

new measurement tools to capture this information.

CDC is requesting OMB approval to collect data over a 3-year period that will be used to (1) assess the utility of new measures developed or adapted to collect information related to this new intervention (PrEP) and (2) evaluate community contextual factors that may impact the acceptability and successful introduction of a new HIV prevention method. The project will be conducted in communities in each of four cities where PrEP has recently become available through a local community health center.

Once per year for three years, two surveys will be conducted: (1) A community-based survey to be administered to 40 persons per city approached in public venues in the catchment areas of the PrEP clinics, and (2) a key stakeholder survey to be administered to 10 community HIV leaders nominated by PrEP clinic staff and HIV community-based organizations in the clinic communities. Both surveys will collect data on the demographics of the participants, knowledge of PrEP, misinformation about PrEP, and attitudes about it. The

neighborhood survey will also include questions about basic HIV knowledge, attitudes, and beliefs as well as information about sexual and drug use behaviors that are indications for PrEP use. For the stakeholder survey, additional questions will be included about type of organization where they work and organizational experience with PrEP. Surveys will be administered face-to-face by trained, local interviewers.

There are no costs to respondents other than their time. The total annual hours are 91.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average hours per response
Neighborhood Survey Street Interview Participant	Neighborhood Interview Recruitment Script and Informed Consent.	240	1	5/60
Key Stakeholder Participant	Key Stakeholder Telephone Recruitment Script and Informed consent.	60	1	5/60
Street Interview Participant	Survey	160	1	20/60
Key Stakeholder Participant	Survey	40	1	20/60

Leroy 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–14–0906]

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 agency’s 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

The Green Housing Study (OMB No. 0920–0906, expires 11/30/2014)—Extension—National Center for Environmental Health (NCEH), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) is seeking a three-year extension of OMB approval for the Green Housing Study. The information collected will help scientists better understand whether green building design features reduce human exposures to chemical and biological agents in the home and/or improve respiratory health of children with asthma. This study directly supports CDC’s Healthy People 2020 Healthy Homes’ health protection goal. This investigation is also consistent with CDC’s Health Protection Research Agenda, which calls for research to identify the major environmental causes of disease and disability and related risk factors.

In 2011, CDC funded two study sites for the Green Housing Study; one location was in Boston and the other was in Cincinnati. In these two cities, renovations sponsored by the Department of Housing and Urban Development (HUD) had already been scheduled. By selecting sites in which renovations were already scheduled to occur, CDC can leverage the opportunity to collect survey and biomarker data from residents and collect environmental measurements in homes in order to evaluate associations between green housing and health.

Although the first two study sites have provided insight into how specific green building practices (e.g., use of low chemical-emitting paints and carpets)

can influence levels of substances in the home such as volatile organic compounds (VOCs), more study sites in different geographic locations will help scientists understand if these relationships hold in different climates and housing stock. This ongoing study provides a foundation to explore the potential for green affordable housing to promote healthy homes principles. This will be accomplished by gathering data from a total of thirteen study sites across the United States.

Study participants will continue to include children with asthma and their mothers/primary caregivers living in HUD-subsidized housing that has either been scheduled to receive a green renovation or is a comparison home

(i.e., no renovation). The following are eligible for the study: (1) Children age 7–12 years with asthma and (2) mothers/primary caregivers. The length of follow-up is one year. Questionnaires regarding home characteristics and respiratory symptoms of the children will be administered at 1- to 6-month intervals. Environmental sampling of the air and dust in the respondents' homes will be conducted over a 1-year period: Once in the home before rehabilitation (Baseline), and then at three time points after rehabilitation has been completed (Baseline Part 2, 6 months, and 12 months).

The response rate from enrollment through the end of data collection for the first two study sites was 82%. The

expected response rate for the overall study is 80%. To reach the desired number of respondents approximately 1,000 adults (mothers/primary caregivers) will need to complete the screening forms. Approximately 832 mothers/primary caregivers of enrolled children will complete the questionnaires. All health and environmental exposure information about children will be provided by their mothers/primary caregivers (i.e., no children will fill out questionnaires).

There is no cost to the respondents other than their time to participate in the study. The total estimated annual burden hours equals 2,356.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs)
Mothers/Primary caregivers of children with asthma.	Screening Questionnaire	1,000	1	10/60
Mothers/Primary caregivers of enrolled children.	Baseline Questionnaire (Home Characteristics).	832	1	15/60
Mothers/Primary caregivers of enrolled children.	Baseline (Part 2) Questionnaire (Home Characteristics).	832	1	5/60
Mothers/Primary caregivers of enrolled children.	Baseline Questionnaire (Demographics)	832	1	5/60
Mothers/Primary caregivers of enrolled children.	Baseline Questionnaire (Children 7–12 with Asthma).	832	1	15/60
Mothers/Primary caregivers of enrolled children.	Text Messages (Children 7–12 with Asthma)	832	8	1/60
Mothers/Primary caregivers of enrolled children.	3 and 9-month Follow-up Questionnaire (Children 7–12 with Asthma).	832	2	5/60
Mothers/Primary caregivers of enrolled children.	6 and 12-month Follow-up Questionnaire (Environment).	832	2	10/60
Mothers/Primary caregivers of enrolled children.	6 and 12-month Follow-up Questionnaire (Children 7–12 with Asthma).	832	2	10/60
Mothers/Primary caregivers of enrolled children.	Time/Activity Questionnaire (Children with Asthma 7–12 years).	832	4	5/60
Mothers/Primary caregivers of enrolled children.	Time/Activity Questionnaire (Mother/Primary Caregiver).	832	4	5/60
Mothers/Primary caregivers of enrolled children.	Illness Checklist	832	4	5/60

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Multi-Agency Informational Meeting Concerning Compliance With the Import Permit Program; Public Webcast

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of public webcast.

SUMMARY: The Centers for Disease Control and Prevention (CDC) located within the United States Department of

Health and Human Services (HHS) announces a public webcast for all individuals who apply for permits to import (1) infectious biological agents, infectious substances, or vectors known to transfer or that are capable of transferring an infectious biological agent to a human; and (2) import items that contain or may contain dangerous agricultural pests and diseases. The purpose of the webcast is to provide guidance related to the import permit program.

DATES: The webcast will be held on Friday, October 24, 2014 from 1 p.m. to 5 p.m. EST. Those wishing to join the webcast must register by October 1, 2014. Registration instructions can be