

# **Food safety knowledge, attitude, and practices survey of correctional workers**

Request for OMB approval of a New Information Collection

11/7/2023

## **Supporting Statement A**

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- **Goal of the study:** The goal of the project is to gain insight and track progress relating to food safety practices and training among people working in U.S. based correctional facilities in order to reduce foodborne illness in correctional facilities.
- **Intended use of the resulting data:** The same survey tool will be deployed on two occasions, the first in year one (baseline) data will be used to inform training opportunities in food safety. The same survey will then be repeated 2 years later (follow-up) to assess changes in food safety attitudes and practices at correctional facilities. The data may be shared in peer reviewed publications, academic and professional meetings etc., to further improve food safety in institutional settings.
- **Methods to be used to collect:** An anonymous, electronic-based survey will be employed using CDC's REDCap Web Survey platform. Surveys will be disseminated to leaders of correctional employers (federal, tribal, state, local and private) and professional organizations etc. to ask members to participate in the survey. They will be asked to share the surveys with correctional workers within their organization through email. The same methods and survey tool will be used to survey correctional workers 2 years later to assess changes in attitude and practices related to food safety.
- **The subpopulation to be studied:** The survey will target correctional workers currently employed at a federal, state, tribal, local or private correctional facility in the United States.
- **How data will be analyzed:** The data will be summarized using frequencies, bivariate and multivariate analyses, when appropriate. Baseline data will be compared to follow-up data to look for notable changes in attitudes and practices.

## 1. Circumstances Making the Collection of Information Necessary

The Centers for Disease Control and Prevention (CDC), National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Foodborne, Waterborne, and Environmental Diseases (DFWED), request the approval of a new Information Collection Request "Food safety knowledge, attitude, and practices survey of correctional workers." We are requesting approval for a period of 3 years.

In 2017 an analysis of Foodborne Disease Outbreak Surveillance System (FDOSS) epidemiology data demonstrated a disproportionately high burden of foodborne outbreaks and outbreak-associated illnesses in correctional settings compared to other settings (Marlow et al, Am J Public Health 2017). The CDC is implementing training and policy initiatives to reduce foodborne illness in correctional facilities. However, CDC has little understanding of current training and overall food safety culture among individuals working in correctional settings. This survey will allow for the collection of knowledge, attitudes, and practices (KAP) of correctional staff working in a variety of U.S. correctional facilities (including federal, state, tribal, local and private facilities). The survey will assess overall food infrastructure, food safety training, and the receptiveness of correctional staff to being a part of food safety at their facilities. The same survey tool (**Attachment 3**) will be deployed on two occasions, the

first in year one (baseline) data will be used to inform training opportunities in food safety. The same survey will then be repeated 2 years later (follow-up) to assess changes in food safety attitudes and practices at correctional facilities. There is no legal requirement for CDC to collect this information, however, CDC is the federal authority on identifying and preventing foodborne illness and as such, is best suited to collect data in support of improved food safety practices at state, local, federal, and tribal correctional facilities. Authorizing Legislation comes from Section 301 of the Public Health Service Act (42 U.S.C. 241) (**Attachment 1-Authorizing legislation**).

Following the initial baseline data collection, CDC plans to develop food safety best practices which are tailored to the needs and risks of correctional facilities. Best practices will be disseminated via pilot training initiatives through the Integrated Food Safety Centers of Excellence (CoEs) supported by CDC's ELC Cooperative Agreement (CDC RFA CK19-1904). The overall goal of program will be to reduce foodborne illness outbreaks in correctional facilities by increasing training and implementing policy to improve food safety.

## **2. Purpose and Use of Information Collection**

The purpose of this project is to obtain information on current knowledge, attitudes, and practices of individuals working in correctional facilities across the United States relating to food safety. Previous research has indicated that incarcerated individuals are disproportionately impacted by foodborne outbreaks per population indicating gaps in food safety practices within the facilities. DFWED aims to improve food safety practices in correctional settings by improving food safety knowledge and establishing a food safety culture among all correctional workers. To design an appropriate curriculum and programmatic support, we first need to better understand the current knowledge, attitudes, and practices of correctional workers using the survey tool (**Attachment 3- Food safety knowledge, attitudes, and practices survey of correctional workers**) to be sent via an anonymous REDCap survey link distributed by email through their employers and/or professional associations (**Attachment 4- Partner Letter**). The survey allows for the documentation of individual knowledge, barriers and accelerators of food safety, food infrastructure including who is involved in food preparation and service and how those individuals are trained. The survey is comprised of primarily multiple-choice questions and should take the respondent less than 30 minutes to complete. Participation is completely voluntary and does not include collection of any personally identifiable information.

Survey responses will establish baseline knowledge of correctional workers across all jurisdictions (federal, state, local and tribal) and sizes. Understanding the differences in knowledge and practices across facility types allows us to tailor programs to the unique infrastructures of each setting and focus on critical knowledge gaps. The same survey will be repeated 2 years after the baseline as a means of interim program evaluation. The survey tool (**Attachment 3**) will be deployed a total of two times during the 3-year information collection period.

## **3. Use of Improved Information Technology and Burden Reduction**

All data for this survey will be done using an electronic survey (**Attachment 3**) to collect and process data most efficiently. The survey maximizes the use to multiple choice and drop-down options to minimize data entry errors and uses skip-pattern logic to narrow the survey questions to only those most

relevant for the respondent. An online survey format is easier for the participant to follow than printed skip logic instructions on a paper form. Not applicable questions been hidden also reduces the overall time it takes to complete the survey.

Particular emphasis will be placed on compliance with the Government Paperwork Elimination Act (GPEA), Public Law 105-277, title XVII. The number of questions posed will be held to the minimum required in all information collections in order to elicit the necessary data.

#### **4. Efforts to Identify Duplication and Use of Similar Information**

The Bureau of Justice Statistics (BJS) collects, analyzes, publishes, and disseminates information on crime, criminal offenders, victims of crime, and the operation of justice systems at all levels of government, however none of their current or former survey tools collect information on food safety operations and culture. The Federal Bureau of Prisons (BOP) provides guidelines to all of their facilities relating to food safety and they conduct training with Food Service Administrators, but no survey of training and practices has been undertaken for all BOP staff. Moreover, most correctional facilities are run by state and local jurisdictions, not by BOP; these facilities are not centrally organized leading to likely variations in practices, resources, and training. CDC is working to develop the model food safety practices for correctional settings and will work with state, tribal, and local health departments, departments of corrections, and professional organizations to implement training and pilot programs. To the best of our knowledge from conversations with BOP, BJS, selected state health departments, and a review of the peer reviewed literature, CDC is not aware of the availability of any similar information. No survey relating to food safety knowledge and infrastructure has been undertaken on a national level.

This survey will provide a unique opportunity to assess KAP across jurisdictions to design the best tools and training opportunities to facilitate food safety in correctional facilities. The survey will include questions relating to the general infrastructure of the facility in which they work, the level of involvement with food preparation and service, the training they have received relating to food safety, and questions relating to the staff beliefs, barriers, and perceived impact on food safety at their facility. The survey was developed in partnership with CDC's National Center for Environmental Health and National Institute for Occupational Safety and Health; BOP and BJS colleagues were invited to review and provide feedback on the survey.

To disseminate the survey tool, CDC will send a partner letter to correctional employers and organizations to encourage the dissemination of the survey link (**Attachment 4**). As new publications of scientific findings become available, CDC will initiate outreach to public health and correctional partners about the disproportionate impact of foodborne illness in correctional facilities. This outreach will include partner letters with summaries of the latest outbreak data and will highlight CDC's next steps in developing and disseminating best practices for food safety in correctional facilities.

#### **5. Impact on Small Businesses or Other Small Entities**

Correctional workers at small jails and prisons will not be excluded from this survey. It is vital to have representation from facilities of all sizes so that training tools can be adequately scoped for a range of

facility resources and infrastructures. Questions have been held to the absolute minimum required for the intended use of the information.

## **6. Consequences of Collecting the Information Less Frequently**

Data collections have been kept to a minimum. A baseline assessment is needed to better design training and programmatic resources for correctional workers. The same survey (**Attachment 3**) will be sent out a second time 2 years following the initial data collection to provide interim evaluation findings and allow for program adjustment to meet goals. For both the baseline and follow-up assessment, survey links will be sent to correctional employers and organizations. Survey respondents will be sampled independently during the baseline and follow-up assessments so while the same individual may participate in both data collections, we will not specifically aim to recruit the same participant twice.

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

This request fully complies with the regulation 5 CFR 1320.5.

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

A. A 60-day Federal Register Notice was published in the *Federal Register* on August 7th, 2023, vol. 88, No. 150, pp. 52164 (**Attachment 2-60 day FRN**). CDC received a single public comment related to this notice and a response was sent to the inquirer (**Attachments 2A-2B**).

B. CDC Consulted with Dr. Richard Kluckow ([richard.kluckow@usdoj.gov](mailto:richard.kluckow@usdoj.gov)) of the Bureau of Justice Statistics and Dr. Mitch Holliday, EDN, RDN ([MHolliday@bop.gov](mailto:MHolliday@bop.gov)) of the Federal Bureau of Prisons in 2023 in the design and application of this survey tool and to ensure the survey was not duplicative of other agency efforts. There are no unresolved issues from these consultations.

C. CDC consulted internally with Dr. Adam Kramer ScD, MPH, RS ([ank5@cdc.gov](mailto:ank5@cdc.gov)), Beth Wittry, MPH, REHS ([xks5@cdc.gov](mailto:xks5@cdc.gov)), of the National Center for Environmental Health Dr. John Gibbins, DVM, MPH ([ffi9@cdc.gov](mailto:ffi9@cdc.gov)), Sarah Hughes, MPH, REHS ([qsn3@cdc.gov](mailto:qsn3@cdc.gov)), and Dr. Wesley Attwood, DCJ ([oyk2@cdc.gov](mailto:oyk2@cdc.gov)), of the National Institute for Occupational Safety and Health in 2023 in the design and application of this survey tool. The following individuals from the Division of Foodborne Waterborne and Environmental Diseases led or were consulted on the design of the survey tool and will be involved in its analysis: Dr. Naomi Drexler, DrPH, MPH ([isj3@cdc.gov](mailto:isj3@cdc.gov)), Adora Nsonwu, MPH ([tvx2@cdc.gov](mailto:tvx2@cdc.gov)), Dr. Hilary Whitham, PhD, MPH, ([kqq7@cdc.gov](mailto:kqq7@cdc.gov)), Dr. Marisa Hast, PhD, MPH, ([iun1@cdc.gov](mailto:iun1@cdc.gov)) and Dr. Lyndsay Bottichio, DrPH, MPH ([xmm8@cdc.gov](mailto:xmm8@cdc.gov)). There are no unresolved issues from these consultations.

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

No payments, gifts, or incentives will be provided for participation in this survey.

## 10. Protection of the Privacy and Confidentiality of Information Provided by Respondents

CDC’s Information Systems Security Officer reviewed this submission and determined that the Privacy Act does apply. A Privacy Impact Assessment is included as part of this submission (**Attachment 6-Privacy Impact Assessment**).

## 11. Institutional Review Board (IRB) and Justification for Sensitive Questions

### Institutional Review Board (IRB)

NCEZID’s Human Subjects Advisor has determined that information collection is not research involving human subjects. IRB approval is not required (**Attachment 5-Human Subjects Determination**).

### Justification for Sensitive Questions

There are no sensitive questions included in this survey.

## 12. Estimates of Annualized Burden Hours and Costs

### A. Estimated Annualized Burden Hours

**12.A** and **12.B** provide details about how this estimate was calculated, assuming 5,000 participants in each the baseline (in year 1) and follow-up assessments (2 years later). There are more than 390,000 persons employed as correctional officers in the United States according to the U.S. Bureau of Labor Statistics. There are likely thousands of additional workers in correctional settings from maintenance workers, to healthcare workers, and others, although no overall estimate of correctional workers is available. While we aim to distribute this survey to as many individuals working in correctional settings as possible, this survey link is being distributed via email, without incentives, therefore we expect a low response rate (<1.5%). The survey includes a maximum of 45 questions which are largely multiple choice. Pilot testing reveals the survey should take less than 30 minutes to complete per individual. 5,000 respondents will be surveyed during the baseline assessment in year 1, and an additional 5,000 respondents will be surveyed for the follow-up assessment 2 years later. A total of 10,000 individuals will be surveyed (resulting in a total of 5,000 burden hours) over the 3-year period; annual burden hours will be 2,500. The same survey tool (**Attachment 3**) will be used in both the baseline and follow-up assessments. Survey respondents will be sampled independently during the baseline and follow-up assessments so while the same individual may participate in both data collections, we will not specifically aim to recruit the same participant twice.

Type of Respondent	Form Name	No. of Respondents	No. Responses per Respondent	Avg. Burden per response (in hrs.)	Total Burden (in hrs.)
Correctional workers in the U.S.	<b>Food safety knowledge, attitudes, and practices (KAP) survey</b>	5000	1	30/60	2500

	<b>of correctional workers</b>				
<b>Total</b>					2500

**B. Estimated Annualized Burden Costs**

There are a range of occupational categories included in correctional workers from maintenance workers to healthcare providers. We believe the majority of correctional workers to be correctional officers and jailers, thus we used the mean national hourly wage for this category.

Type of Respondent	Form Name	Total Burden Hours	Hourly Wage Rate*	Total Respondent Costs
Correctional workers in the U.S.	<b>Food safety knowledge, attitudes, and practices (KAP) survey of correctional workers</b>	2500	\$26.33	\$65,825
<b>Total</b>				

\* The United States Department of Labor, Bureau of Labor Statistics, May 2022, mean hourly wage for correctional officers and jailers (<https://www.bls.gov/oes/current/oes333012.htm>).

**13. Estimates of Other Total Annual Cost Burden to Respondents or Record Keepers**

There are no costs to respondents other than their time to participate.

**14. Annualized Cost to the Government**

The main anticipated cost to the federal government relates to the design, facilitation, and analysis of the survey. We estimated 5% annual time of a GS-13 epidemiologist, paid roughly \$100,000 annually.

Estimated Annualized Cost to the Government per Activity	
Cost Category	Estimated Annualized Cost
Personnel cost for survey facilitation, design, and analysis	\$5,000
<b>Total</b>	<b>\$5,000</b>

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

**16. “This is a new data/information collection.Plans for Tabulation and Publication and Project Time Schedule**

Data collection is anticipated to begin in as soon as OMB approval is obtained. Baseline data will be analyzed in the months following the data collection to provide a summary of knowledge, attitudes, and practices on which programmatic training and resources may be developed. Survey results will be summarized using frequencies, bivariate and multivariate analyses, when appropriate. Results of individual respondent will not be discussed singularly in the summary of analysis. Data will be analyzed in SAS or R statistical software. The results will be included in a manuscript and submitted for



publication in the peer-reviewed literature and results will also be shared with correctional associations and leaders through meetings and conferences. The follow-up survey will be administered 2 years following the baseline to provide interim program evaluations. Baseline assessments will be compared to follow-up assessments 2 years later to look for notable changes in attitudes and practices or provide information for programmatic adjustment. Data from both surveys may be published in the peer reviewed literature and will be shared with correctional programs and associations through meetings and conferences. All data collection, analysis and reporting can be accomplished within the 3 years of the requested approval.

Project Time Schedule	
Activity	Time Schedule
Baseline survey data collection	December 2023-January 2024 (following OMB approval)
Baseline survey analysis	February 2024-April 2024
Publication and dissemination of baseline results	April 2024-June 2024
Program work	September 2024-September 2027
Follow-up survey data collection	December 2025-January 2026
Follow-up survey analysis	February 2026-April 2026
Publication and dissemination of follow-up analysis and comparison with baseline	April 2026-June 2026

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

The display of the OMB Expiration date is not inappropriate.

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

There are no exceptions to the certification.

**Attachments**

1. Authorizing Legislation
2. 60-Day FRN
  - a. Comment #1
  - b. Response #1
3. Information Collection instrument ( Food safety knowledge, attitudes, and practices (KAP) survey of correctional workers, consent shown at top of survey)
4. Partner Letter
5. Human Subjects Determination
6. Privacy Impact Assessment