

quantitative results that can be generalized to the population of study. This feedback will provide insights into customer or stakeholder perceptions, experiences and expectations, provide an early warning of issues with service, or focus attention on areas where communication, training, or changes in operations might improve delivery of products or services. These collections will allow for ongoing, collaborative, and actionable communications between the Agency and its customers and stakeholders. It will also allow feedback to contribute directly to the improvement of program management.

Feedback collected under this generic clearance will provide useful information, but it will not yield data that can be generalized to the overall population. This type of generic

clearance for qualitative information will not be used for quantitative information collections that are designed to yield reliably actionable results, such as monitoring trends over time or documenting program performance. Such data uses require more rigorous designs that address: the target population to which generalizations will be made, the sampling frame, the sample design (including stratification and clustering), the precision requirements or power calculations that justify the proposed sample size, the expected response rate, methods for assessing potential non-response bias, the protocols for data collection, and any testing procedures that were or will be undertaken prior fielding the study. Depending on the degree of influence the results are likely

to have, such collections may still be eligible for submission for other generic mechanisms that are designed to yield quantitative results.

This is a revision to the previously approved collection to reduce the burden hours from 12,400 to 9,690 hours as a result of the previous usage and anticipated future usage of this Generic Information Collection. Respondents will be screened and selected from Individuals and Households, Businesses, Organizations, and/or State, Local or Tribal Government. Below we provide CDC's projected annualized estimate for the next three years. There is no cost to respondents other than their time. The estimated annualized burden hours for this data collection activity are 9,690.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of collection	Number of respondents	Annual frequency per response	Hours per response
Online surveys	10,500	1	30/60
Discussion Groups	280	1	2
Focus groups	640	1	2
Website/app usability testing	2,000	1	30/60
Interviews	800	1	2

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.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-17-17ABD; Docket No. CDC-2017-0036]

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 "Backyard Integrated Tick Management Project" which will evaluate the effectiveness of specific tick control methods used on single versus multiple adjacent properties to suppress host-seeking ticks infected with Lyme disease spirochetes and to reduce human tick bites, and help the CDC better understand human landscape use patterns and tick exposure locations.

DATES: Written comments must be received on or before July 31, 2017.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2017-0036 by any of the following methods:

- *Federal eRulemaking Portal: Regulations.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*.

Please note: All public comment should be submitted through the Federal eRulemaking portal (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 Leroy Richardson, 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 to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information.

Proposed Project

Backyard Integrated Tick Management Project—Existing Collection in Use Without an OMB Control Number—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC)

Background and Brief Description

The combined number of confirmed and probable Lyme disease cases have exceeded 30,000 in all years since 2008, and recent estimates suggest that the true number of Lyme disease cases may be 10-fold higher. There is no Lyme

disease vaccine for use in humans and prevention of infection is therefore completely reliant on personal protective measures (avoiding tick habitat, use of repellent, tick checks or prompt tick removal, etc.) and methods to suppress vector ticks in the environment.

The primary goal of this project is to evaluate the effectiveness of specific tick/pathogen control methods used on single versus multiple adjacent properties on the risk of human exposure to ticks. The secondary goal is to better understand human landscape use patterns and tick exposure locations. The project was initiated in direct response to knowledge gaps, identified by CDC Subject Matter Experts (SMEs), for the use of integrated tick vector/rodent reservoir management to reduce human risk of exposure to Ixodes scapularis ticks, the sole vector of Lyme disease in the Northeast.

Resulting data is intended to be used to provide suggestions for improving tick/pathogen control methods used in the environment.

Information will be collected, under protocols approved by the institutional review boards (IRBs) at Western Connecticut State University (WCSU) and the University of Rhode Island (URI), from inhabitants of residential properties to (i) compare the effectiveness of an integrated tick management approach at single-treated residential properties vs. contiguously-treated residential properties to reduce human tick bites and (ii) increase the understanding of where people encounter ticks, both near their homes and in other outdoor settings.

Another potential positive outcome of the information collection is more effective targeting of tick control efforts to high risk areas, minimizing pesticide use. Not collecting the information would lead to inadequate evaluation of the implemented integrated tick management program (solely focusing on host-seeking ticks collected from the vegetation) as well as the unacceptable status quo for detailed knowledge of where people encounter ticks within their residential properties and on the residential properties versus elsewhere.

Information will be collected by WCSU and URI researchers from inhabitants (adults and children) of participating residential properties (freestanding homes with tick habitat on the property) located in Connecticut and Rhode Island. Consenting participants will complete one introductory survey by telephone, projected to last no more than 15 minutes. In May–August of Years 1–4, participants will also complete an emailed monthly tick encounter survey about the number of ticks found on each member of the household and each household member's tick-borne disease status, projected to take no more than 10 minutes per month to complete. An end-of-season survey will also be administered in March/April each year, projected to take no more than 10 minutes to complete.

In addition, participants will be asked to record location of daily activity on behalf of themselves and household members each day over the first week of June in a single year via emailed daily surveys, projected to take 70 minutes over the week of participation. Lastly, an end-of-study survey will be administered in September 2020, projected to take no more than 15 minutes. In total, we expect approximately two hours or less of total time spent on surveys by consented participants in each year of the study. All survey instruments have been approved by the IRBs at WCSU and URI.

The collection of information is conducted by WCSU, and its subcontractor, URI, as part of a Cooperative Agreement with the Centers for Disease Control and Prevention (CDC) (1U01CK0004912–01). The Cooperative Agreement was established based on WCSU competing successfully for CDC RFA–CK–16–002 (Spatially Scalable Integrated Tick Vector/Rodent Reservoir Management to Reduce Human Risk of Exposure to Ixodes scapularis Ticks Infected with Lyme Disease Spirochetes).

This study is authorized by Section 301 of the Public Health Service Act (42 U.S.C. 241).

There is no cost to respondents other than their time to participate.

ESTIMATED 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)
Households or Individuals	Eligibility Survey	500	1	15/60	125
	Introductory Survey (including Consent Form).	230	1	30/60	115
	Monthly Surveys	230	4	10/60	154

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
	Daily Surveys	230	7	10/60	269
	Annual End of Year Survey	230	1	15/60	58
	Final Survey	230	1	15/60	58
Total	779

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.

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**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Disease Control and
 Prevention**

[60Day-17-17AHW; Docket No. CDC-2017-
 0052]

**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 an information collection
 titled “Zika Virus Enhanced
 Surveillance of Selected Populations.”
 This information collection will help
 state health departments better define
 the public health burden and clinical
 characteristics of Zika virus disease.

DATES: Written comments must be
 received on or before July 31, 2017.

ADDRESSES: You may submit comments,
 identified by Docket No. CDC-2017-
 0052 by any of the following methods:

- *Federal eRulemaking Portal:*
Regulations.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.

*Please note: All public comment
 should be submitted through the
 Federal eRulemaking portal
 (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 Leroy A.
 Richardson, 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
 to provide information. Burden means
 the total time, effort, or financial
 resources expended by persons to
 generate, maintain, retain, disclose or
 provide information to or for a Federal
 agency. This includes the time needed
 to review instructions; to develop,
 acquire, install and utilize technology
 and systems for the purpose of
 collecting, validating and verifying
 information, processing and
 maintaining information, and disclosing
 and providing information; to train
 personnel and to be able to respond to
 a collection of information, to search
 data sources, to complete and review
 the collection of information; and to
 transmit or otherwise disclose the
 information.

Proposed Project

*Zika Virus Enhanced Surveillance of
 Selected Populations—Emergency ICR—
 National Center for Emerging and
 Zoonotic Infectious Diseases (NCEZID),
 Centers for Disease Control and
 Prevention (CDC)*

Background and Brief Description

Zika virus is a mosquito-borne
 flavivirus primarily transmitted to
 humans by *Aedes* mosquitoes. Zika
 virus infections can also be transmitted
 congenitally, at the time of birth from a
 viremic mother to her newborn,
 sexually, through blood transfusion, and
 through inadvertent laboratory
 exposure. Most Zika virus infections are
 asymptomatic. Clinical illness, when it
 occurs, is generally mild and
 characterized by acute onset of fever,
 maculopapular rash, arthralgia, and/or
 nonpurulent conjunctivitis. As routine
 surveillance data have been reported to
 CDC, it has become apparent that the