

Incidents of Public Health Significance in the National Poison Data System

OSTLTS Generic Information Collection Request
OMB No. 0920-0879

Supporting Statement – Section B

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Section B – Data Collection Procedures

1. Respondent Universe and Sampling Methods

Data will be collected from state epidemiologists in their official capacities at state health departments. There is only one state epidemiologist per health department, and the names and contact information of each individual is publicly available at the Council of State and territorial Epidemiologists website.¹ Because the recipients of the notifications will be dependent on where the incident occurs, the state epidemiologists will come from this public list of state epidemiologist contacts. The number of notifications that each state epidemiologist will receive will depend directly on the locations of the incidents.

In CY2013, 80 incidents of public health significance corresponding to 30 state health departments were identified by the surveillance system. This number is expected to be similar in future calendar years as poison center call volumes and the resulting public health significant incidents have not deviated over the past three years.² For the purposes of this request, an upper limit of 100 notifications of incidents are used in case additional events were identified by up to 30% and an upper limit of 35 health departments are used in case additional events were identified by up to 15%. Therefore, there will be 100 chemical, environmental, drug, foodborne, biological and radiological exposures and illnesses of potential public health significance notifications sent to state epidemiologists at 35 state health departments involved in this data collection activity based on estimates from CY2013.² We estimate 100 respondents in that each notification of incident is unique and, therefore, each response will be treated as one unique response.

2. Procedures for the Collection of Information

Following OMB approval, data collection will commence using the information collection instrument (**Attachment B, Attachment C**). The instrument will be administered one time per notification. The process starts when a notification of an incident of public health significance is sent to the state epidemiologist, which occurs within 24 hours of identified incident as described in Statement A. An introductory email prompting the administration of the data collection instrument and Survey Monkey® link to the form (**Att. D – Introductory Email**) will be sent five business days following the notification. The state epidemiologist of the corresponding location of the incident will have ten business days to complete the web-based instrument. As described in statement A, the notifications of the incidents and by extension the information collection activity following each notification will be dependent on when the surveillance system identifies an incident that warrants state notification. Because of this, the notification of incidents will vary by time; this assessment will be individually administered an estimated 100 times over the course of the calendar year.

A reminder email will be sent five business days after the introductory email of the official if the individual has not yet responded (**Att. E Reminder Email**). A thank you email will be sent to the

official upon completion of the form (**Att. F Thank you Email**). Reports will be generated one year after OMB approval using all the collected data (**Att. G Sample Annual Report**).

Data will be collected through the Survey Monkey® database and exported to Microsoft Excel® for analysis. Since the majority of data analysis is descriptive and does not require complex statistical analysis, all data analysis will be conducted through Microsoft Excel®.

3. Methods to Maximize Response Rates Deal with Nonresponse

To maximize response rates, a reminder email will be sent five business days after the introductory email to the official if the individual has not yet responded. The information collection instrument only consists of four questions that are estimated to only take ten minutes; this detail is highlighted in the introductory email to convey to the recipient that the instrument is not time-consuming or burdensome.

Even though HSB team members will do their due diligence in maximizing response rates for this information collection activity, nonresponse may still be an issue. Nonresponse rates will be incorporated into the data analysis as a caveat for possible nonresponse bias.

4. Test of Procedures or Methods to be Undertaken

The information collection instrument was pilot tested with five public health professionals within HSB to assess clarity and to estimate the time to complete the form. Feedback from this group was used to refine the questions as needed. There was consensus that the resulting form is clear and concise. The range of times to complete the form was from five to ten minutes; ten minutes is used as the upper limit of time burden to complete the questions.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

Because the main purpose of this data collection is program improvement, the extent of analysis will be descriptive in nature and no statistical analysis is planned for this activity. The information collection and data analysis will be conducted by the project officer:

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LIST OF ATTACHMENTS – Section B

- D. Introductory Email**
- E. Reminder Email**
- F. Thank You Email**
- G. Sample Annual Report**

REFERENCES

1. Council of State and Territorial Epidemiologists (CSTE). “State Epidemiologists.” Available at <http://www.cste.org/?page=StateEpi/>. Accessed at 10/27/2014.
2. Law RK, Sheikh S, Bronstein A, Thomas R, Spiller H, Schier J. Incidents of potential public health significance identified by national surveillance of poison center data (2008-2012). Accepted for publication in the Journal of Clinical Toxicology, August 2014.