

Attachment G- Interview Recruitment Email

Form Approved

OMB No: 0920-xxxx

Exp. Date: xx-xx-xxxx

Dear *[NAME]*,

I am writing from the Booz Allen Hamilton evaluation team. We are conducting an evaluation of the Overdose Data to Action (OD2A) program on behalf of the Centers for Disease Control and Prevention (CDC). As part of this information collection initiative, we are conducting telephone interviews with OD2A awardees to assess the implementation of OD2A program activities. In your jurisdiction, we will focus on the implementation of *[LIST ACTIVITY/ACTIVITIES]*.

Given your role in OD2A activities in *[JURISDICTION NAME]*, we are reaching out to request your participation in a telephone interview regarding the above listed activities. If you are unable to participate or feel another individual would be better suited for this interview you may request that person participate. Please provide this individual's name, email address, and phone number, so we can schedule an interview with him/her as soon as possible.

The interview will take approximately 60 minutes. Your participation in this interview is completely voluntary, however we hope that you will be willing to share your experiences with us. You may choose to skip questions or stop the interview at any time—that will not in any way impact the funding or your ability to receive technical assistance from CDC. We would also like to record the conversation to accurately document the questions and your responses. A request for permission to record the conversation will be emailed to you separately. Any information you provide during our conversation will be kept secure and no information or quotes will be publicly linked to you. After transcription and analysis of our conversation is complete, the recording will be deleted and no personally identifiable information will be retained. All data will be reported in aggregate form within all reports and potential publications.

Below we provide some potential times for scheduling an interview. Would any of the following be amenable? If not, please propose a few alternate times in Eastern and your local time zone.

[LIST DATES AND TIMES IN ET AND RESPECTIVE LOCAL TIME ZONE]

The information collected from this evaluation will be used by the CDC to:

- Provide crucial data highlighting the value of different programmatic components of OD2A (e.g., strategies and activities) in preventing drug overdose;
- Complete a valid program implementation evaluation of the OD2A program; and,
- Improve implementation of OD2A components.

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If you have additional questions about the interview, please do not hesitate to contact the Project Director, Dr. Stephen Tregear (Tregear_Stephen@bah.com), or the Project Manager, Hema Desai (Desai_Hema@bah.com).

Thank you so much, and we look forward to speaking with you.

Warm regards,

[SIGNATURE]

Public Reporting burden of this collection of information is estimated at 5 minutes 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. 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 Reports Clearance Officer, 1600 Clifton Road NW, MS D-74, Atlanta, GA 30333; Attn: PRA (0920-xxxx).