

## **TELEPHONE SCRIPT FOR RECRUITMENT AND RESPONDENT IDENTIFICATION: DISTRICT**

[PRIOR TO CALLING, CHECK DATE LETTER WAS SENT, SUPERINTENDENT'S NAME, STATE INFO, AND GENERAL DISTRICT INFO, INCLUDING IF SCHOOLS ARE SAMPLED. NOTE IF THE DISTRICT IS A CATHOLIC DIOCESE.]

*The recruiter may not speak to the District Superintendent. Generally, you will speak with an administrative assistant or an Assistant Superintendent at the school district.*

### **BEGIN SCRIPT**

Hello. My name is \_\_\_\_\_ and I'm calling on behalf of CDC, the U.S. Centers for Disease Control and Prevention, as part of a study looking at school health policies and practices. [SUPERINTENDENT'S NAME] was recently sent a letter via FEDEX from the CDC, describing the School Health Policies and Practices Study 2012 (SHPPS 2012). We've already spoken to [STATE CONTACT] at the [NAME OF STATE] Department of Education, and [STATE APPROVER] gave permission for us to contact your school districts. I am calling today to see if your office has received this FEDEX.

Did you receive that letter? This letter was sent on [DATE], via FEDEX, to [SUPERINTENDENT'S NAME] and our records indicate it arrived on [DATE]. The letter was from the CDC, dated [DATE], signed by Dr. Howell Wechsler, and there were several other materials enclosed as well, including information about how the 2012 study will be conducted. Could you tell me who will be handling the review of this request?

### **EXPLANATION OF STUDY (once a contact has been identified):**

Let me just take a few minutes to briefly tell you about this study. [IF CONTACT DOES NOT HAVE MATERIALS THAT WE SENT]: I'd be happy to fax you a copy of the study information at the end of our conversation.

The purpose of the study is to describe the programs and practices related to school health at state, district, and school levels nationwide. Participation in the study is completely voluntary. Beginning in October 2011, we will be collecting data from state and district personnel via web-based questionnaires. We will also be conducting in-person interviews with school personnel.

I am calling today to confirm your district's participation in the study, to identify the appropriate district personnel to respond to the seven surveys, [AND TO REQUEST YOUR SUPPORT FOR THE STUDY FOR WHEN WE CONTACT SELECTED SCHOOLS IN YOUR DISTRICT].

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. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, Mailstop D-74, Atlanta, GA 30333; Attention PRA (0920-0445).

**Approval for District Participation:**

As part of the study, we will begin contacting some of your staff in October 2011 to complete web-based questionnaires. I will need your help to identify the appropriate individuals to complete these questionnaires. In the packet that was sent by the CDC were content outlines for each of the content areas.

If you have a moment, I'd like to ask your help in identifying individuals who can respond to these topics. There are 7 topics in all that we need to identify respondents for; however, some topic areas may require the expertise of more than one person.

Is now a good time?

Great!

The first content area I have on my list that we need to identify a respondent for is:

- HEALTH EDUCATION
- PHYSICAL EDUCATION AND ACTIVITY
- HEALTH SERVICES
- NUTRITION SERVICES
- HEALTHY AND SAFE SCHOOL ENVIRONMENT
- MENTAL HEALTH AND SOCIAL SERVICES
- FACULTY AND STAFF HEALTH PROMOTION

Is there someone in your district who oversees or coordinates...

- SCHOOL HEALTH EDUCATION?
- SCHOOL PHYSICAL EDUCATION AND ACTIVITY?
- SCHOOL HEALTH SERVICES?
- SCHOOL NUTRITION SERVICES?
- SCHOOL ENVIRONMENT, FOR EXAMPLE VIOLENCE PREVENTION, TOBACCO USE PREVENTION, FOODS AND BEVERAGES AVAILABLE OUTSIDE THE SCHOOL MEALS PROGRAM, PHYSICAL SCHOOL ENVIRONMENT?
- SCHOOL MENTAL HEALTH AND SOCIAL SERVICES?
- FACULTY AND STAFF HEALTH PROMOTION?

**If yes** → Can I get the name and telephone number for this person?

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
Mailing Address: \_\_\_\_\_

\_\_\_\_\_

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**If no →** Is there an individual in your district who can knowledgeably answer questions on this topic, even though they do not officially oversee or coordinate...

- SCHOOL HEALTH EDUCATION?
- SCHOOL PHYSICAL EDUCATION AND ACTIVITY?
- SCHOOL HEALTH SERVICES?
- SCHOOL NUTRITION SERVICES?
- SCHOOL ENVIRONMENT, FOR EXAMPLE VIOLENCE PREVENTION, TOBACCO USE PREVENTION, FOODS AND BEVERAGES AVAILABLE OUTSIDE THE SCHOOL MEALS PROGRAM, PHYSICAL SCHOOL ENVIRONMENT?
- SCHOOL MENTAL HEALTH AND SOCIAL SERVICES?
- FACULTY AND STAFF HEALTH PROMOTION?

Can I have that person's name and telephone number?

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If no "knowledgeable respondent" can be immediately identified →**

For the time being, would it be alright if I listed you as the respondent for this content area? I can follow up with you at a later date to see if someone else can be identified.

[REPEAT FOR EACH TOPIC AREA]

**Approval for District Permission to Contact Schools** (SKIP, IF NO SAMPLED SCHOOLS):

- I would like to confirm some information about the schools in your district who will be invited to participate in the study [CONFIRM PRINCIPAL NAME, ADDRESS, PHONE NUMBER, GRADE RANGE, AND POPULATION SERVED FOR EACH SAMPLED SCHOOL].
- Are there any special clearance procedures with which our research request must comply? **IF YES:** Please send me any necessary forms so that we can return them as quickly as possible. Do you see any problem in obtaining the district's endorsement of the survey? (**IF SO:**) We expect that some districts will not choose to endorse the survey. In such cases, CDC is asking that the district allow each school to make up its own mind about whether to participate.

- Your support of the survey is important to obtaining the cooperation of the schools. We'd like to request that your office call each selected principal confirming that we have contacted you concerning their selection, have complied with any clearance requirements, and will be contacting them soon. Can you do this? Or if you prefer, with your approval we will contact the school(s) and inform them that "we spoke to District Superintendent on [DATE]. He/she has given his/her approval for our contacting you today." Or would you prefer to call or write each school principal yourself before we contact them? **(IF SO:)** Could you give me an idea when you expect to make the contacts? I'd like to confirm with you that you've made contact before we proceed. (IF CONTACT WILL BE BY LETTER:) Could you send me a copy of the letter?
- Enclosed with the packet that was sent to you by the CDC were individual packets for each of the schools in your district that will be invited to take part in the study. It would be greatly appreciated if you could initial and date the packets and send them to the addressees.
- Lastly, I'd like to ask about your district's configuration. Does your district include schools at the elementary, middle, and high school levels? **(IF NO)** What schools levels does your district include?  
RECORD THIS INFORMATION IN THE ONLINE CASE MANAGEMENT SYSTEM. THIS INFORMATION WILL FEED INTO THE WEB-BASED QUESTIONNAIRES SO THAT DISTRICTS ARE ONLY ASKED ABOUT THE SCHOOL LEVELS CONTAINED IN THEIR DISTRICT.

Thank you again for your time. We will begin contacting district personnel in early October to begin completing the web-based questionnaires. Before we contact the respondents, you will be receiving a packet of information to distribute to each of these individuals that provides background information about the study. Please feel free to call Alice Roberts, at 1-800-287-1815, if you have any questions before then.