

PAPERWORK REDUCTION ACT SUBMISSION WORKSHEET  
Part II: Information Collection Detail

**This template is intended for staff without an ICRAS account. Please fill out and submit to the appropriate Operating Division to enter into ICRAS. The form mirrors the screens available in the ICRAS 4 system. To request an account to log into ICRAS.**

**Instructions for filling out the form are available at [www.paperworkreduction.gov](http://www.paperworkreduction.gov).**

1. Title High Risk Inpatient Influenza Vaccination Numerator Data Form - Method B		
2. Is this a Common Form?  <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No	3. Obligation to respond ( <i>check one</i> )  a. <input checked="" type="checkbox"/> Voluntary  b. <input type="checkbox"/> Required to obtain or retain benefits  c. <input type="checkbox"/> Mandatory	4. Frequency of reporting ( <i>check all that apply</i> )  a. <input type="checkbox"/> Hourly (24 -7) b. <input type="checkbox"/> Hourly Bus (40 per week) c. <input type="checkbox"/> Daily (7 per week) d. <input type="checkbox"/> Daily Bus (5 per week) e. <input type="checkbox"/> Weekly (52 per year) f. <input type="checkbox"/> Monthly g. <input checked="" type="checkbox"/> Yearly h. <input type="checkbox"/> Every Decade i. <input type="checkbox"/> Quarterly j. <input type="checkbox"/> Semi-annually k. <input type="checkbox"/> Biennially l. <input type="checkbox"/> Once m. <input type="checkbox"/> occasionally
5. CFR Citation(s) for the information collection under review (if applicable).  Title _____ Part _____ Section _____ Title _____ Part _____ Section _____ Title _____ Part _____ Section _____ Title _____ Part _____ Section _____		
6. Information Collection Instruments - Send all instruments along with the Part 2 form(s). If more than one Part 2 is completed make sure to identify which instruments are associated with which Part 2 form.		
7. Federal Enterprise Architecture Business Reference Model (Select one Services for Citizens Line of Business and one Subfunction from its group)		
_____	_____	
Services for Citizens Line of Business	Subfunction	
None	_____	
Community and Social Services ___	<b>Homeownership Promotion</b> ___ <b>Community and Regional Development</b> ___ <b>Social Services</b> ___ <b>Postal Service</b> ___ <b>None</b> ___	
Correctional Activities ___	<b>Criminal Incarceration</b> ___ <b>Criminal Rehabilitation</b> ___ <b>None</b> ___	
Defense and National Security ___	<b>Strategic National and Theater Defense</b> ___ <b>Operational Defense</b> ___ <b>Tactical Defense</b> ___ <b>None</b> ___	

Disaster Management__	<b>Disaster Monitoring and Predication__</b> <b>Disaster Preparedness and Planning__</b> <b>Disaster Repair and Restore__</b> <b>Emergency Response__</b> <b>None__</b>
Economic Development__	<b>Business and Industry Development__</b> <b>Intellectual Property Protection__</b> <b>Financial Sector Oversight__</b> <b>Industry Sector Income Stabilization__</b> <b>None__</b>
Education__	<b>Elementary, Secondary, and Vocational Education__</b> <b>Higher Education__</b> <b>Cultural and Historic Preservation__</b> <b>Cultural and Historic Exhibition__</b> <b>None__</b>
Energy__	<b>Energy Supply__</b> <b>Energy Conservation and Preparedness__</b> <b>Energy Resource Management__</b> <b>Energy Production__</b> <b>None__</b>
Environmental Management__	<b>Environmental Monitoring and Forecasting__</b> <b>Environmental Remediation__</b> <b>Pollution Prevention and Control__</b> <b>None__</b>
General Science and Innovation__	<b>Scientific and Technological Research and Innovation__</b> <b>Space Exploration and Innovation__</b> <b>None__</b>
Health_X__	<b>Illness Prevention__</b> <b>Immunization Management__</b> <b>Public Health Monitoring_X__</b> <b>Health Care Services__</b> <b>Consumer Health and Safety__</b> <b>None__</b>
Homeland Security__	<b>Border and Transportation Security__</b> <b>Key Asset and Critical Infrastructure Protection__</b> <b>Catastrophic Defense__</b> <b>None</b>
Income Security__	<b>General Retirement and Disability__</b> <b>Unemployment Compensation__</b> <b>Housing Assistance__</b> <b>Food and Nutrition Assistance__</b> <b>Survivor Compensation__</b> <b>None</b>
Intelligence Operations__	<b>Intelligence Planning and Direction/Needs__</b> <b>Intelligence Collection__</b> <b>Intelligence Analysis and Production__</b> <b>Dissemination__</b> <b>None</b>
International Affairs and Commerce__	<b>Foreign Affairs__</b> <b>International Development and Humanitarian Aid__</b> <b>Global Trade__</b> <b>None</b>
Law Enforcement__	<b>Criminal Apprehension__</b> <b>Criminal Investigation and Surveillance__</b> <b>Citizen Protection__</b> <b>Crime Prevention__</b> <b>Leadership Protection__</b> <b>Property Protection__</b> <b>Substance Control__</b> <b>None</b>
Litigation and Judicial Activities__	<b>Judicial Hearing__</b> <b>Legal Defense__</b> <b>Legal Investigation__</b> <b>Legal Prosecution and Litigation__</b> <b>Resolution Facilitation__</b> <b>None</b>
Natural Resources__	<b>Water Resource Management__</b> <b>Conservation, Marine and Land Management__</b> <b>Recreational Resource Management and Tourism__</b> <b>Agricultural Innovation and Services__</b> <b>None</b>
Transportation__	<b>Air Transportation__</b> <b>Ground Transportation__</b>

	<b>Water Transportation</b> ___ <b>Space Operations</b> ___ <b>None</b>
Workforce Management ___	<b>Training and Employment</b> ___ <b>Labor Rights Management</b> ___ <b>Worker Safety</b> ___ <b>None</b>

See <http://www.feapmo.gov> for the Business Reference Model categories and definitions.

8. Privacy Act System of Records (if applicable)

Title: \_\_\_\_\_

Federal Register Citation: Volume \_\_\_\_\_ Page number \_\_\_\_\_ Publication date \_\_\_\_/\_\_\_\_/\_\_\_\_

9. Respondents

- a. Total # 500
- b. Small Entity # \_\_\_\_\_
- c. Percent Electronic 100

Affected public (choose one)

- a. \_\_\_ Individuals or households
- b.  Private Sector
- c. \_\_\_ State, Local, or Tribal Governments
- d. \_\_\_ Federal Government

(if Private Sector check all that apply)

- a.  Business or other for-profits
- b.   Not-for-profit institutions
- c. \_\_\_  Farms

10. Frequency: How often on average will each respondent respond to the Information Collection?

- Number of Responses per Respondent 250  
 Per (select the most appropriate time period for this collection)
- a. \_\_\_ Hour (24-7) - 8736 per year
  - b. \_\_\_ Business Hour (40 per week) - 2080 per year
  - c. \_\_\_ Day (7 per week) - 364 per year
  - d. \_\_\_ Business Day (5 per week) - 260 per year
  - e. \_\_\_ Week - 52 per year
  - f. \_\_\_ Month - 12 per year
  - g.  Year
  - h. \_\_\_ Decade .1 per year
  - i. \_\_\_ Quarter - 4 per year
  - j. \_\_\_ Half-Year - 2 per year
  - k. \_\_\_ Biennial - 0.5 per year

Calculated: Annual Frequency = 250 times a year (per respondent)

Calculated: Annual Number Of Responses = 125,000 a year

11. Hour and Cost Burden

Enter the hours and cost (per response) broken out by reporting, record keeping, and third-party disclosure.

	Time per Response	Hour per response	Annual Hour Burden	Cost per Response	Annual cost Burden
Reporting	10/60	0.17	20,833	\$34.65	\$721,863.45
Record keeping					
Third party disclosure					
Total					

12. Allocate the change in burden

	Total Requested	Change Due to New Statute	Change Due to Agency Discretion	Due to Agency Estimate	Change Due Violation	Currently Approved
a. Annual Responses	125,000			125,000		0

b. Annual Hour Burden	20,883 hour	hours	hour	20,883 hours	hours	0 hours
c. Annual Cost Burden	\$721,863.45	\$		\$721,863.45	\$	\$0.00