**Appendix A: Recruitment Plan and Screener**

National Institute of Nursing Research (NINR)

Pediatric Palliative Care Materials Review Interview

OMB Number: 0925-0653 Expiration Date: 04/30/2018

Public reporting burden for this collection of information is estimated to average 10 minutes per screening call, including time for reviewing instructions and 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: NIH, Project Clearance Branch, 6705 Rockledge Dr., MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0653). Do not return the completed form to this address.

RIVA Market Research, in partnership with BETAH Associates, Inc., and on behalf of the National Institute of Nursing Research, will conduct interviews to receive feedback on *Palliative Care: Conversations Matter®* campaign materials from families of children with serious illnesses. The following outlines the interview respondent recruitment process, including questions that will be used to determine and select participants.

*Interview Design*

* 12 individual interviews with parents, guardians, or other adult family members
  + 6 in-person (DC/MD/VA area) – respondents will be invited to an interview facility, but will also have option for home visit/interview if requested
  + 6 by phone (elsewhere in U.S.)
* 60-minute interviews
* Timing: 2015
* Honorarium: $40 per respondent
* Materials to be reviewed: collectively referred to as a “Family Information Kit”:
  + Fact sheet about pediatric palliative care
  + Resource sheet with ideas for finding support
  + Collection of family stories about palliative care experiences

*Eligibility criteria*

Participants must:

* Be a family member of child with serious illness (includes childhood cancers, genetic disorders, heart and lung conditions, neurologic disorders, and others)
  + There is no restriction around the age of the child, whether the child is living, or when the experience occurred for the family
* Live in the United States
* Be at least 18 years old
* Speak English as a first language
* Be able to read at or above an 8th-grade level (to review and provide feedback on materials)

*Respondent Identification and Selection*

* Based on the screener, a sample will be pulled from an existing database.
* Once a list of potential respondents is compiled, phone calls will be placed – mainly in the late afternoon – to ask the screener questions. If someone qualifies, they are invited to participate.
* The overall goal will be to contact a representative/balanced mix of respondents in terms of location (geographical, urban/rural), gender, and family role. However, no specific minimum or maximum numbers of demographic groups are set.

**SCREENER**

Good morning/afternoon, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. My name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and I am calling from RIVA Market Research on behalf of the National Institute of Nursing Research, part of the National Institutes of Health. We are looking for family members of children with serious illnesses to provide feedback on materials related to palliative care for families. Eligible participants will provide comments on the materials during a one-hour interview this September, and will receive a $40 Visa gift card for participating. This screener call will take 10 minutes or less.

1. <Do not read> Record gender: ❑ Male ❑ Female
2. Please tell me your age.

|  |  |
| --- | --- |
| Under 18 | Disqualify |
| ❑ 18-29 | Continue |
| ❑ 30-39 |
| ❑ 40-49 |
| ❑ 50-64 |
| ❑ 66 or over |

1. What is your first language?

|  |  |
| --- | --- |
| English | Continue |
| Spanish | Disqualify |
| French |
| Chinese |
| Other |

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

|  |  |
| --- | --- |
| Less than a high school diploma | Disqualify |
| ❑ High School | Continue |
| ❑ Associate degree/some college |
| ❑ Bachelor’s degree |
| ❑ Graduate school |

1. Are you or have you ever been the parent or family member of a child with a serious illness?

|  |  |
| --- | --- |
| Yes | Continue |
| No | Disqualify |

1. Please describe your relationship to the child.

|  |  |
| --- | --- |
| ❑ Parent/guardian | Continue |
| ❑ Sibling |
| ❑ Grandparent |
| ❑ Aunt/uncle |
| ❑ Other: \_\_\_\_\_\_\_\_\_ |

1. What type of illness or condition was diagnosed? *(Screener will be provided a list of illnesses for each category to help with classification.)*

|  |  |
| --- | --- |
| ❑ Cancer | Continue |
| ❑ Genetic disorder |
| ❑ Neurological disorder |
| ❑ Heart or lung condition |
| ❑ Cognitive or cerebral condition |
| ❑ Other |  |

1. How old was the child when you first learned of the illness?

|  |  |
| --- | --- |
| ❑ <1 year old | Continue |
| ❑ 1-4 years |
| ❑ 5-9 years |
| ❑ 10-14 years |
| ❑ 15-17 years |

1. Please tell me your zip code. *(Screener will use a recruitment area tool, like* [*http://www.eurekafacts.com/recruitment-area.html*](http://www.eurekafacts.com/recruitment-area.html)*, to determine eligibility for in-person interview)*
2. Are you available September <date> at <time> to participate in a <phone/in-person> interview at <location, if applicable>?

If selected to participate: I would like to send you a confirmation letter with more detail. Can you please provide a phone number and email address (or mailing address, if phone interview or no email address) where you prefer to be reached?

Thank you so much for your time today. We will be in touch with you soon.