

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-11-0621]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

National Youth Tobacco Surveys (NYTS) 2012-2014—Revision (Exp Date: 1/31/2012)—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) has periodically collected information about tobacco use among adolescents since 2004 (National Youth Tobacco Survey (NYTS) 2004, 2006, 2009, 2011, OMB No. 0920-0621, exp. 12/31/2011). At present, the NYTS is the most comprehensive source of nationally representative tobacco data among students in grades 9-12, and the only source of such data for students in grades 6-8. The NYTS has provided national estimates of tobacco use behaviors, information about exposure to pro- and anti-tobacco influences, and information about racial and ethnic disparities in tobacco-related topics. Information collected through the NYTS is used to identify trends over time, to inform the development of tobacco cessation programs for youth, and to evaluate the effectiveness of existing interventions and programs.

CDC is requesting OMB approval to conduct additional cycles of the NYTS in the spring of 2012, 2013, and 2014. The survey will be conducted among nationally representative samples of students attending public and private schools in grades 6-12, and will be administered to students as an optically

scannable, eight-page booklet of multiple-choice questions. Information supporting the NYTS also will be collected from state-, district-, and school-level administrators and teachers. During the 2012-2014 timeframe, a number of changes will be incorporated that reflect CDC's ongoing collaboration with FDA and the need to measure progress toward meeting strategic goals established by the Family Smoking Prevention and Tobacco Control Act. Information collection will occur annually and will include a number of new questions, as well as increased representation of minority youth.

Results of the NYTS will continue to be used for public health program planning and evaluation. Information collected through the NYTS is also expected to provide multiple measures and data for monitoring progress on six of the 20 tobacco-related objectives for Healthy People 2020.

OMB approval is requested for three years. The estimated average burden per response is 45 minutes, and the total estimated annualized burden hours are 18,862. There are no costs to respondents other than their time.

Estimated Annualized Burden Hours

Type of respondent	Form name	No. of respondents	No. of responses per respondent	Average burden per response (in hr)
State Administrators	State-level Recruitment Script for the NYTS	35	1	30/60
District Administrators	District-level Recruitment Script for the NYTS	150	1	30/60
School Administrators	School-level Recruitment Script for the NYTS	244	1	30/60
Teachers	Data Collection Checklist	816	1	15/60
Students	National Youth Tobacco Survey	24,591	1	45/60

Dated: September 13, 2011.

Daniel Holcomb,

Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-11-0260]

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Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

Health Hazard Evaluation/Technical Assistance and Emerging Problems—Revision (OMB No. 0920-0260 Exp. 1/31/2012)—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In accordance with its mandates under the Occupational Safety and Health Act of 1970 and the Federal Mine Safety and Health Act of 1977, the

National Institute for Occupational Safety and Health (NIOSH) responds to requests for health hazard evaluations (HHE) to identify chemical, biological or physical hazards in workplaces throughout the United States. Each year, NIOSH receives approximately 320 such requests. Most HHE requests come from the following types of companies: service, manufacturing companies, health and social services, transportation, construction, agriculture, mining, skilled trade and construction.

A printed Health Hazard Evaluation request form is available in English and in Spanish. The form is also available on the Internet and differs from the printed version only in format and in the fact that it uses an Internet address to submit the form to NIOSH. Both the printed and Internet versions of the form provide the mechanism for employees, employers, and other

authorized representatives to supply the information required by the regulations governing the NIOSH Health Hazard Evaluation program (42 CFR 85.3-1). In general, if employees are submitting the form it must contain the signatures of three or more current employees. However, regulations allow a single signature if the requestor: is one of three (3) or fewer employees in the process, operation, or job of concern; or is any officer of a labor union representing the employees for collective bargaining purposes. An individual management official may request an evaluation on behalf of the employer. The information provided is used by NIOSH to determine whether there is reasonable cause to justify conducting an investigation and provides a mechanism to respond to the requestor.

In the case of 25% to 50% of the health hazard evaluation requests received, NIOSH determines an on-site evaluation is needed. The primary purpose of an on-site evaluation is to help employers and employees identify and eliminate occupational health hazards. In most on-site evaluations employees are interviewed to help further define concerns, and in approximately 50% these evaluations (presently estimated to be about 80 facilities), questionnaires are distributed

to the employees (averaging about 40 employees per site for this last subgroup). The interview and survey questions are specific to each workplace and its suspected diseases and hazards, however, items are derived from standard medical and epidemiologic techniques. The request forms take an estimated 12 minutes to complete. The interview forms take 15-30 minutes to complete.

NIOSH distributes interim and final reports of health hazard evaluations, excluding personal identifiers, to: requesters, employers, employee representatives; the Department of Labor (Occupational Safety and Health Administration or Mine Safety and Health Administration, as appropriate); and, as needed, other federal, state, and local agencies.

NIOSH administers a follow-back program to assess the effectiveness of its health hazard evaluation program in reducing workplace hazards. This program entails the mailing of follow-back questionnaires to employer and employee representatives at all the workplaces where NIOSH conducted site visits. In a small number of instances, a follow-back on-site evaluation may be conducted. The initial follow-back questionnaire is administered immediately following

the site visits and takes about 10 minutes. Another follow-back questionnaire is sent a year later and requires about 15 minutes to complete. At 24 months, a final follow-back questionnaire regarding the completed evaluation is sent which takes about 15 minutes to complete.

For requests where NIOSH does not conduct an onsite evaluation, the requester receives a follow-back questionnaire 12 months after our response and a second one 24 months after our response. The first questionnaire takes about 10 minutes to complete and the second questionnaire takes about 15 minutes to complete. Because of the large number of investigations conducted each year, the need to respond quickly to requests for assistance, the diverse and unpredictable nature of these investigations, and its follow-back program to assess evaluation effectiveness; NIOSH requests a clearance of the revised information collection package for data collections performed within the domain of its health hazard evaluation program. There is no cost to respondents other than their time. The total estimated annual burden hours are 2874.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form	Number of respondents	Number of responses per respondent	Average burden per response in hours
Employees and Representatives;	Health Hazard Evaluation Request Form	211	1	12/60
Employers	Health Hazard Evaluation Request Form	109	1	12/60
Employees	Health Hazard Evaluation specific interview example.	3200	1	15/60
Employees	Health Hazard Evaluation specific questionnaire example.	3440	1	30/60
Followback for onsite evaluations for Management, Labor and Requester Year 1.	Initial Site Visit survey form	320	1	15/60
	Year 1-Closeout for HHE with an OnSite Evaluation.	320	1	15/60
	Year 2-1 year Later HHE with an On Site Evaluation.	320	1	15/60
Followback for evaluations for Management, Labor and Requester without onsite evaluation.	Year 1-Closeout Survey cover letter and Forms.	120	1	10/60
	Year 2-Closeout Survey Cover Letter and Forms.	120	1	15/60

Dated: September 13, 2011.
Daniel Holcomb,
Reports Clearance Officer, Centers for Disease Control and Prevention.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-0920-0792]

Agency Forms Undergoing Paperwork Reduction Act Review

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Proposed Project

Environmental Health Specialists Network (EHS-NET) Program, OMB 0920-0792, expiration 10/31/2011—Revision—National Center for Environmental Health (NCEH), Centers

for Disease Control and Prevention (CDC).

Background and Brief Description

The CDC is requesting OMB approval for three additional years to use this generic clearance for a research program focused on identifying the environmental causes of foodborne illness. This revision will provide OMB clearance for EHS-Net data collections conducted in 2011 through 2014 (a maximum of 3 annually). The program is revising the generic information collection request (ICR) to reduce the number of respondent groups, reduce the number of studies conducted and the estimated burden, and collect more generalizable data.

Reducing foodborne illness first requires identification and understanding of the environmental factors that cause these illnesses. We need to know how and why food becomes contaminated with foodborne illness pathogens. This information can then be used to determine effective food safety prevention methods. The purpose of this food safety research program is to identify and understand environmental factors associated with foodborne illness and outbreaks. This program will continue to involve up to 3 data collections a year. This program is conducted by the Environmental Health Specialists Network (EHS-Net), a collaborative project of CDC, FDA, USDA, and six state/local sites (CA, NYC, NY, MN, RI, and TN).

Environmental factors associated with foodborne illness include both food

safety practices (e.g., inadequate cleaning practices) and the factors in the environment associated with those practices (e.g., worker and retail food establishment characteristics). To understand these factors, we need to continue to collect data from those who prepare food (i.e., food workers) and on the environments in which the food is prepared (i.e., retail food establishment kitchens). Thus, our respondents will be retail food establishment food workers.

For each data collection, we will collect data in approximately 480 retail food establishments. For each data collection, we will collect data from a maximum 1,440 workers. Each respondent will respond only once and the average burden per response will be approximately 30 minutes. We will conduct up to 3 data collections a year. The maximum annual interview/survey burden for all 3 data collections will be 2,160 hours.

We expect a worker response rate of approximately 70 percent. Thus, for each data collection, we will need to conduct a recruiting screener with approximately 2,057 worker respondents to obtain the needed number of respondents. Each respondent will respond only once and the average burden per response will be 3 minutes. As we plan to conduct up to 3 data collections annually, the maximum annual recruiting screener burden will be 309 hours. The total maximum annual burden will be 2,469 hours. There is no cost to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Retail food workers	Interview/survey	4,320	1	30/60
Retail food workers	Recruiting screener	6,171	1	3/60

Dated: September 15, 2011.
Daniel Holcomb,
Reports Clearance Officer, Centers for Disease Control and Prevention.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC-2011-0011]

Public Health Service Guideline for Reducing Transmission of Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and Hepatitis C Virus (HCV) Through Solid Organ Transplantation

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

ACTION: Notice of availability and request for public comment.

SUMMARY: With this notice, the Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS) requests public comment on the draft *Public Health Service Guideline for Reducing Transmission of Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and Hepatitis C Virus (HCV) through Solid Organ Transplantation* (Draft Guideline). The Draft Guideline can be found at <http://www.regulations.gov> under Docket No. CDC-2011-0011.