



CDC I-Catalyst Program 0920-16AOW PUBLIC COMMENT ON FEDERAL REGISTER BELOW

This is a Comment on the **Centers for Disease Control and Prevention (CDC) Notice: CDC I-Catalyst Program 0920-16AOW 2016-13982**

For related information, [Open Docket Folder](#)

Comment Period Closed
Aug 15 2016, at 11:59 PM ET

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Comment

From: Jean Public <jeanpublic1@yahoo.com>
Sent: Saturday, June 18, 2016 4:01 PM
To: OMB-Comments (CDC);
HELP@REGULATIONS.GOV
Cc: INFO@TAXPAYER.NET; MEDIA@CAGW.ORG;
VICEPRESIDENT@WHITEHOUSE.GOV
Subject: PUBLIC COMMENT ON FEDERAL
REGISTER BELOW

FIRST THING I WENT TO REGULATIONS GOV AS THIS INEPT AGENCY SAID TO DO AND LOOKED FOR AND TRIED TO FIND 2016-13982. NO LUCK. THEN I TRIED CDC-2016-0050. NO LUCK. DIDNT WORK. AGAIN CDC HAS FAILED TO LIST ON REGULATIONS.GOV THE WAY FOR THE PUBLIC TO COMMENT. SO I HAVE TO COMMENT IN AN ALTERNATE WAY BECAUSE OF THE COMPLETE FAILURE OF THE CDC. THIS IS AN EXAMPLE OF THE SLOPPY, INEPT WAY THIS AGENCY OPERATES. FAT CAT BLOATED BUREAUCRACY STUPIDITY.

THIS PROGRAM AS USUAL RELIES ONLY ON EMPLOYEE IMPERIALISM. THIS AGENCY COMPLETELY DISRESPECTS THE PUBLIC. EVEN WHEN HIGHLY QUALIFIED PUBLIC HAS QUESTIONS, NONE OF THEM ARE EVER ANSWERED BY THE SECRETIIVE, SNEAKY EMPLOYEES WHO WORK IN THIS AGENCY, WHO ARE AFRAID TO STAND UP FOR WHAT THEY TRY TO PUSH ONT HE GENRAL PUBLIC. THE HARMFUL VACCINES.

THIS IS JUST MORE OF THE SAME CDC BLINDNESS TO PUBLIC DEMANDS ON WHAT THEY NEED AND WANT FROM THIS AGENCY. AND THE DISRESPECT GIVEN TO THAT PUBLIC WHEN THEY WANT INFORMATION AND ANSWERS FROM THE HARMFUL

ACTIONS OF THIS AGENCY. THE PUBLIC COUNTS FOR NOTHING WITH THESE IMPERIALISTS AT THIS AGENCY. I OPPOSE THIS PROJECT. I OPPOSE ALL FUNDING FOR THIS PROJECT. THE FUNDS FOR THIS PROJECT SHOULD BE ZERO. WE DONT NEED MORE EMPLOYEE IDEAS. WE NEED MORE PUBLIC IDEAS COUNTENANCED AND INVESTIGATED BY THIS AGENCY.

GOVT FOR TH EPEOPLE VANISHED FROM THIS AGENCY. THIS AGENCY WORKS ON GOVT FOR THE IMPERIALIST EMPLOYEES. THIS IS AN EVIL CORRUPT AGENCY. IT NEEDS TO BE SHUT DOWN. WE NEED TO START FRESH. THE EFFECTS OF BIG PHARMA AND BIG MEDICINE HAVE BEEN FAR TOO CORRUPTING HERE. ALL IT IS IS ABOUT MONEY FOR THE IMPERIALISTS WHO REVOLVE FROM BIG PHARMA TO CDC

AND BACK AGAIN, WITH RAISES EACH TIME FOR WORK THAT SCREWS THE AMERICAN PUBLIC. THIS IS MORE FAKERY THIS PROPOSAL SUCKS. THIS COMMENT IS FOR THE PUBLIC RECORD. PLEASE RECEIPT.

JEAN PUBLIEE JEANPUBLIC1@YAHOO.COM

> Federal
 > Register Volume 81, Number 114 (Tuesday, June 14, 2016) [Notices]
 > [Pages 38707-38709] From the Federal Register Online via the
 > Government Publishing Office [www.gpo.gov] [FR Doc No: 2016-13982]
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 > DEPARTMENT OF HEALTH AND HUMAN SERVICES
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 > Centers for Disease Control and Prevention
 >
 > [60Day-16-16AOW; Docket No. CDC-2016-0050]
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 >
 > Proposed Data Collection Submitted for Public Comment and
 > Recommendations
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 > AGENCY: Centers for Disease Control and Prevention (CDC), Department
 > of Health and Human Services (HHS).
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 > ACTION: Notice with comment period.
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 > SUMMARY: The Centers for Disease Control and

Prevention (CDC), as part

- > of its continuing effort to reduce public burden and maximize the
- > utility of government information, invites the general public and
- > other Federal agencies to take this opportunity to comment on proposed
- > and/or continuing information collections, as required by the
- > Paperwork Reduction Act of 1995. This notice invites comment on the
- > CDC I- Catalyst program. The I-Catalyst program is intended to help
- > CDC employees get their ideas out of the starting blocks and down the
- > track through a discovery,
- >
- > [[Page 38708]]
- >
- > ideation, and prototyping process. The expected result is that CDC
- > staff will be empowered to implement innovative strategies and
- > solutions that create value for a set of beneficiaries.
- >
- > DATES: Written comments must be received on or before August 15, 2016.
- >
- > ADDRESSES: You may submit comments, identified by Docket No.
- > CDC-2016-
- > 0050 by any of the following methods:
- > Federal eRulemaking Portal: Regulations.gov. Follow the
- > instructions for submitting comments.
- > Mail: Leroy A. Richardson, Information Collection Review Office,
- > Centers for Disease Control and Prevention, 1600 Clifton Road NE.,
- > MS-D74, Atlanta, Georgia 30329.
- > Instructions: All submissions received must include the agency
- > name and Docket Number. All relevant comments received will be posted
- > without change to Regulations.gov, including any personal information
- > provided. For access to the docket to read background documents or
- > comments received, go to Regulations.gov.
- >
- > Please note: All public comment should be submitted through the
- > Federal eRulemaking portal (regulations.gov) or by U.S. mail to the
- > address listed above.
- >
- >

- > FOR FURTHER INFORMATION CONTACT: To request more information on the
- > proposed project or to obtain a copy of the information collection
- > plan and instruments, contact the Information Collection Review
- > Office, Centers for Disease Control and Prevention, 1600 Clifton Road
- > NE., MS- D74, Atlanta, Georgia 30329; phone: 404-639-7570; Email:
- > omb@cdc.gov.
- >
- > SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995
- > (PRA) (44 U.S.C. 3501-3520), Federal agencies must obtain approval
- > from the Office of Management and Budget (OMB) for each collection of
- > information they conduct or sponsor. In addition, the PRA also
- > requires Federal agencies to provide a 60-day notice in the Federal
- > Register concerning each proposed collection of information, including
- > each new proposed collection, each proposed extension of existing
- > collection of information, and each reinstatement of previously
- > approved information collection before submitting the collection to
- > OMB for approval. To comply with this requirement, we are publishing
- > this notice of a proposed data collection as described below.
- > Comments are invited on: (a) Whether the proposed collection of
- > information is necessary for the proper performance of the functions
- > of the agency, including whether the information shall have practical
- > utility; (b) the accuracy of the agency's estimate of the burden of
- > the proposed collection of information; (c) ways to enhance the
- > quality, utility, and clarity of the information to be collected;
- (d)
- > ways to minimize the burden of the collection of information on
- > respondents, including through the use of automated collection
- > techniques or other forms of information technology; and
- (e) estimates
- > of capital or start-up costs and costs of operation, maintenance, and
- > purchase of services to provide information. Burden means the total
- > time, effort, or financial resources expended by persons to

generate,
> maintain, retain, disclose or provide information to or for a
Federal
> agency.
> This
> includes the time needed to review instructions; to
develop, acquire,
> install and utilize technology and systems for the purpose
of
> collecting, validating and verifying information, processing
and
> maintaining information, and disclosing and providing
information; to
> train personnel and to be able to respond to a collection of
>
> information, to search data sources, to complete and
review the
> collection of information; and to transmit or otherwise
disclose the
> information.
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> Proposed Project
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> CDC I-Catalyst Program--New--Office of the
Associate Director for
> Science, Centers for Disease Control and Prevention
(CDC).
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> Background and Brief Description
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> The CDC Office of Technology and Innovation (OTI)
within Office of
> the Associate Director for Science (OADS) fosters
innovative science
> and promotes the testing and implementation of innovative
ideas that
> improve CDC's ability to have public health impact. To arm
CDC staff
> with an expanded skill-set and tools to evaluate and
translate their
> insights and ideas into solutions, CDC developed an
experiential
> innovation curriculum called I-Catalyst. The program was
created with
> the belief that innovation should be customer driven, be
based on user
> research, and is something people at all levels of an
organization can
> engage in.
> The goal of the I-Catalyst program is to help CDC
employees test
> and explore their ideas through a discovery, ideation, and
prototyping
> process. I-Catalyst offers a process for defining problems
and
> developing strategies to solutions that will help improve
the quality

- > and efficiency of innovation efforts and, as a result, overall
- > performance. Through the I-Catalyst Program, teams work to define and
- > articulate their problem space to find effective solutions.
- > Participating teams will go through a hypothesis-testing, scientific
- > method of discovery to gather important insights and identify issues
- > associated with their projects. Teams are forced "out of the
- > classroom" to conduct interviews, study customer/stakeholder needs,
- > collect feedback, and find partnership opportunities. It is expected
- > that participants will leave the program with the ability to evaluate
- > and translate their insights into solutions.
- > The I-Catalyst program provides CDC staff with real-world,
- > hands-on entrepreneurship training. Through I-Catalyst CDC staff make
- > hypothesis about how the world works, and then test them by getting
- > out of the building and talking to customers and/or stakeholders. Only
- > conversations with potential customers/stakeholders can provide the
- > facts from which hypotheses are proven or disproven about whether a
- > solution (whether a product, process, etc.) creates value for the
- > intended beneficiaries. Participants have to go out into the world and
- > learn by doing. The process will engage customers/stakeholders in a
- > process that will identify what they most value and need and what
- > their top barriers and pain points are, and source solutions that will
- > have high levels of efficacy and user acceptability.
- > I-Catalyst combines in-class lectures with out-of-class learning
- > and interactions with various customers/stakeholders. This curriculum
- > requires full participation from the entire team. The program guides
- > teams and individuals through a series of workshops that helps
- > participants articulate a problem, create evidence-based plan for
- > assessment, and conduct unstructured interviews with customers/
- > stakeholders. Ongoing technical assistance and support from a cadre of
- > experts is provided to teams as they define the problem, map their
- > operational model, and identify and interact with

customers/
> stakeholders. Each team member must commit to in-depth preparation,
> attendance at the lectures and workshops, and at least 15 additional
> hours per week for customer discovery.
> Teams will be spending a significant amount of time in between
> each of the lectures outside the class talking to customers. Each week
> teams will conduct a minimum of five customer interviews with
> individuals who represent different segments of customers/stakeholders
> whom they expect will gain value through their solution or will
> benefit from value streams that are being produced by their solution
> (in terms of social and/or environmental impact). The types of
> customers or stakeholders teams'
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> [[Page 38709]]
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> interview will be specific to the proposed solution and context. For
> example, teams may interview government employees if the solution is
> intended to improve how government employees do their work.
> On the
> other hand, teams may interview individuals who work industry and
> businesses if the teams determines that they are the intended
> beneficiaries.
> Using a generic information collection plan, this data collection
> covers qualitative information to be obtained through on-site,
> unstructured interviews with individuals who represent the customers
> or stakeholders CDC teams are attempting to serve or benefit.
> CDC
> anticipates conducting I-Catalyst with three cohorts of teams over the
> next two years. With each I-Catalyst cohort teams will interview their
> customers/stakeholders for an average of 30 minutes. Each team will
> interview approximately 50 respondents. With 8-10 teams participating
> in each of the three I-Catalyst training cohorts, approximately 1,500
> respondents will be interviewed. Of these, approximately 40% of

- > individuals will be internal CDC/ATSDR staff and 60% will be external
- > partners, stakeholders, or customers. Data to be collected includes
- > information regarding what they most value and need and their top
- > barriers and pain points.
- > CDC expects that teams participating in the I-Catalyst will be
- > empowered to implement innovative strategies and solutions that create
- > value for a set of beneficiaries. The ultimate goal of the I-Catalyst
- > program is to give CDC staff skills to successfully transfer knowledge
- > into value-based solutions that benefit society and broaden the
- > agency's impact.
- > Participation in the I-Catalyst interviews is completely
- > voluntary.
- > A three-year approval is requested. There is no cost to respondents
- > other than their time.

> Estimated Annualized Burden
> Hours

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Average Number of respondents	burden per responses (in respondent hrs.)	Form name	Total burden (in hrs.)
1	1		500

> -----

> Cohort 1:
> External Partners, Forms will not
> 500 1 1 500
> Stakeholders, or be used.
> Customers.

> Cohort 2:
> External Partners, Forms will not
> 500 1 1 500
> Stakeholders, or be used.
> Customers.

> Cohort 3:
> External Partners, Forms will not
> 500 1 1 500
> Stakeholders, or be used.
> Customers.

> -----
> Total.....
>

> 1,500
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> Leroy A. Richardson,
> Chief, Information Collection Review Office, Office of
> Scientific
> Integrity, Office of the Associate Director for Science,
> Office of the
> Director, Centers for Disease Control and Prevention.
> [FR Doc. 2016-13982 Filed 6-13-16; 8:45 am] BILLING
> CODE 4163-18-P
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