

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
General Public	Screening Form	1,382	1	3/60
	Focus Group Guide	691	1	2
Health Care Providers	Screening Form	346	1	3/60
	Focus Group Guide	173	1	2

Dated: August 5, 2008.
Maryam I. Daneshvar,
Acting Reports Clearance Officer, Centers for Disease Control and Prevention.
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-08-0006]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. Alternatively, to obtain a copy of the data collection plans and instrument,

call 404-639-5960 and send comments to Maryam I. Daneshvar, CDC Reports Clearance Officer, 1600 Clifton Road NE., MS-D74, Atlanta, Georgia 30333; comments may also be sent by e-mail to omb@cdc.gov.

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 a 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; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Statements in Support of Application of Waiver of Inadmissibility (0920-0006)—Extension—National Center for Preparedness, Detection, and Control of

Infectious Diseases (NCPDCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 212(a)(1) of the Immigration and Nationality Act states that aliens with specific health related conditions are ineligible for admission into the United States. The Attorney General may waive application of this inadmissibility on health-related grounds if an application for waiver is filed and approved by the consular office considering the application for visa. CDC uses this application primarily to collect information to establish and maintain records of waiver applicants in order to notify the U.S. Citizenship and Immigration Services when terms, conditions and controls imposed by waiver are not met. CDC is requesting approval from OMB to collect this data for another 3 years. There are no costs to respondents except their time to complete the application. The annualized burden for this data collection is 167 hours.

ESTIMATE OF ANNUALIZED BURDEN HOURS

Form	Number of responses	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Form CDC 4.422-1	200	1	10/60	33
Form CDC 4.422-1a	200	1	20/60	67
Form CDC 4.422-1b	200	1	20/60	67
Total				167

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-08-08BA]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and

Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Active Bacterial Core Surveillance (ABCs) Projects—New—National Center for Immunization and Respiratory Diseases (NCIRD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Active Bacterial Core surveillance (ABCs) is a core component of CDC's Emerging Infections Program Network (EIP), a collaboration between CDC, state health departments, and universities. ABCs is an active laboratory- and population-based surveillance system for six invasive bacterial pathogens of public health importance (group A and group B streptococcus, *Haemophilus influenzae*, *Neisseria meningitidis*, *Streptococcus pneumoniae*, and methicillin-resistant *Staphylococcus aureus*). Case finding is active and laboratory-based. Following the identification of cases, a standard case report is completed on all identified cases through medical record review. Data collection is performed

differently in each surveillance area, for example, through the cooperation of on-site hospital personnel (e.g., Infection Control Practitioners or Medical Records personnel); through medical record review or clinician interview by county health department personnel; or through medical record review by surveillance personnel. Case report forms are entered into a secure computerized database and maintained at each surveillance site. The computerized databases, with personal identifiers removed, are transmitted to CDC by the fifth of every month.

The data collection has important practical utility to the government as well as EIP populations and the American population as a whole. ABCs data is critical for documenting disease burden and describing the epidemiology of invasive bacterial disease, tracking trends in antimicrobial resistance, contributing to the development and evaluation of new vaccines, developing and assessing public health prevention measures, and improving overall public

health practice. Current information on disease incidence is needed to study present and emerging disease problems. The ABCs surveillance system provides data for those engaged in research or medical practice, health education officials, and manufacturers of pharmaceutical products which may lead to effective prevention strategies and enhanced interventions.

Respondents for each of the data collection forms are state health departments (California, Colorado, Connecticut, Georgia, Maryland, Minnesota, New Mexico, New York, Oregon and Tennessee) who are recipients of funding through the EIP cooperative agreement. The number of responses is dependent on the number of cases that are identified. Number of "responses" for all case report forms must be estimated not knowing before hand how many cases will occur.

There are no costs to respondents other than their time. The total estimated annualized burden is 4918 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
ABCs Case Report Form	State Health Department	10	809	20/60
Invasive Methicillin-resistant <i>Staphylococcus aureus</i> ABCs Case Report Form.	State Health Department	10	609	20/60
ABCs Invasive Pneumococcal Disease in Children Case Report Form.	State Health Department	10	41	10/60
Neonatal Group B Streptococcal Disease Prevention Tracking Form.	State Health Department	10	37	20/60

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Maryam I. Daneshvar,

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Annual Progress Report—University Centers for Excellence in Developmental Disabilities Education, Research, and Service

OMB No.: 0970-0289

Description: Section 104 (42 U.S.C. 15004) of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (DD Act of 2000) directs the

Secretary of Health and Human Services to develop and implement a system of program accountability to monitor the grantees funded under the DD Act of 2000. The program accountability system shall include the National Network of University Centers for Excellence in Developmental Disabilities Education, Research, and Service (UCEDDs) authorized under Part D of the DD Act of 2000. In addition to the accountability system, Section 154(e) (42 U.S.C. 15064) of the DD Act of 2000 includes requirements for a UCEDD Annual Report.

Respondents: 67.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
UCEDD Annual Report Template	67	1	200	13,400