C4. State Agency Recruitment Call Script



OMB Number: 0584-xxxx Expiration Date: xx/xx/20xx



Study of Nutrition and Activity in Child Care Settings II (SNACS-II) State Agency Recruitment Call Script

Introduction

Hi, my name is [NAME OF CALLER] and I am calling from [Mathematica/Westat] on behalf of USDA's second Study of Nutrition and Activity in Child Care Settings, or SNACS-II. We recently sent you an email with some information about the study and requested your assistance with selecting a sample of CACFP child care providers in your state. I am calling now to follow up on that request, and to answer any questions you may have about the study. Did you get our initial email? [If not, confirm respondent's email address and re-send the email. Arrange to call back at another time].

- Do you have about 15 minutes to talk with me now? [If not, arrange to call back at another time.]
- Do you have any questions about the study or the activities that any of the child care providers may be asked to
 participate in if selected to be in the study? [Answer questions as needed about the study and data collection
 activities.]

Confirm Receipt of Child Care Provider, Sponsor, and Program Templates

The email included details on the information being requested. An attached *Reference Guide for Sample Frame Data File* outlined data file requirements and required data elements for the requested lists of Child Care Providers and of Sponsor Organizations, as well as information on uploading the files securely to the study website. The email also included a *Data File Template* that you can use for creating the requested lists. We will use these lists to select a sample of providers and programs to participate in the study. Did you have a chance to review the information that we need?

Caller should review the list of information needed with the respondent, discuss any questions that they have about the information requested and review the secure file upload procedures.

- Ask if they have any questions about the data needed or the format. If the respondent does not plan to populate the templates, determine the file format. Request a readable format and a codebook or other documentation to assist with interpreting and processing the data.
- Ask when they think they will be able to send the data. Request it for as soon as possible.
- Ask who will handle the request and obtain this person's contact information if it is someone other than the respondent. Ask for an email introduction to this person.
- Let them know that we are available to provide technical assistance and answer any questions. Caller should provide their contact information if the respondent doesn't already have it.
- Ask that they return the completed templates to us securely by [INSERT INSTRUCTIONS].

Ask State Agency to Provide Outreach to Sponsors and Providers in Support of Study

After the sample of providers has been selected, it would be very helpful if you would be willing to reach out to the selected sponsors and independent child care centers to encourage their participation. If we provide a sample email and the list of recipients, would you be willing to email a note to the selected sponsors and child care providers?

[If respondent agrees, tell them that we will send them sample email messages when we have selected the provider sample. If someone other than the respondent will send these emails, obtain the person's contact information and ask for an email introduction.]

Next Steps

Thank respondent for their time and confirm that they (or one of their colleagues) have the instructions for the provider, sponsor, and program data request.

The Food and Nutrition Service (FNS) is collecting this information to understand the nutritional quality of CACFP meals and snacks, the cost to produce them, and dietary intakes and activity levels of CACFP participants. This is a voluntary collection and FNS will use the information to examine CACFP operations. The collection does request personally identifiable information under the Privacy Act of 1974. Responses will be kept private to the extent provided by law and FNS regulations. 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 0.2171 hours (13 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 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.