

Attachment C
Participant Screener

Form Approved

OMB No. 0920-0572

Exp. Date: 3/31/2018

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Screening Script and Questionnaire

Hello, my name is _____, and I'm with <Focus Pointe>, a research organization that is working with researchers at Battelle and the Centers for Disease Control and Prevention or CDC. We're working with CDC to gather feedback on the My Mobility brochure and to get ideas on how to distribute it. The tool is designed to help people ages 60 or older protect their ability to get places they need to go as they age. May I please speak to [NAME]?

- Yes. (REPEAT INTRO IF NECESSARY AND PROCEED)
- No Answer. (Leave a message as appropriate and follow-up later)

Hello [NAME] We're looking for people to participate in a 2 hour focus group in ___MONTH___ of YEAR. If you are eligible to participate, you may take part in a focus group discussion with 4-6 people.

If you are interested, I will ask you a few questions to determine if you are eligible for the project. Your participation is completely voluntary, and all the information you provide will be kept private and secure. If you do not wish to provide this information, you are free to stop these questions at any time.

1. What is your age?	_____	If not between 60-74 (terminate)
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<p>2. How would you describe your ability to get where you need to go on a typical day? Would you say it is very good, good, fair, or poor?</p>	<input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <i>(terminate)</i> <input type="checkbox"/> Poor <i>(terminate)</i>	
<p>3. Do you currently live in a retirement community, nursing home, assisted living residence or facility, a skilled nursing facility, or in some other assisted living situation?</p>	<input type="checkbox"/> Yes <i>(terminate)</i>	<input type="checkbox"/> No (continue)
<p>4. Do you ever use the Internet for health information?</p>	<input type="checkbox"/> Yes <i>(go to question #5)</i>	<input type="checkbox"/> No <i>(record as Non-internet, go to question #5)</i>
<p>5. (If “Yes” to #4): About how often do you use the Internet?</p>	<input type="checkbox"/> Several times a day <input type="checkbox"/> About once a day <input type="checkbox"/> 3-5 days a week <input type="checkbox"/> 1-2 days a week <input type="checkbox"/> Every few weeks <i>(record as Internet User)</i>	<input type="checkbox"/> Less often <input type="checkbox"/> Never <input type="checkbox"/> Don’t know/refused <i>(record as Non-internet)</i>

Based on your responses so far, I would like to invite you to participate in this project. This project will require a 2 hour appointment at one of Battelle’s research offices. During the appointment, you and 4-5 other people will participate in a group discussion. You will receive \$75 in cash for your participation.

<p>6. Are you willing to commit to a 2 hour appointment to participate in the project?</p>	<input type="checkbox"/> Yes (continue)	<input type="checkbox"/> No <i>(terminate)</i>
<p>7. The focus group will be recorded so that the researchers do not have to take detailed notes. Are you comfortable with the researchers recording the focus group?</p>	<input type="checkbox"/> Yes (continue)	<input type="checkbox"/> No <i>(terminate)</i>

<p>8. Most of the discussion will involve speaking and reading in English. Are you comfortable with speaking and reading in English?</p>	<input type="checkbox"/> Yes (continue)	<input type="checkbox"/> No (<i>terminate</i>)
<p><i>(Discuss available times, and schedule as appropriate)</i></p>	<p>_____ Date/Time Visit 1</p> <p>_____ Date/Time Visit 2</p> <p>_____ Date/Time Visit 3</p>	
<p><i>(Verify Personal/Contact information, update as needed)</i></p>	<p>_____ Name</p> <p>_____ Phone</p> <p><i>Confirm address (for mailing letter and advance copy of MPT)</i></p>	
<p><i>(Record the following items for tracking purposes)</i></p>	<p>_____ Date of Birth</p> <p><i>Now I'd like to ask you some general questions about your background.</i></p> <p>1. <i>Are you of Hispanic or Latino/Latina origin or descent?</i></p> <ul style="list-style-type: none"> • Yes • No <p>2. <i>Which of the following best describes your race? Select all that apply [READ LIST:]</i></p> <ul style="list-style-type: none"> • American Indian or Alaska 	

Native,

- *Asian,*
- *Black or African American,*
- *Native Hawaiian or Other Pacific Islander, or*
- *White*

3. *ASK IF NOT OBVIOUS: What sex were you assigned at birth, on your original birth certificate?*

Male

Female

4. *What is the highest grade or year of school that you completed?*

RECORD RESPONSE:

- *Less than High School Degree or GED*
- *High School Degree or GED only*
- *Some college (no degree)*
- *Completed associate or other technical 2-year degree*
- *Completed Bachelor's degree (but not graduate or professional degree)*
- *Completed graduate or professional degree (Master's degree or higher)*

5. *Do you wear eyeglasses, contacts lenses, or any kind of corrective eyewear?*

Yes

No

6. *Have you been diagnosed as colorblind or color deficient?*

Yes

No

