**Attachment B-2**

**CATI Confirmation and Prep Email/Letter Text**

**Email version**

Date

Name of Director

Name of facility

Email subject line: Direct Care Worker Pilot Study—Preparing for Telephone call

Dear <Name of director>,

We look forward to you completing the Direct Care Worker Pilot Study telephone call on [insert date] at [insert time] to sample two of your direct care workers.

**In preparation for the telephone call, you will need to prepare a list of current employee and contracted direct care workers as of midnight the night before your scheduled appointment.**

* If your facility is associated with another facility, only include direct care workers currently working or contracting at <Facility name, facility street address> on the list.
* If your facility is part of a facility or campus that offers multiple levels of care, only include direct care workers currently working or contracting in the [residential care/adult day services/nursing home] portion on the list.

From the list, we will talk you through some instructions to scientifically select two direct care workers at your facility. Once the two sampled direct care workers are identified, we will ask you for their contact information. We will be sending the two sampled direct care workers a questionnaire to complete by mail or web.

If you have any further questions, or need to reschedule the telephone call, please call (xxx) xxx-xxxx.

Again, I appreciate your time and effort. We will talk with you soon.

Sincerely,

Brian C. Moyer, PhD

Director, National Center for Health Statistics

**Letter version**

[NCHS Letterhead]

Date

Name of Director

Name of facility

Address

City, State, Zip

Dear <Name of director>,

We look forward to you completing the Direct Care Worker Pilot Study telephone call on [insert date] at [insert time] to sample two of your direct care workers.

**In preparation for the telephone call, you will need to prepare a list of current direct care workers as of midnight the night before your scheduled appointment.**

* If your facility is associated with another facility, only include direct care workers currently working at <Facility name, facility street address> on the list.
* If your facility is part of a facility or campus that offers multiple levels of care, only include direct care workers currently working in the [residential care/adult day services/nursing home] portion on the list.

From the list, we will talk you through some instructions to scientifically select two direct care workers at your facility. Once the two sampled direct care workers are identified, we will ask you for contact information for them. We will be sending the two sampled direct care workers a questionnaire to complete by mail or web.

If you have any questions, or need to reschedule the telephone call, please call (xxx) xxx-xxxx.

Again, I appreciate your time and effort. We will talk with you soon.

Sincerely,

Brian C. Moyer, PhD

Director, National Center for Health Statistics