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# Participant Recruitment Telephone Script

L.	Hello, my name is [first and last name]. May I speak to [name]?
	If someone other than Participant asks why you are calling, say "I'm calling from <b>[your company]</b> regarding an important study of notices of privacy practices. We are paying participants to help us with this study."
	<ul> <li>□ No one by that name at this number</li> <li>□ Speaking to Participant/ Participant comes to the phone → Go to question 3</li> </ul>
2.	Confirm you have dialed correctly. Ask if Participant was ever at this number (do they have his/her new number)?
	If no new number is given, finalize as not located.
3.	Hello, my name is <b>[your name]</b> and I'm calling from <b>[your company's name]</b> for the Kleimann Communication Group. Kleimann Communication Group is conducting a study on improving notices of privacy practices.
	We have chosen you to participate in a one-on-one interview being held on <b>[Date].</b> In this interview, we will ask you to read some notices of privacy practices to get your reaction to them.
1.	We will pay you [\$] at the end of the interview for your participation. Do you have a few minutes to answer some pre-qualifying questions? (If "No," what would be a convenient time to call back?)

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 0955-0002. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

Э.	and your identity or other identifying information will not be used."]				
[If needed: The exact location of the interview is					
	]				
	(Check One Answer)				
	<ul> <li>☐ Yes</li> <li>☐ No → Call back time</li> <li>☐ Refuse → Terminate. Thank participant.</li> </ul>				
6.	Do you read and speak English at home?				
	<ul> <li>☐ Yes</li> <li>☐ No → Terminate. I am sorry, but you do not fit the background we need for participation in this particular study. Thank you for talking with us.</li> </ul>				
7.	Do you have, and regularly use, a home computer to get online?				
	☐ Yes ☐ No				
8.	Have you ever worked for the US Department of Health and Human Services ?				
	<ul> <li>☐ Yes → Terminate. I am sorry, but you do not fit the background we need for participation in this particular study. Thank you for talking with us.</li> <li>☐ No</li> </ul>				
9.	Do currently work in the healthcare industry?				
	<ul> <li>☐ Yes → Terminate. I am sorry, but you do not fit the background we need for participation in this particular study. Thank you for talking with us.</li> <li>☐ No</li> </ul>				
10. What is your current age?					
	☐ Enter age				

11. What is the highest level of education you have completed?

		ss than high school			
		High school or GED			
		Some college or a 2-year college program			
		College graduate			
		Graduate school			
12. What is your race? You may select one or more than one categor					
		American Indian or Alaskan Native			
		Asian			
		Black or African-American			
		Hispanic/Latino			
		Native Hawaiian or other Pacific Islander			
		White			
		Other			
13. What is your gender?					
		Female			
		Male			
4					
14. What is your household income level?					
		Less than \$25,000			
		\$25,001 to \$50,000			
		\$50,001 to \$75,000			
		\$75,001 to \$100,000			
		\$100,001 or more			

15. Do you have children under age 18 in your household?							
	☐ Yes ☐ No						
16	. Have you months?	you or any underage member of your family seen a physician in the last 6 s?					
☐ Yes ☐ No							
าด	longer tha	-	ew times that we hav Calendar needs to b				
	[Date]						
	[Time]						
<ul> <li>□ No, can't make those times → Thank for time, end of interview</li> <li>□ Refuse → Thank participant for time, end of interview</li> </ul>							
	☐ Yes, I	☐ Yes, I'll take the time slot. → Enter selection.					
	[Follow ]		s confirmation prod	cedure, or continu	e with the		
Γh	e letter wil	l include a numb	ning the time and da per for you to call if yo have your current ac	ou have any questic			
f address is listed, verify that it is still correct:							
	☐ Yes, a	ions below, then co	ntinue.				
	Address:	Address:City/state/zip:					

If do not have address listed, ask participant to give a current address and list below.

And to make sure I send it to the right person, can I check the spelling of your name? (Verify name is correct as listed, make any changes below.)
<ul> <li>☐ Yes, name is correct → continue</li> <li>☐ No, name is not correct → make corrections below, then continue</li> </ul>
Participant's correct name:
We will need to call you the day before the interview to remind you about the appointment. Is it OK to call you at this number?
<ul> <li>☐ Yes, ok to call this number → continue</li> <li>☐ No, call different number → record number below</li> </ul>
Number to call to remind Participant:
Thank you for your help I'm glad you can come to the interview

Thank you for your help. I'm glad you can come to the interview. Please watch for a reminder letter from (Testing Facility Name).

## Acknowledgment Letter to Participants

#### [Date]

#### Dear [participant]:

Thank you for agreeing to participate in the research being conducted by Kleimann Communication Group. Below are the date, time, and location that we have reserved for you. We are also attaching directions to our research facility. We will pay you **\$[insert amount]** for your participation. If you use glasses, contacts, or a hearing aid, please do not forget to bring them with you so you can read the materials.

#### [Date, time, and location here]

If you cannot keep this appointment, please call us immediately at **[local number here]** so that we have the chance to find a replacement.

We look forward to meeting you and having your valuable insights for this important research.

Sincerely,

### Participant Reminder Telephone Script

1. Hello, my name is **[first and last name]**. May I speak to **[name from confirmed participant list]**?

Speaking to Participant, Participant comes to the phone → Go to question 3

If someone other than Participant asks why you are calling, say: I'm calling regarding an important study on notices of privacy practices that **[name from confirmed participant]** is participating in. Is **[confirmed participant]** in?

- 2. If no, ask, may I leave a message for him or her? → Go to question 3
- 3. My name is [first and last name] and I'm calling from [your company's name] for the Kleimann Communication Group to confirm [name of confirmed participant's or your] participation on [date and time] for the research study. Will you still be able to make it? Please remember to bring your glasses, contacts, or hearing, so you can use them to read the materials.

If leaving a message say, will you please give [name of confirmed participant] this message and have them call me at [telephone number] to confirm that they will be able to make it.

[Thank Participant or person taking message.]