

APPENDIX D - CALL OFF AGREEMENT FORM



CALL OFF AGREEMENT FORM		
<p>This Form is to be used by the Client when requesting that work be undertaken within the terms of the Call Off Contract. The Parties agree that each completed and approved Form will form part of and be interpreted in accordance with the terms and conditions of that Call Off Contract.</p>		
Project Title: Work Package 1 – Behavioural Trial – Allergens	Reference:	FS430885
	Date:	22/11/2021
Buyer – Project Representative: [REDACTED]	Tel:	
	E-mail:	[REDACTED]
Supplier – Project Representative: [REDACTED]	Tel:	
	E-mail:	[REDACTED]
Project Start Date:	22/11/2021	
Project Completion Date:	30/04/2022	
<p>Specification/ Scope of Work:</p> <p>Part A: SPECIFICATION OF REQUIREMENTS</p> <p>To be completed by the FSA. Please include as much detail as you can on the overall aims of the project, the audiences involved and the rationale for research.</p>		
<p>1. Background and hypotheses</p>		
Description	<p>This study will replicate the feasibility trial conducted in 2020 (McPhedran et al., 2021), which explored allergen communication in businesses. The findings of this trial suggest that pro-active allergen communication may</p>	

	<p>increase customer satisfaction and levels of trust; however the findings need to be replicated on a larger scale to validate them.</p>
Existing evidence	<p>Evidence suggests that young people showed low levels of confidence asking about allergies/avoidance of eating out. (https://www.food.gov.uk/research/food-allergy-and-intolerance-research/young-people-and-food-allergies-and-intolerances).</p> <p>In general, those with allergies find that it has a large impact on their lives. https://www.food.gov.uk/research/food-allergy-and-intolerance-research/food-sensitive-study-quality-of-life-wave-1-report . In particular, feeling more comfortable asking a member of staff for information about food when eating out was related to better quality of life in adult participants. Similarly, higher confidence that the information provided when eating out enables the identification of foods that cause a reaction, was related to better quality of life in adult participants. Qualitative research also suggests consumers feel embarrassed asking about allergies and don't want to "make a fuss" (https://www.food.gov.uk/sites/default/files/media/document/fs305013-final-report.pdf)</p> <p>Some research (e.g. https://www.sciencedirect.com/science/article/abs/pii/S0956713518301877) shows there is varying views of restaurants/takeaways as to whose responsibility it is to discuss allergies – but, prior to the feasibility study, there has been no research that directly tests the impact of proactive vs. reactive communication.</p> <p>The feasibility study found that “analysis suggested that delivery of the trial’s intervention – proactively asking about customer’s food allergies/intolerances – may have a positive effect upon customer’s ‘trust’ in, and ‘satisfaction’ with, food outlets”. (https://www.researchgate.net/publication/352543524_Food_allergen_communication_An_in-business_feasibility_trial) This needs to be validated in a fully-powered trial.</p>
Hypotheses / Key research questions	<p>Does pro-active allergen declaration by FBO waiting staff increase consumer perceptions of trust and safety in that FBO, and allergen declaration rates?</p> <p>Alternative hypothesis: Creating a default of food business staff asking all consumers about any known allergic diseases can increase consumers’ confidence and trust.</p> <p>Null hypothesis: There is no difference in consumers’ confidence and trust for businesses who ask all consumers about allergic diseases, compared to businesses where the burden of identifying a food allergen falls to consumers.</p>

Objectives	<p>This aligns with the FSA's area of research interest on Food Hypersensitivities and Allergies.</p> <p>Quality of life research (https://www.food.gov.uk/research/food-allergy-and-intolerance-research/food-sensitive-study-quality-of-life-wave-1-report) shows that confidence in allergy information/confidence asking staff when eating out is related to better quality of life for allergy consumers, so by making it easier for consumers to declare their dietary requirements, it will have a profound impact on their quality of life.</p>
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2. Design plan (if any yet to be defined, please indicate)

Type of project	In-situ trial with FBOs
Study type	Experiment
Timescale	Fieldwork to be completed by 31 st March 2022
Blinding	Customers in the FBOs will be blind to the trial. Staff implementing the intervention will be aware of their role.
Study design	Kantar to detail below
Randomisation	Kantar to detail below
Peer Review	TBC
Ethical considerations	<p>We would like the trial to be approved by an ethics panel (University affiliations), organised by Kantar</p> <p>The study should adhere to GSR ethical guidelines.</p>

3. Variables (only fill in if requesting trial implementation)

Manipulated, or independent variable(s)	Whether staff members ask customers whether they have allergies or dietary requirements.
Measured variables	Customer satisfaction, confidence, trust in the business, perception of food safety, and allergy declaration rates

4. Sampling plan (if any yet to be defined, please indicate)

Existing data	Feasibility trial (referenced above)	
Data collection procedures	Self-administered survey, till data	
Sample size	Kantar to detail below	
5. Outputs and timeline / milestones (NB. all outputs must be in line with FSA brand guidelines and meet FSA accessibility requirements)		
<p>Outputs should include:</p> <ul style="list-style-type: none"> • A trial protocol for the chosen trials including: <ul style="list-style-type: none"> ○ research aims and objectives ○ the challenge identified and potential solutions based on behavioural theory ○ the proposed intervention ○ trial design including methodology for randomisation, sampling and recruitment, trial procedure, any plans for blinding, detailed analysis plan including power calculations ○ ethical considerations and risks ○ indicative budget and timelines for running the trial • Final key findings report. • Publication in academic journal <p>Proposed timescales for key deliverables:</p> <ul style="list-style-type: none"> • Project commissioned: w/c 08/11/21 • Set-up and partner recruitment: by end Jan 2022 • Pair matching, randomisation and briefing: early Feb 2022 • Fieldwork: Feb to Mar 2022 <p>Analysis and reporting: Mar to Apr 2022</p>		

Special Terms:

To include any terms or conditions not covered in the overarching contract or any terms amended for the purposes of this Call Off Agreement

Sub-Contractors	N/A
Deliverables:	See Annex 1 – Suppliers Response
Foreground IPR – Ownership	See Clause 20 Intellectual Property Rights in the overarching Contract

Personal Data (GDPR)	See Annex 1 – Suppliers Response
Price	See Annex 2 – Suppliers Financial Template
Payments & Invoicing	<p>Please submit invoices to [REDACTED] for work with FSA.</p> <p>Please include the referring FSA purchase order number in the email title and within the invoice to allow Invoice/Purchase Order matching. Note that invoices that do not include reference to FSA Purchase Order number will be returned unpaid with a request for valid purchase order through email.</p>
<p>We confirm receipt of this Form seeking approval for the above project to proceed. We agree to provide the goods and/or services requested according to the terms and conditions set out in the Call Off Contract between the FSA and Kantar.</p>	
<p>Signed on behalf of the FSA:</p> <p>Name: [REDACTED]</p> <p>Signature: [REDACTED]</p> <p>Position: Commercial Advisor</p> <p>Date: 22/11/2021</p> <p>Signed on behalf of Kantar:</p> <p>Name: [REDACTED]</p> <p>Signature: [REDACTED]</p>	

Position: Executive Director

Date: 22/11/2021

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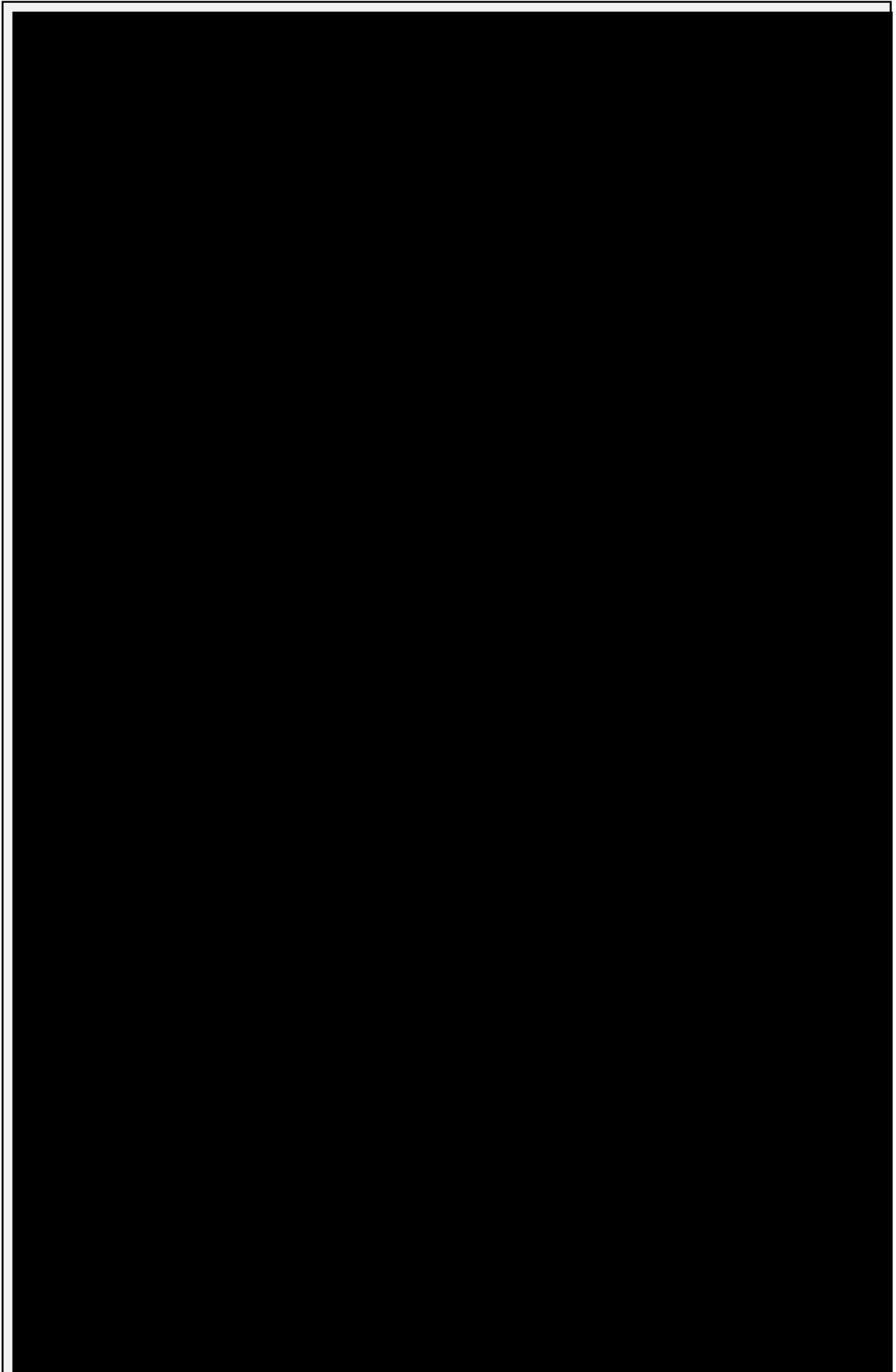
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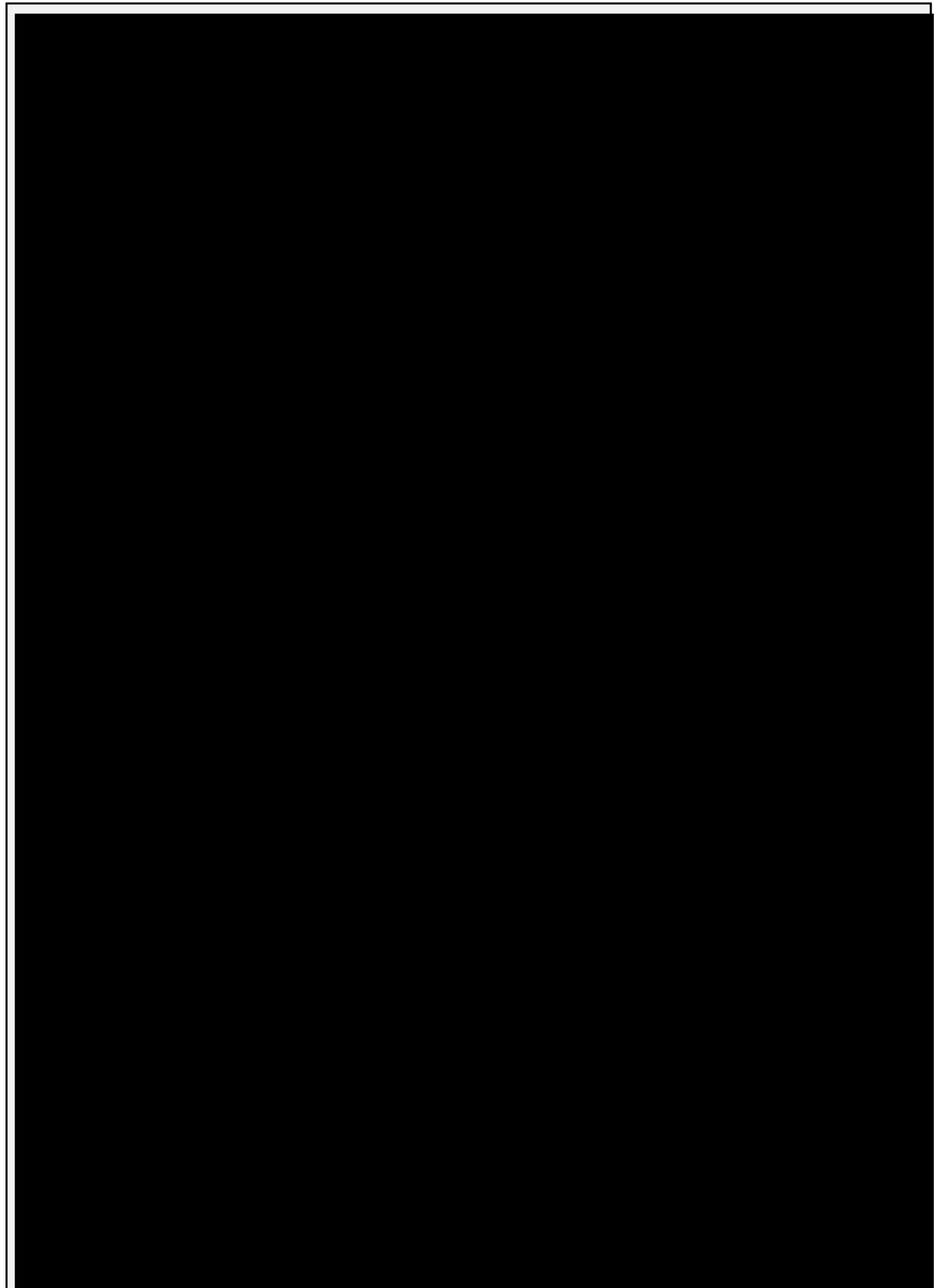
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¹ McPhedran, R., Patel, K., Rayner, A., Patel, M., Disson, J., John, A., ... & Toombs, B. (2021). Food allergen communication: an in-business feasibility trial. *Food Control*, 108287.





⁴ Which would yield ~20-25 participants with hypersensitivities per cluster

⁵ The approximate mean difference observed for 'concern about food safety' between the treatment and control conditions, assuming an ICC of 0.01, equal number of responses per branch and conservatively estimating 30 participating branches in total

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Mode of transport	Number of people
Car	8
Bus	4
Train	2
Bicycle	1

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Total	£ 99,230.00
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