Emerging Issues for Private Wells: CSTE Assessment

OSTLTS Generic Information Collection Request OMB No. 0920-0879

Supporting Statement – Section B

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Program Official/Project Officer

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Section B – Information Collection Procedures

1. Respondent Universe and Sampling Methods

Data will be collected by the Council of State and Territorial Epidemiologists (CSTE) from its members, or their designees, all of whom are employees of state and local health departments and who are acting in their official capacities as government employees. Specifically, the universe of respondents is 55 state and local epidemiologists or other staff (government employees) identified by the epidemiologists with responsibilities for private wells (e.g., for well construction, well water quality). CDC is partnering with CSTE for this assessment because they have the appropriate contacts to allow us to assess every state. Some state epidemiologists will have the expertise required to complete the assessment, while others will designate the assessment to another government official with the relevant expertise.

Respondents come from all 50 states and a representative of local jurisdictions, including Los Angeles, CA; District of Columbia; Chicago, IL; New York City, NY; Houston, TX; and Seattle, WA. These representatives were selected for this information collection because they are either up-todate on critical public health topics, such as private well water issues, in their states and territories or they know who the appropriate contacts are. No sampling is employed.

2. Procedures for the Collection of Information

Data will be collected through a one-time web-based assessment using Survey Monkey. Respondents will be recruited through a notification email to the respondent universe (see **Att. C**—**Invitation Email**). The invitation email will explain:

- The purpose of the assessment, and why their participation, or the participation of the person in state government who best understands issues about private wells and private well owners, is important
- Method to safeguard their responses
- That participation is voluntary
- The expected time to complete the assessment
- Contact information for the assessment team

The email will also state instructions for participating and a link to the online assessment and consent form.

Respondents will be asked for their response to the instrument within a 4 week period to allow ample time for respondents to complete it. Reminders will be sent after one week to non-respondents to urge them to complete the assessment (**see Att. D—Reminder Email**). Further, at the completion of the data collection period, CSTE national office staff will directly contact respondents to request completion of the assessment.

Data from the participant responses will be collected and stored in a database maintained by CSTE. Data will be transferred to SAS for statistical analysis. Both quantitative and qualitative analyses will be performed. Quantitative analyses will involve using descriptive statistics to determine frequency distributions and corresponding variances for responses to the relevant questions. Responses will be cross-tabulated to compare independent variable responses including advertising methods, incentives to participate, number and type of partners/stakeholders, reasons for conducting outreach program, type of outreach program, and outreach program scale. Both factor analysis and coding analysis will be used to assess the data. Qualitative thematic analyses will be performed on open-ended, descriptive questions to compile responses about emerging issues for private wells and private well owners. The descriptive questions will increase the utility of the statistical analysis by providing information about emerging issues that the quantitative data cannot provide (e.g., emerging issues in specific states or regions that CDC may not yet be aware of).

3. Methods to Maximize Response Rates to Deal with Nonresponse

Although participation in the assessment is voluntary, the project lead will make every effort to maximize the rate of response. The goal is to reach 100% for the response rate, but CSTE anticipates that 75-93% of those asked will respond. This estimate was provided by CSTE leaders based on the level of participation they have observed in past assessments of this nature. To achieve a high response rate, a reminder email will be sent to those who have not completed the assessment during the second week of the data collection period (see **Att. D—Reminder Email**). Additionally, the Invitation Email (**Att. C**) and the assessment itself (**Att. A**) both explain the background and rationale for the data collection to further encourage potential respondents to participate.

4. Test of Procedures or Methods to be Undertaken

The estimate for burden hours is based on a pilot test of the information collection instrument by 2 public health professionals from the New Mexico and Indiana health departments. In the pilot test, the average time to complete the instrument including time for reviewing instructions, gathering needed information and completing the instrument, was approximately 60 minutes. Most of this time was spent gathering the appropriate information to respond to the assessment questions. Based on these results, the estimated time range for actual respondents to complete the instrument is 50 to 70 minutes. For the purposes of estimating burden hours, the average time for completion (i.e., 60 minutes) is used.

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

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LIST OF ATTACHMENTS - Section B

Note: Attachments are included as separate files as instructed.

- **C.** Invitation Email
- D. Reminder Email