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Date:	June 4, 2021
Subject:	NonSubstantive Change Request: 2019 National Survey of Early Care and Education COVID-19 Follow-up (OMB #0970-0391)

This memo requests approval of nonsubstantive changes to the approved information collection, 2019 National Survey of Early Care and Education COVID-19 Follow-up (OMB #0970-0391).

Background

OPRE received approval in October 2020 to field a two wave longitudinal COVID Follow-up with early care and education (ECE) provider and workforce samples from the 2019 National Survey of Early Care and Education (NSECE). Wave 1 data collection is nearly completed, as scheduled. Wave 2 data collection began in early April, 2021. In general, Wave 1 data and data collection experience confirmed that the design of the COVID Follow-up could be implemented as expected and collect data to inform the research questions as intended.

Since approval in March 2021 of some minor changes to the NSECE COVID Follow-up Wave 2 protocol, the Administration for Children and Families has become aware that substantial federal funds allocated for pandemic relief for ECE providers have not yet been disbursed by states. A central purpose of the NSECE COVID-19 Follow-up is to collect data on providers' receipt of pandemic assistance. To improve the ability of the data collection to collect data on providers' receipt of receipt of pandemic assistance, we propose to delay parts of Wave 2 data collection to fall 2021.

Overview of Requested Changes

We are proposing (1) changes to Wave 2 sampling of center-based providers, who will be split into a spring data collection and a fall data collection, and (2) minor changes to the Wave 2 center-based and home-based provider questionnaires to collect information about enrollments both in spring 2021 and fall 2021. No changes are proposed to the sampling approach for the Home-based Provider and Workforce surveys, but we will now field these surveys in the fall of 2021 (rather than spring 2021). The delayed timeframe makes it more likely that providers and workforce members will have had opportunity to apply for and/or receive federal pandemic assistance during summer 2021.

Modifications to sampling approach and timing for the Center-Based Provider Survey

Center-based Providers' Wave 2 data collection will be split across spring and fall 2021.

- All centers were initially invited in spring 2021 to complete the Wave 2 spring questionnaire, but a randomly-selected 60 percent are being deferred to fall 2021 data collection. Some of these 60 percent will have completed their spring interview before they were selected to be deferred. A randomly-selected 40 percent sub-sample is being asked to provide spring 2021 data; they will be worked to a 75 percent response rate.
- All centers will again be invited in fall 2021 to complete a Wave 2 fall questionnaire.
- In the fall 2021 data collection, centers having completed the spring 2021 interview will be asked to complete just a supplement on financial assistance received during summer 2021. A randomly-selected 30 percent sub-sample of centers completing the spring 2021 interview will also be asked to complete the full Wave 2 fall questionnaire; this is necessary to ensure representativeness of the fall 2021 estimates.

Modifications to questionnaires

All proposed changes to the questionnaires are consistent with the described purpose of the information collection and planned uses of data collected. The center-based and home-based provider questionnaires include questions about in-person versus remote ECE services and enrollment in March 2021 as well as current to the fall 2021 data collection timing. The center-based workforce questionnaire asks about employment in an ECE program in March 2021 as well as current to the fall 2021 data collection timing.

Time Sensitivities

Wave 2 is scheduled to resume data collection September 27, 2021, so that as much as possible we can collect data during fall 2021, to be completed no later than March 2022. Receiving clearance by August 31st would make it possible for us to maintain our schedule.