Form Approved
OMB No: 0920-0445
Expiration Date: xx/xx/xxxx

TELEPHONE SCRIPT FOR RECRUITMENT AND RESPONDENT IDENTIFICATION: SCHOOL

[PRIOR TO CALLING, CHECK DATE LETTER WAS SENT, PRINCIPAL'S/DELEGATED CONTACT'S NAME, STATE/DISTRICT/DIOCESE INFO, COMMUNICATIONS HISTORY BETWEEN ICF MACRO AND DISTRICT/DIOCESE, COMMUNICATIONS BETWEEN DISTRICT/DIOCESE AND SCHOOL, AND GENERAL SCHOOL INFO. NOTE IF SCHOOL IS PUBLIC, PRIVATE OR CATHOLIC]

The recruiter may or may not speak to the school principal. You may speak to an assistant principal or some other member of the school's administrative staff.

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. [PRINCIPAL'S NAME] was recently sent a letter via FEDEX from the CDC, describing the School Health Policies and Practices Study 2012 (SHPPS 2012). I am calling today to see if your office has received this letter. [DISTRICT APPROVER], [APPROVER POSITION], has given us permission to contact your school. [PROVIDE ANY ADDITIONAL INFORMATION THE DISTRICT CONVEYED ABOUT COMMUNICATIONS WITH THE SCHOOL]

Did you receive that letter? This letter was sent on [DATE], via FEDEX, to [PRINCIPAL'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 this request?

Before I begin, I need to verify the current grade levels at your school. We have your school listed as going from [GRADE1] to [GRADE2]. Is that correct? [IF NO, VERIFY ELIGIBILITY BEFORE CONTINUING.]

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 practice related to school health at state, district, and school levels nationwide. Your school has been randomly selected for this study. Participation in the study is completely voluntary. However, it is very important that we achieve a high participation rate for the study results to be valid, and we cannot replace one school in the study with another. School personnel will be interviewed in-person, by trained interviewers, during a week that you select, any week from February through May of 2012. The interviews will take anywhere from 20 to 60 minutes to complete. We understand that school staff are very busy, and so the interviews will be scheduled at a time that is convenient for each person identified.

Public reporting burden for this collection of information is estimated to average 60 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. 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).

For the first time in 2012, SHPPS will include an observational component to supplement the information obtained through interviews. Observations consist of noting the foods and beverages students have access to during the school day through vending machines.

APPROVAL FOR SCHOOL PARTICIPATION

- My basic reason for calling now is to make sure that you received the letter, to answer any questions that you may have, and to discuss your school's involvement in the study. Do you foresee any problems with participating or do you have any questions?
- *If approved:* Thank you very much for allowing us to conduct these interviews and observations at your school. We will need for someone at the school to serve as our <u>main contact person.</u> [EXPLAIN RESPONSIBILITIES: scheduling, disseminating materials] Would you be willing to do this, or would you prefer to designate someone else at your school to fill this role? [GET CONTACT INFORMATION]

IDENTIFICATION OF SCHOOL-LEVEL RESPONDENTS

Now I will need to take a few minutes to identify the persons we should interview at your school about each of the study topics. This might be a lead teacher or department head, or the person responsible for providing services related to a given topic. Some topic areas may require the expertise of more than one person. You may wish to look at the questionnaire content outlines that we sent to you; they may help in identifying these persons.

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 HEALTHYAND SAFE SCHOOL ENVIRONMENT MENTAL HEALTH AND SOCIAL SERVICES FACULTY AND STAFF HEALTH PROMOTION

Is there someone in your school who oversees or coordinates:
HEALTH EDUCATION?
PHYSICAL EDUCATION AND ACTIVITY?
HEALTH SERVICES?
NUTRITION SERVICES?
SCHOOL ENVIRONMENT, FOR EXAMPLE VIOLENCE PREVENTION, TOBACCO USE PREVENTION, FOODS AND BEVERAGES AVAILABLE OUTSIDE THE SCHOOL MEALS PROGRAM, PHYSICAL SCHOOL ENVIRONMENT?
MENTAL HEALTH AND SOCIAL SERVICES?
FACULTY AND STAFF HEALTH PROMOTION?

If yes→	Can I get the name and title of this person?		
Name:	Title:		
If no →	Is there an individual in your school who can knowledgeably answer questions on this topic, even though they do not officially oversee or coordinate HEALTH EDUCATION?		

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

Can I have that person's name and title?

Name: _		Title:	
	 		_

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]

Thank you for these names. Is the main school telephone # the best way to reach these people, or do any have different numbers?

We will be conducting interviews with each of these staff members, and will need to schedule interviews with them ...when would be the best week from February through May 2012, for our interviewer to be in your school? [REVIEW AVAILABLE WEEKS IN THE ONLINE CASE MANAGEMENT SYSTEM. PLACE THE SCHOOL ON THE CALENDAR IN THE TARGETED WEEK. And can you please tell me weeks/would/be/impossible for you? IN THE CASE MANAGEMENT SYSTEM, RECORD THOSE DATES IN THE RECRUITER'S NOTES SECTION. Thank you. I don't foresee any problem with the week that you have chosen, but it may be necessary for us to call you back later to reschedule... again, we appreciate your willingness to be a part of our study and we intend to accommodate your schedule to the best of our ability.

MIDDLE AND HIGH SCHOOLS

IDENTIFICATION OF CLASSROOM-LEVEL RESPONDENTS (HED & PED):

Thank you for giving me all of this information. Now, we also will be interviewing classroom teachers for our study, specifically, those teachers who teach <u>required courses</u> with <u>either health education or physical education content.</u> This procedure is quite different from what we've just done. First I'll ask for required course names and then for the names of the teachers who teach these courses.

[AT THIS POINT, PRINCIPAL MIGHT SAY THAT S/HE DOES NOT HAVE THE TIME NOW TO CONTINUE THE CONVERSATION. IF SO, ASK WHEN WOULD BE A GOOD TIME TO CALL BACK, OR IF THERE IS SOMEONE ELSE YOU CAN SPEAK TO.]

<u>First, let's talk about health education courses.</u> I would like the names of all **required** courses in your school that **address health topics:** courses taught during the 2011-2012 school year, as well as those in the spring semester of 2011. Please include full-year courses and any courses less than full year. Also, please include any required health education courses that are taught online or partially online. [GO OVER SOME OF THE DEFINITIONS; RECORD COURSES; IF MORE THAN 2 REQUIRED

COURSES, USE RANDOM NUMBER TABLE TO SELECT 2 REQUIRED HEALTH EDUCATION COURSES. READ SELECTED COURSES OUT LOUD]. Now, for **each** course, please tell me the names of all the teachers who taught or will teach [COURSE 1, COURSE 2] during the 2011-2012 school year, or during the spring semester of 2011. [LIST TEACHERS, ONLY THOSE CURRENTLY EMPLOYED BY THE SCHOOL AND WHO ARE EXPECTED TO STILL BE TEACHING IN SPRING 2012. DO NOT EXCLUDE THOSE ON MATERNITY, SICK, PERSONAL LEAVE. USE A RANDOM NUMBER TABLE TO SELECT 2 TEACHERS. TELL CONTACT THE NAMES OF TEACHERS]. Now, for **each** teacher, please tell me the section(s) of the selected course that they teach. LIST SECTIONS. FOR EACH TEACHER, USE A RANDOM NUMBER TABLE TO SELECT 1 SECTION FOR EACH TEACHER.

Now, we need to do the same thing for **required** courses that **include physical education content.** I would like the names of all required physical education courses taught during the 2011-2012 school year, as well as those in the spring semester of 2011. Please include full-year courses and any courses less than full year. Also, please include any required physical education courses that are taught online or partially online. [GO OVER SOME OF THE DEFINITIONS; RECOED COURSES; IF MORE THAN 2 REQUIRED COURSES, USE RANDOM NUMBER TABLE TO SELECT 2 REQUIRED PHYSICAL EDUCATION COURSES. READ SELECTED COURSES OUT LOUD]. Now, for **each** course, please tell me the names of all the teachers who taught or will teach [COURSE 1, COURSE 2] during the 2011-2012 school year, or during the spring semester of 2011. [LIST TEACHERS, ONLY THOSE CURRENTLY EMPLOYED BY THE SCHOOL AND WHO ARE EXPECTED TO STILL BE TEACHING IN SPRING 2012. DO NOT EXCLUDE THOSE ON MATERNITY, SICK, PERSONAL LEAVE. USE A RANDOM NUMBER TABLE TO SELECT 2 TEACHERS. TELL CONTACT THE NAMES OF TEACHERS]. Now, for **each** teacher, please tell me the section(s) of the selected course that they teach. LIST SECTIONS. FOR EACH TEACHER, USE A RANDOM NUMBER TABLE TO SELECT 1 SECTION FOR EACH TEACHER.

OBSERVATIONS

For the observational component, we will be collecting information on the foods and beverages that are available to students throughout the school day through vending machines.

Does your school have any vending machines that students have access to during the school day?

If no, \rightarrow In the case management system, record that the school has zero vending machines that students can access during the school day.

If yes → How many vending machines at your school do students have access to during the school day? Please include both food and beverage vending machines.

RECORD THIS NUMBER IN THE ONLINE CASE MANAGEMENT SYTEM.

IF THE CONTACT SAYS THERE ARE MORE THAN 5 VENDING MACHINES AVAILABLE TO STUDENTS THROUGHOUT THE SCHOOL DAY, CONDUCT A RANDOM SELECTION OF 5 VENDING MACHINES USING A RANDOM NUMBERS CHART.

Rather than observing every vending machine in your school, we would like to limit the number of machines to five. I will do a random selection of

five machines. Please tell me the location of each vending machine in your school. Please include both machines that vend foods as well as those that vend beverages.

VENDING MACHINE #	LOCATION	FOOD or BEVERAGE
1 _		
2		
3		
4		
5		
Etc		

REPEAT FOR EACH VENDING MACHINE CONTACT REPORTS IS AVAILABLE FOR STUDENTS TO USE DURING THE SCHOOL DAY.

IF THE CONTACT SAYS THERE ARE 5 OR FEWER VENDING MACHINES AVAILABLE TO STUDENTS THROUGHOUT THE SCHOOL DAY, PROCEED WITH THE LANGUAGE BELOW.

I need to get some descriptive information about these vending machines so that our interviewer will know which machines are included in the observations. Can you tell me the location of the first vending machine and whether it vends foods or beverages? REPEAT FOR EACH VENDING MACHINE, UP TO FIVE.

VENDING MACHINE #	LOCATION	FOOD or BEVERAGE
1 -		
- 3		
-		
5		

Thank you.

Ending call

We will be sending some information to you for these individuals and will contact you to schedule the interviews, closer to the time of the study. When we send the information, we also will include a <u>scheduling form</u> that we hope will make arranging these interviews easier. This form will list all of the staff we'll be interviewing. We recommend that you pass this form around to these staff members to ask for the times that they are available during that week. Then, keep it handy for when we call you to set up times for interviews. Thank you again for your time. Please feel free to call Alice Roberts with questions... our toll-free # is 800-287-1815.

ELEMENTARY SCHOOLS

IDENTIFICATION OF CLASSROOM-LEVEL HEALTH ED RESPONDENTS:

[NOTE: IF UPPER GRADES IN THE ELEMENTARY SCHOOL OPERATE USING A MIDDLE SCHOOL MODEL, USE THE MIDDLE/HIGH SCHOOL SELECTION PROCESS]

Thank you for giving me all of this information. Now, we also will be interviewing classroom teachers for our study, in classrooms that include either **required**

health education or **required** physical education instruction. This procedure is quite different from what we've just done. I would like to ask you about different grades and teachers, so that we can decide which classroom teachers to interview.

[AT THIS POINT, PRINCIPAL MIGHT SAY THAT S/HE DOES NOT HAVE THE TIME NOW TO CONTINUE THE CONVERSATION. IF SO, ASK WHEN WOULD BE A GOOD TIME TO CALL BACK, OR IF THERE IS SOMEONE ELSE YOU CAN SPEAK TO.]

<u>First, let's talk about health education.</u> What are all of the grades in your school in which **health**

topics must be taught? [GO OVER SOME OF THE DEFINITIONS; CIRCLE GRADES, USE A RANDOM NUMBER TABLE AND SELECT TWO GRADES]. For the purposes of our study, I am going to ask you only about two grades, X and Y.

Now, for grade X, please tell me all of the classrooms which include **required** instruction on health topics.

- LIST ALL TEACHERS/CLASSROOMS: INCLUDE TEAM-TAUGHT CLASSROOMS.
- USE RANDOM NUMBER TABLE AND SELECT ONE TEACHER/CLASSROOM. [IF TEAM-TAUGHT CLASS IS SELECTED, ASK PRINCIPAL TO CHOOSE THE TEACHER WHO IS PRIMARILY RESPONSIBLE FOR HEALTH INSTRUCTION TO BE INTERVIEWED]
- TELL THE SCHOOL CONTACT THE NAME OF THE SELECTED TEACHER:
 Mr/Ms._____has been randomly selected to be interviewed.
- IF THE CONTACT INDICATES THAT "SOMEONE ELSE" TEACHES THE HEALTH EDUCATION TO THIS CLASS (HAS RESPONSIBILITY FOR PLANNING AND TEACHING), LIST THIS PERSON AS A HED SPECIALIST. ASK IF HEALTH TOPICS ARE TAUGHT BY CLASSROOM TEACHER ONLY, HED SPECIALIST, OR BOTH. SELECT THE SPECIALIST OR SPECIALIST AND CLASSROOM TEACHER JOINTLY IF A SPECIALIST TEACHES THE CLASS.

Now, we're going to do the same thing for grade Y Please tell me all of the Yth grade classrooms which include **required** instruction of health topics.

- LIST ALL TEACHERS/CLASSROOMS, INCLUDE TEAM-TAUGHT CLASSROOMS.
- USE RANDOM NUMBER TABLE AND SELECT ONE TEACHER/CLASSROOM. [IF TEAM-TAUGHT CLASS IS SELECTED, ASK PRINCIPAL TO CHOOSE THE TEACHER WHO IS PRIMARILY RESPONSIBLE FOR HEALTH INSTRUCTION TO BE INTERVIEWED]
- TELL THE SCHOOL CONTACT THE NAME OF THE SELECTED TEACHER:

 Mr/Ms._____has been randomly selected to be interviewed.
- IF THE CONTACT INDICATES THAT "SOMEONE ELSE" TEACHES THE HEALTH EDUCATION TO THIS CLASS (HAS RESPONSIBILITY FOR PLANNING AND TEACHING), LIST THIS PERSON AS A HED SPECIALIST. ASK IF HEALTH TOPICS ARE TAUGHT BY CLASSROOM TEACHER ONLY, HED SPECIALIST, OR BOTH. SELECT THE SPECIALIST OR SPECIALIST AND CLASSROOM TEACHER JOINTLY IF A

IDENTIFICATION OF CLASSROOM-LEVEL PHYSICAL ED RESPONDENTS:

Now I will ask you questions about physical education. What are all of the grades in your school that include **required** physical education? [GO OVER SOME OF THE DEFINITIONS; CIRCLE GRADES, USE A RANDOM NUMBER TABLE AND SELECT TWO GRADES]. For the purposes of our study, I am going to ask you only about two grades, X and Y.

Now. for grade X, please tell me all of the classrooms which include **required** physical education.

- LIST ALL TEACHERS/CLASSROOMS, INCLUDE TEAM-TAUGHT CLASSROOMS.
- USE RANDOM NUMBER TABLE AND SELECT ONE TEACHER/CLASSROOM. [IF TEAM-TAUGHT CLASS IS SELECTED, ASK PRINCIPAL TO CHOOSE THE TEACHER WHO IS PRIMARILY RESPONSIBLE FOR PHYS ED INSTRUCTION TO BE INTERVIEWED]
- TELL THE SCHOOL CONTACT THE NAME OF THE SELECTED TEACHER:
 Mr/Ms._____has been randomly selected to be interviewed.
 In his/her classroom, is physical education taught by the classroom teacher, by a PE teacher, or by both?
- IF THERE IS A PE TEACHER, LIST THIS PERSON AS A PHYSICAL EDUCATION SPECIALIST. SELECT THE SPECIALIST OR SPECIALIST AND CLASSROOM TEACHER JOINTLY IF A SPECIALIST TEACHES THE CLASS.

Now, we're going to do the same thing for grade Y. Please tell me all of the Yth grade classrooms which include **required** physical education.

- LIST ALL TEACHERS/CLASSROOMS, INCLUDE TEAM-TAUGHT CLASSROOMS.
- USE RANDOM NUMBER TABLE AND SELECT ONE TEACHER/CLASSROOM. [IF TEAM-TAUGHT CLASS IS SELECTED, ASK PRINCIPAL TO CHOOSE THE TEACHER WHO IS PRIMARILY RESPONSIBLE FOR PHYS ED INSTRUCTION TO BE INTERVIEWED]
- TELL THE SCHOOL CONTACT THE NAME OF THE SELECTED TEACHER:
 - Mr/Ms.____has been randomly selected to be interviewed. In his/her classroom, is physical education taught by the classroom teacher, by a PE teacher, or by both?
- IF THERE IS A PE TEACHER, LIST THIS PERSON AS A PHYSICAL EDUCATION SPECIALIST. SELECT THE SPECIALIST OR SPECIALIST AND CLASSROOM TEACHER JOINTLY IF A SPECIALIST TEACHES THE CLASS.

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