Appendix C1. Call with State Agency Director and

OMB Control No: 0584-XXX Expiration Date: XX/XX/XXXX



Script for direct call to SA:

Hello, May I speak with [STATE AGENCY DIRECTOR]?

Hello. This is [NAME] calling from Westat. We recently sent you an email about the WIC Nutrition Assessment and Tailoring Study (NATS), and asked that you reply with possible dates and times for a telephone call to discuss the study and what we will need from you. At this time, we have not yet scheduled this telephone call.

Do you have time now to discuss the study?
 Yes (GO TO INTRODUCTIONS FOR SA CALL)

	(
•	No → When is a convenient time to have this discussion?
	DATE: TIME
	Thank you. We will call you back then.
	 o If SA Director declines to participate, document reasons for refusal:

Script for scheduled conference call to SA:

Hello.

I. Introductions

This is [Name] at Westat. I'm the [TITLE] for this study. [If conference call] My colleague [Name] is also on the line. She is the Study's [TITLE]. Who do we have on the phone call from [STATE]?

[STATE MAKES INTRODUCTIONS.]

Okay. We want to use this phone call to introduce you to our study. We'll start by providing you with an overview of the study which will describe the study objectives and the overall study design.

II. Overview of study

This study will document how nutrition risk assessments are conducted and examine how the information gathered during the assessment is used to tailor Program benefits, including the provision of supplemental foods, nutrition education, breastfeeding promotion and support, and referrals. The study will also identify promising practices in the nutrition assessment process that are associated with participant and staff satisfaction, improved efficiency, and reduced staff burden.

We have a tiered study design that includes the use of existing information in State and local policy documents, analysis of MIS data, a survey of WIC Local Agencies, as well as direct observation of nutrition assessments and interviews with site-level staff and WIC participants. We have selected 10 SAs to participate in the study, which includes your State. The States were selected based partly on their characteristics (such as region and caseload), which we used to assign States to selection strata, and partly on random chance because we randomly selected SAs from each strata.

From each of the ten SAs, we'll be collecting a mix of primary and secondary data. We will conduct a web-based survey of all Local Agencies (LAs) in the SA and select 3 LAs for further data collection. In these LAs, we'll select a WIC clinic for a week-long site visit during which we will interview the Site Director and up to 5 staff who conduct nutrition assessments. At each clinic, we will also recruit 17 participants to observe their visits and take part in a 30-minute interview after the visit is complete. That's our primary data collection. We will also collect MIS data from State Agencies and documents related to the process of providing nutrition services.

So that's a brief overview of our study. I know it is a lot to take in. Do you have any questions given what you just heard?

[If they have questions, discuss questions and answers.]

If not, then let's go over what will be needed from participating State Agencies.

III. What is needed from participating State Agencies

There are a number of things we'll need participating State agencies to do.

a. We will need you to work with Westat to coordinate submission to the state IRB, if required. This study has received IRB approval from the Westat IRB. We can send you that approval letter.

- b. We will need you to provide a list of contact information for all Local Agency Directors in the state that includes the names, email addresses, and telephone numbers.
- c. We will need you to notify all Local Agencies in the state about the study and inform them that the study team will be sending them an invitation via email to participate in a web survey. A draft email will be provided for this communication.
- d. We will need you to send an email to each LA selected for site visits within your SA encouraging them to participate in the study. (There will be between 1 and 4 LAs selected for site visits in each SA.) A draft email will be provided for this communication.
- e. We will need you to provide documents including the State WIC policy and procedure manual, the nutrition risk criteria list, WIC state training curricula, the state WIC Breastfeeding Promotion and Support Plan, the state WIC MIS user's manual, and any additional documents and materials that the SA disseminates to LAs related to conducting the nutrition assessment and tailoring processes.
- f. We will need you to prepare and submit statewide MIS data files based on data requests prepared by us. Data requests will be made for two points in time the first request at the time of recruitment asking for data for the previous 12-month period and the second request six months later requesting data for the next 6 months.

Do you have any questions about these items?

[If they have questions, discuss questions and answers.]

IV. Study data collection from Local Agencies and WIC Clinics

We will also be asking Local Agencies and WIC Clinics to provide information as we briefly mentioned in our overview of the study. For the Local Agencies, we will be asking them for the following:

- a. All Local Agencies in the 10 selected States will be asked to complete the web-based Local Agency Survey.
- b. 30 Local Agencies selected for site visits from the 10 selected States will be asked to:

- i. Provide general information about all WIC Clinics in their LA
- Provide any local procedure documents, protocols and tools used in nutrition risk assessment, high risk determination and benefit tailoring
- iii. Send an email (drafted by the study team) to the selected clinic encouraging participation in the study
- c. 30 selected WIC clinics (1 per selected Local Agency) will be asked to participate in site visits, which include:
 - i. Observations of clinic environment and of the nutrition risk assessment and benefit tailoring for 17 WIC participants
 - ii. An in-depth interview with the clinic's Site Director
 - iii. In-depth interviews with up to 5 nutrition services staff
 - iv. Interviews with WIC participants who had a nutrition risk assessment observed

V. Questions

I know we've given you a lot of information. If you have any more questions, we're happy to answer them now.

[If they have questions, discuss questions and answers.]

If you think of questions later, you can always give us a call or email us and we'll be happy to discuss your questions with you.

VI. Next steps and Wrap-up

For next steps, we have to start with IRB approval. If you can find out what is needed in your State that will be very helpful. We will send you the study's Westat IRB approval letter once this call is finished. Once we know what is needed for IRB, we can move forward from there.

We appreciate your time and look forward to working with you on the WIC NATS study.

Thanks.

This information is being collected to assist the Food and Nutrition Service in obtaining a comprehensive and detailed description of the WIC nutrition risk assessment process and the ways in which participant benefits are tailored to address the assessment results. This is a voluntary collection and FNS will use the information to improve the delivery and tailoring of WIC services and increase satisfaction of both staff and participants. This collection does request 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-[xxxx]. The time required to complete this information collection is estimated to average 30 minutes

(0.50 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, 5th Floor, Alexandria, VA 22314 ATTN: PRA (0584-xxxx). Do not return the completed form to this address