

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)
Middle and High School Age Adolescents.	Youth questionnaire	20,000	1	50/60	16,667
Middle and High School Age Adolescents.	Pre/Post youth questionnaire	10,000	2	50/60	16,667
Middle and High School Age Adolescents.	Youth interview/focus group guide ...	3,000	2	1.5	9,000
Parents/caregivers of adolescents	Parent/Caregiver questionnaire	7,500	2	25/60	6,250
Parents/caregivers of adolescents	Parent/Caregiver interview/focus group guide.	3,000	2	1.5	9,000
Total	57,584

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. 2017-24317 Filed 11-7-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-17-17AZG; Docket No. CDC-2017-
0076]

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 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 a proposed assessment of
cancer prevention services at selected
community mental health centers. CDC
seeks to request an Office of
Management and Budget (OMB)
clearance for a three-year data collection
project.

DATES: Written comments must be
received on or before January 8, 2018.

ADDRESSES: You may submit comments,
identified by Docket No. CDC-2017-
0076 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

Assessment of Cancer Prevention
Services at Community Mental Health
Centers—New—National Center for
Chronic Disease Prevention and Health
Promotion (NCCDPHP), Centers for
Disease Control and Prevention (CDC).

Background and Brief Description

Compared to people without mental illness (MI), people with MI have higher rates of cancer risk factors such as smoking and obesity.

Many people with MI receive outpatient mental health care at community mental health centers (CMHC), and some of these facilities provide screening for cardiovascular disease and other chronic conditions. The extent to which cancer prevention services are provided at CMHCs is not understood.

This project will use online instruments and telephone interviews with psychiatric clinicians and administrators at selected CMHCs across

the United States to assess the capacities of these facilities to provide cancer prevention services (e.g., cancer risk factor education, cancer screening referrals, tobacco cessation counseling) to clients.

With a goal to achieve a final analytic sample of at least 250 psychiatric clinicians and 250 administrators at CMHCs, researchers will interview a subset of 5%-10% of each group by telephone.

The objectives of this study are to (1) describe the capacity of CMHCs to provide cancer prevention services; (2) describe any written policies and procedures at CMHCs for providing these services; (3) describe any

collaboration of CMHCs with health care providers or community health workers/organizations to provide these services; and (4) describe any barriers to providing these services. Researchers will ask respondents that provide cancer prevention services about best practices and lessons learned.

There will be no costs to the respondents other than their time. To calculate the total burden, we estimated 500 respondents for the surveys and 50 for the interviews. The average burden will vary from 15–20 minutes for the surveys and one hour for the interviews. The total estimated annual burden hours are 392.

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)
Psychiatric clinicians	Clinician Survey Instrument	500	1	15/60	125
Administrators	Administrator Survey Instrument	500	1	20/60	167
Psychiatric clinicians	Clinician Interview	50	1	1	50
Administrators	Administrator Interview	50	1	1	50
Total					392

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

[30Day–18–1039]

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 *Information Collection on Cause-Specific Absenteeism in Schools and Evaluation of Influenza Transmission within Student Households* 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 April 27, 2017 to obtain comments from the public and affected agencies. CDC

received two 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 or send an email to omb@cdc.gov. 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

Information Collection on Cause-Specific Absenteeism in Schools and Evaluation of Influenza Transmission within Student Households—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The CDC requests approval of a revised information collection to improve our understanding of the role of influenza-like illness (ILI)-specific absenteeism in schools in predicting community-wide influenza transmission and to detect within-household transmission of influenza in households from which a student has been absent from school due to ILI.

This information collection request aligns DGMQ/CDC’s mission to reduce morbidity and mortality in mobile