ATSDR will only submit a collection for approval under this Generic Clearance if it meets the following conditions:

- The collections are voluntary;
- The collections are low-burden for respondents (based on considerations of total burden hours, total number of respondents, or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
- The collections are noncontroversial and do not raise issues of concern to other Federal agencies;
- Any collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the near future;
- Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
- Information gathered is intended to be used only internally for general service improvement and program management purposes and is not intended for release outside of the agency (if released, the agency must indicate the qualitative nature of the information);
- Information gathered will not be used for the purpose of substantially informing influential policy decisions; and
- Information gathered will yield qualitative information; the collections will not be designed or expected to yield statistically reliable results or used as though the results are generalizable to the population of study.

Feedback collected under this Generic Clearance provides useful information, but it does not yield data that can be generalized to the overall population. This type of Generic Clearance for qualitative information will not be used for quantitative information collections that are designed to yield reliably actionable results, such as monitoring trends over time or documenting program performance. Such data uses require more rigorous designs that address: The target population to which generalizations will be made, the sampling frame, the sample design (including stratification and clustering), the precision requirements or power calculations that justify the proposed sample size, the expected response rate, methods for assessing potential nonresponse bias, the protocols for data collection, and any testing procedures that were or will be undertaken prior to fielding the study. Depending on the degree of influence the results are likely to have, such collections may still be eligible for submission for other generic mechanisms that are designed to yield quantitative results. As a general matter, information collections will not result in any new system of records containing privacy information and will not ask questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.

This is an extension of the previously approved collection of 7,075 annualized burden hours. There is no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondent type	Type of collection	Number of respondents	Annual frequency per response	Hours per response	Total burden (in hours)
Individuals and Households; Businesses and Organizations; and State, Local, or Tribal Government.	Small discussion groups	300	1	90/60	450
	Request for customer comment cards/complaint forms/post-conference or training surveys.	1,500	1	15/60	375
	Focus groups of customers, potential customers, delivery partners, or other stakeholders.	2,000	1	2	4,000
	Qualitative customer satisfaction surveys or interviews.	3,000	1	30/60	1,500
	Usability testing/in-person observation testing.	1,500	1	30/60	750
Total					7,075

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–0900]

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 ''Contact Investigation Outcome Reporting Forms'' 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 June 4, 2024 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.,* 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

Contact Investigation Outcome Reporting Forms (OMB Control No. 0920–0900, Exp. 8/31/2024)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The goal of this information collection is to obtain sufficient information on the results of contact investigations carried out by state, local, and territorial public health professionals or maritime medical crews to assess the impact of a confirmed communicable disease of public health concern in a traveler, both in terms of further transmission of disease and health outcomes for cases and contacts. This data collection will also determine if further public health intervention is appropriate.

CDC sends an outcome reporting form to state, local, and territorial health departments and maritime operators when an individual with a communicable disease is reported and there is sufficient evidence to suggest that the individual was infectious during travel and/or potentially posed a public health risk to other travelers on the same conveyance. The reporting forms record information about the exposed traveler's location and activities on air or maritime conveyance or land border crossing, other potential exposures, signs/symptoms that may have occurred after their potential exposure, prior history of vaccination or disease, and other medical conditions that could influence the risk of infection or severity of illness. CDC has adjusted the burden to account for changes after the COVID–19 pandemic. Minor adjustments were also made to some forms to improve clarity, readability, and public health relevance of the data collected; these changes are not expected to affect reporting burden.

CDC requests OMB approval for an estimated 33 annualized burden hours. There are no costs to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Cruise Ship Physicians/Cargo Ship Managers	TB Maritime Contact Investigation Worksheet	17	1	10/60
Cruise Ship Physicians	Varicella Outbreak Enhanced Data Collection Form—Maritime.	74	1	10/60
Cruise Ship Physicians	Influenza Outbreak Enhanced Data Collection Form—Maritime.	10	1	10/60
State/Local/Territorial public health staff	General Contact Investigation Outcome Reporting Form—Air.	8	1	5/60
State/Local/Territorial public health staff	TB Aircraft Contact Investigation Outcome Reporting Form.	51	1	10/60
State/Local/Territorial public health staff	Measles Contact Investigation Outcome Reporting Form—Air.	72	1	5/60
State/Local/Territorial public health staff	Rubella Contact Investigation Outcome Reporting Form—Air.	1	1	5/60
State/Local/Territorial public health staff	General Land Contact Investigation Outcome Reporting Form.	2	1	5/60
	Land			

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–1346]

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 ''Oral Health Basic Screening Survey for Children'' 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 January 16, 2024, to obtain comments from the public and affected agencies. CDC received no substantive