**Attachment 4f. Synthetic Turf Field Facility Eligibility Screening Script**

Form Approved

OMB No. 0923-XXXX

Exp. Date xx/xx/20xx

**Caller:** May I speak to [NAME OF Facility Owner/Operator]? I am \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from the Agency for Toxic Substances and Disease Registry (ATSDR), and I am calling you to tell you about a federally funded study on synthetic turf fields. In response to concerns raised by the public about the safety of synthetic turf fields, the United States Environmental Protection Agency and the Agency for Toxic Substances and Disease Registry are working together to study human health questions associated with using synthetic turf fields and playgrounds. Are you interested in hearing more about this study?

*Facility Owner/Operator is not interested in the project:*

**Facility Owner/Operator:** No, I am not interested.

**Caller:** Ok, thank you for your time and have a good day.

END CALL.

*Facility Owner/Operator is interested in the project:*

**Facility Owner/Operator:** Yes, please tell me more.

**Caller:** The EPA and ATSDR are initiating a series of activities to look at tire crumb rubber used in synthetic turf fields. One activity aims at collecting samples from synthetic turf fields and analyzing the material for different chemicals and bacteria. For the this activity, EPA and ATSDR would like to recruit forty facilities with synthetic turf fields containing tire crumb infill that has been present on the field for at least 2 years. As a synthetic turf facility, are you interested in participating in a short 5 minute survey to find out if you are eligible to participate in the project?

*Facility Owner/Operator is not interested in participating:*

**Facility Owner/Operator:** No, I am not interested at this time.

**Caller:** Ok, can you please briefly tell me why you are not interested in participating?

**Facility Owner/Operator: *If willing, insert text here:***

**Caller: Thank you for your time and have a good day.**

*If facility owner/operator is not willing to give a reason:*

**Caller:** OK, thank you for your time and have a good day.

END CALL.

*Facility owner/operator is interested in the project:*

**Facility owner/operator:** Yes, I would like to learn more.

**Caller:** To find out if you are eligible I will read the questions to you over the phone. If you are ready I’m going to read you a few questions.

ATSDR estimates the average public reporting burden for this collection of information as 5 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0923-xxxx).

1. Do you currently own a facility with synthetic turf fields? **⬜**

1. Do you currently operate a facility with synthetic turf fields? ⬜

*If both #1 and #2 are no respondent is ineligible.*

**Caller**: You did not answer “Yes” to either question so you are not eligible to participate in this project. I am sorry. Thank you for your time.

*END CALL.*

*If #1 and/or #2 are yes:*

1. Would you be willing to be enrolled in this new study about facilities like yours that use and maintain of synthetic turf fields with crumb rubber infill? **⬜**

*If no, respondent is a refusal.*

**Caller:** Ok, thank you for your time and have a good day.

*END CALL.*

*If #3 is yes:*

In order to help us determine if your facility is eligible, we have some additional questions specific to your facility:

1. Are there outdoor synthetic turf fields with crumb rubber infill at your facility?............................ **⬜**

*If no, skip to question #8.*

*If yes:*

1. How many outdoor synthetic turf fields are present at your facilities?..................................\_\_\_\_\_\_\_
2. What was the installation date(s)?………………………………………………………..\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What was the date of the most recent tire crumb replenishment?.........................\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Are there indoor synthetic turf fields with crumb rubber infill at your facility?............................... **⬜**

*If no, skip to eligibility decision following question #11.*

*If yes:*

1. How many indoor synthetic turf fields are present at your facilities?....................................\_\_\_\_\_\_\_
2. What was the installation date(s)?………………………………………………………\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What was the date of the most recent tire crumb replenishment?...........................­­­\_\_\_\_\_\_\_\_\_\_\_\_\_
4. In addition to a short survey, would you be willing to allow EPA to collect samples of crumb rubber infill from a synthetic turf field at your facility? **⬜**

*Facility Owner/Operator is willing to participate:*

**Facility Owner/Operator:** Yes, I will allow samples to be collected.

**Caller:** Thank you for your willingness to participate. To participate, we will ask you to sign an agreement form allowing us to collect samples from your facility. We will need to collect tire crumb samples from multiple locations on the field to collect about six pounds. Then, these samples will be tested by EPA and ATSDR for a wide range of chemicals including metals, volatile organic compounds, and semi-volatile organic compounds. They will also be tested for emissions and bioaccessibility, particle size, as well as assessed for microbes like bacteria. We will also ask synthetic field owners or managers to complete a questionnaire to provide us information about these fields like how they are installed, maintained, and used.

1. Are you the correct person to sign the agreement?

*If yes, skip to question #15.*

*If no:*

1. Please provide the name and contact information for the correct contact person:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your willingness to participate. We will contact \_\_\_\_\_\_\_\_\_\_ to complete the necessary forms and schedule a collection appointment. *End Call.*

1. Would you like to schedule an appointment for us to come and collect the samples?

*Facility owner/operator is not interested in scheduling an appointment immediately:*

**Facility Owner/Operator:** No, I do not have time at the moment.

**Caller:** OK, I will call at a better time to schedule an appointment. Thank you for your time today and please feel free to contact me at XXX-XXX-XXXX with any questions you have about the project.

*END CALL.*

*Facility owner/operator is interested in scheduling an appointment immediately:*

**Facility owner/operator:** Yes, I am interested in scheduling an appointment now.

**Caller:** OK, we are able to come and collect on XX at XX:XX or XX at XX:XX. Do either of these times work for you?

**Facility owner/operator:** Yes, you can collect the samples on XX at XX:XX.

**Caller:** I have you scheduled for -----------------------------------. Thank you for your time today and please feel free to contact me at XXX-XXX-XXXX with any questions you have about the project.

*END CALL.*

**Facility owner/operator:** No, I am not available during those times.

**Caller:** OK, I will call you at a later date to schedule the appointment. Thank for your time today and please feel free to contact me at XXX-XXX-XXXX with any questions you have about the project.

*END CALL.*