

Appendix F:
Recruitment Letter and Informed Consent

«Date»

«FORMAT»

«Add1»

«Add2»

«City», «St» «Zip»

Dear:

We would like to invite you to participate in the *Research to Inform the Prevention of Asthma in Health Care* survey. The purpose of this survey is to identify any risk factors for asthma, or worsening asthma, among workers in the healthcare industry. Researchers at the National Institute for Occupational Safety and Health (NIOSH) are attempting to identify any risk factors for asthma, so that successful strategies for preventing asthma or asthma-like symptoms can be developed. This letter contains information about participating in this survey as well as information about informed consent.

We are conducting this survey with members of 1199SEIU United Healthcare Workers East because we believe that working with healthcare workers in the New York City area will give us the best opportunity for success. You have been selected by 1199SEIU and they have mailed you this recruitment material because your job is one of nine healthcare occupations we are interested in surveying.

Participation involves the completion of a 30 minute survey. There are two options available to you for completing this survey. The first option is completing the survey online, on a website hosted by the Centers for Disease Control and Prevention (CDC). The second option is by telephone, with an interviewer from the SEIU Communications Center. Instructions for completing the survey by either method have been included with your recruitment letter.

If you decide to participate you can complete the survey by following the enclosed instructions. If you do not complete the online or telephone survey in the next two weeks, the SEIU Communications Center may contact you by telephone to inquire about your participation. If you would like to participate you can complete the survey at that time.

The following paragraphs contain additional information about this survey which will allow you to make an informed decision about consent.

Any risks from completing this survey are minimal. The only risk we anticipate is the potential for loss of confidentiality. However, we are not collecting any personal identifying information (e.g., name, address, phone number, social security number) and we will not share your information with anyone outside the research team. To help protect your confidentiality, 1199SEIU will assign a study identification number that will be used to identify all study data you provide and will allow us to notify the union of members that have completed the survey. The form linking your name and your study identification number will be kept by 1199SEIU and will not be provided to members of the NIOSH research team. At no time will your name or contact information ever be made available to NIOSH.

If you are injured or harmed through negligence of a NIOSH employee you may be able to obtain compensation under Federal Law. If you want to file a claim against the Federal government your contact point is: General Law Division of OGC, request the Claims Office: (202) 233-0233. If you are injured or harmed through the negligence of a NIOSH contractor, your claim would be against the

contractor, not the federal government. If an injury or harm should occur to you as the result of your participation or if you have questions about your rights if you participate in this survey, you also should contact:

Michael Humann, Associate Service Fellow, 304-285-6193 or Mark A. Toraason, Chair NIOSH HSRB, 513-533-8591.

Your participation is voluntary and you may withdraw your consent and participation in this study at any time without penalty or loss of benefits to which you are otherwise entitled.

There are no direct benefits to you personally for participating in the study. However, what we learn conducting this study may reduce the occurrence of asthma or asthma like symptoms among health care workers through effective intervention strategies.

We understand that your time is valuable. Therefore we will give you a token of appreciation for the 30 minutes spent completing this survey with a \$10 gift card to a local merchant. Reimbursement will be provided only to participants who complete the entire survey. Once we have confirmation that you have completed the survey either online or by phone we will have 1199SEIU mail the gift card to you.

Completing this survey online or by phone will constitute your consent to participate. A link to a detailed informed consent document can be found on the webpage hosting the survey. Furthermore, interviewers can review detailed informed consent information if you choose to participate by telephone.

We hope that you will choose to participate in this important survey. If you have any questions, feel free to contact me (Michael Humann, Associate Service Fellow, 304-285-6193). I will be happy to provide you with additional information regarding this study. Thank you for your time.

Sincerely,

Michael Humann, PhD
National Institute for Occupational Safety and Health
Centers for Disease Control and Prevention
1095 Willowdale Road, MS H2800
Morgantown, WV 26505