

2024 NSECE Follow-up

Appendix T 2024 NSECE Follow-up
Quality Assurance
Questionnaire

Quality Control

Questionnaire used to validate that the survey was completed with the correct individual/sample unit.

Validation Questionnaire: This questionnaire is used as a quality control tool to ensure that field interviewers are completing questionnaires with the correct individuals/sample unit and are doing so appropriately.

Interviewer :		SUID:	
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**2024 NSECE Follow-up
Validation Questionnaire**

Validation interviewer's name:	Date:
Time started:	Time ended:

INTRODUCTION

- Q1.** Hello, my name is [\[YOUR NAME\]](#) and I am calling on behalf of the National Survey of Early Care and Education Follow-up Study. May I please speak with [\[NAME OF RESPONDENT\]](#)?
- IF RESPONDENT IS CALLED TO THE PHONE, INTRODUCE YOURSELF AGAIN AND **GO TO "Q1A."**
 - IF RESPONDENT IS NOT AVAILABLE, FIND A GOOD TIME TO CALL BACK, RECORD TIME IN THE RECORD OF CALLS, AND **GO TO "END STATEMENT 2."**
 - WHENEVER YOU REACH THE RESPONDENT, CONTINUE.
 - IF RESPONDENT/THE PERSON WHO ANSWERS THE PHONE INDICATES NO SUCH PERSON IS AT THAT ADDRESS, **GO TO "END STATEMENT 1."**

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this information collection is 0970-0391 and the expiration date is 06/30/2026. Please send comments regarding the time required for this survey, your privacy-related rights, or any other aspect of this information collection to: NORC at the University of Chicago, 55 E Monroe St, Ste 3000, Chicago, IL, 60603, Attention: A. Rupa Datta.

- Q1A.** Recently, one of our data collectors reported speaking with you. On all of our studies, we routinely recontact some people who were interviewed to make sure our interviewers are following procedures correctly. Is this a good time to talk? Mark, yes **OR NO.**

	YES	➔ GO TO "CONSENT."
	NO	➔ GO TO "END STATEMENT 2."

CONSENT: All information will be kept private and used for study purposes only. You may refuse to answer any questions, or you may stop the interview at any time. ➔ **GO TO "Q2."**

ENUMERATION VALIDATION QUESTIONS

- Q2.** According to our records, [\[DATA COLLECTOR NAME\]](#) met with/talked with you on [\[DAY AND](#)

DATE OF INTERVIEW]. Do you remember the visit/call? **MARK YES OR NO.**

	YES → GO TO “Q2B FOR HH QUESTIONNAIRE.” “Q2G FOR WF QUESTIONNAIRE.”
	NO → GO TO “PROBE.”

PROBE: PROBE TO DETERMINE IF R REMEMBERS ANY INTERACTION WITH THE INTERVIEWER, E.G., ASK: “Do you remember someone coming to your door with a tablet?” OR “Do you remember someone calling you from NORC or the National Survey of Early Care and Education?” OR “Do you remember filling out a survey online?”

IF AT ANY POINT THE R REMEMBERS THE INTERVIEW, CHANGE Q2 TO “YES”. IF THEY DO NOT REMEMBER GO TO “INTERVIEWER CHECK 1.”

HH QUESTIONNAIRE

Q2B. During this visit/call, do you recall being asked questions about your daily schedule of activities?
MARK YES OR NO.

YES NO

Q2C. What (other) kinds of questions do you remember being asked by the interviewer?

Enter comments below:

INTERVIEWER COMMENTS SECTION. WHERE APPLICABLE, PROVIDE COMMENTS ON PROBES USED TO DETERMINE IF AN INTERVIEW WAS CONDUCTED

Enter comments below:

ALL REPONSES GO TO “Q3.”

WF QUESTIONNAIRE

Q2G. During this visit/call/survey, do you recall being asked questions about your first job providing care to children under age 13?

Enter comments below:

Q2H. What (other) kinds of questions do you remember being asked [by the interviewer]?

Enter comments below:

INTERVIEWER COMMENTS SECTION. WHERE APPLICABLE, PROVIDE COMMENTS ON PROBES USED TO DETERMINE IF AN INTERVIEW WAS CONDUCTED

Enter comments below:

ALL REPONSES GO TO "Q3."

Q3. We need to be sure the interviewer contacted the correct [household/location]. As of [DATE OF INTERVIEW], was your address [DU ADDRESS]? **MARK YES OR NO.**

<input type="checkbox"/>	YES	→ GO TO "INTERVIEWER CHECK 1."
<input type="checkbox"/>	NO	→ GO TO "Q3A."

Q3A. What is your address?

STREET ADDRESS:

CITY:

STATE: ZIP:

INTERVIEWER CHECK 1

DOES R APPEAR TO HAVE BEEN INTERVIEWED? **MARK YES OR NO.**

YES NO

(IF Q2 = "YES") GO TO "Q4."

(IF Q2 = "NO") GO TO "END STATEMENT 3."

Q4. Was the interviewer that visited/called you polite and courteous? **MARK YES OR NO.**

YES NO

Q4A. About how long would you say the interview took?

VALIDATION CHECK (Mark X one)

PASS

FAIL

:

Q4B. Did the interviewer ask your permission to record the interview?

MARK YES OR NO.

YES

NO

Q4C. Did you agree?

MARK YES OR NO.

YES

NO

Q4D. Is there anything you would like to say about the interview or the person who interviewed you?

Enter comments below:

GO TO END STATEMENT 4

END STATEMENT 1: I apologize for bothering you today. I have the wrong number. Goodbye. **END CALL**

END STATEMENT 2: Thank you for your time today. I will call you back again (IF GOOD CALLBACK TIME OBTAINED) at the time you suggested. Goodbye. **END CALL**

END STATEMENT 3: Thank you so much for your time and cooperation. I may have additional questions, is this a good number to reach you? (RECORD NEW NUMBER IF OBTAINED) Goodbye. **END CALL**

END STATEMENT 4: Thank you so much for your time, cooperation, and important contribution to this study. Goodbye. **END CALL.**