# Attachment J2:

Telephone script for Annual Case Study vertification Phone Interviews

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Telephone script outline for Annual Case Study (ACS) verification employer recruitment/interviews for Workplace Wellness Grant Program Research

### **Background:**

The annual case study verification interviews will be limited to 30 minutes. The purpose is to 1) ask the employer what their motivation was for starting a wellness program and applying for the grant and 2) clarify an employer's answers to selected questions from the OHBWC WWGP annual case study (*Attachment K*) about the employer and their wellness program.

### **Topics**

What led you to apply for a grant and start a wellness program?

Verify responses to selected questions in Section I — selected questions may vary depending on an employer's responses (no more than 19 questions). *Topics include:* verifying descriptive questions about the organization as a whole and a variety of questions about their wellness program (e.g. aggregate data about employees who participated in the wellness program, descriptive information about program elements and evaluation methods, challenges in the past year, goals for the next year, and information about their vendor).

Verify responses to selected questions in Section II, the *OSH-Wellness Integration Module* — especially questions 2, 6, and 9 (no more than 11 questions). *Topics include*: verifying questions about wellness program activities funded by the grant; other wellness or OSH program activities offered by the employer to support their wellness program; OSH-wellness integration of program planning, evaluation, data used to monitor programs, communication materials, training sessions, program implementation decisions, personnel who are responsible for implementing wellness or OSH programs, and decision makers who influence program design or implementation; and perceived work factors that could be barriers that make it more difficult for employees to exercise or eat healthy food.

**Important note:** Before each phone call be prepared with which survey questions to ask about and put them in order of priority in case you run out of time.

Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing 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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx).

### Telephone script/outline

Recruitmen	ent script:	
[Call and as	ask to speak to the WWGP contact person at the comp	any]
National Ins Compensat	orning/afternoon] Mr./Ms My name is Institute for Occupational Safety and Health (NIOSH) Co sation Studies and I'm calling on behalf of Carol Morriso ogram manager with the Ohio Bureau of Workers' Comp	enter for Workers' n, the Workplace Wellness
to ask for yo	you must be busy so I won't take too much of your time to your assistance with a research study that we are conceau of Workers' Compensation. Do you have a few min	lucting in partnership with the
If no	no:	
wellr	sten, make sure you are talking to the primary contact p ellness program, and ask about a better time to call. If th en get the contact name and number for that person.	
If the addi ]	they are still not sure – ask if they have any questions o dditional information or document their reason for refusa	r if you can send them l]
If ye	yes: Great, thanks.	
	We are helping OBWC to evaluate the effectivene Workplace Wellness Grant Program. We were rev Annual Case Study you submitted in [year] and we responses to [#] questions and talk to you about wand start a wellness program.	iewing your responses to the would like to clarify your
	Do you have time to discuss this right now or shoutalk later?	ıld we schedule a time for us to
	If no: That's okay [schedule another time for the cathem know that someone from OBWC or NIOSH remail to ask about any confusing responses to the	nay follow-up with them via

# Interview outline/script:

Great, thank you so much for your time.

If yes: [conduct interview]

Let's start with the most important question, please tell me more about what led your organization to apply for a Workplace Wellness Grant in the first place?

[discuss, probe as needed, let them tell their story. Listen for perceived costs and benefits of starting a wellness program and organization factors that may have influenced their decision (e.g. change in management, a particular wellness champion, morale)]

We really appreciate the time and effort that you have already invested in the development of your wellness program and your willingness to share your story with us. The additional information we can gain from these interviews will help to strengthen the quality of our research efforts and hopefully help BWC to continue to offer these types of programs.

I do have a couple items to clarify about the Annual Case Study. We realize some of the question may have been confusing, unclear or not applicable for some employers, so we are trying to make sure that we understand the answers so that we can do a better job of interpreting our results.

In Section [I/II] of the annual case study question number [##] reads, [read question]. You answered [read their response]. We were wondering [ask clarification question].

[Repeat format the same format for the remaining questions. Be conversational. Stop when it's been almost 30 minutes or when you finish asking all your questions, whichever happens first.]

Thank you again for your time and cons	sideration [ <u>name]</u> . Please feel free to (	contact me or
Carol Morrison at OBWC if you have an	y questions. Again my name is	and
my phone number is	If you would like to contact Carol M	orrison her
phone number is 614-644-8225.		