B10. Sponsor Follow-up Email with Request to Email Providers

OMB #: 0584-####

Expiration Date: XX-XX-XXXX

Send to: [SPONSOR]

Subject: Help contacting your provider(s) that have been selected for FCCH

Provider Experience Survey



Dear [Sponsor Contact Name]:

We need your help!

We are currently collecting survey data for the United States Department of Agriculture's (USDA's) Family Child Care Home (FCCH) Provider Experience Survey. We have heard back from some of your providers and are hoping that the others will also complete the survey soon. We understand how busy they are, so we have kept the survey brief (20 minutes). Providers will also receive a \$40 gift card.

Please help us by:

- ✓ Visiting the study website at www.FCCHSurvey.com to securely access the list of your providers who have not responded to the survey.
- ✓ Updating the providers' contact information, if needed.
- ✓ Letting us know if any of the providers are no longer under your sponsorship.
- ✓ Sending an email to the providers who have not responded to the survey even if they are not under your sponsorship at this time asking them to be on the lookout for a paper survey in the mail, and encouraging them to complete the survey. To save you time, we have included a template email with this information in both English and Spanish. Please edit the template as needed.

To review the list of providers:

 Go to <u>www.ProviderExperienceSurvey.com</u> or scan the QR code



o Enter your unique PIN [###]

Contact the study team if you are unable to access the list of your providers.

If you have any questions, please call [study phone] toll free, email [study email], or visit the study website at [link] using the passcode [passcode].

Thank you in advance for your help in this important study.

Sincerely,

[SIGNATURE]

Attachments:

B11a. Encouragement Email from Sponsors to Nonresponding Providers—English B11b. Encouragement Email from Sponsors to Nonresponding Providers—Spanish

This information is being collected to assist the Food and Nutrition Service in understanding the decrease in CACFP participation among family child care home providers. This is a voluntary collection and FNS will use the information to provide technical assistance and inform program improvements to support family child care home participation in CACFP. 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-[xxxx]. The time required to complete this information collection is estimated to average 0.5 hours (30 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. Send comments regarding this burden estimate or any other aspect of