

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Middle and High School Age Adolescents.	Youth questionnaire	20,000	1	50/60	16,667
Middle and High School Age Adolescents.	Pre/Post youth questionnaire	10,000	2	50/60	16,667
Middle and High School Age Adolescents.	Youth interview/focus group guide ...	3,000	2	1.5	9,000
Parents/caregivers of adolescents	Parent/Caregiver questionnaire	7,500	2	25/60	6,250
Parents/caregivers of adolescents	Parent/Caregiver interview/focus group guide.	3,000	2	1.5	9,000
Total	57,584

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. 2017-24317 Filed 11-7-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-17-17AZG; Docket No. CDC-2017-0076]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

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 a proposed assessment of cancer prevention services at selected community mental health centers. CDC seeks to request an Office of Management and Budget (OMB) clearance for a three-year data collection project.

DATES: Written comments must be received on or before January 8, 2018.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2017-0076 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 Leroy A. Richardson, 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.

Proposed Project

Assessment of Cancer Prevention Services at Community Mental Health Centers—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Compared to people without mental illness (MI), people with MI have higher rates of cancer risk factors such as smoking and obesity.

Many people with MI receive outpatient mental health care at community mental health centers (CMHC), and some of these facilities provide screening for cardiovascular disease and other chronic conditions. The extent to which cancer prevention services are provided at CMHCs is not understood.

This project will use online instruments and telephone interviews with psychiatric clinicians and administrators at selected CMHCs across

the United States to assess the capacities of these facilities to provide cancer prevention services (e.g., cancer risk factor education, cancer screening referrals, tobacco cessation counseling) to clients.

With a goal to achieve a final analytic sample of at least 250 psychiatric clinicians and 250 administrators at CMHCs, researchers will interview a subset of 5%-10% of each group by telephone.

The objectives of this study are to (1) describe the capacity of CMHCs to provide cancer prevention services; (2) describe any written policies and procedures at CMHCs for providing these services; (3) describe any

collaboration of CMHCs with health care providers or community health workers/organizations to provide these services; and (4) describe any barriers to providing these services. Researchers will ask respondents that provide cancer prevention services about best practices and lessons learned.

There will be no costs to the respondents other than their time. To calculate the total burden, we estimated 500 respondents for the surveys and 50 for the interviews. The average burden will vary from 15–20 minutes for the surveys and one hour for the interviews. The total estimated annual burden hours are 392.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Psychiatric clinicians	Clinician Survey Instrument	500	1	15/60	125
Administrators	Administrator Survey Instrument	500	1	20/60	167
Psychiatric clinicians	Clinician Interview	50	1	1	50
Administrators	Administrator Interview	50	1	1	50
Total					392

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.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–18–1039]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled *Information Collection on Cause-Specific Absenteeism in Schools and Evaluation of Influenza Transmission within Student Households* to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on April 27, 2017 to obtain comments from the public and affected agencies. CDC

received two comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy

of the information collection plan and instruments, call (404) 639–7570 or send an email to omb@cdc.gov. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW., Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Information Collection on Cause-Specific Absenteeism in Schools and Evaluation of Influenza Transmission within Student Households—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The CDC requests approval of a revised information collection to improve our understanding of the role of influenza-like illness (ILI)-specific absenteeism in schools in predicting community-wide influenza transmission and to detect within-household transmission of influenza in households from which a student has been absent from school due to ILI.

This information collection request aligns DGMQ/CDC’s mission to reduce morbidity and mortality in mobile