EDN data entry staff at state and local health departments. The EDN Tuberculosis Follow-Up Worksheet for Newly-Arrived Persons with Overseas Tuberculosis Classifications. 1,548 3 30/60 2,322

Total .......................................................... .......................................................... .......................................................... .......................................................... .......................................................... .......................................................... 2,322

Jeffrey M. Zirger,

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
Healthcare Infection Control Practices Advisory Committee (HICPAC); Correction

Notice is hereby given of a change in the meeting of the Healthcare Infection Control Practices Advisory Committee (HICPAC); March 4, 2021, 9:00 a.m. to 3:00 p.m., EST in the original FRN.

The teleconference was published in the Federal Register on January 14, 2021, Volume 86, Number 9, pages 3155–3156.

The teleconference is being corrected to update the meeting time and should read as follows:
DATE: The meeting will be held on March 4, 2021, from 1:00 p.m. to 3:00 p.m., EST.

FOR FURTHER INFORMATION CONTACT: Koo-Whang Chung, M.P.H., HICPAC, Division of Healthcare Quality Promotion, National Center for Emerging Zoonotic Infectious Diseases, CDC, 1600 Clifton Road NE, Mailstop H16–3, Atlanta, Georgia 30329–4027, telephone (404) 498–0730; HICPAC@cdc.gov.

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
Interagency Committee on Smoking and Health (ICSH); Notice of Charter Renewal

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

ACTION: Notice of charter renewal.

SUMMARY: This gives notice under the Federal Advisory Committee Act of October 6, 1972, that the Interagency Committee on Smoking and Health (ICSH), Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through March 20, 2023.

FOR FURTHER INFORMATION CONTACT: Kathryn Gallagher, Designated Federal Officer, Interagency Committee on Smoking and Health (ICSH), Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road NE, Mailstop S107–7, Atlanta, Georgia 30329–4027, telephone (404) 639–6358; KGallagher@cdc.gov.

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
Advisory Council for the Elimination of Tuberculosis (ACET); Notice of Charter Renewal

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

ACTION: Notice of charter renewal.

SUMMARY: This gives notice under the Federal Advisory Committee Act of October 6, 1972, that the Advisory Council for the Elimination of Tuberculosis (ACET), Centers for Disease Control and Prevention, Department of Health and Human Services, has been renewed for a 2-year period through March 15, 2023.

FOR FURTHER INFORMATION CONTACT: CAPT Deron Burton, M.D., J.D., M.P.H., Designated Federal Officer, Advisory Council for the Elimination of Tuberculosis (ACET), Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road NE, Mailstop USB–6, Atlanta, Georgia 30329–4027, telephone (404) 639–1506; DBurton@cdc.gov.

The Director, Strategic Business Initiatives Unit, 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
Recommendations for Public Comment and Proposed Data Collection Submitted
0026 by any of the following methods:

Centers for Disease Control and Prevention

[60Day–21–21DS; Docket No. CDC–2021–0026]

Proposed Data Collection Submitted for Public Comment and

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 Lighting Interventions for Improving the Health, Safety, and Well-Being of Underground Mineworkers. The purpose of this information collection is to examine the effect of human centric lighting (HCL) interventions on circadian disruption (CD) and well-being in underground mineworkers via survey administration and biometric data collection.

DATES: Written comments must be received on or before May 18, 2021.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2021–0026 by any of the following methods:

• Federal eRulemaking Portal: Regulation.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. 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.

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; and

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.

5. Assess information collection costs.

Proposed Project

Pre-shift Lighting Interventions to Improve Miner Safety and Well-being—New—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Institute for Occupational Safety and Health seeks a two-year approval from the Office of Management and Budget (OMB) to collect information needed to develop strategies and guidance to improve the safety, health, and well-being of underground coal and metal shiftworkers in the U.S. mining industry. Light has both visual and non-visual impacts on the human body, enabling us to visually perceive the world, and non-visually experience circadian entrainment and acute effects that include alertness, concentration, and performance on cognitive tasks. Hence, light drives our fundamental physiological functioning.

It is not surprising that underground miners have significant reductions in exposure to daylight—especially those miners working shifts. This lacking exposure can lead to fatigue and circadian disruption (CD) that can result in sleep loss and reduced alertness. This increases the risk of accidents, and can lead to health problems that include obesity, diabetes, and cancer.

This study will evaluate the impacts of blue and red-light treatment at the beginning of the work shift on task performance, sleepiness and alertness, subjective well-being, sleep efficiency and circadian rhythms in underground mine workers. A 2x2 randomized crossover, mixed design will be used to test the efficacy and acceptability an HCL intervention using light-emitting eyewear delivered to shift workers over a two-year study period. A cross-over design has a significant advantage because the subjects serve as their own control, which serves to minimize variations caused by circadian phase differences and sleep patterns of the individual participants. The other advantages include greater sample size efficiency with randomization of treatment order, and all subjects will receive all the treatments. Participants will be divided between coal and metal miners, and will be those who regularly work the 1st, 2nd and 3rd shifts at one underground coal and one underground metal mine.

NIOSH researchers will visit one underground coal mine and one underground metal mine to obtain informed consent from volunteer mineworkers to conduct an intervention study and administer both electronic and paper and pencil surveys. Before beginning the study, the respondents will provide their informed consent to participate, be given information about the demographic information that will be collected and will be instructed how to