

Green Jobs and Health Care Implementation Study

Appendix B. Script for Screening Calls



10420 Little Patuxent Parkway, Suite 300
Columbia, MD 21044
Phone: 443.367.0088 / Fax: 443.367.0477
www.impaqint.com

Green Jobs and Healthcare Grantee Survey Script for Screening Calls

Note: The purpose of these calls is to build/refine the sample frame for the Green Jobs and Healthcare Grantee Survey. DOL/ETA will work with the contractor to identify the most appropriate survey respondents based on grant documents. As needed, the contractor will call grantee organizations to further refine the survey sample. The objective of the calls is to identify the most knowledgeable individuals in each grantee organization (and their partner organizations) to complete the survey. The screening effort will collect contact information for up to 5 individuals affiliated with each of the 152 grantee sites.

If someone answers:

Hello, my name is [INTERVIEWER NAME] and I am calling from IMPAQ International on behalf of the U.S. Department of Labor. I am trying to reach [GRANTEE PROJECT DIRECTOR/MANAGER NAME].

If Grantee PD/PM confirms their identity:

As you know, your organization was awarded a [INSERT AS APPROPRIATE: *Healthcare and High Growth/State Energy Sector Partnership/Energy Training Partnership/Pathways Out of Poverty*] grant through the Employment and Training Administration of the U.S. Department of Labor. DOL has contracted with IMPAQ International, a private research firm, to conduct a study on grant implementation. As part of the study, we are conducting a survey of grantee staff and staff from partner organizations. The survey asks questions about the grant program's goals, design, operations, outcomes, and partnerships. It takes about 15-20 minutes to complete and will be available online in a few weeks. Participants will receive an email with a link to the online survey.

As we prepare to launch the survey, we need your help to identify the most appropriate individuals in your organization and partner organizations to complete the survey. Can you help with this?

*If yes: Engage respondent in a dialogue to identify appropriate participants. Collect contact information for **up to five** individuals. This should include the grantee project director/manager as well as 1-2 other grantee staff (as appropriate), and 1-2 staff from partner organizations. When finished, thank respondent and end call.*

If no: Who could help me with this?

Obtain name and phone number of alternate contact. Follow-up using the same script as above.

If Grantee PD/PM is not available:

I am happy to call back at a better time. What would be a good day/time to reach [GRANTEE PROJECT DIRECTOR/MANAGER NAME]?

Record callback day/time: _____

I will also leave my phone number in case he/she prefers to call me back. My phone number is 1-XXX-XXX-XXXX.

Provide phone number.

Call back at designated time using same script as above or re-attempt contact if respondent does not return call within 2 business days.

If answering machine or voicemail:

This message is for [RESPONDENT NAME]. My name is [INTERVIEWER NAME], and I'm calling from IMPAQ International on behalf of the U.S. Department of Labor. I am calling regarding your organization's [INSERT AS APPROPRIATE: *Healthcare and High Growth/State Energy Sector Partnership/Energy Training Partnership/Pathways Out of Poverty*] grant. I would appreciate it if you could call me back at 1-XXX-XXX-XXXX. Thank you very much.

CONTACT INFORMATION FOR RESPONDENT #1

Respondent Name _____

Respondent Title _____

Organization Name _____

Indicate if Grantee or Partner Organization _____

Mailing Address _____

Email Address _____

Telephone Number _____

CONTACT INFORMATION FOR RESPONDENT #2

Respondent Name _____

Respondent Title _____

Organization Name _____

Indicate if Grantee or Partner Organization _____

Mailing Address _____

Email Address _____

Telephone Number _____

CONTACT INFORMATION FOR RESPONDENT #3

Respondent Name _____

Respondent Title _____

Organization Name _____

Indicate if Grantee or Partner Organization _____

Mailing Address _____

Email Address _____

Telephone Number _____

CONTACT INFORMATION FOR RESPONDENT #4

Respondent Name _____

Respondent Title _____

Organization Name _____

Indicate if Grantee or Partner Organization _____

Mailing Address _____

Email Address _____

Telephone Number _____

CONTACT INFORMATION FOR RESPONDENT #5

Respondent Name _____

Respondent Title _____

Organization Name _____

Indicate if Grantee or Partner Organization _____

Mailing Address _____

Email Address _____

Telephone Number _____