

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), announces the award of approximately \$1,000,000 for Year 1 of funding to the *Servicos Provinciais de Saude de Inhambane* (SPS Inhambane), Mozambique. The award will strengthen the institutional capacity of SPS Inhambane to plan, coordinate, and supervise HIV-related activities to contribute to accelerated progress towards the 95–95–95 goals (95% of HIV-positive individuals knowing their status, 95% of those receiving ART [Antiretroviral therapy], and 95% of those achieving viral suppression) and ensure sustainable control of the epidemic in Mozambique. Funding amounts for years 2–5 will be set at continuation.

DATES: The period for this award will be September 30, 2022 through September 29, 2027.

FOR FURTHER INFORMATION CONTACT: Meghan Duffy, Center for Global Health, Centers for Disease Control and Prevention, U.S. Embassy Maputo, Avenida Marginal nr 5467, Sommerschild, Distrito Municipal de KaMpfumo Caixa Postal 783 CEP 0101–11 Maputo, Moçambique, Telephone: 800–232–6348, E-Mail: wwp2@cdc.gov.

SUPPLEMENTARY INFORMATION: The single-source award will focus on building institutional capacity of the SPS in Inhambane for program development and planning and strengthening program implementation and oversight of activities related to HIV prevention, care, support, and treatment services funded by PEPFAR in Mozambique.

SPS Inhambane is in a unique position to conduct this work, as it is the sole organization tasked with ensuring the execution of health activities at the provincial level in Inhambane [Decree 26/2020]. In Mozambique, the governmental public health infrastructure is organized into the central or national entity of the Mozambique Ministry of Health/ *Ministério da Saude* (MOH/MISAU), the Provincial Health Directorates (DPSS) that implement activities at the primary healthcare level, and the Provincial Health Service (SPS) that lead all health services within the province of Inhambane. The SPSs in Mozambique are government organizations established by law and mandated to plan, coordinate, and supervise all health-related activities at the tertiary and secondary level, including HIV/AIDS activities, within their provincial jurisdiction.

Summary of the Award

Recipient: SPS Inhambane, Mozambique.

Purpose of the Award: The purpose of this award is to strengthen the institutional capacity of SPS Inhambane to plan, coordinate, and supervise HIV-related activities to contribute to accelerated progress towards the 95–95–95 goals and ensure sustainable control of the epidemic in Mozambique.

Amount of Award: The approximate year 1 funding amount will be \$1,000,000 in Federal Fiscal Year (FFY) 2022 funds, subject to the availability of funds. Funding amounts for years 2–5 will be set at continuation.

Authority: This program is authorized under Public Law 108–25 (the United States Leadership Against HIV AIDS, Tuberculosis and Malaria Act of 2003).

Period of Performance: September 30, 2022 through September 29, 2027.

Dated: February 16, 2022.

Terrance Perry,

Chief Grants Management Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award of a Single-Source Cooperative Agreement To Fund Cote d'Ivoire Ministry of Health and Public Hygiene and Universal Health Coverage (MSHPCMU)

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

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS) announces the award of approximately \$3,000,000 for Year 1 of funding to the (MSHPCMU). The award will strengthen the capacities of the Ministry of Health (MOH) at the central and decentralized levels for HIV/TB infection control interventions. Funding amounts for years 2–5 will be set at continuation.

DATES: The period for this award will be September 30, 2022 through September 29, 2027.

FOR FURTHER INFORMATION CONTACT: Titania Techeira, Center for Global Health, Centers for Disease Control and Prevention, CDC Côte d'Ivoire, U.S. Embassy B.P. 730 Abidjan Cidex 03,

Telephone: 800–232–6348, E-Mail: iux2@cdc.gov.

SUPPLEMENTARY INFORMATION: The single-source award will (1) Provide technical, programmatic, financial, and administrative support to the ministry departments for the implementation, coordination, mobilization, and supervision of key central-level prevention, care, and treatment activities; (2) Link and coordinate specific activities of various health ministry departments at the central and decentralized levels with related activities by other ministries in the multi-sectoral HIV/AIDS response; (3) Develop a sustainability plan which places an emphasis on national commitment to health and HIV/AIDS effort; (4) Plan, monitor, evaluate, and coordinate expanded service delivery of prevention of mother to child transmission (PMTCT), counseling and testing (CT); and anti-retroviral therapy (ART) in collaboration with the national HIV and TB program.

The MOH is the only eligible applicant that can apply for this funding opportunity because it is the sole public sector entity in Cote d'Ivoire mandated by the government to address the public's health needs. This mandate includes: (1) Coordination, monitoring and evaluation of comprehensive STI/TB and HIV prevention, and care and treatment services; (2) Coordination of HIV/AIDS interventions at decentralized levels of the health sector in Cote d'Ivoire; (3) Lead GoCI institution for strengthen the regulatory framework and promote hygiene to prevent diseases related to poor hospital hygiene; (4) Lead the GoCI in strengthening the SI management in the Ivorian national health sector response to HIV/AIDS; and Lead the GoCI for the development of the national M&E plan to monitor and evaluate the implementation of the activities and the results throughout the Ivorian territory and at different levels of the health pyramid.

Summary of the Award

Recipient: MSHPCMU.

Purpose of the Award: The purpose of this award is to strengthen the capacities of the MOH at the central and decentralized levels for HIV/TB infection control interventions to: (1) Improve the coordination of HIV/AIDS control interventions at the decentralized levels of the health sector; (2) Strengthen the regulatory framework and promote hygiene to prevent HIV infection and healthcare-related infections; and Strengthen the management of SI for the health sector national response.

Amount of Award: The approximate year 1 funding amount will be \$3,000,000 in Federal Fiscal Year (FFY) 2022 funds, subject to the availability of funds. Funding amounts for years 2–5 will be set at continuation.

Authority: Public Law 108–25 (the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003).

Period of Performance: September 30, 2022 through September 29, 2027.

Dated: February 15, 2022.

Terrance Perry,

Chief Grants Management Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–22–21HD]

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 the “One Health Surveillance for Zoonotic SARS–CoV–2 Events” 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 August 13, 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

One Health Surveillance for Zoonotic SARS–CoV–2 Events—New—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

NCEZID seeks OMB approval for One Health Surveillance for Zoonotic SARS–CoV–2 Events through the use of two forms: One Health Case Investigation Form for Animals with SARS–CoV–2, and Zoonotic SARS–CoV–2 Event Form. Description of these forms and activities associated with this study, including burden to respondents can be found below.

Zoonotic SARS–CoV–2 Event Form: Although it is now well established that SARS–CoV–2 is a zoonotic virus (*i.e.*, can be spread between people and animals), little information exists on the prevalence or likelihood of zoonotic transmission events. Currently, reporting of zoonotic SARS–CoV–2 transmission events is not systematically reported. Without this crucial information, however, interpreting data on SARS–CoV–2 infection in animals, especially the overall contribution of zoonotic transmission to the spread of COVID–19, is incomplete. The information gathered using this surveillance mechanism will provide insight into the role of animals in SARS–CoV–2

transmission and will also provide context for understanding prevalence of linked human and animal infections throughout the nation.

Positive SARS–CoV–2 animal samples must be confirmed by United States Department of Agriculture (USDA) National Veterinary Services Lab (NVSL); however, without the proposed surveillance mechanism, data on linked human and animal transmission events which yield negative results would not be tracked at the national level. CDC and USDA guidance recommends state-level health authorities, namely state public health veterinarians and state animal health officials, are involved in approving and coordinating animal SARS–CoV–2 testing. These officials are therefore the primary target audience for this surveillance form, in addition to tribal, local and territorial health authorities. The Zoonotic SARS–CoV–2 Event form includes questions intended to improve our understanding of the number of cases state officials are asked to consult upon regarding SARS–CoV–2 testing for potential zoonotic transmission events, the proportion of those events that are tested for SARS–CoV–2, and corresponding relevant epidemiological data (epidemiological links to other cases of SARS–CoV–2 in people or animals, clinical signs, etc.), results, etc. This form will fill a needed gap over the next three years.

In addition to the primary reason for the Zoonotic SARS–CoV–2 Event form, it will also be used to replace paper-based reporting for CDC-funded research. Currently, CDC’s One Health Office has funded surveillance and research at sites throughout the nation. This surveillance form will be used to report all linked human and animal testing for SARS–CoV–2 to CDC that is occurring through funded surveillance activities, including the status and circumstances for testing. This will relieve the requirement for less secure reporting such as paper-based reporting forms sent through email.

More broadly, we expect this form may be generalized in the future to encapsulate surveillance for other zoonotic respiratory viruses. This surveillance form therefore offers the opportunity to test and iterate upon surveillance mechanisms prior to the advancement of a broader surveillance system.

One Health Case Investigation Form for Animals with SARS–CoV–2: Currently, most animal samples that test positive for SARS–CoV–2 are confirmed by USDA NVSL, and are reported to the World Organization for Animal Health (OIE). However, the information collected is largely restricted to