

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. 2015-13797 Filed 6-4-15; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC-2015-0038; 60Day-15-
0964]

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 efforts 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 reinstatement
of an information collection entitled
“Interventions to Reduce Shoulder
MSDs in Overhead Assembly”. This
information collection is part of a study
to assess the effectiveness and cost-
benefit of occupational safety and health
(OSH) interventions to prevent
musculoskeletal disorders (MSDs)
among workers in the Manufacturing
(MNF) sector.

DATES: Written comments must be
received on or before August 4, 2015.

ADDRESSES: You may submit comments,
identified by Docket No. CDC-2015-
0038 by any of the following methods:

Federal eRulemaking Portal:
Regulation.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 the 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

Interventions to Reduce Shoulder
MSDs in Overhead Assembly—
Reinstatement—(OMB Control No.
0920-0964, Expired 4/30/2015),
National Institute for Occupational
Safety and Health (NIOSH), Centers for
Disease Control and Prevention (CDC).

Background and Brief Description

The mission of the National Institute
for Occupational Safety and Health
(NIOSH) is to promote safety and health
at work for all people through research
and prevention. Under Public Law 91-
596, sections 20 and 22 (Section 20-22,
Occupational Safety and Health Act of
1970), NIOSH has the responsibility to
conduct research to advance the health
and safety of workers. In this capacity,
NIOSH proposes a reinstatement for a
study to assess the effectiveness and
cost-benefit of occupational safety and
health (OSH) interventions to prevent
musculoskeletal disorders (MSDs)
among workers in the Manufacturing
(MNF) sector. The original information
collection request expired on April 30,
2015. A reinstatement is being requested
in order to allow the program to resume
the data collection activities.

MSDs represent a major proportion of
injury/illness incidence and cost in the
U.S. Manufacturing (MNF) sector. In
2008, 29% of non-fatal injuries and
illnesses involving days away from
work (DAW) in the MNF sector involved
MSDs and the MNF sector had some of
the highest rates of MSD DAW cases.
The rate for the motor vehicle
manufacturing sub-sector (NAICS 3361)
was among the highest of MNF sub
sectors, with MSD DAW rates that were
higher than the general manufacturing
MSD DAW rates from 2003-2007.

In automotive manufacturing
overhead conveyance of the vehicle
chassis requires assembly line
employees to use tools in working
postures with the arms elevated. These
postures are believed to be associated
with symptoms of upper limb
discomfort, fatigue, and impingement
syndromes (Fischer et al., 2007).
Overhead working posture, independent
of the force or load exerted with the
hands, may play a role in the
development in these conditions.

However, recent studies suggest a
more significant role of localized
shoulder muscle fatigue in contributing
to these disorders. Fatigue of the
shoulder muscles may result in changes

in normal shoulder kinematics (motion) that affect risk for shoulder impingement disorders (Ebaugh et al., 2006; Chopp et al., 2010).

The U.S. Manufacturing sector has faced a number of challenges including an overall decline in jobs, an aging workforce, and changes in organizational management systems. Studies have indicated that the average age of industrial workers is increasing and that older workers may differ from younger workers in work capacity, injury risk, severity of injuries, and speed of recovery (Kenny et al., 2008; Gall et al., 2004; Restrepo et al., 2006). As the average age of the industrial population increases and newer systems of work organization (such as lean manufacturing) are changing the nature of labor-intensive work, prevention of MSDs will be more critical to protecting older workers and maintaining productivity.

This study will continue to evaluate the efficacy of two intervention strategies for reducing musculoskeletal symptoms and pain in the shoulder attributable to overhead assembly work in automotive manufacturing. These interventions are, (1) an articulating spring-tensioned tool support device that unloads from the worker the weight of the tool that would otherwise be manually supported, and, (2) a targeted exercise program intended to increase

individual employees' strength and endurance in the shoulder and upper arm stabilizing muscle group. As a primary prevention strategy, the tool support engineering control approach is preferred; however, a cost-efficient opportunity exists to concurrently evaluate the efficacy of a preventive exercise program intervention. Both of these intervention approaches have been used in the Manufacturing sector, and preliminary evidence suggests that both approaches may have merit. However, high quality evidence demonstrating their effectiveness, by way of controlled trials, is lacking.

This project will be conducted as a partnership between NIOSH and Toyota Motors Engineering & Manufacturing North America, Inc. (TEMA), with the intervention evaluation study taking place at the Toyota Motor Manufacturing Kentucky, Inc. (TMMK) manufacturing facility in Georgetown, Kentucky. The prospective intervention evaluation study will be conducted using a group-randomized controlled trial multi-time series design. Four groups of 25–30 employees will be established to test the two intervention treatment conditions (tool support, exercise program), a combined intervention treatment condition, and a control condition. The four groups will be comprised of employees working on

two vehicle assembly lines in different parts of the facility, on two work shifts (first and second shift). Individual randomization to treatment condition is not feasible, so a group-randomization (by work unit) will be used to assign the four groups to treatment and control conditions. Observations will be made over the 10-month study period and questionnaires will include the Shoulder Rating Questionnaire (SRQ), Disabilities of the Arm, Shoulder and Hand (DASH) questionnaire, a Standardized Nordic Questionnaire for body part discomfort, and a Work Organization Questionnaire. In addition to the questionnaires, a shoulder-specific functional capacity evaluation test battery will be administered at 90 and 210 days, immediately pre- and post-intervention, to confirm the efficacy of the targeted exercise program in improving shoulder capacity.

In summary, this study will evaluate the effectiveness of two interventions to reduce musculoskeletal symptoms and pain in the shoulder associated with repetitive overhead work in the manufacturing industry. In addition, NIOSH will disseminate the results of evidence-based prevention practices to the greatest audience possible. NIOSH expects to complete all data collection by 2018. There is no cost to respondents other than their time.

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 hrs.)
Employees	PAR-Q (Physical Activity Readiness)	125	1	2/60	4
Employees	Shoulder rating Questionnaire (SQR)	125	10	4/60	83
Employees	Disabilities of Arm Shoulder and Hand (DASH).	125	10	6/60	125
Employees	Standardized Nordic Questionnaire for Musculoskeletal Symptoms.	125	10	4/60	83
Employees	Work Org Questionnaire	125	3	26/60	163
Total	458

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. 2015-13798 Filed 6-4-15; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifiers CMS-10561]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare & Medicaid Services, HHS.

ACTION: Notice.

SUMMARY: The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our