

CDC requests a three-year OMB approval for this project. Participation

in the CDC ScoreCard is voluntary and there are no costs to respondents other

than their time. The total estimated annualized burden hours are 1,067.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Employers	CDC Worksite Health Scorecard Registration	800	1	5/60
	CDC Worksite Health Scorecard	800	1	75/60

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2022-02402 Filed 2-3-22; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-22-22CH Docket No. CDC-2022-0016]

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 proposed and/or continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled the National School COVID-19 Prevention Study. This information collection request is designed to obtain data from a nationally representative sample of K-12 public schools in the United States to describe the prevalence of COVID-19 prevention strategies (e.g., mask use, physical distancing) that K-12 schools are implementing, including changes over time and differences by school-level characteristics and examine associations between school-level COVID-19 prevention strategies and COVID-19 transmission related outcomes in the school and larger community.

DATES: CDC must receive written comments on or before April 5, 2022.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2022-0016 by either of the following methods:

- *Federal eRulemaking Portal:*

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 *regulations.gov*.

Please note: Submit all comments 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 Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21-8, 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;

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; and

5. Assess information collection costs.

Proposed Project

The National School COVID-19 Prevention Study—New—National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

CDC requests a one-year approval for a new information collection titled the National School COVID-19 Prevention Study (NSCPS) for the collection of information using a series of surveys to be administered to school-level designees (e.g., principals) in a nationally representative sample of K-12 schools. The NSCPS has a longitudinal study design and involves five waves of data collection. This project will gather information on school-level COVID-19 prevention strategies and COVID-19 related outcomes for the last two data waves; the first three waves have been previously approved under the Public Health Emergency PRA Waiver. These data will inform CDC guidance for COVID-19 prevention in school settings.

CDC requests OMB approval for an estimated 900 annual burden hours. 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 hours per response	Total response burden (hours)
School-level Administrator (e.g., principal).	NSCPS Wave 4 and 5 Questionnaire.	600	2	45/60	900
Total	900

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2022-02405 Filed 2-3-22; 8:45 am]

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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 the Ministerio de Salud de la República de Panamá (MINSa)

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 \$10,000,000 for Year 1 of funding to the Ministerio de Salud de la República de Panamá {MINSa}. The award will contribute to the achievement of 95-95-95 targets (95% of HIV-positive individuals knowing their status, 95% of those receiving ART [Antiretroviral therapy], and 95% of those achieving viral suppression) in Panama by introducing or scaling up high-impact HIV prevention, testing, linkage, and treatment models across the continuum of care and strengthening HIV laboratory and information systems. 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: Lily de Leon, Center for Global Health, Centers for Disease Control and Prevention, 18 Avenida 11-37, Zona 15, VHI, Telephone: 800-232-6348, Email: izo0@cdc.gov.

SUPPLEMENTARY INFORMATION: The single-source award will include key HIV prevention and diagnosis activities: Index testing, differentiated service

modalities at key population testing facilities, self-testing, Pre-Exposure Prophylaxis (PreP), rapid recency testing and response to clusters of recent transmission, and linkage to treatment for newly diagnosed individuals in Panama. Additionally, key HIV treatment activities will include linkage to care registries, early treatment initiation, differentiated service delivery models, opportunistic infection diagnosis and treatment, lost-to follow-up reengagement, quality assurance in Viral Load (VL) networks, and drug resistance monitoring.

MINSa is in a unique position to conduct this work, as it is the sole organization authorized to oversee the regions and medical sanitary areas covered by health institutions deemed to be scattered and decentralized in Panama. Since its creation in 1969, MINSa has served to streamline programs within these areas by setting up satellite systems in which higher ranking institutions are responsible for coordinating collaboration between medical-sanitary area officials, urban doctors, and the general hospital staff of these complex institutions.

Summary of the Award

Recipient: Ministerio de Salud de la República de Panamá (MINSa).

Purpose of the Award: The purpose of this award is to contribute to the achievement of 95-95-95 targets in Panama by introducing or scaling up high-impact HIV prevention, testing, linkage, and treatment models across the continuum of care and strengthening HIV laboratory and information systems.

Amount of Award: The approximate year 1 funding amount will be \$10,000,000 in Federal Fiscal Year (FFY) 2022 funds, subject to the availability of funds. Fund 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 1, 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-22-0020]

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 Coal Workers' Health Surveillance Program (CWHSP) 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 September 14, 2021 to obtain comments from the public and affected agencies. CDC did not receive comments 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.,