

Proposed Project

The Performance Measures Project: Improving Performance Measurement and Monitoring by CDC Programs (OMB Control No. 0920–1282; Exp. 06/30/2026)—Revision—Office of the Policy, Performance, and Evaluation (OPPE), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Each year, approximately 75% of the CDC’s congressionally appropriated funding goes to extramural organizations, including state and local partners, via contracts, grants, and, most commonly, cooperative agreements. The availability of funding for grants and cooperative agreements is announced through a Notice of Funding Opportunity (NOFO). CDC awards up to 100 new, non-research NOFOs each year (each funded for 1–5 years). These awards may have only a few funded recipients or more than 50, such as when a CDC program provides funding to all states and territories. Monitoring and reporting of program performance is required of any non-federal entity receiving federal funds under 45 CFR

75.342; “The non-Federal entity must monitor its activities under Federal awards to assure compliance with applicable Federal requirements and performance expectations are being achieved.”

CDC’s Performance and Evaluation Office (PEO) provides technical assistance to CDC programs and funding recipients with the immediate goal of monitoring progress and the long-term goals of improving performance and maximizing public health impact. Greater public health impact can be achieved by the development of performance measures and monitoring plans that are customized to the goals outlined in each NOFO. PEO therefore provides consultations for the development of NOFO-specific performance measures and the development of each NOFO’s logic model, *i.e.*, a graphic depiction of the relationship between the funded activities and the intended effects or outcomes of those activities in the short, medium, and/or long term. PEO has also developed templates that can be further customized by CDC/ATSDR programs participating in the Performance

Measures Project (PMP). These templates include a sample “Recipient Codebook Technical Specification” and a sample “Recipient Data Reporting Guide.” After the templates are finalized by PEO and the CDC/ATSDR program, the templates are completed by the recipients of CDC/ATSDR funding.

CDC requests OMB approval to continue information collection for the PMP, with no changes except for the request for additional burden hours. Individual collection requests submitted under this Generic Clearance will continue to include the tailored forms and a supplementary template that provides a description of program purpose and the estimated burden of information collection. Through this Revision, CDC requests additional capacity to ensure seamless continuation of individual GenIC data collections that were previously approved (34,949 hours), but have not been completed. Combined with the estimated annualized burden hours for new GENICs (70,000 hours), CDC estimates 104,949 total annualized burden hours. There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of responses	Number of responses per respondent per year	Average burden per response (in hours)
CDC/ATSDR Award Recipients (new GENICs)	Performance Measures Project Information Collection Tool.	1,750	1	40
CDC/ATSDR Award Recipients (continuation of previously approved GENICs).	Performance Measures Project Information Collection Tool.	3,236	1	10.8

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–26–1397]

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 “CDC’s Milestone

Tracker App User Surveys” 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 March 24, 2026 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

CDC’s Milestone Tracker App User Surveys (OMB Control No. 0920–1397, Exp. 5/31/2026)—Revision—National Center for Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) seeks a three-year Revision of a currently approved

information collection to evaluate the Milestone Tracker mobile application. The Milestone Tracker app, developed under CDC’s Learn the Signs. Act Early. program, supports family-engaged developmental monitoring and promotes early identification of developmental delays and disabilities. The purpose of this data collection is to assess user satisfaction, usage patterns, and actions taken after a missed developmental milestone or developmental concern is identified within the app. The information collected will help CDC understand how users engage with the app, whether follow-up actions are taken after concerns are identified, and how the app functions as a tool to support developmental monitoring. Findings will inform future improvements and ongoing program evaluation. Without this Revision, CDC would lose access to ongoing data necessary to monitor user experience, assess follow-up actions after identification of developmental concerns, and support continuous program improvement.

This request includes one minor, non-substantive clarification to Parent Survey 2. A brief explanatory note was

added to Question 1 to clarify why the question is being asked, after some respondents indicated confusion during prior data collection. The question wording and response options remain unchanged. This clarification does not affect the methodology, data collected, or the estimated time per response, which remains five (5) minutes. This Revision also reflects an adjustment to previously approved burden estimates. The original 2023 burden projections were developed without historical response data and were based on anticipated participation levels derived from total app downloads. Actual data collected from 2023–2026 indicate substantially lower response levels. Accordingly, the number of respondents and total annual burden hours have been revised to align with observed participation trends.

CDC requests OMB approval for a revised annual burden estimate of 2,401 hours, a reduction of 39,266 hours from the previously approved 41,667 hours. There are no changes to the instruments, methodology, frequency of collection, or time per response. 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)
Parents using the <i>Milestone Tracker</i> app who complete 65% or more of a checklist using the app.	Parent Survey 1	23,000	1	5/60
Parents using the <i>Milestone Tracker</i> App who complete 65% or more of a checklist using the app AND indicate a missed milestone or identify a developmental concern.	Parent Survey 2	5,000	1	5/60
Early childhood providers/professionals who use the <i>Milestone Tracker</i> app at least 3 times.	Provider	800	1	5/60

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–26–1348]

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 “The National Firefighter Registry for Cancer” 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 February 14, 2026, to obtain comments from the public and affected agencies. CDC received no 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