

when asthma programs embark on asthma activities similar to those done elsewhere.

In the past three-years, AIRS data were used to:

- Serve as a resource to NCEH when addressing congressional, departmental and institutional inquiries.
- Help the branch align its current interventions with CDC goals and allowed the monitoring of progress toward these goals.
- Allow the NACP and the state asthma programs to make more

informed decisions about activities to achieve objectives.

- Facilitate communication about interventions across states, and enable inquiries regarding interventions by populations with a disproportionate burden, age groups, geographic areas and other variables of interest.

A revision to this data collection is necessary because: (1) The web-based reporting platform is no longer supported by CDC; (2) in collaboration with state asthma programs, reporting requirements have been prioritized to

provide specific information on the two main strategies in the associated Funding Opportunity Announcement (FOA): Services and health systems strategies; (3) CDC now endorses limiting state program reporting to once a year; and (4) the number of state awardees has been reduced from 34 to 23 states.

There will be no cost for respondents other than their time to complete the three AIRS spreadsheets annually. The estimated annualized burden hours are 82.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden response (hours)
State Asthma Program Awardees	AIRS Performance Measures Reporting Spreadsheets.	23	1	150/60
	AIRS Emergency Department Visits Reporting Form.	23	1	30/60
	AIRS Hospital Discharge Reporting Forms ...	23	1	30/60

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-16-16CQ]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (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 or send an email to omb@cdc.gov. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

Occupational Health Safety Network (OHSN)—Existing Information Collection in Use without an OMB Control Number—National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Healthcare in the United States is a growing industry that employs more than 19 million workers with a substantial burden of occupational injuries and illnesses. In 2013, one in five workers in the healthcare and social assistance industry reported a nonfatal job-related injury. This is the highest number of non-fatal injuries reported among all private industries.

U.S. healthcare facilities depend on surveillance data to track the incidence of injuries, identify risk factors, target prevention activities and evaluate interventions to reduce the occurrence of occupational injury among healthcare personnel. In 2012, to assist healthcare facilities to enhance capacity to use existing surveillance data, the National Institute for Occupational Safety and Health (NIOSH) launched the Occupational Health Safety Network (OHSN), a voluntary surveillance system developed specifically for healthcare personnel environment. OHSN is a free, and secure electronic occupational safety and health surveillance system that has provided U.S. healthcare facilities the ability to efficiently analyze their own occupational injury data while, at the same time, serving as a source for national surveillance by sharing their de-identified injury data with NIOSH. Unlike other national occupational surveillance systems, OHSN offers integrated approach to monitor standard occupational injuries among facility-based healthcare personnel in the U.S.

and to provide timely, facility-level feedback to participants with benchmarking and analyses capabilities.

OHSN collects two types of data from participating facilities. Facilities collect these data to meet specific regulatory or administrative requirements. Thus, no new data collection is required.

Participating facilities provides OHSN—(1) a onetime enrollment form, requests information of the participating facility and is publically available information from American Hospital Association database; and (2) a monthly submission of occupational injury data collected in the previous month. These data are sent to OHSN via a web portal in a format using standardized data elements and value sets. No personal identifiable information is transmitted to OHSN. Data elements include: Injury time, location and surrounding circumstances of each injury event.

Healthcare facilities download data through an OHSN-provided data

conversion and mapping tools to upload the monthly occupational injury data.

Each participating facilities has access to OHSN web portal, facilities are able to analyze workers current and historical worker injury data to benchmark their internal injury rates and trends against aggregate data from similar workplaces. In addition they are able to assess the impact of prevention efforts on occupational health and safety over time using integrated data analysis and visualization tools (charts and graphs).

OHSN currently tracks three common, serious, and preventable categories of traumatic injury to healthcare personnel: Slips, trips and falls; musculoskeletal disorders resulting from patient handling and movement events; and workplace violence. OHSN will add new modules about exposure to sharps injury and blood and body fluids exposures.

NIOSH analyzes the data submitted to OHSN to conduct surveillance and to produce periodic aggregate reports on the occurrence of and risk factors for occupational injuries among all OHSN facilities.

OHSN has been operating continuously and receiving voluntary monthly reports from 116 participating facilities since 2012 and is projected to enroll total of 900 facilities in the next three years. Current burden estimates were derived using the estimated number of facilities participating in OHSN for each facility type and form. OSHA reporting mandates were taken into account when estimating the number of facilities (participants) and the annual number of responses per facility. Total burden hours for this request is 185.

NIOSH seeks approval for an OMB control number to continue this important work. There is no cost to the 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 hrs.)
U.S. healthcare facilities	Occupational Health Safety Network (OHSN)	300	12	3/60
U.S. healthcare facilities	Enrollment form	300	1	1/60
Total				

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-10434]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

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 (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 a second opportunity for public comment on the notice. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

DATES: Comments on the collection(s) of information must be received by the OMB desk officer by April 27, 2016.

ADDRESSES: When commenting on the proposed information collections, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be received by

the OMB desk officer via one of the following transmissions: OMB, Office of Information and Regulatory Affairs, Attention: CMS Desk Officer, Fax Number: (202) 395-5806 OR Email: OIRA_submission@omb.eop.gov.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' Web site address at <http://www.cms.hhs.gov/PaperworkReductionActof1995>.
2. Email your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov.
3. Call the Reports Clearance Office at (410) 786-1326.

FOR FURTHER INFORMATION CONTACT: Reports Clearance Office at (410) 786-1326.

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. The term "collection of