

Dimension	Sub-Dimension	Data Source	Level of data collection
Intervention Characteristics		Study Staff	Study level

Satisfaction	Participant self report	Participant level
Engagement	Study Staff	Study level

Sociodemographic	Age or DOB	EMR(preferred) or Participa Participant level
	Gender	EMR(preferred) or Participa Participant level
	Sex	EMR(preferred) or Participa Participant level

Race & Ethnicity- Long VI Participant self-report prefe Participant level

(or)

Race & Ethnicity- SHORT Participant self-report prefe Participant level

Household

EMR(preferred) or Participa Participant level

EMR(preferred) or Participa Participant level

EMR(preferred) or Participa Participant level

Food Insecurity

Participant self-report

Participant level

Financial Strain		Participant self-report	Participant level
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		Participant self-report	Participant level
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General Health Status	Single Question	Participant self-report	Participant level
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	EQ-5D-5L (Optional Enha	Participant self-report	Participant level
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		Participant self-report	Participant level
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		Participant self-report	Participant level
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		Participant self-report	Participant level
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		Participant self-report	Participant level
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Diet Quality	26-Item DSQ (Optional E 10-Item DSQ subset(Core)	Participant self-report	participant level
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10-Item_Q1

10-Item_Q2
10-Item_Q3
10-Item_Q4
10-Item_Q5
10-Item_Q6
10-Item_Q7
10-Item_Q9
10-Item_Q8
10-Item_Q10

24 Hour Recalls (Optional Enhancement)

participant level

DIETID (Optional Enhancement)

participant level

Number of Measures	Time of Data Collection	Variable Name
7	Baseline	Intervention_Q1 Intervention_Q2 Intervention_Q3 Intervention_Q4 Intervention_Q5 Intervention_Q6_1 Intervention_Q6_2 Intervention_Q6_3 Intervention_Q6_4 Intervention_Q6_5 Intervention_Q6_6 Intervention_Q6_7 Intervention_Q6_8 Intervention_Q6_9 Intervention_Q6_10 Intervention_Q7 Intervention_Q8
1	Post-Intervention	Net_Promoter_Score
3	Post-Intervention Post-Intervention Post-Intervention Post-Intervention Post-Intervention Post-Intervention Post-Intervention Post-Intervention	Produce_redemption Intervention_adherence Study_screen Study_contact Study_consent Study_started Study_discontinued Study_LFP Study_completed
8	Baseline Baseline	Age (or) DOB Gender
	Baseline	Sex

Baseline

RaceEth_Long_AIAN

RaceEth_Long_AIAN_detail

RaceEth_Long_ASIAN

RaceEth_Long_ASIAN_CHN

RaceEth_Long_ASIAN_IND

RaceEth_Long_ASIAN_PHL

RaceEth_Long_ASIAN_VNM

RaceEth_Long_ASIAN_KOR

RaceEth_Long_ASIAN_JPN

RaceEth_Long_ASIAN_detail

RaceEth_Long_BLACK

RaceEth_Long_BLACK_AA

RaceEth_Long_BLACK_JAM

RaceEth_Long_BLACK_HTI

RaceEth_Long_BLACK_NGA

RaceEth_Long_BLACK_ETH

RaceEth_Long_BLACK_SOM

RaceEth_Long_BLACK_detail

RaceEth_Long_HISP

RaceEth_Long_HISP_MEX

RaceEth_Long_HISP_PRI

RaceEth_Long_HISP_SLV

RaceEth_Long_HISP_CUB

RaceEth_Long_HISP_DOM

RaceEth_Long_HISP_GTM

RaceEth_Long_HISP_detail

RaceEth_Long_MENA

RaceEth_Long_MENA_LBN

RaceEth_Long_MENA_IRN

RaceEth_Long_MENA_EGY

RaceEth_Long_MENA_SYR

RaceEth_Long_MENA_IRQ

RaceEth_Long_MENA_ISR

RaceEth_Long_MENA_detail

RaceEth_Long_NHPI

RaceEth_Long_NHPI_NH

RaceEth_Long_NHPI_WSM

RaceEth_Long_NHPI_CHA

RaceEth_Long_NHPI_TON

RaceEth_Long_NHPI_FJI

RaceEth_Long_NHPI_MHL

RaceEth_Long_NHPI_detail

RaceEth_Long_White

RaceEth_Long_White_ENG

	RaceEth_Long_White_DEU
	RaceEth_Long_White_IRL
	RaceEth_Long_White_ITA
	RaceEth_Long_White_POL
	RaceEth_Long_White_SCO
	RaceEth_Long_White_detail
Baseline	
	RaceEth_Short_AIAN
	RaceEth_Short_ASIAN
	RaceEth_Short_BLACK
	RaceEth_Short_HISP
	RaceEth_Short_MENA
	RaceEth_Short_NHPI
	RaceEth_Short_White
Baseline	HouseholdSize
Baseline	HouseholdSize_under18
Baseline	InsuranceType

FSSM6_HH4

FSSM6_AD1

FSSM6_AD1a

FSSM6_AD2

FSSM6_AD3

1 Baseline, post-interven Fin_Strain

Baseline, post-interven Food_Assis

1 Baseline, post-interven Gen_Health

5 Baseline, post-interven EQ5D5L_Q1

EQ5D5L_Q2

EQ5D5L_Q3

EQ5D5L_Q4

EQ5D5L_Q5

26 Baseline, Post-Interver DSQ_010

10 DSQ_020

DSQ_030

DSQ_040

DSQ_050

DSQ_060

DSQ_070

DSQ_080

DSQ_090

DSQ_100

DSQ_110

DSQ_120

DSQ_130

DSQ_140

DSQ_150

DSQ_160

DSQ_170

DSQ_180

DSQ_190

DSQ_200

DSQ_210

DSQ_220

DSQ_230

DSQ_240

DSQ_250

DSQ_260

ASA24 Automated Self-Administrated 24

Assess diet quality with DIETID's digital, i

Label/Question

Study setting/locations, target population and eligibility (inclusion/exclusion)

Recruitment method, target number of participants

Study timeframe, duration and follow up period (if any)

Intervention methods (during active intervention and post-intervention if any) and randomized primary and secondary outcomes with main hypothesis

Details of Intervention (please address each area if applicable):

- o FIM type (such as MTM, MTG etc.)
- o Dose/intensity
- o Duration/frequency
- o Delivery or Pick Up
- o Food provided, including nutrition information
- o Training and education
- o Ancillary Services
- o Communication Details (frequency, type, mode)
- o Technical Assistance availability
- o Nutrition Education Components (access, type, frequency of availability, cost)

Projected study cost break-down (recruitment, food cost, delivery, education, measurement)

Mid-study protocol deviation/modification

How likely is it that you would recommend [insert intervention] to a friend or colleague?

Redemption Rate (for produce prescriptions, e.g., number of meals or prescriptions redeemed)

Adherence Rate (e.g., shared medical appointments, nutritional counseling, coaching etc.) for

Participant flow according to CONSORT reporting standard

- o Number Screened for eligibility
- o Number Contacted
- o Number that completed IRB consents and randomized into intervention
- o Number that received intervention (e.g., attended initial appointments)
- o Number that withdrew and discontinued intervention (no longer receiving intervention)
- o Number that did not withdraw but stopped engaging (lost-to-follow-up)
- o Number that had the completed main outcome measures of intervention

What is your age (at enrollment/consent)?

What is your Date of Birth (at enrollment/consent)?

How do you describe your gender?

What sex were you assigned at birth on your original birth certificate?

What is your race and/or ethnicity? Select all that apply and enter additional details in the space provided.
American Indian or Alaska Native

Asian- Provide details below.

Black or African American- Provide details below.

Hispanic or Latino- Provide details below.

Middle Eastern or North African- Provide details below.

Native Hawaiian or Pacific Islander- Provide details below.

White- Provide details below.

What is your race and/or ethnicity? Select all that apply.

Including yourself, how many people were living or staying in this house, apartment, or

How many of your household members are people under the age of 18?

Financial_Class (different EPIC instances may have different coding scheme)
depending on EPIC instances, group into 5-categories

The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more.

(I/we) couldn't afford to eat balanced meals.

In the last 30 days, since last (name of current month), did (you/you or other adults in your I

[IF YES ABOVE, ASK] In the last 30 days, how many days did this happen?

In the last 30 days, did you ever eat less than you felt you should because there wasn't enou

In the last 30 days, were you every hungry but didn't eat because there wasn't enough money?

How often does this describe you? I don't have money to pay my bills (including food, housing, utilities, etc.)

Have you received federal food assistance through either SNAP or WIC in the past 30 days?

Would you say that in general your health is excellent, very good, good, fair, or poor?

MOBILITY

SELF-CARE

USUAL ACTIVITIES (e.g. work, study, housework, family or leisure activities)

PAIN / DISCOMFORT

ANXIETY / DEPRESSION

During the past month, how often did you eat hot or cold cereals? Mark one

During the past month, what kind of cereal did you usually eat? Print cereal.

During the past month, how often did you have any milk (either to drink or on cereal)? Include

During the past month, how often did you drink regular soda or pop that contains sugar? Do

During the past month, how often did you drink 100% pure fruit juices such as orange, mango,

During the past month, how often did you drink coffee or tea that had sugar or honey added?

During the past month, how often did you drink sweetened fruit drinks, sports or energy drinks?

During the past month, how often did you eat fruit? Include fresh, frozen or canned fruit.

During the past month, how often did you eat a green leafy or lettuce salad, with or without dressing?

During the past month, how often did you eat any kind of fried potatoes, including French fries?

During the past month, how often did you eat any other kind of potatoes, such as baked, boiled or mashed?

During the past month, how often did you eat refried beans, baked beans, beans in soup, or other beans?

During the past month, not including what you just told me about (green salads, potatoes, coffee, etc.), how often did you eat pizza? Include frozen pizza, fast food pizza, and homemade pizza.

During the past month, how often did you have Mexican-type salsa made with tomatoes?

During the past month, how often did you have tomato sauces such as with spaghetti or no sauce?

During the past month, how often did you eat red meat, such as beef, pork, ham, or sausage?

During the past month, how often did you eat any processed meat, such as bacon, lunch meat, or hot dogs?

During the past month, how often did you eat any kind of cheese? Include cheese as a snack or in a sandwich.

During the past month, how often did you eat whole grain bread including toast, rolls and in sandwiches?

During the past month, how often did you eat brown rice or other cooked whole grains, such as quinoa?

During the past month, how often did you eat chocolate or any other types of candy? Do not include gum.

During the past month, how often did you eat red meat, such as beef, pork, ham, or sausage?

During the past month, how often did you eat cookies, cake, pie or brownies? Do not include ice cream.

During the past month, how often did you eat ice cream or other frozen desserts? Do not include frozen yogurt.

During the past month, how often did you eat popcorn?

-Hour Dietary Assessment Tool

Image-based, 1-minute, validated, visual dietary assessment.

Format	Range	Multiple Entries Allowed?
text	N/A	N/A
text	N/A	N/A
text	N/A	N/A
text	N/A	N/A
text	N/A	N/A
text	N/A	N/A

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text	N/A	N/A
text	N/A	N/A
numeric	1-10	No
percentage	0-100%	
percentage	0-100%	

n
)
(e intervention)
)
on

1. Age: _____	1-110	No
2. Prefer not to answer		
date	mmddyyyy	No
1. Male	1-7	No
2. Female		
3. Female to Male (FTM), Transgender Male, Trans Man		
4. Male to Female (MTF), Transgender Female, Trans Woman		
5. Genderqueer, neither exclusively male nor female		
6. Additional gender category or other.		
7. Did not disclose		
1. Male	1-3	No
2. Female		
3. Unknown		

pages below.

Yes

Y/N

Enter, for example, Navajo Nation, Blackfeet Tribe or text

Y/N

1. Chinese Y/N

2. Asian Indian Y/N

3. Filipino Y/N

4. Vietnamese Y/N

5. Korean Y/N

6. Japanese Y/N

Enter, for example, Pakistani, Hmong, Afghan, etc. text

Y/N

1. African American Y/N

2. Jamaican Y/N

3. Haitian Y/N

4. Nigerian Y/N

5. Ethiopian Y/N

6. Somali Y/N

Enter, for example, Trinidaian and Tobagonian, text

Y/N

1. Mexican Y/N

2. Puerto Rican Y/N

3. Salvadoran Y/N

4. Cuban Y/N

5. Dominican Y/N

6. Guatemalan Y/N

Enter, for example, Colombian, Honduran, text

Y/N

1. Lebanese Y/N

2. Iranian Y/N

3. Egyptian Y/N

4. Syrian Y/N

5. Iraqi Y/N

6. Israeli Y/N

Enter, for example, Moroccan, Yemeni, Kurdish, text

Y/N

1. Native Hawaiian Y/N

2. Samoan Y/N

3. Chamorro Y/N

4. Tongan Y/N

5. Fijian Y/N

6. Marshallese Y/N

Enter, for example, Chuukese, Palauan, Tahitian, text

Y/N

1. English Y/N

2. German	Y/N	
3. Irish	Y/N	
4. Italian	Y/N	
5. Polish	Y/N	
6. Scottish	Y/N	
<i>Enter, for example, Swedish, Norwegian, etc.</i>	text	Yes
1. American Indian or Alaska Native.	Y/N	
2. Asian.	Y/N	
3. Black or African American.	Y/N	
4. Hispanic or Latino.	Y/N	
5. Middle Eastern or North African.	Y/N	
6. Native Hawaiian or Pacific Islander.	Y/N	
7. White.	Y/N	
numeric (integer)	1-20	No
numeric (integer)	1-20	No
1. Commercial (HMO, PPO, Blueshield etc.)	1-5	Yes
2. Medicare (including Medicare Advantage)		
3. Medicaid (including Managed Medicaid)		
4. Self-Pay		
5. A homemaker		
6. A student		
7. Retired		
8. Unable to work (disabled)		
9. Prefer not to answer		
1. Often true	1-4	No
2. Sometimes true		
3. Never true		
4. DK or Refused		
1. Often true	1-4	No
2. Sometimes true		
3. Never true		
4. DK or Refused		
1. Yes	1-3	No
2. No (Skip AD1a)		
3. DK (Skip AD1a)		
count (number of days)	1-30	No
2. Some months but not every month		
3. Only 1 or 2 months		
4. DK		
1. Yes	1-3	No
2. No		
3. DK		

1. Yes	1-3	No
2. No		
3. DK		
<hr/>		
1. Never	1-5	No
2. Rarely		
3. Sometimes		
4. Often		
5. Always		
1. Yes		
2. No		
3. Don't know		
<hr/>		
1. Excellent	1-5	No
2. Very Good		
3. Good		
4. Fair		
5. Poor		
1. I have no problems in walking about	1-5	no
2. I have slight problems in walking about		
3. I have moderate problems in walking about		
4. I have severe problems in walking about		
5. I am unable to walk about		
1. I have no problems washing or dressing myself	1-5	no
2. I have slight problems washing or dressing myself		
3. I have moderate problems washing or dressing myself		
4. I have severe problems washing or dressing myself		
5. I am unable to wash or dress myself		
1. I have no problems doing my usual activities	1-5	no
2. I have slight problems doing my usual activities		
3. I have moderate problems doing my usual activities		
4. I have severe problems doing my usual activities		
5. I am unable to do my usual activities		
1. I have no pain or discomfort	1-5	no
2. I have slight pain or discomfort		
3. I have moderate pain or discomfort		
4. I have severe pain or discomfort		
5. I have extreme pain or discomfort		
1. I am not anxious or depressed	1-5	no
2. I am slightly anxious or depressed		
3. I am moderately anxious or depressed		
4. I am severely anxious or depressed		
5. I am extremely anxious or depressed		
<hr/>		
A = Never B = 1 time last month C = 2-3 times last	a-i	No
See Appendix A, List of Cereals		?
A = Never B = 1 time last month C = 2-3 times last	a-k	No
A = Never B = 1 time last month C = 2-3 times last	a-k	No
A = Never B = 1 time last month C = 2-3 times last	a-k	No

Source

Internal
Internal
Internal
Internal
Internal
Internal

Internal
Internal
QUALTRICS

GusNip

Census HPS

EPIC/Fin_Class

USDA FSSM 6-Item

AAFP Social Needs Screening Tool

ACS modified

John Ware and Cathy Sherbourne (1

EQ-5D-5L

Notes

Provide sufficient details as would in a published paper
Provide sufficient details as would in a published paper
Provide sufficient details as would in a published paper
Provide sufficient details as would in a published paper
Provide sufficient details as would in a published paper
Provide sufficient details as would in a published paper

Refer to cost effectiveness analysis guidelines provided as an appendix
Provide sufficient details as would in a published paper

Internal note for overall NPS core generation: check reference

please be transparent in the collection and calculation methods; describe in detail how the adherence
please be transparent in the collection and calculation methods; describe in detail how the adherence

include anyone who did not indicate withdrawal from study

Collect from EMR (with exception of race/ethnicity) if possible to minimize respondent burden. If not p

Race should be asked BEFORE ethnicity

OPTIONAL ENHANCEMENT: Note that teams may choose to use the longer form tools (10 item or 18 i
All teams should use versions that ask about a 30-day lookback period.

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Under each heading, please tick the ONE box that best describes your health TODAY
OPTIONAL ENHANCEMENT, EQ-5D-5L is an optional measure that is often used in cost-effectiveness analysis

NCI developed scoring algorithms to convert screener responses to estimates of individual dietary intake. For the core measure, we ask that at a minimum, studies collect fruit and vegetable intake (for instance, 10 servings per day). For those who are well-positioned to collect additional information, DSQ-26 or 24 Hour Recalls are preferred. FV intake is a participant-level core metric that measures the impact of GusNIP and GusCRR on participants.

Most respondents complete their 24-hour recall (ASA24) within a range of 17 to 34 minutes

Results generated in real time. Cost varies but can be as low as \$1.00 per assessment

Reference

N/A

N/A

N/A

N/A

N/A

N/A

N/A

N/A

<https://www.qualtrics.com/experience-management/customer/net-promoter-score/>
[Net Promoter Score Guide \(NPS\) | Medallia](#)

↻ rate and redemption rate were calculated—if there is nuance to the numerators and demoninators

↻ rate and redemption rate were calculated—if there is nuance to the numerators and demoninators

[Guidelines for Reporting Outcomes in Trial Reports: The CONSORT-Outcomes 2022 Extension | Research, Method
untitled \(jamanetwork.com\)](#)

[CONSORT 2010 Statement: updated guidelines for reporting parallel group randomized trials | The BMJ](#)

<https://www.nutritionincentivehub.org/media/elfhflej/list-of-participant-level-core-metrics-nutrition-incentive-pr>

[Census Survey Now Asks about Sexual Orientation, Gender Identity](#)

[Federal Register :: Revisions to OMB's Statistical Policy Directive No. 15: Standards for Maintaining, Collecting, and
FAQCombinedQuestion-1.pdf \(civilrights.org\)](#)

[OMB Publishes Revisions to Statistical Policy Directive No. 15: Standards for Maintaining, Collecting, and Presentir](#)

[https://www.opinionstage.com/survey/demographic-questions/
2020-informational-questionnaire.pdf](https://www.opinionstage.com/survey/demographic-questions/2020-informational-questionnaire.pdf) (census.gov)
<https://www.opinionstage.com/survey/demographic-questions/>

https://open.epic.com/EHITables/GetTable/HSP_TRANSACTION.htm

[https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools/
short2012.pdf](https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools/short2012.pdf) (usda.gov)

<https://sirenetwork.ucsf.edu/financial-strain-questions-0>

[FoodStamps.pdf \(census.gov\)](#)

[Self-Rated Health | SPARQtools](#)

For those well-positioned to collect additional information, EQ-5D-5L is an optional measure that may be helpful a

[EQ-5D-5L | EuroQol](#)

https://www.unmc.edu/centric/_documents/EQ-5D-5L.pdf

<https://epi.grants.cancer.gov/nhanes/dietscreen/questionnaires.html>

[Data Processing & Scoring Procedures Using Current Methods \(Recommended\) | EGRP/DCCPS/NCI/NIH \(cancer.gov\)](#)

-Item DSQ). Please note that the self-report version of this tool should be used.

d.

[dsq-quick-guide_11-2023.pdf \(nutritionincentivehub.org\)](#)

[Gus Schumacher Nutrition Incentive Program - Nutrition Incentive Program \(GusNIP-NI\) | NIFA \(usda.gov\)](#)

[ASA24® Respondent Website Overview | EGRP/DCCPS/NCI/NIH \(cancer.gov\)](#)

[24-Hour-Recall.pdf \(healthyhappyeating.com\)](#)

[asa24-quick-start-guide-24hr-recall-06062022.pdf \(cancer.gov\)](#)

[PDFfiller - wvu ne101 24.pdf \(signnow.com\)](#)

[Diet ID](#)

[ing Federal Data on Race and Ethnicity | OMB | The White House](#)
