

OMB No.: 0584-XXXX  
Expiration Date: XX/XX/XXXX

APPENDIX C

CACFP FAMILY DAY CARE  
HOME STUDY  
PROVIDER INTERVIEW

SPONSOR ID NUMBER: |\_|\_|\_|\_| FDCH NUMBER: |\_|\_|\_|

DATE: |\_|\_|\_| / |\_|\_|\_| / |2|0|0|\_|\_|  
MONTH DAY YEAR

INTERVIEWER ID NUMBER: |\_|\_|\_|\_|\_|\_|\_|

TIME INTERVIEW BEGAN: |\_|\_|\_|:|\_|\_|\_| AM.....1  
HOUR MINUTE PM.....2

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments concerning the accuracy of time estimates or suggestions for improving this form, please contact: U. S. Department of Agriculture, Food and Nutrition Service, ORNA, Alexandria, VA 22302.



## SECTION A: INTRODUCTION

- A1. **INTRODUCTION WHEN CONDUCTING AN IN-PERSON INTERVIEW:** I have a few questions I need to ask for the U.S. Department of Agriculture's study of family day care homes. It should take about 15 minutes. Is this a good time?

APPOINTMENT MADE FOR  
FUTURE INTERVIEW BY  
TELEPHONE.....(RECORD ON CONTACT SHEET).....1

WANTS TO KNOW MORE  
ABOUT THE STUDY.....(GO TO A2).....2

DO INTERVIEW NOW.....(GO TO B1).....3

NOT INTERESTED—RECORD ON CONTACT SHEET.....0

- A1. **INTRODUCTION: WHEN CALLING FOR TELEPHONE INTERVIEW:** Hello, my name is (INTERVIEWER'S FULL NAME) and I am calling on behalf of the U.S. Department of Agriculture's study of family day care homes. We recently visited (your family day care home/(NAME OF FAMILY DAY CARE HOME) and I needed to ask (you/PROVIDER NAME) a few questions but (you/he/she) did not have time during my visit. [Is this a good time?/May I speak with (him/her)?]

IF APPOINTMENT MADE—RECORD ON CONTACT  
SHEET AND POLITELY THANK RESPONDENT AND  
TERMINATE CALL.....(RECORD ON CONTACT SHEET).....1

WANTS TO KNOW MORE ABOUT  
THE STUDY.....(GO TO A2).....2

DO INTERVIEW NOW  
(TELEPHONE ONLY).....(GO TO B1).....3

NOT INTERESTED—RECORD  
ON CONTACT SHEET AND  
TERMINATE CALL.....(RECORD ON CONTACT SHEET).....0

## **A2. ANSWERS TO COMMONLY ASKED QUESTIONS**

### **WHAT IS THE PURPOSE OF THE STUDY?**

The U.S. Department of Agriculture is interested in learning about how family day care homes submit counts for meals and snacks served to children in care.

### **HOW DID YOU SELECT MY FAMILY DAY CARE HOME? WHY SHOULD I PARTICIPATE?**

Your family day care home was one of several selected in this state for the study. The questions we're asking for U.S. Department of Agriculture should be considered as part of your participation in the Child and Adult Care Food Program. The information you provide will help provide an accurate picture of how family day care homes submit claims for meals and snacks.

### **AM I REQUIRED TO PARTICIPATE?**

Although your participation is entirely voluntary, it should be considered as part of your participation in the Child and Adult Care Food Program. Your responses will not affect your home's eligibility to participate in the CACFP or receive reimbursement for meals or snacks at the family day care home. You may refuse to answer any question. However, your experiences and opinions are very important for the study and for the program's success.

### **I DO NOT HAVE THE TIME FOR THE INTERVIEW**

I understand how valuable your time is. The questions will only take about ten minutes. We can try to do it now or if this time is not convenient, I can arrange to call back at a better time for you.

### **IS THE INFORMATION CONFIDENTIAL?**

Yes. All of the information we collect in the study is completely confidential to the full extent allowed by law and will be used for research purposes only. Your answers will be combined with the answers of other family day care home providers and will never be linked to your name or your family day care home in any reports.

### **HOW LONG WILL THE INTERVIEW TAKE?**

The length is different for different people, but it usually takes about ten minutes.

### **WHAT ARE THE QUESTIONS ABOUT?**

There may be questions about your sponsor's paperwork requirements and monthly forms you need to submit for reimbursement, along with questions about daily attendance and meals served.

## SECTION B: DOCUMENTATION REQUIREMENTS

B1. Does (NAME OF SPONSOR) require you to have a sign-in and sign-out sheet for parents to complete when they drop off and pick up their children?

**PROBE:** By sign-in and sign-out sheet, I mean a form where parents sign their names and record the times they drop off and pick up their children.

YES..... 1  
NO.....(GO TO B1b).....0  
DON'T KNOW.....(GO TO B3).....d  
REFUSED.....(GO TO B3).....r

B1a. Do you regularly use a sign-in and sign-out sheet that parents sign when they drop off and pick up their children?

YES.....(GO TO B1.1).....1  
NO.....(GO TO B3).....0  
DON'T KNOW.....(GO TO B3).....d  
REFUSED.....(GO TO B3).....r

B1b. Although your sponsor does not require you to have a sign-in and sign-out sheet for parents, do you use one in your family day care home?

YES..... 1  
NO.....(GO TO B3).....0  
DON'T KNOW.....(GO TO B3).....d  
REFUSED.....(GO TO B3).....r

B1.1. Do you, the provider, usually sign the children in and out, do the parents usually sign them in and out, or do both you and the parents sign them in and out?

PROVIDER..... 1  
PARENTS.....(GO TO B1.3).....2  
BOTH..... 3  
DON'T KNOW.....(GO TO B2).....d  
REFUSED.....(GO TO B2).....r



B1.2. Do you fill out the sign-in/sign-out form after a child arrives or leaves, at certain times of the day, at certain times of the week, or at the end of the month?

- AFTER CHILD ARRIVES OR LEAVES.....1
- CERTAIN TIMES OF THE DAY.....2
- END OF THE MONTH.....3
- DON'T KNOW.....d
- REFUSED.....r

B1.3 How difficult is to have the parents of the children in your family day care home sign their names and the time when they drop off and pick up their children? Would you say it is very difficult, somewhat difficult, not too difficult, or not difficult at all?

- VERY DIFFICULT.....1
- SOMEWHAT DIFFICULT.....2
- NOT TOO DIFFICULT.....(GO TO B1.5).....3
- NOT DIFFICULT AT ALL....(GO TO B1.5).....4
- DON'T KNOW.....(GO TO B1.5).....d
- REFUSED.....(GO TO B1.5).....r

B1.4 Why is it difficult to use this kind of form with parents of the children you watch?

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B1.5. Do you think it is useful or helpful to have a sign-in and sign-out sheet for parents to use when they drop off and pick up their children?

- YES.....1
- NO.....(GO TO B1.7).....0
- DON'T KNOW.....(GO TO B2).....d
- REFUSED.....(GO TO B2).....r

B1.6 Why is this type of form useful?

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**(GO TO B2)**

B1.7 Why isn't this type of form useful?

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B2. Did the sponsor train you on the use of the sign-in and sign-out sheet?

- YES.....(GO TO B5).....1
- NO.....(GO TO B5).....0
- DON'T KNOW.....(GO TO B5).....d
- REFUSED.....(GO TO B5).....r

B3. Do you think it would be useful or helpful to have a sign-in and sign-out sheet for parents to use when they drop off and pick up their children?

- YES..... 1
- NO.....(GO TO B4.2).....0
- DON'T KNOW.....(GO TO B4.3).....d
- REFUSED.....(GO TO B4.3).....r

B4.1 Why would this type of form be useful?

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**(GO TO B4.3)**

B4.2 Why wouldn't this type of form be useful?

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B4.3 Currently, if a parent claimed that their child was missing, how would you be able to show that a parent did or did not drop the child off or whether the parent came and picked up the child?

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B4.4 How difficult would it be to have the parents of the children in your family day care home sign their names and the time when they drop off and pick up their children? Would you say it would be very difficult, somewhat difficult, not too difficult, or not difficult at all?

- VERY DIFFICULT..... 1
- SOMEWHAT DIFFICULT..... 2
- NOT TOO DIFFICULT.....(GO TO B5)..... 3
- NOT DIFFICULT AT ALL....(GO TO B5)..... 4
- DON'T KNOW.....(GO TO B5)..... d
- REFUSED.....(GO TO B5)..... r

B4.5 Why would it be difficult to use this kind of form with parents of the children you watch?

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B5. What other forms or paperwork does your sponsor require you to complete each month to document and claim reimbursement for meals and snacks?

CIRCLE ALL

THAT

APPLY

- DAILY ATTENDANCE FORM.....1
- MONTHLY MENU.....2
- YEARLY ENROLLMENT FORMS.....3
- OTHER (SPECIFY).....4

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- NONE/NO OTHER FORMS.....5
- DON'T KNOW.....d
- REFUSED.....r

B6. Other than the sign-in/sign-out sheets, how much time do you spend each month completing the forms or paperwork required by your sponsor?

|\_|\_|\_|\_|.|\_|\_|\_| HRS. PER DAY

|\_|\_|\_|\_|.|\_|\_|\_| HRS. PER MONTH

- DON'T KNOW.....d
- REFUSED.....r

B7. Are any forms or paperwork difficult to complete?

- YES.....1
- NO.....(GO TO B9).....0
- DON'T KNOW.....d
- REFUSED.....r

B7a. Which form or paperwork is most difficult to complete?

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- DON'T KNOW.....d
- REFUSED.....r

B8. Why is that form or paperwork difficult to complete?

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DON'T KNOW.....d  
REFUSED.....r

B9. What is the main method you use to keep track of the daily meals and snacks you provide to children in day care?

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DON'T KNOW.....d  
REFUSED.....r

B10. Is this the method that is required by the sponsor?

YES.....1  
NO, ANOTHER METHOD THEN  
FILL IN REQUIRED FORMS.....0  
DON'T KNOW.....d  
REFUSED.....r

B11. Do you usually fill out the meal counts forms on a daily basis, at the end of each week, or at the end of the month?

DAILY.....1  
END OF EACH WEEK.....2  
END OF THE MONTH.....3  
DON'T KNOW.....d  
REFUSED.....r

B12. Are the meals and snacks the parents indicated on the enrollment forms usually the same as, sometimes the same as, or never the same as the meals and snacks the children receive in day care?

- USUALLY.....1
- SOMETIMES.....2
- NEVER.....3
- DON'T KNOW.....d
- REFUSED.....r

B13. How much does your daily attendance vary from day to day? Would you say a great deal, a moderate amount, a small amount, or not at all?

- A GREAT DEAL.....1
- MODERATE AMOUNT.....2
- SMALL AMOUNT.....3
- NOT AT ALL/NONE.....(GO TO B15).....4
- DON'T KNOW.....(GO TO B15).....d
- REFUSED.....(GO TO B15).....r

B14. Are variations in attendance most closely related to weather conditions, children's health cold or flu season, whether school is in session, or something else?

- WEATHER CONDITIONS.....1
  - CHILDREN'S HEALTH.....2
  - COLD OR FLU SEASON.....3
  - WHETHER SCHOOL IS IN SESSION.....4
  - OTHER (SPECIFY).....5
- 
- DON'T KNOW.....d
  - REFUSED.....r



**INSTRUCTIONS FOR SUBMITTING COPIES OF ADMINISTRATIVE RECORDS**

INTERVIEWER: CHECK THE FORMS THE FDCH PROVIDER NEEDS TO SUBMIT TO MPR.

IF THE FDCH PROVIDER IS ABLE TO USE FED EX, PROVIDE THE MAILING MATERIALS AND INSTRUCTIONS.

REMIND THE PROVIDER TO SEND LEGIBLE COPIES AND KEEP THE ORIGINAL IN THE FILES OF THE FDCH.