**OMB Control Number History**

**Blood Lead Surveillance System (BLSS) (formerly known as ‘The Healthy Homes and Lead Poisoning Prevention Surveillance System (HHLPSS)’)**

OMB Control Number: **0920-0931**

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| --- | --- | --- | --- | --- |
| [**ICR Ref. No.**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931) | [**Request Type**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931) | [**Date Received By OIRA**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931) | [**Conclusion Date**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931) | [**Conclusion Action**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931) |
| 0920-0931 | Revision of a currently approved collection  NCEH and NIOSH published a 60-day Federal Register Notice for a new CBLS-ABLES ICR on April 6, 2017, Vol. 82, No. 65, pp. 16839 (Attachment 2a). A 60-day Federal Register Notice to extend HHLPSS was also published in the Federal Register on November 8, 2017, vol. 82, No. 215, pp. 51841 (Attachment 2b). In consultation with the OMB Office of Information and Regulatory Affairs (OIRA), the programs have decided to combine all program changes under this single HHLPSS revision ICR. | 03/27/2018 | pending | pending |
| **IC:** pending | | | |
| [201502-0920-012](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=201502-0920-012) | Extension without change of a currently approved collection | 02/26/2015 | 05/20/2015 | [Approved without change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931)  Exp. Date 05/31/2018 |
|  | |  | | --- | | Terms of Clearance: Clearance is provided contingent on CDC advising its grantees/contractors of the change in wording of the race/ethnicity and asthma questions that were made during clearance. Dissemination of the aggregate data set and statistics generated from the aggregate data set will always be accompanied by the following caveats: These data were collected for program management purposes. The data are not generalizable at the national, state, or local level. Furthermore, because inclusion criteria vary across grantees, comparisons of aggregate statistics across programs can be misleading (i.e., state policies and practices for blood lead testing vary and local priorities drive decisions regarding which homes receive assessments for other housing hazards). However, descriptive statistics can be used to compare changes overtime in a given area when the method by which housing units are chosen for inclusion remains the same. With a thoughtful understanding of the approach used to include housing units in a given location, HHLPPS can be used to make associations between the number of individuals in a given area and a specific housing hazard or health condition and geographic descriptors such as poverty, age of housing, tenancy, and health conditions." |  |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 05/31/2018 | 36 Months From Approved | 05/31/2015 | | Responses | 160 | 160 | 160 | | Time Burden (Hours) | 640 | 640 | 640 | | Cost Burden (Dollars) | 15,000 | 15,000 | 0 | | | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Estimated Annualized Burden Hours** | | | | | | | Type of Respondents | Form  Name | No. of  Respondents | No. of  Responses per Respondent | Average Burden per Response  (in hours) | Total  Burden (in hours) | | State, local, and territorial Health Departments | Healthy Homes and Lead Poisoning Surveillance Variables | 40 | 4 | 4 | 640 | | Total | | | | | 640 | | | | |
| **IC:** Healthy Homes and Lead Poisoning Surveillance Variables  <https://www.reginfo.gov/public/do/DownloadDocument?objectID=53666501>  (NIOSH variables combined in Table 7 of HHLPSS Form) | | | |
| [201111-0920-005](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=201111-0920-005) | New collection (Request for a new OMB Control Number) | 11/22/2011 | 04/23/2012 | [Approved with change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0931)  Exp. Date 04/30/2015 |
|  | |  | | --- | | Terms of Clearance: Clearance is provided contingent on CDC advising its grantees/contractors of the change in wording of the race/ethnicity and asthma questions that were made during clearance. Dissemination of the aggregate data set and statistics generated from the aggregate data set will always be accompanied by the following caveats: These data were collected for program management purposes. The data are not generalizable at the national, state, or local level. Furthermore, because inclusion criteria vary across grantees, comparisons of aggregate statistics across programs can be misleading (i.e., state policies and practices for blood lead testing vary and local priorities drive decisions regarding which homes receive assessments for other housing hazards). However, descriptive statistics can be used to compare changes overtime in a given area when the method by which housing units are chosen for inclusion remains the same. With a thoughtful understanding of the approach used to include housing units in a given location, HHLPPS can be used to make associations between the number of individuals in a given area and a specific housing hazard or health condition and geographic descriptors such as poverty, age of housing, tenancy, and health conditions." |  |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 04/30/2015 | 36 Months From Approved |  | | Responses | 160 | 160 | 0 | | Time Burden (Hours) | 640 | 640 | 0 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Estimated Annualized Burden Hours** | | | | | | | Type of Respondents | Form  Name | No. of  Respondents | No. of  Responses per Respondent | Average Burden per Response  (in hours) | Total  Burden (in hours) | | State, local, and territorial Health Departments | Healthy Homes and Lead Poisoning Surveillance Variables | 40 | 4 | 4 | 640 | | Total | | | | | 640 | | | | |
| **IC:** Healthy Homes and Lead Poisoning Surveillance Variables  <https://www.reginfo.gov/public/do/DownloadDocument?objectID=31823701>  (NIOSH variables combined in Table 7 of HHLPSS Form) | | | |

**OMB Control Number History**

**National Blood Lead Surveillance**

OMB Control Number:**0920-0337**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [**ICR Ref. No.**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) | [**Request Type**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) | [**Date Received By OIRA**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) | [**Conclusion Date**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) | [**Conclusion Action**](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) |
| [200805-0920-008](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200805-0920-008) | Discontinue | 04/26/2012 | 04/27/2012 | [Approved](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) |
|  | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  | | **Inventory as of this Action** | | **Requested** | | **Previously Approved** | | Expiration Date | 01/31/2012 | | 36 Months From Approved | | 01/31/2009 | | | Responses | 328 | | 328 | | 336 | | | Time Burden (Hours) | 656 | | 656 | | 672 | | | Cost Burden (Dollars) | 0 | | 0 | | 0 | | | | | |
| **IC:** State and Local Health Department Surveillance for Childhood National Blood Lead Surveillance System  <https://www.reginfo.gov/public/do/PRAViewIC?ref_nbr=200805-0920-008&icID=6764>  **IC:** State and Local Health Department Surveillance for Adult National Blood Lead Surveillance System  <https://www.reginfo.gov/public/do/PRAViewIC?ref_nbr=200805-0920-008&icID=184878> | | | |
| [200805-0920-008](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200805-0920-008) | Emergency extension | 01/31/2012 | 01/31/2012 | [Approved](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337)  Exp. Date 01/31/2012 |
|  | |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 01/31/2012 | 36 Months From Approved | 01/31/2009 | | Responses | 328 | 328 | 336 | | Time Burden (Hours) | 656 | 656 | 672 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** State and Local Health Department Surveillance for Childhood National Blood Lead Surveillance System  **IC:** State and Local Health Department Surveillance for Adult National Blood Lead Surveillance System | | | |
| [200805-0920-008](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200805-0920-008) | Revision of a currently approved collection | 05/13/2008 | 01/08/2009 | [Approved without change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337)  Exp. Date 01/31/2009 |
|  | |  | | --- | |  |  |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 01/31/2012 | 36 Months From Approved | 01/31/2009 | | Responses | 328 | 328 | 336 | | Time Burden (Hours) | 656 | 656 | 672 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
|  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Estimated Annualized Burden Hours** | | | | | | Type of  Respondents | Number of  Respondents | No. Responses per Respondent | Average Burden per  Response  (in hours) | Total Annual  Burden  (in hours) | | State and Local Health Departments for Child Surveillance | 42 | 4 | 2 | 336 | | State and Local Health Departments for Adult Surveillance | 40 | 4 | 2 | 320 | | TOTAL |  |  |  | 656 | | | | |
| **IC:** State and Local Health Department Surveillance for Childhood National Blood Lead Surveillance System  <https://www.reginfo.gov/public/do/PRAViewIC?ref_nbr=200805-0920-008&icID=6764>  **IC:** State and Local Health Department Surveillance for Adult National Blood Lead Surveillance System  <https://www.reginfo.gov/public/do/PRAViewIC?ref_nbr=200805-0920-008&icID=184878> | | | |
| [200501-0920-002](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200501-0920-002) | Reinstatement with change of a previously approved collection | 01/28/2005 | 05/06/2005 | [Approved without change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337)  Exp. Date 05/31/2005 |
|  | |  | | --- | | Terms of Clearance: Approved consistent with the following terms of clearance: prior collection of information under the ABLES program constituted a violation of the Paperwork Reduction Act (PRA) and shall be reported in the 2006 ICB. CDC is reminded that collections of information subject to the PRA must receive approval from OMB prior to fielding. |  |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 05/31/2008 | 05/31/2008 |  | | Responses | 336 | 336 | 0 | | Time Burden (Hours) | 672 | 672 | 0 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** National Blood Lead Surveillance System | | | |
| [200104-0920-006](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200104-0920-006) | Emergency extension | 09/30/2004 | 09/30/2004 | [Approved](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) |
|  | |  | | --- | | Terms of Clearance: Approved consistent with clarification in CDC memo of 6-1-01. |  |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 06/30/2004 | 06/30/2004 | 06/30/2001 | | Responses | 188 | 188 | 148 | | Time Burden (Hours) | 600 | 600 | 456 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** National Childhood Blood Lead Surveillance System | | | |
| [200104-0920-006](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200104-0920-006) | Emergency extension | 06/18/2004 | 06/18/2004 | [Approved](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) |
|  | Terms of Clearance: Approved consistent with clarification in CDC memo of 6-1-01.   |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 06/30/2004 | 06/30/2004 | 06/30/2001 | | Responses | 188 | 188 | 148 | | Time Burden (Hours) | 600 | 600 | 456 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** National Childhood Blood Lead Surveillance System | | | |
| [200104-0920-006](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=200104-0920-006) | Extension without change of a currently approved collection | 04/13/2001 | 06/08/2001 | [Approved without change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337)  Exp. Date 06/30/2001 |
|  | |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 06/30/2004 | 06/30/2004 | 06/30/2001 | | Responses | 188 | 188 | 148 | | Time Burden (Hours) | 600 | 600 | 456 | | Cost Burden (Dollars) | 0 | 0 | 0 |   Terms of Clearance: Approved consistent with clarification in CDC memo of 6-1-01. | | | |
| **IC:** National Childhood Blood Lead Surveillance System | | | |
| [199801-0920-002](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=199801-0920-002) | Emergency extension | 03/29/2001 | 03/29/2001 | [Approved](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337) |
|  | |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 03/31/2001 | 03/31/2001 |  | | Responses | 148 | 148 | 0 | | Time Burden (Hours) | 456 | 456 | 0 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** Childhood Blood Lead Surveillance System | | | |
| [199801-0920-002](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=199801-0920-002) | Reinstatement with change of a previously approved collection | 01/09/1998 | 03/02/1998 | [Approved without change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337)  Exp. Date 03/02/1998 |
|  | |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 03/31/2001 | 03/31/2001 |  | | Responses | 148 | 148 | 0 | | Time Burden (Hours) | 456 | 456 | 0 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** Childhood Blood Lead Surveillance System | | | |
| [199310-0920-003](https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=199310-0920-003) | New collection (Request for a new OMB Control Number) | 10/25/1993 | 01/18/1994 | [Approved without change](https://www.reginfo.gov/public/do/PRAOMBHistory?ombControlNumber=0920-0337)  Exp. Date 01/31/1994 |
|  | |  |  |  |  | | --- | --- | --- | --- | |  | **Inventory as of this Action** | **Requested** | **Previously Approved** | | Expiration Date | 01/31/1997 | 01/31/1997 |  | | Responses | 60 | 60 | 0 | | Time Burden (Hours) | 132 | 132 | 0 | | Cost Burden (Dollars) | 0 | 0 | 0 | | | | |
| **IC:** National Childhood Blood Lead Surveillance System | | | |