnight-care rate, ask for the rate *most commonly used*. If Respondent cannot give you one rate, ask for the highest rate that is charged to the parents.

[DIRECTION FOR INTERVIEWER: This should be a rate for only one child. If a parent pays in a lump sum for more than one child, please ask the Respondent to estimate an amount for one child.]

[DIRECTIONS TO INTERVIEWER: for those who don't give a "unit", say "is this the amount per \_\_\_" then ask the question next to the unit quoted by the Respondent. For those who do quote a unit, ask the question next to the unit quoted.]

26b.

01. hour

02. 1/2 day                                      How many hours of care did you provide for this fee? [PROBE: How many hours per 1/2 day for this overnight care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

03. day    How many hours of care did you provide for this fee? [PROBE: How many hours-per-day for this overnight care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

04. night or evening                              How many hours of care did you provide for this fee? [PROBE: How many hours-per-night or evening for this overnight care? (average) ]

\_\_\_\_\_ · \_\_\_\_\_

05. week    How many hours of care did you provide for this fee? [PROBE: How many hours-per-week for this overnight care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

06. other    Explain \_\_\_\_\_

How many hours of care did you provide for this fee? [PROBE: How many hours in this unit?]

\_\_\_\_\_ · \_\_\_\_\_

#### WEEKEND CARE

27. Did you provide weekend care for any (private paying) child within the past month and receive a payment for that care? [PROBE: Weekend care includes Saturday care, Sunday care, or Saturday through Sunday care.)

a. YES \_\_\_\_\_

IF "YES" GO TO Q28

b. NO \_\_\_\_\_  
IF "NO" GO TO Q29

28. What rate did you charge for this weekend care? In quoting your rate, please do not "add on" any additional fees above your regular weekend rate, and please do not deduct for any discounts or subsidies.

\$(a)\_\_\_\_. \_\_\_\_per (b)\_\_\_\_

[DIRECTION FOR INTERVIEWER: If Respondent has more than one weekend-rate, ask for the rate *most commonly used*. If Respondent cannot give you one rate, ask for the highest weekend care rate that is charged to the parents.

[DIRECTION FOR INTERVIEWER: This should be a rate for one child. If a parent pays in a lump sum for more than one child, please ask the Respondent to estimate an amount for one child.]

[DIRECTIONS TO INTERVIEWER: for those who don't give a "unit", say "is this the amount per \_\_\_\_" then ask the question next to the unit quoted by the Respondent. For those who do quote a unit, ask the question next to the unit quoted.]

28b.

01. hour

02. 1/2 day

How many hours of care did you provide for this fee? [PROBE: How many hours per 1/2 day for this weekend-care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

03. day

How many hours of care did you provide for this fee? [PROBE: How many hours-per-day for this week-end care? (average)]

04. per day and evening

\_\_\_\_\_ · \_\_\_\_\_  
 How many hours of care did you provide for this fee? [PROBE: How many hours for this care?] (average)

05. week-end

\_\_\_\_\_ · \_\_\_\_\_  
 How many hours of care did you provide for this fee? [PROBE: How many hours per weekend for this care?]

\_\_\_\_\_ · \_\_\_\_\_  
IF R. cannot give this:

How many days for this weekend care?

\_\_\_\_\_ · \_\_\_\_\_  
 How many hours per day?

06. other

Explain \_\_\_\_\_

How many hours of care did you provide for this fee? [PROBE: How many hours-of-care in this unit?] \_\_\_\_\_

## PART 2: CHILDREN WITH SPECIAL NEEDS

29. Now I just have a question or two remaining to ask. Are you presently serving any child with special needs in your program, private paying or state subsidized?

For this survey, "special needs" means a child from infancy through 18 years of age who is diagnosed with physical, emotional, or developmental needs ....that requires special



care. [PROBE: "any" child with special needs can be a private paying or state-subsidized child, and can be full time or part time.]

1. NO \_\_\_\_\_                      2. Yes \_\_\_\_\_  
 If "NO" go to END                  If "YES" go to Q30

[DIRECTION TO INTERVIEWER: If Respondent questions if a type of illness or situation is "special needs" ....tell the Respondent she should decide if the child has "special needs". You may want to re-read the definition of 'special needs' if the Respondent is unclear about the question or answer.]

30. Are there any additional costs to you for serving the child or children with special needs? {PROBE: Does it cost you any more to have the child or children with special needs in your program ..... than to have the other children in your program?}

1. NO \_\_\_\_\_                      2. Yes \_\_\_\_\_  
 If "NO" go to END                  If "YES" go to Q31

31. Please estimate how much of an additional cost it is to you to have the child or children with special needs in your program? Would you estimate that the higher cost to you is 5% more, 10% more, 15% more, 20% more, or another amount?

- 1.) 5%            2.) 10%            3.) 15%            4.) 20%

or

5. another amount (explain) \_\_\_\_\_

**Thank you for participating in this survey.  
 Your answers have been very helpful. Have a nice day.**

**Survey for Delaware ECE and SA Centers  
for the 2013 Market Rate Study  
(3/16/13)**

1. BEFORE WE BEGIN, I NEED TO ASK: Are you presently providing Early Care and Education or School-age center services to children at this site? (confirm site address) [PROBE: These services include types of programs such as: child development programs, after-school programs, before & after school programs, extended day-care services, child-care center programs, early-learning programs, infant/toddler programs, school-age programs, early-childhood education programs, etc.]

1. NO \_\_\_\_\_

If NO, continue to 1A

2. YES \_\_\_\_\_

If YES, Go to 1B

1A. Have you served any children within the past month or do you expect to serve any children within the next month?

1. NO \_\_\_\_\_

If NO, READ:

Thank you for participating in this survey. That's all I need to ask you at this time. END

2. YES \_\_\_\_\_

If YES, READ:

Please refer to these children when I ask you about children you are presently serving. GO to 1B

1B. In your program at this site, are any of the children enrolled 30 hours or more per week? [PROBE: this usually means 6 hours or more per day.]

1. NO \_\_\_\_\_

If NO, Go to 1C

2. YES \_\_\_\_\_

If YES, GO to 1D

- 1C. Do any school-age children attend your program at this site? For this survey, "school-age children" are from first grade through 12 years of age. [PROBE: This does not include kindergarten care.]

1. NO \_\_\_\_\_  
If NO, END

2. YES \_\_\_\_\_  
GO to 1D

- 1D. How many children in TOTAL are presently enrolled in your program at this site? (Please estimate)

[PROBE: This does not mean your licensed capacity, but the TOTAL number of children enrolled in your center program over the course of a week. This includes infants, toddlers, preschoolers, kindergarten and school-age children at this site, as well as children who attend full time and part time. It also includes both state-subsidized and private-paying children. "Children" can be from 1 month through 12 years of age.]

\_\_\_\_\_ # of children

2. Of these "X" children, please estimate how many are subsidized by Purchase of Care and Purchase of Care Plus. [PROBE: This means that the state directly pays the provider through an authorization. This does NOT include "self-arranged" care.]

\_\_\_\_\_ # of children

- INTERVIEWER: CALCULATE PERCENTAGE Q2/Q1D  
(interviewers CATI system will do this.)
- 2A. 0% NONE                      2B. Between 1% - 99%                      2C. 100% (ALL)
- If NONE:  
If 1B =  
"Yes", Go  
to Q3;  
If 1B =  
No", Go to  
Q7
- READ:  
When I ask you questions  
in this survey about your  
rates, please tell me what  
you charge the GENERAL  
PUBLIC for children  
that are not subsidized.  
**We only want information**  
about "private-paying"  
children that can include  
"self-arranged" care.  
(If 1B = "Yes", Go  
to Q3; If 1B = "No" Go to Q7
- READ:  
That's all I  
need to ask.  
Thank you.  
END

### FULL-TIME PRESCHOOL-AGE

3. The definition we will be using for full-time is 30 hours or more per week. For the (*private paying*) children enrolled in your program full-time, are any of these children pre-school age, that is 3 years through 5 years, including the kindergarten age?

1. NO \_\_\_\_\_                      2. YES \_\_\_\_\_  
IF "NO" Go to Q4                      IF "YES" Continue

- 3a. Using our definition of full-time as 30 hours or more per week, what rate do you charge for your basic full-time rate (*for private paying*) preschool-age children 3 through 5 years of age? In quoting your rate, please do not "add on" any fees above your regular rate, and please do not deduct for any discounts or subsidies. Subsidies include a "sibling discount" or a "sliding-fee scale".

\$ \_\_\_\_\_ . \_\_\_\_\_ (per) (b) \_\_\_\_\_ (unit)



07.) PER SCHOOL YEAR How many days per school year? (estimate)  
 [PROBE: how many days are the children in the program during the school year?]  
 \_\_\_\_\_ . \_\_\_\_\_

08.) PER YEAR How many days per year? (estimate)  
 [PROBE: how many days are the children in the program during the year?]  
 \_\_\_\_\_ . \_\_\_\_\_

09.) PER OTHER: \_\_\_\_\_  
 How many days in this unit? (av) \_\_\_\_\_  
 [PROBE: How many days do you provide these services for this fee?]

3C. How many (private-paying) preschool-age children, 3 through 5 years of age, are presently enrolled full-time program at this site? (Please estimate) [PROBE: Preschool-age children are from 3 years through 5 years, including kindergarten. "Full time" is 30 hours or more per week.]  
 \_\_\_\_\_

### FULL-TIME TODDLERS

4. For the (*private-paying*) children presently enrolled in your program full-time, 30 hours or more per week, are any of these children toddlers. Toddlers are one and two-year-olds.

1. NO \_\_\_\_\_  
 IF NO, GO to Q5

2. YES \_\_\_\_\_  
 IF YES, Continue

4a. Using our definition of full-time as 30 hours or more per week, what rate do you charge for your basic full-time rate for (*private paying*) toddlers? [PROBE: Please do not "add on" any additional fees above your regular rate and please do not deduct for any discounts or subsidies. Subsidies include a "sliding-fee scale" or a "sibling discount".]

\$ \_\_\_\_ . \_\_\_\_ (per) (b) \_\_\_\_\_ (unit)

[TO INTERVIEWER: If Respondent has *more than* one full-time program or full-time rate, ask for the rate for the full-time program that is *most commonly used* by the parents of the toddlers. If Respondent replies that there is no one full-time rate that is most commonly used, ask for the highest rate.]

[TO INTERVIEWER: for those who don't give a "unit" ask: "What unit is that?" and then ask the question next to the unit reported.]

4b.

01.) PER HOUR      How many hours per day? (average) \_\_\_\_.  
[PROBE: What is the average number of hours/day these toddlers are enrolled?]

02.) PER 1/2 DAY:    How many hours per 1/2 day? (av) \_\_\_\_.  
[PROBE: What is the average number of hours/day these toddlers are enrolled for the 1/2 day?]

How many hours per full day? (av) \_\_\_\_.  
[PROBE: What is the average number of hours/day toddlers are enrolled for a full day?]

03.) PER DAY

04.) PER WEEK      How many days per week? (average) \_\_\_\_.  
[PROBE: What is the average number of day/week these toddlers are enrolled?]

05.) PER MONTH    How many days per week? (average) \_\_\_\_.  
[PROBE: What is the average number of day/week these toddlers are enrolled?]

06.) PER SEMESTER How many weeks in a SEMESTER? (estimate) \_\_\_\_\_ . \_\_\_\_\_

How many days per week? (average) \_\_\_\_\_.  
 [PROBE: What is the average number of day / week these toddlers are enrolled?]

07.) PER SCHOOL YEAR How many days per school year? (estimate)  
 YEAR [PROBE: how many days are the children in the program during the school year?]  
 \_\_\_\_\_ . \_\_\_\_\_

08.) PER YEAR How many days per year? (estimate)  
 [PROBE: how many days are the children in the program during the year?]  
 \_\_\_\_\_ . \_\_\_\_\_

09.) PER OTHER: \_\_\_\_\_

How many days in this unit? (av) \_\_\_\_\_.  
 [PROBE: How many days do you provide these services for this fee?]

4C. How many (private-paying) toddlers are presently enrolled in full-time at this site? (Please estimate) \_\_\_\_\_  
 [PROBE: Toddlers are 1 and 2 year olds. "Full time" is 30 hours or more per week.]

### FULL-TIME INFANTS

5. For the (*private paying*) children presently enrolled in your program full-time, 30 hours or more per week, are any of these children infants, under 12 months of age?

1. NO \_\_\_\_\_  
 IF NO, GO to Q6

2. YES \_\_\_\_\_  
 IF YES, Continue



- 5a. Using our definition of full-time as 30 hours or more per week, what rate do you charge for your basic full-time rate for (*private paying*) infants? [PROBE: Please do not "add on" any additional fees above your regular rate and please do not deduct for any discounts or subsidies. Subsidies include a "sliding-fee scale" or a "sibling discount". ]

(a) \$ \_\_\_\_ . \_\_\_\_ (per) (b) \_\_\_\_\_ (unit)

[TO INTERVIEWER: for those who don't give a "unit" ask: "What unit is that?" and then ask the question next to the unit reported.]

5b.

01.) PER HOUR      How many hours per day? (average) \_\_\_\_\_.  
[PROBE: What is the average number of hours/day these infants are enrolled?]

02.) PER 1/2 DAY:    How many hours per 1/2 day? (av) \_\_\_\_\_.  
[PROBE: What is the average number of hours/day these infants are enrolled for the 1/2 day?]

How many hours per full day? (av) \_\_\_\_\_.  
[PROBE: What is the average number of hours/day infants are enrolled for a full day?]

03.) PER DAY

04.) PER WEEK      How many days per week? (average) \_\_\_\_\_.  
[PROBE: What is the average number of day/week these infants are enrolled?]

05.) PER MONTH     How many days per week? (average) \_\_\_\_\_.  
[PROBE: What is the average number of day/week these infants are enrolled?]

06.) PER SEMESTER    How many weeks in a SEMESTER?  
(estimate)

\_\_\_\_ . \_\_\_\_

How many days per week? (average) \_\_\_\_ . \_\_\_\_  
 [PROBE: What is the average number of  
 day / week these infants are enrolled?]

07.) PER SCHOOL YEAR How many days per school year? (estimate)  
 [PROBE: how many days are the children  
 in the program during the school year?]

\_\_\_\_ . \_\_\_\_

08.) PER YEAR How many days per year? (estimate)  
 [PROBE: how many days are the children  
 in the program during the year?]

\_\_\_\_ . \_\_\_\_

09.) PER OTHER: \_\_\_\_\_

How many days in this unit? (av) \_\_\_\_ . \_\_\_\_  
 [PROBE: How many days do you provide  
 these services for this fee?]

5C. How many (private paying) infants are presently  
 enrolled full-time at this site? (Please estimate)  
 [PROBE: Infants are under 12 months of age.  
 "Full time" is 30 hours or more per week.] \_\_\_\_\_

## SCHOOL-AGE CHILDREN

6. Now, at this site, do you provide services for any (*private-paying*) school-age children? For this survey, school-age children are from first grade through 12 years of age. [PROBE: This can be for "after-school care", or for "before-school care" or for "before AND after-school care" at this site. This does NOT include kindergarten care. "Private-paying" means that the parents pay for the services, it is not paid by the state.]

1. NO \_\_\_\_\_  
 IF NO, GO to Q8

2. YES \_\_\_\_\_  
 IF YES, Continue

[DIRECTION FOR INTERVIEWER: The "site" is identified by the name of the program, the site address or the telephone number. If Respondent reports that school-age children are served only at a different site, go to Q8.]

7. For the (private-paying) school-age children, do you provide care for *less than 4 hours per day*? This can be for "after-school care", for "before-school care" or for "before AND after-school care" at this site. [PROBE: "School-age children" are from first grade through 12 years of age.]

1. NO \_\_\_\_\_ IF NO, GO to Q8      2. YES \_\_\_\_\_ IF YES, Continue

- 7a. What rate do you charge for (*private-paying*) school-age children who attend your program less than 4 hours per day? In quoting your rate, please do not "add-on" any additional fees above your regular rate and please do not deduct for any discounts such as a "sibling discount". [PROBE: A discount may also be called a "sliding-fee" scale.]

\$ \_\_\_\_\_ . \_\_\_\_\_ (unit)

[DIRECTION FOR INTERVIEWER: If Respondent has more than one rate for less than 4 hours per day, ask for the MOST COMMONLY USED rate for these children. If the Respondent cannot give one rate, ask for the highest rate.]

[DIRECTION FOR INTERVIEWER: If Respondent reports a "full day" rate, say that we are only asking for a rate for *less than 4 hours per day*, and re-read Question 7a. If R. does not have a rate for less than 4 hours a day, go to Q8]

- 7b. [TO INTERVIEWER: for those who don't give a "unit" ask: "What unit is that?" and then ask question next to the unit reported.]

- 01.) PER HOUR      How many hours-per-day are these school-age children in your program? [PROBE: Please estimate an average number of hours per day.]
- \_\_\_\_\_ . \_\_\_\_\_ HOURS
- IF RESPONDENT CANNOT GIVE THIS, ASK:
- How many hours-per-week are these school-age children in your program? (average)
- \_\_\_\_\_ . \_\_\_\_\_ HOURS
- How many days-per-week are the school-age children in your program? (average)
- \_\_\_\_\_ . \_\_\_\_\_ DAYS
- 02.) PER 1/2 DAY      How many hours per 1/2 day? (av) \_\_\_\_ . \_\_\_\_  
[PROBE: What is the average number of hours per 1/2 day for these children.]
- 03.) PER DAY or AFTERNOON      How many hours-per-day are these school-age children in your program? (average)
- \_\_\_\_\_ . \_\_\_\_
- 04.) PER WEEK      How many days per week?  
[PROBE: What is the average number of days-per-week these children are enrolled?]
- \_\_\_\_\_ . \_\_\_\_
- How many hours-per-day are these school-age children in your program? (average)
- \_\_\_\_\_ . \_\_\_\_
- 05.) PER MONTH      How many days per week? \_\_\_\_ . \_\_\_\_ DAYS  
[PROBE: What is the average number of days-per-week these children are enrolled?]
- How many hours-per-day are these school-age children in your program? (average)

06.) PER  
SEMESTER

How many weeks in a SEMESTER?  
(estimate)

\_\_\_ . \_\_\_

\_\_\_ . \_\_\_

How many days per week?  
[PROBE: What is the average number of days-  
per-week these children are enrolled?]

\_\_\_ . \_\_\_

How many hours-per-day are these school-  
age children in your program? (average)

\_\_\_ . \_\_\_

07.) PER SCHOOL  
YEAR

How many days per school year? (estimate)

\_\_\_ . \_\_\_

How many hours-per-day are these school-  
age children in your program? (average)

\_\_\_ . \_\_\_

08.) PER OTHER

Please explain: \_\_\_\_\_

How many days in this unit?  
[PROBE: How many days do you provide  
services for this fee?]

\_\_\_ . \_\_\_

How many hours-per-day are these school-  
age children in your program? (average)

\_\_\_ . \_\_\_

7C. How many (private-paying) school-age children are presently  
enrolled, for less than 4 hours per day, in your program at  
this site? (Please estimate.)

[PROBE: This could be for 'after-school' care and for 'before  
school care' and for "before AND after school care" "School-  
age" children are from first grade through 12 years of age.]

\_\_\_\_\_

### ODD-HOUR CARE

8. Now I will be asking you about "odd-hour" care, that is evening care, overnight care, and weekend care. Within the past month, have you provided evening care, overnight care, or weekend care for any (private paying) child? [PROBE: Evening care could be care for any evening hours, for example from 8 P.M. - 11 P.M, for any evening Monday to Friday. Overnight care could be care for any overnight hours, for example 11 P.M. - 6 A.M., for any evening Monday to Friday. Weekend care is Saturday care, Sunday care, or Saturday through Sunday care]

If "YES" go to Q9 If "NO" go to Q16

9. Were you paid for providing this odd-hour care? \_\_\_\_\_  
 [PROBE: "Paid" means that you received a payment specifically for the odd-hour care, that you do not provide this odd-hour care for free, or as part of your rate for your regular child care. Odd-hour care does not include "late pick-up" fees. ]

If "YES" go to Q10 If "NO" go to Q16

### EVENING CARE

10. Did you provide evening care for any (private paying) child within the past month and receive a payment for that care?  
 [PROBE: "evening care" is care during evening hours, for example from 8 P. M. to 11 P.M, for any evening Monday through Friday.]

1. YES \_\_\_\_\_  
 IF "YES" GO TO Q11

2. NO \_\_\_\_\_  
 IF "NO" GO TO Q12

11. What rate did you charge for this evening care? In quoting your rate, please do not "add on" any additional fees above your regular evening-care rate, and please do not deduct for any discounts or subsidies.

\$(a)\_\_\_\_. \_\_\_\_per (b)\_\_\_\_

[DIRECTION FOR INTERVIEWER: This should be a rate for only one child.]

11b.

01.) hour

02.) 1/2 day

How many hours of care did you provide for this fee? [PROBE: How many hours per 1/2 day for this evening care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

03.) day

How many hours of care did you provide for this fee? [PROBE: How many hours-per-day for this evening care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

04.) evening

How many hours of care did you provide for this fee? [PROBE: How many hours-per-evening for this care? (average)]

\_\_\_\_\_ · \_\_\_\_\_

05.) week

How many hours of care did you provide for this fee? [PROBE: How many hours-per-week for this evening care?]

\_\_\_\_\_ · \_\_\_\_\_

06.) other

Explain \_\_\_\_\_

How many hours of care did you provide for this fee? [PROBE: How many hours in this unit? (av)]

\_\_\_\_\_ . \_\_\_\_\_

## OVERNIGHT CARE

12. Did you provide overnight care for any (private paying) child within the past month and receive a payment for that care? [PROBE: "overnight care" is care for any overnight hours, for example 11 P.M. - 6 A.M., for any night Monday to Friday.]

1. YES \_\_\_\_\_  
IF "YES" GO TO Q13

2. NO \_\_\_\_\_  
IF "NO" GO TO Q14

13. What rate did you charge for this overnight care? In quoting your rate, please do not "add on" any additional fees above your regular "overnight" rate, and please do not deduct for any discounts or subsidies.

\$(a)\_\_\_\_. \_\_\_\_per (b)\_\_\_\_

[DIRECTION FOR INTERVIEWER: This should be a rate for only one child.]

13b.

01.) hour

02.) 1/2 day

How many hours of care did you provide for this fee? [PROBE: How many hours per 1/2 day for this overnight care? (average)]

\_\_\_\_\_ . \_\_\_\_\_





**WEEKEND CARE**

14. Did you provide weekend care for any (private paying) child within the past month and receive a payment for that care?  
[PROBE: Weekend care includes Saturday care, Sunday care, or Saturday through Sunday care.)

1. YES \_\_\_\_\_  
GO TO Q15

2. NO \_\_\_\_\_  
GO TO Q16

15. What rate did you charge for this weekend care? In quoting your rate, please do not "add on" any additional fees above your regular weekend rate, and please do not deduct for any discounts or subsidies.

\$(a)\_\_\_\_. \_\_\_\_per (b)\_\_\_\_

[DIRECTION FOR INTERVIEWER: This should be a rate for only one child.]

15b.

01.) hour

02.) 1/2 day

How many hours of care did you provide for this fee? [PROBE: How many hours per 1/2 day for this weekend care? (average)]

\_\_\_\_\_ . \_\_\_\_\_

03.) day

How many hours of care did you provide for this fee? [PROBE: How many hours-per-day for this overnight care? (average)]

\_\_\_\_\_ . \_\_\_\_\_

04.) day and evening

How many hours of care did you provide for this fee? [PROBE: How many hours for this care? (average)]

05.) week-end

\_\_\_\_\_ · \_\_\_\_\_  
 How many hours of care did you provide for this fee? [PROBE: How many hours-per-weekend for this care?]

\_\_\_\_\_ · \_\_\_\_\_

If R. cannot give this:

How many days for this weekend care?

\_\_\_\_\_ · \_\_\_\_\_

How many hours per day?

\_\_\_\_\_ · \_\_\_\_\_

06.) other

Explain \_\_\_\_\_

How many hours of care did you provide for this fee? [PROBE: How many hours in this unit?]

\_\_\_\_\_ · \_\_\_\_\_

## CHILDREN WITH SPECIAL NEEDS

16. Now I just have a questions or two remaining. Are you presently serving ANY child with special needs in your program, private paying or state subsidized?

For this survey, "special needs" means a child from infancy through 18 years of age who is diagnosed with physical, or emotional, or developmental needs....that requires special care. [PROBE: "ANY" child with special needs can be a private-paying or state-subsidized child, and can be full time or part time.]

1. NO \_\_\_\_\_

2. Yes \_\_\_\_\_

If "NO" go to END      If "YES" go to Q17

[DIRECTION TO INTERVIEWER: If Respondent questions if a type of illness or situation is "special needs" ...tell the Respondent she should decide if the child has 'special needs'. If necessary, re-read the definition for special needs.]

17. Are there any additional costs to you for serving this child or children with special needs? {PROBE: Does it cost you any more to have the child or children with special needs in your program than to have the other children in your program?}

1. NO \_\_\_\_\_      2. Yes \_\_\_\_\_  
If "NO" go to END      If "YES" go to Q18

18. Please estimate how much of an additional cost it is to you to have the child or children with special needs in your program? Would you estimate that the higher cost to you is 5% more, 10% more, 15% more, 20% more, or another amount:

1.) 5%      2.) 10%      3.) 15%      4.) 20%  
5.) another amount (explain) \_\_\_\_\_

**Thank you for participating in this survey.**