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

ICR Ref. No.		Request	Туре			eceived By DIRA	Conclusio	n Date	Conclusion Action	
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.					pending		pending		
	IC: pending									
201502-0920-012	Extension without change of a currently approved collection				02/26/201	.5	05/20/2015		Approved without change 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."									
			ry as of this Action	Requested	i	Previously .	Approved			
	Expiration Date		05/31/2018	36 Months From A	pproved		05/31/2015			
	Responses		160		160		160			
	Time Burden (Hour Cost Burden (Dolla	•	640 15,000		640 15,000		640 0			
	Estimated Annu	alized Burden Hou	ırs							
	Type of	Form	No. of	No. of	Avera	age Burden	Total			

	Respondents	Name			per Response	Burden			
	Respondents	Nume	Respondents	Responses per Respondent	(in hours)	(in hours)			
	State, local, and territorial Health Departments	Healthy Homes and Lead Poisoning Surveillance Variables	40	4	4	640			
	Total					640			
	https://www.reginfo.	es and Lead Poison .gov/public/do/Down ombined in Table 7 o	loadDocument?ob						
201111-0920-005	New collection (Red	quest for a new OME	3 Control Number)	-	11/22/2011	04/23/2012	Approved with change 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."								
			ory as of this Action	Requested	Previously A	Approved			
	Expiration Date 04/30/2015 36 Months From Approved Responses 160 160				0				
	Time Burden (Hour Cost Burden (Dolla	,	640 0		640 0	0			
	Estimated Annualized Burden Hours								
	Type of	Form	No. of	No. of	Average Burden	Total			
	Respondents	Name	Respondents	Responses per	per Response	Burden			

			Respondent	(in hours)	(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.	Reques	t Type	Date Received By OIRA	Conclusion Date	Conclusion Action			
200805-0920-008	Discontinue		04/26/2012	04/27/2012	<u>Approved</u>			
		Inventory as of this Action	Requested	Previously Approved				
	Expiration Date	01/31/2012 36 Months Fi	rom Approved	01/31/2009				
	Responses	328	328	336				
	Time Burden (Hours)	656	656	672				
	Cost Burden (Dollars)	0	0	0				
	https://www.reginfo.gov/public: State and Local Health Do	Local Health Department Surveillance for Childhood National Blood Lead Surveillance System ginfo.gov/public/do/PRAViewIC?ref_nbr=200805-0920-008&icID=6764 Local Health Department Surveillance for Adult National Blood Lead Surveillance System ginfo.gov/public/do/PRAViewIC?ref_nbr=200805-0920-008&icID=184878						
200805-0920-008	Emergency extension		01/31/2012	01/31/2012	Approved Exp. Date 01/31/2012			
		Inventory as of this Action	Requested	Previously Approved				

	Expiration Date	01/31/2012 36 M	onths 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	Revision of a currently approved colle	ection 05/13	3/2008 01	./08/2009	Approved without change Exp. Date 01/31/2009				
	Inver	ntory as of this Action	Requested I	Previously Approved					
	Expiration Date	01/31/2012 36 M	onths 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 pe Response (in hours)	r 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				
200501-0920-002	Reinstatement with change of a previ	iously approved 01/28	3/2005 05	5/06/2005	Approved without change Exp. Date 05/31/2005				
	Terms of Clearance: Approved consi constituted a violation of the Paperwo information subject to the PRA must	ork Reduction Act (PRA) a	and shall be reported in th						

		Inventory as of this Action	Requested	Previously Approved	
	Expiration Date	05/31/2008	05/31/200	08	
	Responses	336	33	36 0	
	Time Burden (Hours)	672	67	['] 2 0	
	Cost Burden (Dollars)	0		0 0	
	IC: National Blood Lead Surve	illance System			
200104-0920-006	Emergency extension		09/30/2004	09/30/2004	<u>Approved</u>
	Terms of Clearance: Approved		on in CDC memo of 6-1-01		
		Inventory as of this Action	Requested	Previously Approved	
	Expiration Date	06/30/2004	06/30/200	06/30/2001	
	Responses	188	18	38 148	
	Time Burden (Hours)	600	60	00 456	
	Cost Burden (Dollars)	0		0 0	
	IC: National Childhood Blood L	ead Surveillance System			
200104-0920-006	Emergency extension		06/18/2004	06/18/2004	<u>Approved</u>
	Terms of Clearance: Approved		on in CDC memo of 6-1-01		
		Inventory as of this Action	Requested	Previously Approved	
	Expiration Date	06/30/2004	06/30/200	06/30/2001	
	Responses	188	18	148	
	Time Burden (Hours)	600	60	00 456	
	Cost Burden (Dollars)	0		0 0	
	IC: National Childhood Blood L	ead Surveillance System			
200104-0920-006	Extension without change of a currently approved collection		04/13/2001	06/08/2001	Approved without change Exp. Date 06/30/2001
	Inventory as of this Action		Requested	Previously Approved	
	Expiration Date	06/30/2004	06/30/200	06/30/2001	
	Responses	188	18	148	
	Time Burden (Hours)	600	60	00 456	
	Cost Burden (Dollars)	0		0 0	
	Terms of Clearance: Approved	consistent with clarification	n in CDC memo of 6-1-01		
	IC: National Childhood Blood L	ead Surveillance System			

199801-0920-002	Emergency extension		03/29/2001		03/29/2001	Approved
	Inventory as of this Action		Requested	l	Previously Approved	
	Expiration Date	03/31/2001	03/	31/2001		
	Responses	148		148	()
	Time Burden (Hours)	456		456	()
	Cost Burden (Dollars)	0		0	()
	IC: Childhood Blood Lead Sur	veillance System				
199801-0920-002	Reinstatement with change of collection	a previously approved	01/09/1998		03/02/1998	Approved without change Exp. Date 03/02/1998
		Inventory as of this Action			Previously Approved	
	Expiration Date	03/31/2001	03/	31/2001		
	Responses	148		148	()
	Time Burden (Hours)	456		456	()
	Cost Burden (Dollars)	0		0	()
	IC: Childhood Blood Lead Sur	veillance System				
199310-0920-003	New collection (Request for a Number)	new OMB Control	10/25/1993		01/18/1994	Approved without change Exp. Date 01/31/1994
	Inventory as of this Action		Requested	l	Previously Approved	
	Expiration Date	01/31/1997	01/	31/1997		
	Responses	60		60	()
	Time Burden (Hours)	132		132	()
	Cost Burden (Dollars)	0		0	()
	IC: National Childhood Blood	Lead Surveillance System				