

6,000 eligible participants. The total annualized burden is 3,126 hours. There are no other costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondent	Form	No. of respondents	No. of responses per respondent	Average burden per response (hours)	Total burden (in hours)
Persons Screened	Eligibility Screening Form English	5,400	1	5/60	450
Persons Screened	Eligibility Screening Form Spanish	600	1	5/60	50
Persons who give permission	Model Project Consent Form English	4,050	1	5/60	338
Persons who give permission	Model Project Permission Form Spanish	450	1	5/60	38
Eligible Participants	NEXUS Survey English	4,050	1	30/60	2,025
Eligible Participants	NEXUS Survey Spanish	450	1	30/60	225
Total .....	.....	.....	.....	.....	3,126

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-24-24FU; Docket No. CDC-2024-0039]

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 the opportunity to comment on a proposed information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Assessing Capacity to Expand Hepatitis C Testing and Treatment in United States Carceral Systems. This data collection proposes to estimate point prevalence of hepatitis C virus in carceral settings, outline patient characteristics, clinical management, and understand key operational and programmatic successes and challenges to testing and treatment of hepatitis C virus, as well as to support timely analysis and utilize findings to advance the elimination of viral hepatitis in the United States.

DATES: CDC must receive written comments on or before July 29, 2024.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2024-0039 by either of the following methods:

- *Federal eRulemaking Portal:* www.regulations.gov. Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to www.regulations.gov.

Please note: Submit all comments through the Federal eRulemaking portal (www.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 Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road, NE, MS H21-8, Atlanta, Georgia 30329; Telephone: 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 the OMB for approval. To

comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. 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;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;
4. 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 submissions of responses; and
5. Assess information collection costs.

Proposed Project

Assessing Capacity to Expand Hepatitis C Testing and Treatment in United States Carceral Systems—New—National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Carceral settings pose a unique challenge to hepatitis C elimination in that data, as it relates to hepatitis C virus testing and treatment, is not readily available for analysis to understand the burden of disease within this environment. To our knowledge, CDC does not have a repository of data specifically directed towards hepatitis C within State Department of Corrections (DOC) or large jails. This survey

instrument will provide CDC the opportunity to survey a population that is key to advancing the Division of Viral Hepatitis strategic plan to eliminate viral hepatitis in the U.S.

The overarching goals for this data collection are: (1) to reduce new viral hepatitis infections; (2) to reduce viral hepatitis-related morbidity and mortality; and (3) to reduce viral hepatitis-related disparities. The information collected will allow CDC to be good stewards of resources by guiding programmatic initiatives and allocation of funding sources. Data from this project will be used to inform

program planning and evaluation of prevention programs that aim to reduce new viral hepatitis infections, reduce viral hepatitis-related morbidity and mortality and reduce viral hepatitis-related disparities. The data collected will establish a system for ongoing program evaluation and improvement and allows for data-driven resource allocation to areas of greatest need. Invitations will be sent to 101 State and Local DOCs, to include the District of Columbia. The request to complete this anonymous electronic survey will include enough time for record searches. This survey has branching

logic to reduce the number of questions asked to each respondent if the question does not apply. Participating institutions will have a set-time period, to complete the survey. This survey will be self-administered which may take up to 30 minutes to complete using an electronic platform. If preferred, there will be an option to complete an interviewer-administered survey via telephone or videoconferencing.

CDC requests OMB approval for an estimated 60 annual burden hours. There is no cost to respondents other than their time to participate.

ESTIMATES OF 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)
State and local Department of Corrections (DOC) prison and jails, to include District of Columbia.	Assessing Capacity to Expand Hepatitis C Testing and Treatment in United States Carceral Systems.	101	1	30/60	60
Total .....	.....	.....	.....	.....	60

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-24-0953]

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 “Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery” 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 March 14, 2024 to obtain comments from the public and affected agencies. CDC did not receive 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. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular

information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. 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

Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery (OMB Control No. 0920-0953, Exp. 10/31/2024)—Extension—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The information collection activities associated with this project provide a means to garner qualitative customer and stakeholder feedback in an efficient, timely manner, in accordance with the Federal Government’s commitment to improving service delivery. By qualitative feedback we mean information that provides useful insights on perceptions and opinions but are not statistical surveys that yield quantitative results that can be generalized to the population of study. The feedback will provide insights into customer or stakeholder perceptions,