OMB BURDEN STATEMENT:  According to the Paperwork Reduction Act of 1995, no persons are 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 0584-0524.  The time to complete this information collection is estimated as part of the 10 minutes for the screener, including the time for reviewing instructions and completing the information.

USDA/FNS

**Telephone Focus Group Screening Questionnaire –**

**Middle School Food Service Managers**

**Evaluative Round (July 2011)**

**RESEARCH CONTACT:** Erica Sandler at 202-973-2949 or [Erica.Sandler@porternovelli.com](mailto:Erica.Sandler@porternovelli.com)

**SPECS:**

* Six, 90-minute telephone focus groups with middle school (grades 6-8) food service managers
  + Formative Round: 3 telephone focus groups
  + Evaluative Round: 3 telephone focus groups
* Recruit 8 for 6 to show (seat) at each group.
* All respondents may **not** work at a middle school that has won a HUSSC (HealthierUS School Challenge) award (we will provide facility with a list of local schools **not eligible** for recruitment).
* All respondents must speak English.
* All respondents must be outgoing, responsive, articulate, willing and able to read and react to written materials, and must be willing to speak openly in a group setting over the phone.

**EVALUATIVE: PLEASE RECRUIT RESPONDENTS AS FOLLOWS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **GROUP** | **DATE\*** | **TIME** | **LOCATION** |
| [ ] | ***Group 1:*** *middle school food service managers* | TBD | TBD | Telephone |
| [ ] | ***Group 2:*** *middle school food service managers* | TBD | TBD | Telephone |
| [ ] | ***Group 3:*** *middle school food service managers* | TBD | TBD | Telephone |

Hello, my name is \_\_\_\_\_with\_\_\_\_\_\_. We are conducting a study about nutrition on behalf of the federal government, and I would like to ask you a few questions. I’m not trying to sell you anything. We would like to invite a number of middle school food service managers across the country to participate in a telephone focus group to help us understand more about what they think about nutrition and health. May I speak to [NAME OF FOOD SERVICE MANAGER]? This should only take a few minutes. ONCE FOOD SERVICE MANAGER ON PHONE, REPEAT INTRODUCTION AND READ OMB STATEMENT (see top of screener).

1. Record Gender—DO NOT ASK UNLESS UNABLE TO TELL.

|  |  |  |
| --- | --- | --- |
| Female…… | [ ] | **Continue** |
| Male …….. | [ ] | **Continue** |

1. Do you, or does anyone in your household, work for a radio station, television station, newspaper, market research company, advertising or public relations company?

|  |  |  |
| --- | --- | --- |
| Yes…… | [ ] | **Terminate** |
| No…….. | [ ] | **Continue** |

1. Have you ever participated in a focus group or been paid to be part of a discussion group?

|  |  |  |
| --- | --- | --- |
| Yes……..……………… | [ ] | **Continue** |
| No……………………… | [ ] | **Skip to Q6** |

1. How recently did you participate in a focus group?

|  |  |  |
| --- | --- | --- |
| Less than 6 months ago | [ ] | **Terminate** |
| 6 months ago or longer | [ ] | **Continue** |

1. Are you currently employed as a food service manager, cafeteria manager or school nutrition manager in a middle school (i.e., the individual who manages the cafeteria and overall food service for a middle school)?

|  |  |  |
| --- | --- | --- |
| No…………………. | [ ] | **Terminate** |
| Yes …….…….…… | [ ] | **Continue** |

1. How long have you been employed as a middle school food service manager?

|  |  |  |
| --- | --- | --- |
| Less than 6 months | [ ] | **Terminate** |
| 6 months or longer | [ ] | **Continue** |

1. What state is your school is located in? **(RECORD & RECRUIT A MIX)**
2. What is the best way to describe the area in which your school resides? **(READ LIST and RECORD)**

|  |  |  |
| --- | --- | --- |
| Urban ………........................................ | [ ] | **Recruit at least 2** |
| Rural ….…….………………………… | [ ] | **Recruit at least 2** |
| Suburban………………………………. | [ ] | **Recruit at least 2** |
| Don’t Know/Refused……………………... | [ ] | **TERMINATE** |

1. Does your school currently participate in the National School Lunch Program?

|  |  |  |
| --- | --- | --- |
| Yes ….…….………………………… | [ ] | **CONTINUE** |
| No………………………………. | [ ] | **TERMINATE** |
| Don’t Know/Refused……………………... | [ ] | **TERMINATE** |

1. What is your current age? **[Do not read list]**

|  |  |  |
| --- | --- | --- |
| Under 18………… | [ ] | **Terminate** |
| 18-34 …….……... | [ ] | **Record** |
| 35-50…….……… | [ ] |
| 50+ ……............... | [ ] |

1. Are you of Hispanic or Latino origin?

|  |  |  |
| --- | --- | --- |
| No…………………. | [   ] | **Continue** |
| Yes …….…….…… | [   ] | **Continue** |

1. What is your race?   **(READ LIST. ACCEPT MULTIPLE ANSWERS.)**

|  |  |  |
| --- | --- | --- |
| American Indian or Alaska Native………... | [   ] |  |
| Asian ….…….……………………………. | [   ] |  |
| Black or African American …….……… | [   ] |  |
| Native Hawaiian or Other Pacific Islander.. | [   ] |  |
| White……………………………………… | [   ] | Recruit no more than 6\* |

**\*TO THE EXTENT POSSIBLE, THE GROUPS SHOULD BE A MIX OF RACES/ETHNICITIES.**

1. Take a moment and think about the students at your school. What is the biggest concern you have about their health?

**Recruiter: After recording respondent’s answer, determine whether or not you feel this respondent would be useful in the group. Did they:**

* + **Give full and complete answers?**

## Speak clearly, and without long pauses?

* + **Answer enthusiastically?**
  + **Speaks understandable English/is comfortable with the language**

**It is most important that respondent be articulate!!**  **If not, terminate.**

I would like to invite you to participate in a group discussion over the phone that will be held (DATE) at (TIME/EASTERN STANDARD TIME). The group will last approximately 90 minutes. To cover inconveniences such as child care we will mail you a check for $75 after the telephone discussion. Would you be willing to participate?

Yes……………( ) **SCHEDULE** No……………..( ) **TERMINATE**

As I mentioned, the discussion group is (DATE) at (TIME) EST.

(Time zone respondent lives in \_\_\_\_\_\_\_\_)

[RECRUITER: ASK IF PARTICIPANT IS ON EASTERN STANDARD TIME. IF NOT ASK WHAT TIME ZONE THEY ARE IN, AND CONFIRM THAT THEY UNDERSTAND WHAT TIME THE GROUP WOULD BEGIN IN THEIR TIME ZONE.]

Someone from 20/20 Research will call you to begin the discussion. May I please have the phone number where we will be able to reach you on (DATE) at (TIME) EST?

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You will also be mailed some materials in advance, which you will review as part of the discussion. Please do not open the packet before the discussion group. We will also call you a day or two before to remind you on this appointment, and to confirm that you have received these materials. On the day of the discussion, we will call you 30 minutes before the discussion to make sure you are near the phone. We will then call you at the designated time in order to begin the discussion.

If for some reason you realize in the next few days that you will be unable to participate in the discussion group, please call me at (TELEPHONE NUMBER) so that I can find a replacement for you. Thank You.

Respondent’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Telephone # (Home): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recruited by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_