

**Supporting Statement A For:**

**Durable Nursery Products Exposure Survey**

**(CPSC)**

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## **A. JUSTIFICATION**

### **A.1. Circumstances that Make the Collection of Information Necessary**

On August 14, 2008, the Consumer Product Safety Improvement Act (CPSIA) (PL 110–314) was enacted. Section 104 (the Danny Keysar Child Product Safety Notification Act, 15 USC 2056a) of the Act requires the Commission to study and develop safety standards for infant and toddler products. Congress stated that the durable infant and toddler products the Commission must study include, but are not limited to: full-size cribs and non-full-size cribs; toddler beds; high chairs, booster chairs, hook-on chairs; bath seats; gates and other enclosures for confining a child; play yards; stationary activity centers; infant carriers; strollers; walkers; swings; and bassinets and cradles. The Commission is required to evaluate the currently existing voluntary standards for durable infant or toddler products and to promulgate a mandatory standard substantially the same as, or more stringent than, the applicable voluntary standard. The Commission can prioritize its work on these products but must begin two rulemakings by August 14, 2009 and promulgate two more rules every six months until all products have a mandatory safety standard. Once the Commission has issued these safety standards, it will be illegal to manufacture, sell or import a product that violates the new safety standard, which could result in either civil or criminal penalties.

### **A.2. Use of Information**

To evaluate the current voluntary standards effectively, CPSC staff requires baseline data collected before the CPSIA mandatory efforts on durable nursery and toddler products have fully gone into effect. The Durable Nursery Products Exposure Survey (DNPES or survey) will provide baseline data on the exposure to, use of, and characteristics of durable infant and toddler products, as well as the characteristics of users, for which there is currently relatively little systematic data. A follow-up survey may be conducted in the future, after the current durable infant and toddler products have been largely replaced with products conforming to the new, CPSIA-mandated standards. The data may also be used to support: other rulemaking or voluntary processes for children's products independent of the CPSIA; compliance activities; and information and education campaigns.

The CPSC is interested in certain basic data (*e.g.*, prevalence of ownership) for all the durable infant and toddler products mentioned above, but a number of questions are geared to individual infant and toddler products where there are safety-related behavioral issues in question. For example, with

certain products any lapse in supervision of the child using the product by the parent or guardian is considered dangerous. Most of these products are used for relatively short periods of time in an infant or toddler's life, some for only a few months. Furthermore, only 15 percent of households have children in the five and under age range<sup>1</sup> that is the focus of the DNPES. This necessitates contacting large numbers of households to obtain sufficient numbers of respondents, particularly for relatively rare products. Also, survey respondents will be given different product module questions, with the relatively rare products being far more likely to be selected than the more commonly owned products to assure sufficient information on each product.<sup>2</sup> Thus, the survey instrument is made of a central core of questions at the beginning and end of the questionnaire with a series of product modules in between that vary among the respondents.

### **A.2.1 Research Questions**

The DNPES will specifically provide the only source of data available to answer the following research questions and potentially monitor trends in the answers over time:

- **Research Question 1:** How many people own infant or toddler products? How many infant or toddler products are in U.S. households? How many infant or toddler products are being used?
- **Research Question 2:** How do people who own these products acquire, use, discontinue use, and dispose of them?
- **Research Question 3:** What are people's perceptions of the safety of infant or toddler products?

### **A.2.2 Audiences for Data and Results**

The direct audience for data and results will be decision-makers and analysts within the CPSC. Additionally, selected results from the DNPES will be included in public safety campaigns and in a variety of other communications from the CPSC to the public, product manufacturers, other government entities, and voluntary standards organizations, such as ASTM International.

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<sup>1</sup> Derived from U.S. Census Bureau, Current Population Survey (March 2009) [Table H2: Households, by Type, Age of Members, Region of Residence, and Age of Householder](http://www.census.gov/population/www/socdemo/hh-fam.html) (<http://www.census.gov/population/www/socdemo/hh-fam.html>). All households with members 5 years of age and under (17,751,000) ÷ total households (117,181,000) = 15 percent.

<sup>2</sup> The prioritization of products will be updated on a regular basis throughout the DNPES to further assure that each infant or toddler product is adequately represented.

### A.2.3 Methods of Dissemination

Portions of the DNPES results will be made available immediately to the public for various activities, including: ongoing rulemaking activities (including, but not limited to, CPSIA rulemakings); safety campaigns; voluntary standards activities; and compliance activities, such as recalls. Publications using the survey results are expected to be ongoing.

### A.3 Use of Information Technology and Burden Reduction

The initial mailed paper screener will request information on preferred mode of contacts and determine whether initially sampled respondents are eligible for full DNPES participation (see Appendix C). Eligible respondents who have children younger than 6 years old in their household will have Web and phone survey options for completing the full extended DNPES. The mail screener will be short, eliminating the need for eligibility screening calls and the contact of individuals who, even if eligible, are uninterested in participating further, thereby reducing respondent burden. Web and phone administered options will allow for potential respondents to pick the manner in which they prefer being contacted.

The Web survey (see Appendix F for sample screenshots) and computer-assisted telephone interviewing (CATI) systems will be employed for individuals who return the mail screener and are classified as eligible for DNPES participation (*i.e.*, they have children younger than 6 years old in their household). The most important features of the Web survey and CATI system that reduce burden are described below. These features not only reduce respondent burden, but also enable efficient use of DNPES resources and timely capturing of information during the fielding (*i.e.*, survey implementation) period.

- **Skip Patterns.** The Web survey and CATI system will automatically guide the respondent or interviewers (respectively) through the complex skip patterns in the questionnaire, reducing the potential for respondent or interviewer error and shortening the questionnaire administration time. The DNPES will include 24 “modules” that ask about different infant or toddler products, but each respondent will be asked a maximum of 3 of these modules and the CATI and Web programs will ensure that each respondent only gets asked the portions of the survey they have been selected for.

- **Receipt Control.** The Web and CATI systems will provide for automatic receipt control in a flexible manner that will be used to produce status reports that allow ongoing monitoring of the survey's progress and real-time knowledge of participant status regardless of the mode by which they respond.

In addition the CATI will employ:

- **Scheduling.** The CATI scheduler will be used to route telephone numbers to interviewers, maintain a schedule of callback appointments, and reschedule unsuccessful contact attempts to an appropriate day and time. This system also allows the assignment of random subsets of the total sample to any experimental conditions embedded in the data collection.

#### **A.4. Efforts to Identify Duplication**

CPSC staff continuously seeks information from commercial market research and public health studies to support CPSC compliance, information and education, and voluntary standards activities in the area of durable nursery products. The only commercial studies we are aware of that address any of the DNPES research questions are the American Baby Group *Baby Product Tracking Study* and the Pregnancy Risk Assessment Monitoring System (PRAMS) conducted by the Centers for Disease Control and Prevention (CDC) and state health departments.

The *Baby Product Tracking Study* has historically been conducted every three years by the American Baby Group. This survey represents convenience samples of new and expecting mothers and does not represent an unbiased statistical sample. The sample of 3,600 new and expectant mothers is drawn from American Baby magazine's mailing lists. The survey also focuses completely on infant products and does not address durable toddler products which are of specific interest under section 104 of the CPSIA. Additionally, the American Baby Surveys concentrate on purchases of infant products and do not measure the prevalence of these products, or the many behavioral issues of interest to CPSC staff.

PRAMS is a surveillance project of the CDC and state health departments. PRAMS collects state-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. PRAMS does measure some of the same behavioral issues as the DNPES, such as the practice of infants co-sleeping with their parents and the presence of bedding and other items placed on infant sleeping surfaces, such as cribs. However, it does so for a narrow age group.



## **A.5 Impact on Small Businesses and Other Small Entities**

The DNPES will not affect small businesses, as they are not involved in the survey.

## **A.6. Consequence to the Government of Less Frequent Data Collection**

This is a request for a one-time survey to establish a baseline for assessing the effectiveness of current voluntary standards. A second follow-up survey may be conducted at a later date to evaluate the new mandatory standards after they have reached some level of effectiveness. If the DNPES were not conducted, the CPSC would lack data to evaluate the CPSIA-mandated standards and would also lack data on other behavioral issues unrelated to the CPSIA.

## **A.7 Special Circumstances Relating to the Guidelines of 5 CFR 1320.5**

There are no special circumstances that would require collection to be conducted in a manner inconsistent with 5 CFR 1320.5.

## **A.8 Comments in Response to the Federal Register Notice and Efforts to Consult Outside Agency**

A. The 60-Day Federal Register Notice for the DNPES was published on August, 19, 2010 (Volume 75, Number 160, p. 51245). Comments were solicited on the proposed information collection. No public comments were received. The 30-Day Federal Register Notice for the DNPES was published on April 11, 2011. Any comments were directed to OMB.

B. Since 2009, the Agency has consulted with the following staff at Westat regarding this information collection:

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On the CPSC's side, those consulted in the development process include:

1. Economists
  - a. William Zamula (301-504-7709)
  - b. Jill Jenkins (301-504-6795)
2. Statisticians
  - a. Kathleen Stralka (301-504-7416)
  - b. Kevin Gipson (301-504-7415)
  - c. Risana Chowdhury (301-504-7334)
3. Physiologist
  - a. Suad Wanna-Nakamura (301-504-7252)
4. Engineering Psychologists
  - a. Jonathan Midgett (301-504-7692)
  - b. Celestine Kiss (301-504-7739)
5. Engineers
  - a. Patricia Edwards (301-504-7577)
  - b. Han Lim (301-504-7538)

It is anticipated that additional statisticians and economists may be charged with analyzing portions of the data collected and that various other CPSC offices and employees may be involved in summarizing and presenting the information collected.

#### **A.9 Explanation of Any Payment or Gift to Respondents**

Return postage for the return of the screener to the Coordinating Center will be provided via the use of pre-stamped Business Return Permits on the return envelopes. Respondents will not receive any gift or payment for their participation in the survey. However, respondents who participate in the cognitive testing or usability testing of the survey instrument will receive \$40 for their participation. Cognitive testing and usability testing require a higher level of burden on respondents because these

activities require them to be available at a particular time and place and require a significant amount of their time (up to 90 minutes). Furthermore, cognitive and usability testing require respondents to offer extensive feedback that describes their thought process rather than just basic recall of factual information or a summary of their opinion. The \$40 payment will facilitate recruitment of cognitive and usability testing respondents and help motivate them to provide the level of feedback needed to make the results of cognitive and usability testing useful. The DNPES will involve up to three rounds of cognitive testing with each round involving up to nine participants. It will also involve usability testing with up to twenty participants over one or two rounds. Thus, a maximum of 47 individuals will receive this \$40 payment.

#### **A.10 Assurance of Privacy to the Extent Provided by Law**

Volunteers who participate in the DNPES will be subject to assurances and safeguards as provided by the Privacy Act of 1974 (5 USC 552a), which requires the safeguarding of individuals against invasion of privacy. The Privacy Act also provides for the confidential treatment of records maintained by a Federal agency according to either the individual's name or some other identifier.

Participation in the DNPES is voluntary and respondents will be so informed before completing the screener and beginning the survey. Subjects are informed of the measures taken to protect their privacy, to the extent provided by law, in the introductory letter (Appendix A). Additionally, respondents are informed again of measures taken to protect their privacy, to the extent provided by law, prior to beginning the telephone interview or the Web survey. The CATI survey instrument includes a statement of privacy, to the extent provided by law, in the introductory language read to sampled persons. The Web survey will include a similar statement in the introductory language that the respondent reads prior to beginning the survey (Appendix B).

Respondent names, phone numbers, and email addresses are the only information in identifiable form (IIF) and will only be used by CPSC's contractor (Westat) to screen and conduct interviews with participants. Access to Westat (the contractor) Data Collection Center network is restricted only to authorized individuals and access restrictions are defined for each individual based on his/her role. Access to data requires the entry of a valid account username and password. Westat staff receives data security training and signs an assurance of confidentiality of survey data (Appendix E). All Westat staff complete required annual privacy and security training and sign a document pledging confidentially and maintaining privacy. The training includes information and

data security factors, using information sources responsibly, employee responsibilities, and how to report instances where violation of data security is suspected.

After the survey effort is complete, names, phone numbers, and email addresses will not remain linked to the data and will not be provided to the CPSC. Survey respondents will have a unique ID number and analysis will be conducted on data sets that include only respondent ID numbers. All data will be securely stored in locked file cabinets or password-protected computers, and accessible only to Westat project staff. Names, phone numbers, and emails of respondents will not be kept in a system of records, and will be destroyed at the end of the survey.

### **A.11 Justification for Sensitive Questions**

Most questions asked on the DNPES are not typically considered sensitive. Potentially sensitive questions include those on the respondent's ownership and utilization of infant and toddler products, first names and ages of their children, and sleeping habits of their children. All of these topics are essential to the objectives of the DNPES.

DNPES procedures will be designed to make respondents feel as comfortable as possible in answering these questions. These procedures will involve assuring respondents of the privacy of their responses, to the extent provided by law, and of the voluntary nature of their participation in the survey or any of its components, including specific questions that they may prefer not to answer. Furthermore, participants' names will not appear on any survey documents containing data. A crosswalk between study ID and participant name will be kept in a secured electronic file and will be accessible only to those working on the survey. Electronic interview data will be identified by the unique survey ID only. The linkage between survey ID and personal identifiers will be destroyed upon completion of the DNPES.

### **A.12 Estimates of Hour Burden Including Annualized Hourly Costs**

Estimates of hour burden and costs to respondents for the DNPES are shown in Table A-1. The mail household screener will take approximately 5 minutes (.0833 hours) to complete. The telephone extended interview or Web survey will take approximately 35 minutes (.5833 hours) to complete. Each cognitive interview will take approximately one hour and each usability test will also take approximately one hour. The total estimate of respondent burden is 2,592.6 hours.

Respondent costs were calculated using the estimate for all workers in private industry in Table 9 of the June 2010 Employer Costs for Employee Compensation, published on the Bureau of Labor Statistics Web site. The total compensation hourly rate is \$27.64. The cost to the respondents for the total burden is estimated to be \$71,935; that is, \$27.64 per hour for 2,602.6 burden hours.

Table A-1. Estimate of respondent burden for DNPES

Type of respondent	Estimated number of respondents	Frequency of response	Average hours per response	Annual hour burden	Respondent cost**
Cognitive Tester	27	1	1.0	27.0	\$746
Usability Tester	20	1	1.0	20.0	\$553
Mail Screener	16,667	1	0.0833	1,388.9	\$38,390
Telephone Interview	1,500	1	0.5833	875.0	\$24,185
Web Survey	500	1	0.5833	291.7	\$8,062
<b>Total</b>	<b>16,714*</b>			<b>2,602.6</b>	<b>\$71,935</b>

\*The 1,500 telephone interviews and 500 Web surveys will come from respondents who complete the mail screener.

\*\*Hourly total compensation (wages+benefits) = \$27.64.

Drafts of the mail screener and survey instruments can be found in Appendices C and D.

There are no other costs to respondents and no respondent recordkeeping requirements associated with the field test.<sup>3</sup>

### A.13 Estimates of Other Total Annual Cost Burden to Respondents or Recordkeepers

There are no costs to respondents beyond those presented in Section A.12. There are no operating, maintenance, or capital costs associated with the collection.

<sup>3</sup> The field test refers to an initial limited rollout of the survey that will be used to test its effectiveness before rolling out the remainder of the survey.

## **A.14 Estimates of Annualized Costs to the Federal Government**

Two task orders to design and conduct the DNPES were issued to Westat, Inc. under contract number CPSC-D-09-0004 for \$114,220 and \$614,873, respectively. Salary and benefits costs for government personnel assigned to this study are estimated at \$297,670 based on 21 months of staff time at an average level of GS-14 step 5 ( $(\$119,238 / .701) \div 12 \text{ months}) \times 21 \text{ months}$ ), using a 70.1 percent ratio of wages and salary to total compensation from Table 1 of the June 2010 Employer Costs for Employee Compensation, published on the Bureau of Labor Statistics. Therefore, estimated cost to the government is \$1,026,763. However, since the study extends over three years, the annualized cost is \$342,254.

## **A.15 Explanation for Program Changes or Adjustments**

This is a new collection of information.

## **A.16 Plans for Tabulation and Publication and Projected Time Schedule**

### **A.16.1 Analysis Plans**

Analysis products from the contractor will include a final technical report describing the DNPES methodology. The CPSC may also have the contractor prepare a summary report. Further analysis to be conducted by CPSC staff will include:

- 1) Estimate the prevalence of, and exposure to, 24 different infant products in U.S. households. Prevalence (*i.e.*, ownership) data will be collected from all respondents for each of the 24 infant and toddler products. Exposure (*i.e.*, usage) data (referred to as “intensity of usage” in the original submission) embodies several dimensions of product use, and the relevant dimensions will vary according to product. Generally, exposure will be captured by the responses to several questions in the survey, questions that have been tailored to each specific product. These questions cover such dimensions as: the number of particular products in use in the household, the frequency of use, and, in some cases, the duration of use. The intent of these questions is to provide information on household exposure to product risk, information beyond whether a household simply owns a product.

As a specific example, consider the case of high chairs. To capture the exposure, the survey asks how many high chairs a household owns and how many they use. Additionally, for the most frequently used high chair, the survey asks how frequently the high chair is used (for example, every day) and the duration of use (for example, 30 minutes). From the information collected, it will be straightforward to compute “exposure” as “minutes in use per day,” a measure that can be compared across households, as well as for other products where “minutes in use per day” can be computed similarly. Obviously, such a measure captures household exposure to a product-related risk more meaningfully than a simple question of whether the household owns a product.

The 95 percent CI half-width will vary from product to product depending upon the level of exposure captured and evaluated. Using high chairs as an example once again, prevalence and frequency of use data would have an estimated sample size of 1,800 (see below).

Therefore, assuming a design effect of 1 (*i.e.*, no variation in household weights), the 95 percent CI half-width would be 2.4 percent. Questions about duration of use would be asked of a subset of those 1,800 respondents. As discussed below, the survey will target a minimum of 250 completes for each product module. However, only current or past users will be asked about duration of use, future users would not be asked this question.

Therefore, it is likely that the actual number of completes for duration of high chair use will be lower than 250, even though respondent selection for modules will be biased toward current and past users. Assuming a sample of at least 200, which is lower than actually anticipated) would give a 95 percent CI half-width of 7 percent.

- 2) Estimate the injury rates of the products based on their prevalence, exposure (usage), and characteristics and comparing them with the CPSC injury data. As an example illustrating how the data will be used, consider the case of infant bath seats. One long-standing policy issue for the agency has been whether an infant death is more likely to occur with the use of an infant bath seat versus the use of only a bath tub. If an infant death is more likely to occur with the use of a bath tub only, then efforts to ban infant bath seats or reduce their use could have the undesired consequence of increasing the risk of infant bathing deaths, which would be the exact opposite of the CPSC’s policy goals. The rate of death associated with these products would be compared on a per-child basis:

$$\frac{\text{number of bathtub only - related deaths}}{\text{number of children using bathtubs only}} \text{ vs. } \frac{\text{number of bathseat deaths}}{\text{number of children using bathseats}}$$

For the numerators, the agency compiles death data from a variety of sources. However, the agency lacks the information needed to estimate the denominators in the above calculation, which is the number of children using only bath tubs versus the number using bath seats. The denominators can be estimated using data from the complete survey sample of approximately 1,800 (see below). Therefore the 95 percent CI half-width would be 2.4 percent, assuming a design effect of 1 (*i.e.*, no variation in household weights). Margins of error for the numerators vary too widely between products to be estimated without undertaking a full analysis.

In addition to the simple injury rate calculations described above, the survey results could be used to conduct a formal logistic analysis of the factors associated with nursery product risks. Such an analysis could be done if the exposure survey data can be compared to parallel injury data that might be collected from a survey of injuries reported through the National Electronic Injury Surveillance System (NEISS). In order to conduct this type of analysis, we would need to compare the characteristics of injured victims (from the parallel injury survey) with the characteristics of non-injured users (from the exposure survey). Consequently, to do this type of analysis, we must be able to exclude cases from the exposure survey in which children were injured. That is why we want to collect information on whether the children using nursery products were injured. From a policy standpoint, this type of analysis has proven useful to the agency in the past because it provides information on the types of situations where injury is more likely to occur, which, in turn, allows us to target regulatory efforts, as well as informational and educational campaigns, more efficiently.

- 3) Develop models for the expected useful life of durable nursery products using study findings on acquisition and disposal of products and prevalence of ownership. How long a product was used can be calculated from when the respondent started using it and when they stopped using it. Combined with responses to questions regarding how a product was acquired, whether it was new or second-hand when acquired, the age of the product when acquired, what was done with the product when it was no longer being used (for example, loaned out or stored), will allow CPSC staff to model the expected useful life of each durable nursery product.



- 4) Analyze product characteristics, user characteristics, and various behaviors for use in developing voluntary standards, information and education campaigns, and compliance activities. For example, sleep environments with additional soft bedding is a known hazard for young infants. Information collected by the DNPES will assist staff in better directing our educational and outreach campaigns to populations most at risk.

The CPSC has undertaken measures to ensure that the current sample design and size will be sufficient to support the envisioned analyses. Using available data (from American Baby Group and elsewhere), we have made preliminary estimates of the prevalence of ownership of each product in the general population. While these preliminary estimates are not based on a probability-based sample, they are useful for selecting the product modules each respondent will be asked to complete. These selection rates will be updated, however, as the survey is rolled out. Therefore, if we initially believe that few respondents will be eligible for one module but end up with numerous completes, we will shift priorities to ask respondents about products for which we have fewer completes first. We plan to make these updates on an ongoing basis. The product selection rates used for each household will be stored for later use in weighting responses to produce national estimates.

In this manner, we will target a minimum of 250 completes for each product module. This means that products used less often will be selected at a much higher rate than more commonly used products. This should allow for making estimates about a particular product with adequate precision, such as, for example, the number of baby sling users reporting a death or injury. For an estimated 50 percent proportion, a sample size of 250 would give a 95 percent CI half-width of 6.3 percent, assuming a design effect of 1 (*i.e.*, no variation in household weights).

Of course, there may be products for which there are fewer eligible respondents. For example, except for a few products, respondents are eligible only if they use/used the product at least a few times a week. Therefore, it is possible that we could end up with fewer respondents in some cases and, in the extreme case, too few respondents for a particular product module to do any modeling using the product-specific questions in the product module. However, the prevalence can be estimated for all product modules because the precision for each prevalence rate is based on the number of households completing the inventory portion of the questionnaire (*i.e.*, the section that asks whether the household uses or has used each of the 24 products). This is expected to be about 1,800 households (16,667 completed screeners \* 0.132 eligibility rate \* 0.80 extended questionnaire response rate = 1,760).

**A.16.2 Publication Plans**

Portions of the DNPES results will be made available immediately to the public as part of various activities, including: ongoing rulemaking activities (including, but not limited to, CPSIA rulemakings); safety campaigns; voluntary standards activities; and compliance activities, such as recalls. Publications using the survey results are expected to be ongoing.

**A.16.3 Time Schedule**

The time schedule for data collection is dependent on the timing of OMB clearance. Our project time schedule for the completion of DNPES after OMB approval is given below in Table A.16.

<b>TABLE A.16. PROJECT SCHEDULE FOR DNPES</b>	
<b>Component</b>	<b>Time after OMB approval</b>
Start collection	Within 2 months of OMB approval
Data collection	1-11 months after approval
Data editing	2-13 months after approval
Data analysis	2-18 months after approval
Publication	18-22 months after approval

**A.17 Reasons(s) Display of OMB Expiration Date is Inappropriate**

CPSC is not seeking an exception to the display of the OMB expiration date.

**A.18 Exceptions to Certification for Paperwork Reduction Act Submissions**

CPSC is not requesting an exception to the certification requirements.