

## INITIAL CONTACT WITH CLINIC-LEVEL RESPONDENT

Hello, my name is [YOUR NAME]. I'm calling from 2M Research for the USDA Food and Nutrition Service to follow up on the request to participate in the WIC Child Retention Survey that was sent to [CLINIC-LEVEL RESPONDENT'S NAME]. Would that be you?

(IF SPEAKING TO THE CLINIC-LEVEL RESPONDENT ON INITIAL CONTACT, GO TO B1.)

(IF SPEAKING TO SOMEONE ELSE, SAY:) Is there a direct line to reach him/her, or could you please transfer me to [CLINIC-LEVEL RESPONDENT'S NAME]?

(IF YES TO DIRECT LINE, RECORD NUMBER IN SPACE BELOW AND ENTER THIS NUMBER IN THE MESSAGE FIELD AT THE END OF THE CALL)

Phone: \_\_\_\_\_

(IF THERE IS NO DIRECT LINE/CANNOT BE TRANSFERRED, THEN ASK TO LEAVE A MESSAGE WITH PERSON WHO ANSWERED PHONE AND GO TO A.1)

### A. CLINIC-LEVEL RESPONDENT NOT AVAILABLE

(IF SPEAKING TO A PERSON WHO IS NOT THE CLINIC-LEVEL RESPONDENT): We sent a request to [CLINIC-LEVEL RESPONDENT'S NAME] to participate in the WIC Child Retention Survey.

Is he/she available?

YES (GO TO B3a. IF TRANSFERRED)

NO (GO TO A.1)

NO, does not know person. (END CALL. "Thank you for your time, I will reach out to the local agency point of contact for clarification." CALL THE LA POC LISTED ON RECORD FOR CLARIFICATION)

#### A1. LEAVE A MESSAGE

Would you please leave a message for [CLINIC-LEVEL RESPONDENT'S NAME] mentioning that [YOUR NAME] called from 2M Research to follow up on the WIC Child Retention Survey? When is a good time to call back? If [CLINIC-LEVEL RESPONDENT'S NAME] prefers, she/he can reach me toll-free at **1-877-440-0050** from **9:00 a.m. to 4:00 p.m. Eastern Time, Monday through Friday**, or by email at (SPELL OUT THE EMAIL ADDRESS) [usdawicretention@2mresearch.com](mailto:usdawicretention@2mresearch.com). If you call outside of these hours, please leave a message, and we will return your call the following business day. (END OF CALL)

Callback Date/Time:

If person on the phone transfers you to voicemail: (GO TO D. VOICEMAIL SCRIPT)

## B. SCRIPT FOR WHEN CLINIC-LEVEL RESPONDENT IS ON THE PHONE:

### B1. If Speaking to CLINIC-LEVEL RESPONDENT on Initial Contact

We recently sent a request inviting you to participate in the USDA Food and Nutrition Service WIC Child Retention Survey. We sent this invitation to participate in the survey by email. [SPECIFY EMAIL]. (GO TO B3. STUDY INTRODUCTION)

Do you need us to resend the email with the survey link?

YES

The email address we have for you is [EMAIL ADDRESS]. Is that correct? (UPDATE IF NECESSARY AND CONFIRM THAT THE SURVEY LINK WILL BE SENT RIGHT AWAY THEN GO TO STUDY INTRODUCTION FOR NEW CONTACT B3a.)

NO (GO TO B3a.)

### B2. If Transferred

Hello, my name is [YOUR NAME], and I am calling from 2M Research. We recently sent an email request inviting you to complete the WIC Child Retention Survey for the USDA Food and Nutrition Service. (GO TO B3. STUDY INTRODUCTION)

### B3. Study Introduction

2M and its subcontractor, Mathematica, are carrying out the WIC Child Retention Survey for the USDA Food and Nutrition Service. We noticed that you haven't responded to our request to complete the survey, sent to you by email. [SPECIFY EMAIL]. (GO TO B4)

### B3a. Study Introduction for New Contact

2M and its subcontractor, Mathematica, are carrying out the WIC Child Retention Survey for the USDA Food and Nutrition Service. Your WIC local agency has nominated you as a clinic staff member who has direct experience with WIC participants in caseload management, certification, and/or follow-up with appointment no-shows. This study seeks to examine why child participants leave WIC and to identify local policies and practices to improve child retention in WIC. (GO TO B5a)

### B4. Verify Contact Information

The email address we have for you is [EMAIL ADDRESS]. Is that correct? (UPDATE IF NECESSARY AND CONFIRM THAT THE SURVEY LINK WILL BE SENT RIGHT AWAY, IF THEY NEED LINK RESENT)

(GO TO B5 IF INITIAL CONTACT.) (GO TO B5a IF NEW CONTACT)

### B5. Respond to Questions or Concerns

(1) Do you have any questions about the study?

YES (ANSWER QUESTIONS USING FAQs, THEN GO TO QUESTION 2; IF THE CLINIC-LEVEL RESPONDENT HAS A QUESTION TO WHICH YOU DO NOT KNOW THE ANSWER, ASK IF YOU MAY HAVE YOUR SUPERVISOR CALL THEM BACK; THEN GO TO QUESTION 2)

**NO** (GO TO QUESTION 2)

(2) Have you been able to access the survey through the link in your email?

**YES** Great! (GO TO QUESTION 3)

**NO** Okay. Sorry to hear that. (GO TO QUESTION 4)

**NO** Okay, we can resend the email with the link, and you should receive it shortly (RESPONDENT NEEDS LINK RESENT. GO TO B6.)

(3) Have you been able to start the survey?

**YES** Great! Please remember to complete the survey by [DATE]. (GO TO B5a.)

**NO** Okay. Sorry to hear that. (GO TO QUESTION 4)

(4) Did you have trouble with the link to the survey?

**YES** We can help with that! Please open the email that we sent, and I will walk you through the process. (STAFF MEMBER WILL NEED TO GUIDE CLINIC-LEVEL RESPONDENT AND MAKE SURE THEY CLICK THE RIGHT LINK). If you scroll down in the window that pops up from clicking the link, you should see an option to BEGIN the survey. Click on the link and continue with the survey. (GO TO C1)

**NO** Okay. Please remember to complete the survey by [DATE]. (GO TO B5a.)

### B5a. Respond to Questions or Concerns (FOR NEW CONTACT)

(1) Do you have any questions about the study?

**YES** (ANSWER QUESTIONS USING FAQs; IF THE CLINIC-LEVEL RESPONDENT HAS A QUESTION TO WHICH YOU DO NOT KNOW THE ANSWER, ASK IF YOU MAY HAVE YOUR SUPERVISOR CALL THEM OR EMAIL THEM BACK; THEN GO TO C1. REMINDER AND THANK YOU)

**NO** Okay. (GO TO C1. REMINDER AND THANK YOU)

### B6. Resend Link

If you don't have any other questions, would you like for me to resend the link to the survey?

**EMAIL** Great! I'll get that email to you shortly. (GO TO C1. REMINDER AND THANK YOU)

**NO** Okay. (GO TO C1. REMINDER AND THANK YOU)

### C1. Reminder and Thank You

We kindly request you to complete the survey by [DATE]. If you have any questions or concerns about the study, please contact the Study Team at 2M Research by email at [usdawicretention@2mresearch.com](mailto:usdawicretention@2mresearch.com) or by phone at 1-877-440-0050 (toll-free) between the hours of 9:00 a.m. and 4:00 p.m. Eastern Time Monday through Friday. If you call outside of these hours, please leave a message, and we will return your call the following business day. Thank you for your time. (END OF CALL)

## D. VOICEMAIL SCRIPT

Hello, my name is [NAME], and I'm calling from 2M Research for the USDA Food and Nutrition Service to follow up on the WIC Child Retention Survey. We recently emailed you a link to this survey and noticed that you have not yet completed it. Your opinion is important to us help improve child retention in WIC. If you need us to resend the survey link by email, or if you have any questions or concerns, please contact the Study Team at 2M Research by email at [usdawicretention@2mresearch.com](mailto:usdawicretention@2mresearch.com) or by phone at 1-877-440-0050 (toll-free) between the hours of 9:00 a.m. and 4:00 p.m. Eastern Time Monday through Friday. Please complete this survey by [DATE]. Thank you. (END OF CALL)

This information is being collected to assist the Food and Nutrition Service in understanding why children ages 1 to 4 years leave the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). This is a voluntary collection and FNS will use the information to better understand Local Agency strategies related to improving child retention in the WIC Program. This collection does not request any personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0613. The time required to complete this information collection is estimated to average 0.16 hours 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, Room 555, Alexandria, VA 22314 ATTN: PRA (0584-0613). Do not return the completed form to this address.