

FEDERAL RESERVE SYSTEM**Formations of, Acquisitions by, and Mergers of Bank Holding Companies**

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than October 2, 2015.

A. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. *West Town Bancorp, Inc.*, Raleigh, North Carolina; to become a bank holding company by acquiring 100 percent of the voting shares of West Town Bank, Cicero, Illinois.

B. Federal Reserve Bank of Kansas City (Dennis Denney, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198-0001:

1. *CSBO Holdings, Inc.*, Ridgway, Colorado; to become a bank holding company by acquiring 100 percent of the voting shares of Citizens State Bank of Ouray, Ouray, Colorado.

Board of Governors of the Federal Reserve System, September 2, 2015.

Michael J. Lewandowski,

Associate Secretary of the Board.

[FR Doc. 2015-22518 Filed 9-4-15; 8:45 am]

BILLING CODE 6210-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention**

[30 Day-15-0666]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (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. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

National Healthcare Safety Network (NHSN) (OMB No. 0920-0666, exp. 12/31/2017)—Revision—National Center for Emerging and Zoonotic Infectious

Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Healthcare Safety Network (NHSN) is a system designed to accumulate, exchange, and integrate relevant information and resources among private and public stakeholders to support local and national efforts to protect patients and promote healthcare safety. Specifically, the data is used to determine the magnitude of various healthcare-associated adverse events and trends in the rates of these events among patients and healthcare workers with similar risks. The data will be used to detect changes in the epidemiology of adverse events resulting from new and current medical therapies and changing risks. The NHSN currently consists of five components: Patient Safety, Healthcare Personnel Safety, Biovigilance, Long-Term Care Facility (LTCF), and Dialysis. The Outpatient Procedure Component is on track to be released in NHSN in 2016/2017. The development of this component has been previously delayed to obtain additional user feedback and support from outside partners.

Changes were made to seven facility surveys. Based on user feedback and internal reviews of the annual facility surveys it was determined that questions and response options be amended, removed, or added to fit the evolving uses of the annual facility surveys. The surveys are being increasingly used to help intelligently interpret the other data elements reported into NHSN. Currently the surveys are used to appropriately risk adjust the numerator and denominator data entered into NHSN while also guiding decisions on future division priorities for prevention.

Additionally, minor revisions have been made to 27 forms within the package to clarify and/or update surveillance definitions. Two forms are being removed as those forms will no longer be added to the NHSN system.

The previously approved NHSN package included 54 individual collection forms; the current revision request removes two forms for a total of 52 forms. The reporting burden will increase by 583,825 hours, for a total of 4,861,542 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Registered Nurse (Infection Preventionist)	NHSN Registration Form	2,000	1	5/60
Registered Nurse (Infection Preventionist)	Facility Contact Information	2,000	1	10/60
Registered Nurse (Infection Preventionist)	Patient Safety Component—Annual Hospital Survey.	5,000	1	50/60
Registered Nurse (Infection Preventionist)	Group Contact Information	1,000	1	5/60
Registered Nurse (Infection Preventionist)	Patient Safety Monthly Reporting Plan	6,000	12	15/60
Registered Nurse (Infection Preventionist)	Primary Bloodstream Infection (BSI)	6,000	44	30/60
Registered Nurse (Infection Preventionist)	Pneumonia (PNEU)	6,000	72	30/60
Registered Nurse (Infection Preventionist)	Ventilator-Associated Event	6,000	144	25/60
Registered Nurse (Infection Preventionist)	Urinary Tract Infection (UTI)	6,000	40	20/60
Staff RN	Denominators for Neonatal Intensive Care Unit (NICU).	6,000	9	3
Staff RN	Denominators for Specialty Care Area (SCA)/Oncology (ONC).	6,000	9	5
Staff RN	Denominators for Intensive Care Unit (ICU)/ Other locations (not NICU or SCA).	6,000	60	5
Registered Nurse (Infection Preventionist)	Surgical Site Infection (SSI)	6,000	36	35/60
Staff RN	Denominator for Procedure	6,000	540	5/60
Laboratory Technician	Antimicrobial Use and Resistance (AUR)-Microbiology Data Electronic Upload Specification Tables.	6,000	12	5/60
Pharmacy Technician	Antimicrobial Use and Resistance (AUR)-Pharmacy Data Electronic Upload Specification Tables.	6,000	12	5/60
Registered Nurse (Infection Preventionist)	Central Line Insertion Practices Adherence Monitoring.	1,000	100	25/60
Registered Nurse (Infection Preventionist)	MDRO or CDI Infection Form	6,000	72	30/60
Registered Nurse (Infection Preventionist)	MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring.	6,000	24	15/60
Registered Nurse (Infection Preventionist)	Laboratory-identified MDRO or CDI Event	6,000	240	30/60
Registered Nurse (Infection Preventionist)	Long-Term Care Facility Component—Annual Facility Survey.	250	1	1
Registered Nurse (Infection Preventionist)	Laboratory-identified MDRO or CDI Event for LTCF.	250	8	15/60
Registered Nurse (Infection Preventionist)	MDRO and CDI Prevention Process Measures Monthly Monitoring for LTCF.	250	12	5/60
Registered Nurse (Infection Preventionist)	Urinary Tract Infection (UTI) for LTCF	250	9	30/60
Registered Nurse (Infection Preventionist)	Monthly Reporting Plan for LTCF	250	12	5/60
Registered Nurse (Infection Preventionist)	Denominators for LTCF Locations	250	12	3.25
Registered Nurse (Infection Preventionist)	Prevention Process Measures Monthly Monitoring for LTCF.	250	12	5/60
Registered Nurse (Infection Preventionist)	LTAC Annual Survey	400	1	50/60
Registered Nurse (Infection Preventionist)	Rehab Annual Survey	1,000	1	50/60
Occupational Health RN/Specialist	Healthcare Personnel Safety Component Annual Facility Survey.	50	1	8
Occupational Health RN/Specialist	Healthcare Personnel Safety Monthly Reporting Plan.	17,000	1	5/60
Occupational Health RN/Specialist	Healthcare Worker Demographic Data	50	200	20/60
Occupational Health RN/Specialist	Exposure to Blood/Body Fluids	50	50	1
Occupational Health RN/Specialist	Healthcare Worker Prophylaxis/Treatment	50	30	15/60
Laboratory Technician	Follow-Up Laboratory Testing	50	50	15/60
Occupational Health RN/Specialist	Healthcare Worker Prophylaxis/Treatment-Influenza.	50	50	10/60
Medical/Clinical Laboratory Technologist	Hemovigilance Module Annual Survey	500	1	2
Medical/Clinical Laboratory Technologist	Hemovigilance Module Monthly Reporting Plan.	500	12	1/60
Medical/Clinical Laboratory Technologist	Hemovigilance Module Monthly Reporting Denominators.	500	12	1
Medical/Clinical Laboratory Technologist	Hemovigilance Adverse Reaction	500	48	15/60
Medical/Clinical Laboratory Technologist	Hemovigilance Incident	500	10	10/60
Staff RN	Patient Safety Component—Annual Facility Survey for Ambulatory Surgery Center (ASC).	5,000	1	5/60
Staff RN	Outpatient Procedure Component—Monthly Reporting Plan.	5,000	12	15/60
Staff RN	Outpatient Procedure Component Event	5,000	25	40/60
Staff RN	Outpatient Procedure Component—Monthly Denominators and Summary.	5,000	12	40/60
Registered Nurse (Infection Preventionist)	Outpatient Dialysis Center Practices Survey	6,500	1	2.0

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Staff RN	Dialysis Monthly Reporting Plan	6,500	12	5/60
Staff RN	Dialysis Event	6,500	60	25/60
Staff RN	Denominators for Dialysis Event Surveillance	6,500	12	10/60
Staff RN	Prevention Process Measures Monthly Monitoring for Dialysis.	1,500	12	1.25
Staff RN	Dialysis Patient Influenza Vaccination	325	75	10/60
Staff RN	Dialysis Patient Influenza Vaccination Denominator.	325	5	10/60

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. 2015-22529 Filed 9-4-15; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Statement of Organization, Functions, and Delegations of Authority; Correction

This document corrects a notice that was published in the **Federal Register** on Tuesday, June 16, 2015 (78 FR 34437-34438) announcing the reorganization of the National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention. Replace the title of *Research Branch (CCLE)*, with *Research Branch (CCLG)*, and replace *Conformity Verification & Standards Development Branch (CCLG)*, with *Conformity Verification & Standards Development Branch (CCLE)*.

James Seligman,

Acting Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2015-22535 Filed 9-4-15; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-15-0950; Docket No. CDC-2015-0078]

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 efforts 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 the proposed revision of the National Health and Nutrition Examination Survey (NHANES). NHANES programs produce descriptive statistics which measure the health and nutrition status of the general population.

DATES: Written comments must be received on or before November 9, 2015.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2015-0078 by any of the following methods:

- *Federal eRulemaking Portal:*

Regulation.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*.

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 the 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