

Assisted Living, American Seniors Housing Association, Argentum (formerly Assisted Living Federation of America), National Adult Day Services Association; universities; foundations; and other private sector organizations such as the Alzheimer’s Association and the AARP Public Policy Institute.

Expected burden from data collection for eligible cases is 80 minutes per respondent: 5 minutes for a contact confirmation call; 15 minutes for a screener and appointment setting call; 30 minutes for a provider questionnaire; and 30 minutes for a sampling and services user questionnaire. We estimate

an eligibility rate for ADSCs of 86% and for RCCs of 76%. One-year clearance requested to cover the collection of data. The burden for the collection shown in Table 1 below. There is no cost 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)	Total burden (in hours)
RCC/ADSC Director/Designated Staff Member.	Contact Confirmation Call	3,740	1	5/60	312
RCC/ADSC Director/Designated Staff Member.	Screener and Appointment Setting Call.	3,740	1	15/60	935
RCC Director/Designated Staff Member.	RCC Provider Questionnaire	1,589	1	30/60	795
ADSC Director/Designated Staff Member.	ADSC Provider Questionnaire	1,419	1	30/60	710
RCC Director/Designated Staff Member.	RCC Sampling and Services User Questionnaire.	1,589	1	30/60	795
ADSC Director/Designated Staff Member.	ADSC Sampling and Services User Questionnaire.	1,419	1	30/60	710
Total	4,257

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.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-18-17AMP]

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 *Evaluation of the SAMHSA Naloxone Education and Distribution Program* 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 July 17, 2017 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 or send an email to omb@cdc.gov. 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

Evaluation of the SAMHSA Naloxone Education and Distribution Program—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Overdose deaths involving prescription opioids and heroin have reached epidemic levels in the U.S. and continue to rise. To address the prescription drug/opioid overdose crisis, the federal government has recently allocated funding to improve access to treatment for opioid use disorders, reduce opioid related deaths, and strengthen prevention efforts. One program resulting from the federal government’s efforts to address the opioid crisis is the Substance Abuse and Mental Health Services Agency (SAMHSA) Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths. This proposed information collection project will help evaluate this program.

Through this program, SAMHSA awarded funding to 12 states. The funding is aimed at reducing the number of prescription drug/opioid overdose-related deaths and adverse events among individuals 18 years of

age and older through educating and training first responders and other key community sectors on the prevention of prescription drug/opioid overdose-related deaths, including the purchase and distribution of naloxone. SAMHSA is funding the grant and CDC is responsible for conducting the grantee evaluation.

The intended use of the resulting data is to increase CDC and SAMHSA understanding of the scope and impact of the program on overdose fatalities

and how program effectiveness may vary among different sub-populations and settings, and to increase knowledge of barriers and facilitators to program implementation.

Researchers will use key informant interviews and focus groups with participants in the activities enacted by the twelve state grant recipients. Participants will include state administrators of the grant and other PDO/Naloxone stakeholders including advisory council members, first

responders, social service providers, laypersons including end users and their family and friend. All focus groups and interviews will be analyzed through qualitative content analysis, including utilization of a systematic coding scheme.

Total burden in hours for this collection is 381. There are no costs to respondents other than their time. CDC requests a three-year OMB approval to collect the necessary project-related information.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
PDO/Naloxone Advisory Committee Members and Grantees.	Focus Group Discussion Guide	140	1	1.5
PDO/Naloxone Grantees	Key Informant Interview Guide for Grantees	36	1	1
PDO/Naloxone Stakeholders and Partners	Key Informant Interview Guide for Partners ..	84	1	1
PDO/Naloxone Laypersons	Key Informant Interview Guide for Laypersons.	24	1	1
All participants (PDO Naloxone grantees, advisory committee, stakeholders and partners, laypersons).	Recruitment contact script	284	1	5/60
PDO/Naloxone Grantees	Key Informant Selection Tool	12	1	15/60

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: ACF Generic Clearance for Mandatory Grant Financial Reports.

OMB No.: 0970—New.

Description: OMB has granted permission for ACF to submit a request

for a generic clearance to be used for the financial reports used in the administration of mandatory grants. This clearance supports the Departments initiative of *Generating Efficiencies through Streamlined Processes* by employing an abbreviated process.

If approved program offices will be at liberty to tailor a financial report to their specific needs rather than adhering to a standard form.

Respondents: States and Territories.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Mandatory Grant Financial Reports	900	4	5	18,000

Estimated Total Annual Burden Hours:

In compliance with the requirements of the Paperwork Reduction Act of 1995 (Pub. L. 104-13, 44 U.S.C. Chap. 35), the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and

Families, Office of Planning, Research and Evaluation, 330 C Street SW, Washington, DC 20201. Attn: ACF Reports Clearance Officer. Email address: *infocollection@acf.hhs.gov*. All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) the quality, utility, and clarity of the information to be collected; and (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. Consideration will be given to