

demonstrate the capacity to implement proven and innovative strategies to support YBCS, MBC patients, and their families. Those organizations work to: (1) foster meaningful partnerships; (2) educate, inform, and support young breast cancer survivors, metastatic breast cancer patients, and their families; and (3) educate health care providers, community health workers, and patient navigators.

CDC proposes to evaluate the fourth YBCS program cycle (DP24–0061) to examine the funded organizations that provide structured support services, resources, or education to young breast cancer survivors, metastatic breast cancer patients, their families, health care providers, community health workers, and patient navigators. The evaluation will include two primary data collection methods: (1) in-depth interviews; and (2) a web-based survey with each of the 11 funded organizations. Data collection will be facilitated annually with key programmatic staff from the funded organizations to better understand

implementation efforts, challenges faced, and outcomes achieved.

To facilitate recruitment and scheduling for the evaluation, four forms of information collection will be implemented. This includes a nomination form and three scheduling forms tailored to the interview respondent's role in the program (one per role: Program Leadership, Program Implementer, and Evaluator). The nomination form will assist recipients with identifying primary and alternate respondents for the interviews and web-survey. The scheduling forms will help invited participants to quickly identify suitable times for interviews. The gather insights from respondents, four additional forms of information will be administered. This includes a web-based survey and three interview guides (one per role: Program Leadership, Program Implementer, Evaluator). The web-based survey will gather information regarding implementation efforts, promising practices, and outcomes of the YBCS program (DP24–0061). The virtual in-depth interviews

will be used to provide additional context for how YBCS program recipients (DP24–0061) implement and assess their respective strategies; the factors that facilitate or impede the implementation of specific activities, interventions, and strategies; and the extent to which recipients were able to achieve planned outcomes.

The evaluation may yield information from programs related to support services, resources, and patient-provider interactions. CDC will be able to use the findings from the evaluation to enhance existing efforts to provide educational resources and support services to YBCS, MBC patients, their families, and health care workers and to inform future funded YBCS programs. Findings will be summarized in a topline report by methodology as well as a comprehensive report.

CDC is requesting new approval. OMB approval is requested for three years. The total estimated annual burden is 79 hours. There are no costs to 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.)	Total burden (in hours)
Program Leadership	Nomination Form	15	1	30/60	8
Program Leadership	Interview Scheduling Form	4	1	5/60	1
Program Implementer	Interview Scheduling Form	7	1	5/60	1
Evaluator	Interview Scheduling Form	4	1	5/60	1
Program Leadership	Program Leadership Interview Guide.	4	1	1.5	6
Program Implementer	Program Implementer Interview Guide.	7	1	1.5	11
Evaluator	Evaluator Interview Guide	4	1	1.5	6
Program Leadership	Web-based Survey	15	1	3	45
Total	60	79

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 Office of Public Health Ethics and
 Regulations, Office of Science, Centers for
 Disease Control and Prevention.*
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–26–0017; Docket No. CDC–2026–0067]

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 information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comments on a proposed information collection project titled Survey to Promote Resources and Opportunities for aUTistic Teens and young adults (SPROUT). This follow-up survey will allow CDC to collect longitudinal data on prior participants in the Study to Explore Early Development (SEED) and family members in order to better understand the healthcare utilization, service and support needs, and impact of co-occurring conditions on autistic adolescents and young adults and their families, as well as the educational,

social, and/or vocational needs and experiences of autistic adolescents and young adults.

DATES: CDC must receive written comments on or before March 30, 2026.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2026-0067 by either of the following methods:

Federal eRulemaking Portal: www.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 www.regulations.gov.

Please note: Submit all comments through the Federal eRulemaking portal (www.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; Telephone: 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

Survey to Promote Resources and Opportunities for aUtistic Teens and young adults (SPROUT)—New—National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In 2022, an estimated one in 31 children eight years of age living in 16 communities across the United States had autism, a developmental disability that can cause significant social, communication, and behavior challenges. The Study to Explore Early Development (SEED) was implemented in 2006 to learn more about autism and other developmental disabilities in children 2-5-years of age. Extensive data, from interviews, in-person evaluations, and other sources were collected across three phases (SEED 1-3) in eight geographic areas (California, Colorado, Georgia, Maryland, Missouri, North Carolina, Pennsylvania, and Wisconsin). SEED 1-3 collected data on 9,808 preschool-aged children with autism, another developmental delay or disability, or from the general population. To date, almost 100 analyses of SEED 1-3 data have been published in peer-reviewed journals.

To better understand transition and lifespan issues affecting people with autism as they age, caregivers of children enrolled in SEED 1 (2006-2011) were eligible to participate in a pilot follow-up survey when their child was between 12-16 years of age (2018-2021; SEED Teen). An important outcome of SEED Teen was to demonstrate that longitudinal data collection from SEED participants is feasible (*i.e.*, contact was established with approximately 97% of eligible participants and, of those, 64% enrolled in SEED Teen). SEED Follow-Up was thus initiated in 2021 to survey the broader cohort of SEED 1-3 participants on adolescent and young adult health

and well-being. SEED Follow-Up is currently ongoing until June 2026.

The federal government identified a need to improve efforts to better understand lifespan issues among people with autism in the Autism CARES Act of 2024 and a report to Congress in 2017. Despite this, a recent portfolio analysis from the Interagency Autism Coordinating Committee (IACC), indicated that lifespan issues continue to receive the least amount of autism funding from federal agencies. Both the SEED Teen and SEED Follow-Up surveys helped identify healthcare needs and experiences among adolescents with autism. However, gaps in understanding remain in how we can best support adolescents and young adults with autism and their families.

Draft chapters of the 2024 IACC Strategic Plan Update emphasize the need for data on service and support needs and conditions that commonly co-occur with autism. On behalf of the IACC, the Office of National Autism Coordination (ONAC) released a Request for Public Comment on these topics from members of the autistic community. Some identified service and support needs were: (1) provider training; (2) more benefits and insurance coverage; and 3) help with system navigation. Some commonly reported co-occurring conditions were sensory and motor issues, anxiety disorder, sleep problems, attention deficits, hyperactivity, gastrointestinal issues, learning and memory issues, and suicidal ideation. Other topics identified as important to the autistic community are social, education, and vocational experiences and outcomes.

The current information collection request is to conduct longitudinal follow-up surveys that offer unique information about autistic adolescents and young adults, thereby addressing the priorities established in the Autism CARES Act of 2024 and draft 2024 IACC Strategic Plan. Given the size of the original SEED birth cohorts and the wealth of baseline and follow-up information collected, additional surveys of participants can help address critical information gaps. Specifically, the information collected from the Survey to Promote Resources and Opportunities for aUtistic Teens and young adults (SPROUT) will allow us to better understand: (1) the healthcare utilization of, service and support needs of, and impact of co-occurring conditions on autistic people and their families; and (2) the educational, social, and/or vocational needs and experiences of autistic adolescents and young adults.

One survey will be administered to caregivers and a second is a self-report survey administered to children, adolescents and young adults age 9–27. The survey version will be based on the

child participant’s age and ability to self-report on healthcare utilization, service and support needs, co-occurring conditions, and healthcare transition. CDC requests OMB approval for an

estimated 1,510 annual 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)	Total burden (in hours)
Caregivers	Survey 1	1,310	1	30/60	565
Caregivers	Survey 2	180	1	30/60	90
Caregivers	Survey 3	90	1	30/60	45
Caregivers	Survey 4	1,600	1	10/60	266
Children and adolescents	Self-report Survey 1	575	1	15/60	144
Young adults	Self-report Survey 2	800	1	30/60	400
Total	1,510

Jeffrey M. Zirger,

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–26–0980]

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 “National Environmental Assessment Reporting System (NEARS)” 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 October 2, 2025 to obtain comments from the public and affected agencies. CDC received one anonymous comment 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

National Environmental Assessment Reporting System (NEARS) (OMB Control No. 0920–0980, Exp. 2/28/

2026)—Revision—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

CDC is requesting OMB approval for the National Environmental Assessment Reporting System (NEARS) to collect data from outbreak environmental assessments routinely conducted by local, state, territorial, or tribal food safety programs during foodborne outbreak investigations. Prior to the development of NEARS, environmental assessment data were not collected at the national level. The data reported through this surveillance system provides timely information on the causes of outbreaks, including environmental factors associated with outbreaks, and are essential to environmental public health regulators’ efforts to respond more effectively to outbreaks and prevent future, similar outbreaks.

NEARS was developed by the Environmental Health Specialists Network (EHS-Net), a collaborative network of CDC, the U.S. Food and Drug Administration (FDA), the U.S. Department of Agriculture (USDA), and state and local food safety programs. The network consists of environmental health specialists (EHS), epidemiologists, and laboratorians. EHS-Net developed a standardized protocol for identifying, reporting, and analyzing data relevant to foodborne illness outbreak environmental assessments. While conducting environmental assessments during foodborne outbreak investigations is routine for food safety program officials, reporting information from the environmental assessments to CDC is not routine. Local, state, federal,