

Counselors, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, Constitution Center, 400 7th Street SW, Suite 5W, Washington, District of Columbia 20024. Telephone: (202) 245-0649; Email: MStrickland2@cdc.gov.

SUPPLEMENTARY INFORMATION:

Background: The Secretary of Health and Human Services, the Assistant Secretary for Health, and by delegation the Director, Centers for Disease Control and Prevention, are authorized under Sections 301 and 308 of the Public Health Service Act to conduct directly, or by grants or contracts, research, experiments, and demonstrations relating to occupational safety and health and to mine health.

Purpose: The Board of Scientific Counselors, National Institute for Occupational Safety and Health (BSC, NIOSH) provides advice to the Director, National Institute for Occupational Safety and Health, on NIOSH research and prevention programs. The Board also provides guidance on the Institute's research activities related to developing and evaluating hypotheses, systematically documenting findings, and disseminating results. In addition, the Board evaluates the degree to which the activities of NIOSH: (1) conform to those standards of scientific excellence appropriate for Federal scientific institutions in accomplishing objectives in occupational safety and health; (2) address currently relevant needs in the fields of occupational safety and health either alone or in conjunction with other known activities inside and outside of NIOSH; and (3) produce their intended results in addressing important research questions in occupational safety and health, both in terms of applicability of the research findings and dissemination of the findings.

Matters To Be Considered: The agenda for the meeting addresses the NIOSH Evaluation Capacity Building Plan (ECB Plan) and Scoring Progress on the ECB Plan; Diversity, Equity, and Inclusion at NIOSH; and a National Firefighter Registry Subcommittee Update. Agenda items are subject to change as priorities dictate.

The agenda is also posted on the NIOSH website at <https://www.cdc.gov/niosh/bsc/>.

Public Participation

Written Public Comment: Written comments will be accepted per the instructions provided in the addresses section above. Comments received in advance of the meeting are part of the public record and are subject to public disclosure. Written comments will be

included in the official record of the meeting. Do not include any information in your comment or supporting materials that you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/near-duplicate examples of a mass-mail campaign. CDC will carefully consider all comments submitted into the docket.

Written comments received by March 6, 2024, will be provided to the Board prior to the meeting.

Oral Public Comment: The public is welcome to participate during the public comment period, from 1 p.m. to 1:15 p.m., EDT, March 13, 2024. Each commenter will be provided up to five minutes for comment. A limited number of time slots are available and will be assigned on a first-come, first-served basis. Members of the public who wish to address the BSC, NIOSH are requested to contact the Designated Federal Officer for scheduling purposes (see **FOR FURTHER INFORMATION CONTACT** above).

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2024-02180 Filed 2-2-24; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-24-0728]

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 "National Notifiable Diseases Surveillance System (NNDSS)" 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 November 14, 2023 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

National Notifiable Diseases Surveillance System (NNDSS) (OMB Control No. 0920–0728, Exp. 03/31/2026)—Revision—Office of Public Health Data, Surveillance, and Technology (OPHDST), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Public Health Services Act (42 U.S.C. 241) authorizes CDC to disseminate nationally notifiable condition information. The National Notifiable Diseases Surveillance System (NNDSS) is based on data collected at the state, territorial and local levels because of legislation and regulations in those jurisdictions that require health care providers, medical laboratories, and other entities to submit health-related data on reportable conditions to public health departments. These reportable conditions, which include infectious and non-infectious diseases, vary by jurisdiction depending upon each jurisdiction’s health priorities and needs. Each year, the Council of State and Territorial Epidemiologists (CSTE), supported by CDC, determines which reportable conditions should be designated nationally notifiable or under standardized surveillance. CDC requests a three-year approval for a Revision of the NNDSS (OMB Control No. 0920–0728, Exp. Date 03/31/2026). This Revision includes requests for approval to: (1) receive case notification data for Cronobacter and Ehrlichiosis, new notifiable conditions; (2) receive case notification data for Congenital cytomegalovirus infection and Toxoplasmosis, new conditions under standardized surveillance; and (3) receive new disease-specific data elements for Cronobacter, Hansen’s Disease (Leprosy), and Leptospirosis.

The NNDSS currently facilitates the submission and aggregation of case

notification data voluntarily submitted to CDC from 60 jurisdictions: public health departments in every U.S. state, New York City, Washington DC, five U.S. territories (American Samoa, the Commonwealth of Northern Mariana Islands, Guam, Puerto Rico, and the U.S. Virgin Islands), and three freely associated states (Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau). This information is shared across jurisdictional boundaries and both surveillance and prevention and control activities are coordinated at regional and national levels.

Approximately 90% of case notifications are encrypted and submitted to NNDSS electronically from already existing databases by automated electronic messages. When automated transmission is not possible, case notifications are faxed, emailed, uploaded to a secure network or entered into a secure website. All case notifications that are faxed or emailed are done so in the form of an aggregate weekly or annual report, not individual cases. These different mechanisms used to send case notifications to CDC vary by the jurisdiction and the disease or condition. Jurisdictions remove most personally identifiable information (PII) before data are submitted to CDC, but some data elements (e.g., date of birth, date of diagnosis, county of residence) could potentially be combined with other information to identify individuals. Private information is not disclosed unless otherwise compelled by law. All data are treated in a secure manner consistent with the technical, administrative, and operational controls required by the Federal Information Security Management Act of 2002 (FISMA) and the 2010 National Institute of Standards and Technology (NIST) Recommended Security Controls for Federal Information Systems and

Organizations. Weekly tables of nationally notifiable diseases are available through CDC WONDER and *data.cdc.gov*. Annual summaries of finalized nationally notifiable disease data are published on CDC WONDER and *data.cdc.gov* and disease-specific data are published by individual CDC programs.

The burden estimates include the number of hours that the public health department uses to process and send case notification data from their jurisdiction to CDC. Specifically, the burden estimates include separate burden hours incurred for automated and non-automated transmissions, separate weekly burden hours incurred for modernizing surveillance systems as part of CDC’s Data Modernization Initiative (DMI) implementation, separate burden hours incurred for annual data reconciliation and submission, and separate one-time burden hours incurred for the addition of new diseases and data elements. The burden estimates for the one-time burden for reporting jurisdictions are for the addition of case notification data for Cronobacter and Ehrlichiosis, new notifiable conditions; the addition of case notification data for Congenital cytomegalovirus infection and Toxoplasmosis, new conditions under standardized surveillance; and the addition of new disease-specific data elements for Cronobacter, Hansen’s Disease (Leprosy) and Leptospirosis. The estimated annual burden for the 257 respondents is 18,414 hours. The total burden hours decreased from 18,594 to 18,414 since the last Revision because there were fewer disease-specific data elements added compared to the previous Revision. There are no costs to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
States	Weekly (Automated)	50	52	20/60
States	Weekly (Non-automated)	10	52	2
States	Weekly (DMI Implementation)	50	52	4
States	Annual	50	1	75
States	One-time Addition of Diseases and Data Elements	50	1	3
Territories	Weekly (Automated)	5	52	20/60
Territories	Weekly, Quarterly (Non-automated)	5	56	20/60
Territories	Weekly (DMI Implementation)	5	52	4
Territories	Annual	5	1	5
Territories	One-time Addition of Diseases and Data Elements	5	1	3
Freely Associated States	Weekly (Automated)	3	52	20/60
Freely Associated States	Weekly, Quarterly (Non-automated)	3	56	20/60
Freely Associated States	Annual	3	1	5
Freely Associated States	One-time Addition of Diseases and Data Elements	3	1	3

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Cities	Weekly (Automated)	2	52	20/60
Cities	Weekly (Non-automated)	2	52	2
Cities	Weekly (DMI Implementation)	2	52	4
Cities	Annual	2	1	75
Cities	One-time Addition of Diseases and Data Elements	2	1	3

Jeffrey M. Zirger,
*Lead, Information Collection Review Office,
 Office of Public Health Ethics and
 Regulations, Office of Science, Centers for
 Disease Control and Prevention.*
 [FR Doc. 2024-02171 Filed 2-2-24; 8:45 am]
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**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Disease Control and
 Prevention**

**Disease, Disability, and Injury
 Prevention and Control Special
 Emphasis Panel (SEP)—CE24-011,
 Grants To Support New Investigators
 in Conducting Research Related To
 Understanding Drug Use and
 Overdose Risk and Protective Factors
 (K01); Cancellation of Meeting**

AGENCY: Centers for Disease Control and
 Prevention, Department of Health and
 Human Services.

ACTION: Notice.

FOR FURTHER INFORMATION CONTACT:
 Aisha L. Wilkes, M.P.H., Scientific
 Review Officer, National Center for
 Injury Prevention and Control, Centers
 for Disease Control and Prevention,
 4770 Buford Highway NE, Mailstop
 S106-9, Atlanta, Georgia 30341-3717.
 Telephone: (404) 639-6473; Email:
 AWilkes@cdc.gov.

SUPPLEMENTARY INFORMATION: Notice is
 hereby given of a change in the meeting
 of the Disease, Disability, and Injury
 Prevention and Control Special
 Emphasis Panel (SEP)—CE24-011,
 Grants to Support New Investigators in
 Conducting Research Related to
 Understanding Drug Use and Overdose
 Risk and Protective Factors (K01);
 Cancellation of Meeting; March 5, 2024,
 8:30 a.m.–5 p.m., EST., in the original
Federal Register notice FRN. The web
 conference was published in the
Federal Register on Tuesday, October
 24, 2023, 88 FR 73020.

This meeting is being canceled in its
 entirety.

The Director, Office of Strategic
 Business Initiatives, Office of the Chief
 Operating Officer, Centers for Disease
 Control and Prevention, has been
 delegated the authority to sign **Federal
 Register** notices pertaining to
 announcements of meetings and other
 committee management activities, for
 both the Centers for Disease Control and
 Prevention and the Agency for Toxic
 Substances and Disease Registry.

Kalwant Smagh,
*Director, Office of Strategic Business
 Initiatives, Office of the Chief Operating
 Officer, Centers for Disease Control and
 Prevention.*

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**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Centers for Disease Control and
 Prevention**

**[60Day-24-0696; Docket No. CDC-2024-
 0006]**

**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 continuing information collection, as
 required by the Paperwork Reduction
 Act of 1995. This notice invites
 comment on a proposed information
 collection project titled National HIV
 Prevention Program Monitoring and
 Evaluation (NHM&E). NHM&E collects
 standardized HIV prevention program
 evaluation data from health departments
 and community-based organizations
 (CBOs) who receive federal funds for
 HIV prevention activities.

DATES: CDC must receive written
 comments on or before April 5, 2024.

ADDRESSES: You may submit comments,
 identified by Docket No. CDC-2024-
 0006 by either of the following methods:

- **Federal eRulemaking Portal:**
www.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 H21-8, Atlanta,
 Georgia 30329.

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

Please note: Submit all comments
 through the Federal eRulemaking portal
 (www.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
 H21-8, Atlanta, Georgia 30329;
 Telephone: 404-639-7118; Email: [omb@
 cdc.gov](mailto: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: