Priority Non-Infectious Drinking Water Issues: CSTE Assessment

OSTLTS Generic Information Collection Request OMB No. 0920-0879

Supporting Statement - Section B

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Table of Contents

Sectio	Section B – Information Collection Procedures	
1.	Respondent Universe and Sampling Methods	3
2.	Procedures for the Collection of Information	3
3.	Methods to Maximize Response Rates to Deal with Nonresponse	4
4.	Test of Procedures or Methods to be Undertaken	4
5.	Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing	
Data		5
LIST	LIST OF ATTACHMENTS – Section B	

Section B - Information Collection Procedures

1. Respondent Universe and Sampling Methods

Data will be collected by the Council of State and Territorial Epidemiologists (CSTE). CSTE is an organization of member states and territories representing public health epidemiologists. CSTE works to establish more effective relationships among state and other health agencies. It also provides technical advice and assistance to partner organizations and to federal public health agencies such as the Centers for Disease Control and Prevention (CDC). CSTE members have surveillance and epidemiology expertise in a broad range of areas including occupational health, infectious diseases, environmental health, chronic diseases, injury control, maternal and child health, and more. CSTE supports effective public health surveillance and good epidemiologic practice through training, capacity development, and peer consultation.

CSTE will collect data 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 will consist of 50 state and 5 local epidemiologists or other staff (government employees who work with state and local drinking water programs, which could be part of the state/local health department or the state/local environmental agency) identified by the epidemiologists with responsibilities for drinking water issues and private residential wells. CDC is partnering with CSTE for this assessment because they have the appropriate contacts within 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 will represent 50 states and representatives of the following local jurisdictions: Los Angeles, CA; District of Columbia; Chicago, IL; New York City, NY; Houston, TX; and Seattle, WA. No sampling of states will occur, as all states will be invited to participate in the assessment. The 5 local jurisdictions were hand-selected by investigators for participation because they are among the largest local health departments in the country with anticipated greater capacity to plan for and address the types of drinking water issues assessed in this data collection. The assessment will be sent to all state health departments, and a convenience sample of five of the largest local health departments in the US. There will be 55 respondents in total.

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—CSTEDWA Invitation Email**). The invitation email will explain:

- The purpose of the assessment, and why participation is important
- Method to safeguard 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 provide a link to the online assessment.

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

Data will be collected and stored in a secure database maintained by CSTE. Data will be analyzed descriptively to determine frequency distributions and corresponding variances for responses to the relevant questions. Responses will be cross-tabulated to compare independent variable responses. 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 issues that the quantitative data cannot provide (e.g., 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, 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. Additionally, 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—CSTEDWA Reminder Email).

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 4 state public health professionals. In the pilot test, the average time to complete the instrument including time for reviewing instructions, gathering needed information and completing the instrument, was 35 minutes. Based on these results, the estimated time range for actual respondents to complete the instrument is 25 to 40 minutes. For the purposes of estimating burden hours, the upper limit time for completion (i.e., 40 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

- C. CSTEDWA Invitation Email
- D. CSTEDWA Reminder Email