

Introductions (10 min)

A. INTRODUCTION OF MODERATOR

Hello. Thank you for coming out and agreeing to participate. My name is _____. I am an independent moderator working with TMN Corp, a research firm in Silver Spring, MD. Today we're going to be talking about general health and safety.

This is a 90 minute focus group session, and, as we discussed during your recruiting phone call, the session will be recorded. However, your individual responses are strictly confidential, and no personal information will be shared in any format, nor will it ever be included in any report. Once again, does everyone give consent to have the session recorded?

B. GROUND RULES

- This session is being recorded and observed.
- We ask that only one person speak at a time.
- All comments and questions are good ones. There is no right or wrong answer.
- Please turn all cell phones off.
- If you disagree with something that someone else says, please be sure to express your different views. We want to hear everyone's views and opinions.
- Please show respect for one another's views, and for your fellow group members.
- We ask that you not eat or drink during the session.
- I want to make sure that you all understand that I was not involved in the development of any of the concepts we will be discussing today, so feel free to be completely open and honest about your opinions. You won't hurt my feelings! Does anyone have any questions?

C. INTRODUCTION OF PARTICIPANTS (BY FIRST NAME ONLY) AND ICEBREAKER

Let's start by giving us your first name and telling us a little about your family and what you like to do for fun. *(After all participants have spoken, the moderator can emphasize what they have in common—they provide care, responsible for the health of their loved ones.)*

Discussion

A. POISONS (10 MIN)

1. Keeping yourself and family safe and healthy is important. Where do you look for health information? What sources do you rely on the most?
2. What are some of the things that you do around the house to keep them safe?
3. What comes to mind when I say "poison"? *[Probe for insects, spiders, plants, food poisoning, carbon monoxide (generators) as well as typical products that most people associate as being "poison"]*

4. How many of you have had a situation when you or a loved one may have possibly been poisoned? It could be last week, when you were a child, any time.
 - What happened?
 - What did you do? [Probe for whether or not they called 911, the Poison Help line, a doctor, a friend, or someone else; looked online for a solution; or took the individual to get medical attention (e.g., the ER) after a poisoning emergency]
5. *(If not previously mentioned)* Has anyone ever contacted their poison center? (Probe why the person called, what her experience was like, whether she called or emailed, whether there was a cost for the call, what time she called, where she found the number, whether or not she has a magnet on the fridge, whether the number is programmed in to her phone or she went online to look for it. Time of call is the least important of the probes)
6. Does anyone know what the number is to reach their poison center? *(If respondents say they don't know, or if they ask questions):*
 - Where would you go for an answer to that question?
 - Does anyone have the number programmed in to their telephone?

B. DISCUSSION OF TWO VIDEO CONCEPTS (45 MIN)

The moderator should vary the order of showing the concepts. "Comparisons" should be shown first in the first English and first Spanish groups. "Making Connections" should be shown first in the second English and second Spanish groups.

During the next part of our discussion, I'm going to show you two different concepts that are being developed to make people more aware of poison centers. The final product will be a Web-based video, but today we are going to be looking at some storyboards, which show what the video will look like when it is completed. Your suggestions will be incorporated into the final product. So, your input at this point is very important! Remember, I did not participate in the development of the concepts or story boards, so my feelings won't be hurt by anything you say. We're looking for your honest opinions.

Let's look at the first concept.

The moderator points to the pictures in order, "acting out" the voice over as much as possible, and explaining the pictures where necessary. The complete scripts for the concepts appear in the moderator's guide, but respondents will not see the script. They will see the moderator pointing to the appropriate storyboards while "performing" the voice over.

"COMPARISONS" CONCEPT (FOR MODERATOR REFERENCE DURING GROUP)

CONCEPT OVERVIEW:

Different aspects of calling the Poison Help line versus going to the emergency room are compared through rapid swipes on a mobile phone. The characteristics of each are represented through words.

Visual	Copy at a glance
Close up of a horizontal touch phone. [Running music throughout the video.] Poison Help line logo appears. Click sound on logo appearance.	Poison Help Line (logo)
The word "and" appears. Click sound on "and" appearance.	Poison Help Line (logo) <i>and</i>
"Emergency Room" appears. Click sound on "Emergency Room" appearance.	Poison Help Line (logo) <i>and</i> Emergency Room
Close up of the phone. Finger swipes entire scene out to the left.	Poison Help Line (logo) <i>and</i> Emergency Room
Finger swipes entire scene out to the left and the words "available 24/7" swipe in its place from the right.	available 24/7
Finger swipes entire scene out to the left and the words "help from expert medical professionals" swipe in its place from the right.	help from expert medical professionals
Finger swipes entire scene out to the left and the words "completely confidential" swipes in its place from the right.	completely confidential
Finger swipes entire scene out to the left and a thin white line swipes in from the right. [click] Logo appears: "Poison Help line" on the left side of it. [click] Copy appears: "Emergency Room" to the right side of it.	Poison Help Line (logo) Emergency Room
Finger appears from the bottom of the screen. Swipes the Poison Help line logo down, and "Free" swipes in its place from above. Swipes the words "Emergency Room" down, and "Expensive" swipes in its place from above. The ghost image of the Poison Help line logo appears on the left corner and remains there until living room is swiped out.	Free Expensive
Finger appears from the bottom of the screen. Swipes the word "Free" down, and "Home" swipes in its place from above. Swipes the word "Expensive" down, and "Hospital" swipes in its place from above.	Home Hospital
Finger appears from the bottom of the screen. Swipes the word "Home" down, and "Quick Answer" swipes in its place from above. Swipes the word "Hospital" down and "Long Wait" swipes in its place from above.	Quick Answer Long Wait
Finger appears from the bottom of the screen. Swipes the words "Quick Answer" down, and "Emergencies Not Required" swipes in its place from above. Swipes the word "Long Wait" down, and "Emergencies Only" swipes in its place from above.	Emergencies Not Required Emergencies Only

<p>Finger appears from the bottom of the screen. Swipes the phrase “Emergencies not Required” down, and a picture of a living room with the words “Living room” swipes in its place from above. Swipes the words “Emergencies Only” down, and an image of a waiting room with the words “Waiting Room” swipes in its place from above.</p>	<p>Living Room Waiting Room</p>
<p>Finger appears from the bottom of the screen. Swipes the entire scene out to the left. The Poison Help line logo and tagline “It’s Your Call” swipe in from the right.</p>	<p>Poison Help Line (logo) It’s Your Call</p>
<p>A hand picks up the phone and orients it vertically as the screen morphs to a contact display with the Poison Help line programmed in.</p>	
<p>A finger touches the call button and moves the phone off screen as the call is being made, revealing the Poison Help line logo on the screen behind it.</p>	<p>Poison Help Line (logo)</p>

7. Who can explain to me what this video concept is about? (*Moderator has two or three people share their overall understanding of the video.*)
8. What do you think the main message of **this** video concept is?
9. Who do you feel the video is designed for?
 - What makes you think that the video was designed for _____?
 - Who else might the video be designed for?
10. What do you **like** about the “Comparisons” video concept? Why?
11. Is there anything you **did not** like? Why?
 - What, if anything, do you think might be confusing to some people? Why is that confusing?
 - Probe whether or not the “ghost” logo in the lower left-hand corner of the screen is helpful, or if it is confusing in some way. Determine whether they prefer to have the logo there or not.
12. What are the main messages of this video?
 - Probe: Available 24/7, free and confidential, medical experts, 1-800#
13. Is this believable to you? Why or why not?
14. Did you learn anything new? (give respondents time to answer)
 - Probe: Let’s look at this one illustration here, where it is comparing the Poison Help line with the hospital. For the Poison Help line it says, “Emergencies Not Required.” For the hospital, it says “Emergencies Only.” What do you think they are trying to convey with that comparison? (*Probe for whether or not they understand that they can call the Poison Help line anytime they have a question*). What could they say in a word or two to better convey that message?
 - Probe for “Information”, “Information and emergencies”, “Emergency or information”, or others that the group recommends.

15. What do you think about the line at the end, “It’s your call”? (*Probe for how memorable it is or is not, reactions to the tag line as a message to the public*)
 - What would you think if the tag line said instead, “Your call. Your choice.”?
16. Imagine that you’re all the “creative team” that we’ve hired to improve our Comparison video. What would you do to improve the video?
17. How likely would you be to call the Poison Help line after seeing this video? Why/why not?
 - [If they say it would not motivate them to call the Poison Help line] What would motivate you to call the Poison Help line?
18. How likely would you be to program the Poison Help line in to your phone after seeing this video? Why/why not?
19. What would motivate you to program the Poison Help line number in to your phone?
20. How likely would it be that you would recommend this video to a friend or family member? Why or why not?
 - Let’s say you were giving this video concept a grade – A, B, C, D or F. What grade would you give it, and why? (*Moderator goes around the table and gets responses from everyone*)
21. Any other feedback that you’d like to give on this concept? (*Moderator-- “Check-in” to make sure people have shared all of their major points about the concept*).

Okay, let’s look at the second concept.

“MAKING CONNECTIONS” CONCEPT (FOR MODERATOR REFERENCE DURING GROUP)

CONCEPT OVERVIEW:

Diagrammatical connections are made between the Poison Help line benefits, experts, callers, and a programmed cell phone. The concepts are represented as simple illustrations with lines being drawn between them. The movements of the connections are followed on the screen. Near the end of the video, relevant illustrations are arranged to reinforce the fact that the Poison Help line provides information on many types of poison issues. Moderator “performs” the voice over while showing the pictures in the storyboards.

Voice Over	Visuals with sound effect
Life’s a lot easier when you have the right connections.	[ongoing musical soundtrack] A cell phone with the Poison Help line listed as a contact in the display.

<p>The Poison Help line can quickly connect you to medical professionals at your poison center <i>whenever</i> you need help.</p>	<p>Straight lines draw out from the left and the right of the phone and connect to an adult to the left with a cluster of medical professionals on the right. A moon rises and stars appear on the word “whenever.” All illustrations in the video pulse glow when the line connects with them. (Phrase moving from left to right in the background, very subtle and ghosted back: AVAILABLE 24/7)</p>
<p>It’s a great resource for <i>all</i> your questions.</p>	<p>Line draws from the medical professionals to a symbol of a dialog bubble with a question mark in it. Swift zoom in on dialogue bubble on the word “all” reveals it is made up of numerous poison-related symbols. Symbols could include household and personal products, pills, plants, spiders, and food items, as well as health and family symbols.</p>
<p>Medical experts can provide you with information about household products, other possible poisons, and medications as well as treatment options.</p>	<p>Swift pan back out to dialog bubble symbol. A line connecting the dialog bubble goes down, diagonally to a cluster of images that include: household products a spider a capsule and a pill (Phrase moving from left to right in the background, very subtle and ghosted back: FREE & CONFIDENTIAL)</p>
<p>And because most poisonings can be treated over the phone, calls to the Poison Help line save you time and money.</p>	<p>Line draws from the poisons symbol towards a hospital image. The line diverts down just before reaching the hospital symbol and then connects to an illustration of a clock and dollar sign. As the line diverts away from the hospital, a null symbol fades in over the hospital image.</p>
<p>So, consider all the benefits that the Poison Help line can provide, and plan ahead so it’s there when you need it most.</p>	<p>Quick pan across to the right connects clock symbol, to poisons symbol, to dialog bubble symbol, to medical experts symbol in rapid succession. (Phrase moving from left to right in the background, very subtle and ghosted back: 1-800-222-1222)</p>
<p>Program the Poison Help line in to your phone today. Make the call, make the connection.</p>	<p>As symbols pan out of the frame to the left, Poison Help line logo enters from the right to center frame.</p>

22. Who can explain to me what this video concept is about? (*Moderator gets two or three people to share their overall understanding of the video.*)

23. What do you think the main message of **this** video concept is?

24. Who do you feel the video is designed for?

- What makes you think that the video is designed for _____?
- Who else might the video be designed for?

25. What do you **like** about the “Making Connections” video concept? Why?

26. Is there anything you did **not like**? Why?
- What, if anything, do you think might be confusing to some people? Why is that confusing?
27. What are the main messages of this video?
- Probe: Available 24/7, free and confidential, medical experts, 1-800#
28. Is this believable to you? Why or why not?
29. Did you learn anything new? (give respondents time to answer)
- Probe: Let's look back at this one illustration, where the video says that the Poison Help line saves you "time and money." What is your initial reaction to that point?
 - Which is more important to you - the fact that it will save time, or the fact that it will save money?
 - Why is that most important to you?
 - How important do you think this will be to people who see this video?
30. Now let's look at this picture with the dialogue bubble. What do you think this picture is trying to show you?
- Can you identify some of the images here for me?
 - (*When they mention something*) Why does the image include a _____?
 - Are there any images that don't make sense to you? If so, which ones? Why?
 - If they are trying to show images related to poison, what additional images do you think they should include? Why?
31. (*If not previously mentioned*) What do you think about that line at the end, "**Make the call. Make the connection**"? (*Probe for how memorable it is or is not, reactions to the tag line as a message to the public*)
32. Imagine that you're all the "creative team" that we've hired to improve our Making Connections video. What would you do to improve the video?
33. How likely would you be to call the Poison Help line after seeing this video? Why/why not?
- [*If they say it would not motivate them to call the Poison Help line*] What would motivate you to call the Poison Help line?
34. How likely would you be to program the Poison Help line in to your phone after seeing this video? Why/why not?
35. What would motivate you to program the Poison Help line number in to your phone?
36. How likely would it be that you would recommend this video to a friend or family member? Why or why not?
37. Let's say you were giving this video concept a grade - A, B, C, D or F. What grade would you give it, and why? (*Moderator goes around the table and gets responses from everyone*)

38. One thing we haven't talked much about is the color to be used for the video. (*Moderator-- Color options will be varied for each of the four focus groups. See table below.*)

Group 1	Group 2	Group 3	Group 4
Color 1	Color 3	Color 2	Color 1
Color 2	Color 1	Color 3	Color 2
Color 3	Color 2	Color 1	Color 3

I have three different colors for us to look at, and I'd like you first to tell me what you think about:

- Color #1.
 - o What do you like about it?
 - o What do you not like about it?
- Let's look at Color #2.
 - o Again, what do you like about it?
 - o What do you not like about it?
- And finally, Color #3.
 - o What do you like about it?
 - o What do you not like about it?

39. If you had to choose just one color scheme for this video, which would it be? Why?

40. Any other feedback that you'd like to give on this concept? (*Moderator-- "Check-in" to make sure people have shared all of their major points about the concept.*)

C. COMPARISON OF TWO CONCEPTS AND TWO TAG LINES (10 MIN)

We've seen two concepts for promoting the Poison Help line to members of the general public. Let's compare them a bit.

41. First, how many of you preferred the "Comparisons" concept? (*Moderator counts out loud*)
42. How many of you preferred the "Making Connections" concept? (*Moderator counts out loud*)
43. Those of you who preferred the "Comparisons" concept – What makes this your favorite? What makes it stronger than the other one? Is there anything that you would change about the ad to improve it?
44. Okay, now those of you who said you preferred the "Making Connections" Concept – What did you especially like about that concept? What makes this your favorite? What makes it stronger than the other one? Is there anything that you would change about the ad to improve it?
45. Which tag line did you prefer -- **"Make the call. Make the connection"** or **"It's your call."** Why?

46. Here are a couple of other tag lines. Tell me what you think of them. The first one is, “**Don’t Guess. Be Sure.**” What is your initial reaction to that line? Why? What do you like/not like about it?
47. Here’s another option: “**Stop Searching. Just Call.**” What is your initial reaction to that line? Why? What do you like/not like about it?
48. And once again, your reaction to “**Your call. Your choice.**”?
49. Overall, of the five tag lines we’ve discussed which one do you think is best? Why?
50. Now let me ask that question a little differently. Of all of the taglines, which one would be most likely to spur you to action – like programming the Poison Help line number into your phone, or calling the Poison Help line if you had a question or a poison emergency? Why?
51. Let me ask that same kind of question about the two video concepts. Which one would be more likely to spur you to action? Why?

D. PROMOTION AND DISTRIBUTION QUESTIONS (10 MIN)

52. Thinking about the places/sources where you go to find health information, where would you want to see this video? *Probe for websites, blogs, etc.*
53. Let’s say you were organizing a campaign to make sure that people saw and paid attention to this video. How would you promote it? (*Moderator – As this will be a web-based video, HRSA is primarily interested in websites, social media ideas, etc. Promotion pieces, however, could be print. Like a postcard or something encouraging people to watch the video, so probes can be non-web related. If time is a factor, only probe web-related.*)

False Close (2 min)

The moderator will go to the back room and ask the observers if there are any follow-up questions, or if any clarifications need to be made. If there are additional questions, she will ask them of the group. Otherwise, she will conclude the group with the following discussion:

Conclusion/Thank and Close (3 min)

We have spent a lot of time today talking about poisons, where to get more information, and how to address them. Before we wrap up, are there any last thoughts you would like to share with us?

Thanks and conclusion of the group. Distribute magnets and business cards.

Public Burden Statement: 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 control number for this project is 0915-0212. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or another aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.