

FINAL - DHQP and NCEZID cleared.

ANTIBIOTIC USE CAMPAIGN - RECRUITMENT SCREENER CONSUMERS—CAREGIVERS OF NURSING HOME ADULT RESIDENTS

Hello. My name is _____ and I work for [recruiting firm]. We are working with ICF, a consulting firm in Atlanta, Georgia, and the Centers for Disease Control and Prevention (CDC) to conduct in-person focus groups to gather feedback on specific, health-related CDC educational materials. The focus groups will include four to seven other people and will last about 75 minutes.

Do you think that you might be interested in participating in this type of discussion?

- Yes
- No (Thank person for their time and end the conversation)

May I ask you a few questions in order to determine whether you are a good fit to participate in the focus group?

- Yes
- No (Thank person for their time and end the conversation)

NOTE TO RECRUITER: Please terminate individuals as soon as they provide a response that makes them ineligible for participation. Please use the **termination script** below:

“We appreciate your willingness to answer each of the questions. Unfortunately, you do not meet all of the required criteria to participate in the focus group. Thank you for your time.”

For those who are eligible for participation, move on to the next question.

Record and keep all screened data.

1. What is your age? _____ **[Recruiter to document actual age and then categorize]**
 - <26 years old (Thank person for their time, read termination script, and end the conversation)
 - 26-64
 - 65+ (Thank person for their time, read termination script, and end the conversation)

2. Do you live in TBD city?
 - Yes
 - No (Thank person for their time, read termination script, and end the conversation)

3. Do you work in the healthcare field as a healthcare provider, paramedical professional, or health educator?
- Yes (Thank person for their time, read termination script, and end the conversation)
 - No
4. Are you caring for and/or making healthcare decisions for a family member in a nursing home?
- Yes
 - No (Thank person for their time, read termination script, and end the conversation)
5. This discussion will involve speaking and reading in English. Are you comfortable speaking and reading in English?
- Yes
 - No (Thank person for their time, read termination script, and end the conversation)

NOTE TO RECRUITER:

Please check final eligibility determination (check all that apply to confirm)

Caregiver of Adult Nursing Home Resident

- 26+ years of age
- In charge of medical care decisions for a family member in a long-term care facility (e.g. nursing home)
- Does not work in a healthcare facility as a healthcare provider, paramedical professional, or health educator
- Comfortable speaking and reading in English

If the individual is not eligible based on any of the above, go to termination script.

For those who are eligible for participation, move on to the next question.

6. Thank you for answering those questions. You are eligible to participate in the discussion. We will provide a \$XX token of appreciation for participating in this discussion. Are you still interested in participating?
- Yes
 - No (Thank person for their time and end the conversation.)

I'm glad that you are willing to participate! I have just a couple of additional questions and then will need to find the best time to schedule the discussion.

NOTE TO RECRUITER: Questions 7-12 do not affect eligibility.

7. What is your gender?

- Male
- Female
- Prefer not to answer

8. Would you describe yourself as Hispanic or Latino?

- Yes
- No
- Prefer not to answer

9. How would you describe your racial background? (Select all that apply)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White/Caucasian
- Other: _____
- Prefer not to answer

10. What is your highest education level completed? (Please select only one)

- Less than high school graduate/some high school
- High school graduate (or equivalent)
- Associate or technical degree
- Four-year college degree
- Master's degree
- Professional or doctoral degree (MD, JD, PhD, etc.)

11. How confident are you filling out medical forms by yourself?

- Extremely
- Quite a bit
- Somewhat
- A little bit
- Not at all

12. Ok, let's check your availability for the focus group discussions. Are you available at any of the following dates and times? The discussion will take approximately 75 minutes.

*Actual dates and timeslots TBD – dependent on CDC/ICF/moderator availability.

[If no times work] Record alternate times below. Otherwise, thank person for their time, and end the conversation.

Date: _____ Time: ___: ___ am/pm

Date: _____ Time: ___: ___ am/pm

Date: _____ Time: ___: ___ am/pm

[If at least one time works for an in-person focus group] Thank you. We will send you an invitation with the address and instructions to arrive at the focus group facility at least 15 minutes before your scheduled time. Now, please confirm the following contact information:

Name	
Mailing Address	

Home Telephone	
Cell Phone	
Email	

We will send you a confirmation notification via email, mail, and/or mobile device. The day before the focus group, we will call to remind you about this focus group and will send a reminder via text message. After the focus group is over, we will send your token of appreciation to the mailing address you provided.

Thank you for your time. Please contact [Recruiter] at [Phone Number] if you have questions or if your plans change and you are no longer able to participate in the discussion. Otherwise, we'll look forward to seeing you on [Month/Day/Year] at [Time].