**Attachment A. Study Population**

Based on previous formative research related to the *Get Ahead of Sepsis* (GAOS) educational effort and CDC subject matter expert guidance, CDC has developed new or revised educational effort materials and is planning to develop additional educational effort materials for three new healthcare professional (HCP) audiences described in the table below.

| HCP Audience | The “Why”  | Criteria for eligibility |
| --- | --- | --- |
| **Emergency medical services (EMS) personnel** | Sepsis signs and symptoms start outside the hospital in 80% of cases. EMS personnel are uniquely positioned to be the first healthcare professionals to encounter patients with possible sepsis.  | * Certified as an Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), or paramedic
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| **Long-term care (LTC) medical technicians and sitters** | LTC medical technicians and sitters are often the medical personnel that have the most frequent contact and interaction with older adults who are at an increased risk for sepsis. As a result, they are uniquely positioned to help residents/patients prevent infections that can lead to sepsis and to alert other HCPs who can initiate sepsis treatment when sepsis signs and symptoms are first detected. | * Works at a long-term care facility (e.g., nursing home, LTC acute care center, adult day care center, dementia facility)
* Currently employed as an HCP assisting residents/patients with one or more of the following types of care: bathing, dressing, toileting, walking, transferring in and out of bed, assisting with meals, obtaining vital signs, monitoring behaviors and habits, and/or assisting nurses in distributing medication(s)
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| **Long-term care (LTC) nurses** | LTC nurses provide advanced care for older adults who are at risk for sepsis and are frequently involved in patient education. As a result, they are uniquely positioned to help residents/patients prevent infections that can lead to sepsis and to alert other HCPs who can initiate sepsis treatment (or initiate it themselves) when sepsis signs and symptoms are first detected. | * Licensed Registered Nurse (RN), Licensed Practical Nurse (LPN), or Licensed Vocational Nurse (LVN)
* Works at a long-term care facility (e.g., nursing home, LTC acute care center, adult day care center, dementia facility)
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The *Get Ahead of Sepsis* educational effort targets HCPs and consumers in the following states: Illinois, Louisiana, Mississippi, New Jersey, New York, Ohio, Pennsylvania, Tennessee, and West Virginia. The proposed materials testing research will be conducted with the three above described target audiences recruited from these nine target states.

This proposed research is being done in parallel with similar materials testing research with corresponding consumer audiences for the *Get Ahead of Sepsis* educational effort (OMB package under review). The study population for the work proposed here was selected to align with the geographic sampling frame for the consumer research.

**Screening and recruitment**. CDC, and their contractor ICF, will partner with a professional recruitment firm to contact the potential participants by phone, and with their permission, use the screener to determine eligibility, interest, and availability for each interview. The recruitment firm will recruit HCPs on a rolling basis for up to nine interviews per audience segment.​ After completing the screener and confirming the individual agrees to participate, the recruitment firm will send a confirmation letter to the email address provided by the participant. The day before the interview, the recruitment firm will contact the participant via phone call and/or text to remind them about the interview. The recruitment firm will also send the participant the informed consent form to review, sign, and return prior to the interview; provide the web conferencing platform for the online interview; manage the recordings; and manage the distribution of participant incentives. Lastly, the firm will update ICF and the CDC on the number and demographics of individuals recruited using unique identifiers to protect the confidentiality of potential participants. This is to guide decision-making related to future recruiting in order to ensure a mix of demographics (age, gender, race/ethnicity, etc.) across all participants.​