### Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention. [FR Doc. 2021–14226 Filed 7–1–21; 8:45 am]

BILLING CODE 4163-18-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[60Day-21-21GA Docket No. CDC-2021-0061]

#### 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 and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposal to allow CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Division of Adolescent and School Health (DASH) to conduct a research information collection project titled "Teen and Parents Surveys of Health (TAPS)". This project serves to inform the CDC's Division of Adolescent and School Health's (DASH) key school-based programmatic strategies of improving family- and school-level protective factors, bolstering health education, and increasing adolescent access to quality health services.

**DATES:** CDC must receive written comments on or before August 31, 2021. **ADDRESSES:** You may submit comments, identified by Docket No. CDC–2021– 0061 by any of the following methods:

• Federal eRulemaking Portal: 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–D74, Atlanta, Georgia 30329.

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

Please note: Submit all comments 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 Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS–D74, Atlanta, Georgia 30329; phone: 404–639–7118; 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**

Teen and Parents Surveys of Health (TAPS)—New—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

### Background and Brief Description

The Centers for Disease Control and Prevention (CDC), National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Division of Adolescent and School Health (DASH) requests approval for "Teen and Parent Surveys of Health (TAPS)" through an existing online panel using NORC at the University of Chicago's AmeriSpeaks panel. Documenting health-related risk behaviors and experiences and health outcomes of young people through routine surveillance is a critical component of DASH's prevention efforts. Another component of DASH's efforts to improve adolescent health is observational research to inform its school-based programmatic strategies. This type of research serves to inform priority settings and sub-populations for intervention as well as specific intervention strategies. TAPS data will allow DASH to refine existing strategies for funded school district partners to improve the quality of their programs and services to prevent HIV, other STDs, and pregnancy among adolescents, as well as improve mental health, sexual health and other adolescent health outcomes (e.g., substance use, violence victimization). Data will be used to inform DASH's key school-based programmatic strategies of improving family- and school-level protective factors, bolstering health education, and increasing adolescent access to quality health services. This observational research complements and extends DASH's ongoing surveillance efforts through the Youth Risk Behavioral Surveillances System (YRBSS) (OMB Control No. 0920-0493, Exp. 11/30/ 2023), which provides key national estimates of adolescent health risk behaviors and health outcomes, by providing a deeper dive into individual, family, and school factors that positively associate with adolescent behaviors and health outcomes. Collecting this observational data provides the opportunity to examine untested associations of protective factors, health education experiences, and health service use (immediate outcomes of DASH strategies) with mental health, sexual health, and substance use outcomes.

CDC requests approval for an estimated 1,378 annual burden hours. There are no costs to respondents other than their time to participate.

# ESTIMATED ANNUALIZED BURDEN HOURS

| Type of respondents                                      | Form name              | Number of respondents | Number of<br>responses per<br>respondent | Average<br>burden per<br>response<br>(in hrs) | Total burden<br>(in hrs) |
|--|------------------------|-----------------------|--|---|--------------------------|
| Parents/Caregivers of 15–17 year olds.                   | Adult/Caregiver Survey | 2,634                 | 1  | 20/60   | 878                      |
| Adolescent 15–17 year olds<br>Adolescent 18–19 year olds |                        | 900<br>600            | 1  | 20/60<br>20/60                                | 300<br>200               |
| Totals   |                        |                       |  |   | 1,378                    |

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Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention. [FR Doc. 2021–14223 Filed 7–1–21; 8:45 am]

BILLING CODE 4163-18-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

### [30Day-21-21CG]

#### 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 "A Longitudinal Examination of Mental and Physical Health among Police Associated with COVID-19" 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 January 26, 2021 to obtain comments from the public and affected agencies. CDC received one comment 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**

A Longitudinal Examination of Mental and Physical Health among Police Associated with COVID–19— New—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

Police officers are exposed to several stressors during their working lives, including traumatic events (*e.g.*, motorvehicle accidents, domestic incidents), organizational stressors (*e.g.*, long work hours, shiftwork), public criticism, and concern about physical harm. On top of these day-to-day stressors, the coronavirus disease 2019 (COVID–19) has contributed to an increase in mental and physical risk. Although exact figures are not known, in April 2020, it was estimated that approximately 17% of the New York police department were

out sick, and five officers had died. Over 1,000 police officers had tested positive for COVID-19. Since then, rates of COVID-19 have not only increased in the general population, but also in police populations. These preliminary studies indicate that police departments are under a great deal of stress and at greater risk because of COVID-19. Given that efficiently performing officers are key to successful functioning of law enforcement, addressing police mental and physical health is imperative for their well-being, as well as that of the public they serve. Nonetheless, little research has been conducted to evaluate the physical and mental health consequences of the COVID-19 pandemic on police officers. Thus, NIOSH seeks OMB approval to evaluate the longitudinal mental and physical health effect of the COVID-19 pandemic on police officers.

Previously, in collaboration with NIOSH, the University of New York at Buffalo (UB) conducted a cross-sectional research project to evaluate the mental, physical, and subclinical measures of health in the Buffalo, NY police officers as part of the Buffalo Cardio-Metabolic Occupational Police Stress (BCOPS) study. The BCOPS study itself includes a baseline examination and four followup examinations. For this reason, NIOSH has mental and physical health data on police officers, collected prior to COVID-19, including stress related surveys, blood parameters, physical measures, stress biomarkers (cortisol) and telomere length data.

To meet the aims of the current study NIOSH has contracted with UB to recruit 200 police officers who previously participated in a BCOPS study. Priority will be placed on recruiting officers who participated in the last BCOPS study (n=240). If 200 of the 240 officers cannot be recruited, then UB will try to recruit any officer who has previously participated in a BCOPS study. A subset of the surveys and biological data collected as part of the BCOPS studies will be repeated for this study. By comparing the responses of the surveys and physical data