Attachment D-1 Thank you/Reminder letter

[NCHS Letterhead]

Date

Name of DCW Address city, state, zip code

Dear [Name of DCW],

We have been trying to reach you to ask you to participate in a Direct Care Worker Pilot Study. If you already returned your completed questionnaire, thank you for your participation.

If you have not completed and returned your questionnaire, we hope you will consider participating. Your responses are very important in providing accurate information on direct care workers. Your information will be kept confidential. You do not have to answer any question you don't want to answer.

Please complete the web questionnaire over a safe and secure network by going to this URL address and typing in your unique User ID and password:

URL: User ID: Password:

Benefits to completing by web include getting only the questions that apply to you based on your responses—so it takes less time--and having the option to print a copy of your completed questionnaire for your records. However, if you prefer to use hardcopy, please complete the questionnaire you recently received and return it in the pre-addressed, postage-paid envelope provided. Completing the questionnaire takes 30 minutes on average.

If you are a direct care worker for more than one facility, please complete the questionnaire based on the facility listed on the front of the questionnaire; otherwise, we cannot use your data.

If you need technical support or have further questions about this pilot study, please call (855) 500-1435.

Thank you once again,

Brian C. Moyer, PhD Director, National Center for Health Statistics We have been trying to reach you to ask you to participate in the **Direct Care Worker Pilot Study**. To date, we have not yet received your completed questionnaire .

Please complete the web questionnaire over a safe and secure network by going to this URL address and typing in your unique User ID and password:

URL: User ID: Password:

Thank you for your participation

Brian C. Moyer, PhD Director, National Center for Health Statistics

If you need technical support or have further questions about this pilot study, please call (855) 500-1435.

If you are a direct care worker for more than one facility, please complete the questionnaire only for the specific facility listed on the front of the questionnaire; otherwise, we cannot use your data.