Telephone Script for Recruitment of MUH Operators in Los Angeles County

Public reporting burden of this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx)

Hello,

My name is XXXXXXXX and I am calling you from Healthy Housing Solutions in Columbia, MD. This is not a sales call. We have been asked by the U.S. Centers for Disease Control and Prevention, or CDC, to study smoke-free policies in apartment complexes. I am calling you because your apartment complex has been selected to participate in our research study. We have already sent your management firm a letter that describes the study.

I would like to invite a representative of your apartment complex to take part in an interview about the non-smoking policy in your apartment complex. The goal of this research study is to learn more about how apartment complexes put smoke-free policies in place and what it takes to carry out that policy.

1. Are you t	he person in charge of the daily operation of this apartment complex?
	Yes (If "Yes", go to Question 2)
	No (If "No", go to Question 1a)
	ay we contact to obtain this information? [END SURVEY with respondent; if information ontact the appropriate person]
2. Do you h	ave knowledge of the company policy/policies regarding smoking in this apartment complex?
	☐ Yes (If "Yes", proceed with the interview)
	☐ No(If "No", go to Question 2a)

	ay we contact to obtain this information? [END SURVEY with respondent; if information ontact the appropriate person]
If you agree	e to be part of the study, we will:
	Come to your office on a day and time of your convenience between and,;
	Ask you to read a consent form about your role in the study. If you agree to participate, we will ask you to sign the form;
	Interview you for approximately 45 minutes about your policies and experience with smoke-free units and the costs involved in getting apartments ready for new tenants.
	Get copies of any written materials that your apartment complex gives tenants about smoke-free policies (such as lease agreements and statements about charges for damages or costs to renovate at turnover a unit that had smokers in it);
	Ask you to show us the outside and common areas of the complex to look at signs for designated smoking and non-smoking areas;
	Give a list of building and apartment numbers of occupied apartments so that we can randomly select residents to interview for the research study.
At the end	of the interview, we will give you a \$75.00 Visa gift card as a token of our appreciation.
	e apartment complex will not be identified by name in any of the information we use for this will not share the information you give us with senior management from your firm.
Would you	like to participate?
	Yes – Thanks for your help!
	No If no, ask the following:

answer?
□ Yes
☐ No – Can you recommend someone else who might help us?

Use only if appointment is scheduled:
I will send a letter confirming the appointment day and time. Please let me know the correct mailing address to use.
Appointment Date and Time:
Mailing address for confirmation
Email (optional)
Thank you for your time!