

# **Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0923-0047)**

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**TITLE OF INFORMATION COLLECTION:** Radiation Dose Tool Feedback

## **PURPOSE:**

Amidst the chaos ensuing from a radiation emergency, a crucial task for federal, state, and local authorities will be communicating risk to the public. Effective communications will be a critical factor in building trust, comforting a nation in distress, and most importantly, saving lives and minimizing injury. The Centers for Disease Control and Prevention (CDC) is considered by the public and clinicians to be a trusted source of information during a nuclear or radiation emergency.

Following a radiation emergency, various agencies and organizations will be measuring radiation levels and estimating radiation doses. Radiation is an unfamiliar concept to the public, as well as professional audiences, and many need help interpreting data and understanding unfamiliar units of radiation measurement. Communicating that a particular dose is low, and within the range of doses received from more familiar sources, such as air travel, medical tests, and the natural world can help to allay fears of negative health effects. Communicating that a particular dose is high could motivate people in the area to take protective actions.

Data showing small increases in radiation dose following the radiation emergency in Fukushima, Japan, spurred the CDC to create a tool to help people put the measurements in context with other exposures. An interactive tool was created to meet this need. The tool is similar to a thermometer, and is populated with doses that range from common, everyday doses to higher doses that could lead to negative health effects, or even death. This communication tool helps people assess their own risk in a radiation emergency and understand how following protective actions can lower their risk of health effects. The Radiation Studies Branch (RSB) will not publish the results of the data collection. Knowledge generated is not generalizable from the selected “sample” out to the universe of public health prep planner personnel.

CDC recently pilot tested the concept with 9 members of the public, public health emergency planners and public information officers. The overall concept and interactive nature of the tool was well-received by participants, and the tool has great potential as an effective communication method. However, participants did have several suggestions to the overall design of the thermometer tool, and the RSB would like to increase the flexibility of the tool. Therefore, CDC would like to test the new version of the radiation dose tool.

RSB is seeking feedback on the latest version of the radiation dose tool. RSB will collect, analyze, and interpret information gathered through this information collection to identify strengths and weaknesses of the current radiation dose tool and make improvements based on feedback. The goal of this information collection is to explore the effectiveness of the radiation dose tool as a communication instrument among the public, public information officers, and public health planners. The objectives of this study are to:

- Evaluate the extent to which the radiation dose tool effectively communicates risk.
- Evaluate the extent to which the radiation dose tool is relevant, comprehensible, credible, appealing, and motivational toward achieving desired action.

This collection of information is necessary to enable RSB to garner the public, public information officers and public health preparedness planners’ feedback in an efficient, timely manner, in accordance with our commitment to improving service delivery. The information collected from the public, public

information officers and public health preparedness planners will help ensure that users have an effective, efficient, and satisfying experience with the radiation dose tool. It will also provide their insight of potential issues with the radiation dose tool. This information will help RSB improve the delivery of the radiation dose tool.

**DESCRIPTION OF RESPONDENTS:** Respondents for this information collection are the public, public health information officers and public health planners, who will be responding in their official capacity.

**TYPE OF COLLECTION:** (Check one)

- Customer Comment Card/Complaint Form
- Usability Testing (e.g., Website or Software)
- Focus Group
- Customer Satisfaction Survey
- Small Discussion Group
- Other: interviews

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Michelle Howard 3/5/15  
Michelle Howard

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No
3. If Applicable, has a System or Records Notice been published?  Yes  No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

UserInsight will offer the gift cards to the participants as a token of appreciation for participants' willingness to engage in the project. Remote participants will receive their gift cards via email. Public health planners and public information officers will be offered the gift cards; however, some planners and information officers may refuse the token of appreciation because of their health department's

policies. The token of appreciation offered, \$40 per in-person participants and \$30 for remote participants, is impacted by a number of variables for this project, including the following:

- Total participation time of 60 minutes: length of the interview
- Specifications that each participant has to meet to participate in the study
- Recommendations from the market research facilities
- In-person or remote participation

Gift cards are neutral (not connected with a company, service or product) and have universal utility. It is usually more cost-effective and efficient to offer a token of appreciation, attractive by the participant, to mitigate the cost of the recruitment. The amount needs to be high enough that participants feel like it is worth their time to participate and cannot be so low that participants perceive their time and candid responses are under-valued. Likewise, tokens of appreciation cannot be so high that participants become skeptical as to the intention of the interview.

In our experience, it is most cost effective to offer the recruiter-recommended amount, which results in a better show rate and lower recruiting fees. Recruiters from the market research facilities know from experience what various market segments expect to receive. Recruiters will be paid solely for the length of time required to recruit participants.

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden
Public (Screener)	36	10 minutes	6
Public (Interview)	18	60 minutes	18
Public Information Officers & Public Health planners (Screener)	36	10 minutes	6
Public Information Officers & Public Health planners (Interview)	18	60 minutes	18
<b>Totals</b>	<b>108</b>	<b>140 minutes</b>	<b>48 hours</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$150,000 \_\_\_\_\_

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?  
 Yes       No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

UserInsight (the market research firm) maintains a pool of members of the public who are interested in participating in market research, and will invite individuals from this pool to participate in the project. UserInsight will also conduct brief telephone interviews with individuals that volunteer to

participate to ensure that they are eligible (Attachment C). The information collection will be conducted using a convenience sample of 18 members of the public.

Similarly, Oak Ridge Associated Universities (ORAU) will provide UserInsight with a pool of public health professionals who attended NREP (National Radiological Emergency Preparedness) conference to recruit public information officers and planners. UserInsight will screen the public health professionals using the screening questionnaire (Attachment D) through telephone interviews to ensure they meet the screening criteria. Participation will be strictly voluntary. The information collection will be conducted with a convenience sample of 18 public health professionals.

### **Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
  - Web-based or other forms of Social Media
  - Telephone
  - In-person
  - Mail
  - Other, Explain: Some interviews will be conducted remotely using telephone interviews and remote screen sharing technology like AdobeConnects or Go-To-Meeting.
2. Will interviewers or facilitators be used?  Yes  No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**

### **Attachments**

- Attachment A: Protocol Summary
- Attachment B: Protocol
- Attachment C: Public Screener
- Attachment D: PIO and Planners Screener
- Attachment E: Participant Information Sheet
- Attachment F: Interview guide for the public
- Attachment G: Interview guide for PIOs and Planners
- Attachment H: Radiation Dose Tool