

information the requester chooses to provide, the requested public financial disclosure reports will be either emailed or mailed to the requester. This change will not affect the estimated time of response to complete the form.

OGE also intends to update the maximum civil monetary penalty for improperly obtaining or using a public financial disclosure report on both the automated and nonautomated versions of the form, in accordance with 5 CFR 2634.703.

OGE published a first round notice of its intent to request paperwork clearance for a modified OGE Form 201. See 81 FR 70112 (October 11, 2016). OGE received no responses to that notice.

Request for Comments: Agency and public comment is again invited specifically on the need for and practical utility of this information collection, the accuracy of OGE's burden estimate, the enhancement of quality, utility, and clarity of the information collected, and the minimization of burden (including the use of information technology). Comments received in response to this notice will be summarized for, and may be included with, the OGE request for extension of OMB paperwork approval. The comments will also become a matter of public record.

Approved: December 22, 2016.

Walter M. Shaub, Jr.,

Director, Office of Government Ethics.

[FR Doc. 2016-31451 Filed 12-28-16; 8:45 am]

BILLING CODE 6345-02-P

OFFICE OF GOVERNMENT ETHICS

Agency Information Collection Activities; Submission for OMB Review; Proposed Collection; Comment Request for a Modified OGE Form 450 Executive Branch Confidential Financial Disclosure Report

AGENCY: Office of Government Ethics (OGE).

ACTION: Notice of request for agency and public comments.

SUMMARY: After publication of this second round notice, OGE intends to submit a modified OGE Form 450 Executive Branch Confidential Financial Disclosure Report to the Office of Management and Budget (OMB) for review and approval of a three-year extension under the Paperwork Reduction Act of 1995.

DATES: Written comments by the public and the agencies on this proposed

extension are invited and must be received by January 30, 2017.

ADDRESSES: You may submit comments on this paperwork notice to the Office of Management and Budget, Attn: Desk Officer for OGE, via fax at 202-395-6974 or email at OIRA_Submission@omb.eop.gov. (Include reference to "OGE Form 450 paperwork comment" in the subject line of the message.)

FOR FURTHER INFORMATION CONTACT: Brandon Steele at the U.S. Office of Government Ethics; telephone: 202-482-9209; TTY: 800-877-8339; FAX: 202-482-9237; Email: bastele@oge.gov. An electronic copy of the OGE Form 450 is available in the Forms Library section of OGE's Web site at <http://www.oge.gov>. A paper copy may also be obtained, without charge, by contacting Mr. Steele.

SUPPLEMENTARY INFORMATION:

Title: Executive Branch Confidential Financial Disclosure Report.

Agency Form Number: OGE Form 450.

OMB Control Number: 3209-0006.

Type of Information Collection:

Extension with modifications of a currently approved collection.

Type of Review Request: Regular.

Respondents: Private citizens who are potential (incoming) regular Federal employees whose positions are designated for confidential disclosure filing, and special Government employees whose agencies require that they file new entrant disclosure reports prior to assuming Government responsibilities.

Estimated Annual Number of Respondents: 24,640.

Estimated Time per Response: 1 hour.

Estimated Total Annual Burden: 24,640 hours.

Abstract: The OGE Form 450 collects information from covered department and agency employees as required under OGE's executive branchwide regulatory provisions in subpart I of 5 CFR part 2634. The basis for the OGE reporting regulation is section 201(d) of Executive Order 12674 of April 12, 1989 (as modified by Executive Order 12731 of October 17, 1990, 3 CFR, 1990 Comp., pp. 306-311, at p. 308) and section 107(a) of the Ethics in Government Act, 5 U.S.C. app. sec. 107(a). OGE proposes several modifications to the form. OGE proposes to clarify the instructions in two places to assist filers in completing the form. OGE also proposes to revise the Privacy Act Statement in accordance with the OGE/GOVT-2 Executive Branch Confidential Financial Disclosure Reports Privacy Act system of records.

OGE published a first round notice of its intent to request paperwork

clearance for a modified OGE Form 450 Executive Branch Confidential Financial Disclosure Report. See 81 FR 70113 (October 11, 2016). OGE received no responses to that notice.

Request for Comments: Agency and public comment is again invited specifically on the need for and practical utility of this information collection, the accuracy of OGE's burden estimate, the enhancement of quality, utility, and clarity of the information collected, and the minimization of burden (including the use of information technology). Comments received in response to this notice will be summarized for, and may be included with, the OGE request for extension of OMB paperwork approval. The comments will also become a matter of public record.

Approved: December 22, 2016.

Walter M. Shaub, Jr.,

Director, Office of Government Ethics.

[FR Doc. 2016-31452 Filed 12-28-16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[30Day-17-16BEH]

Agency Forms Undergoing Paperwork Reduction Act Review

The Agency for Toxic Substances and Disease Registry (ATSDR) 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*. Direct written comments and/or suggestions regarding the items contained in this notice 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

ATSDR Communication Activities Survey (ACAS)—New—Agency for Toxic Substances and Disease Registry (ATSDR).

Background and Brief Description

The Agency for Toxic Substances and Disease Registry (ATSDR) serves the public through responsive public health actions to promote healthy and safe environments and to prevent harmful exposures. The agency aims to work effectively with communities in proximity to hazardous waste sites by listening to and understanding their health concerns and seeking their guidance on where, when, and how to take public health actions.

Community members are key participants in the agency’s public health assessment process and should be actively involved in decisions that impact their community. Thus, agency’s goals for this new information collection request (ICR) titled the “ATSDR Communication Activities Survey (ACAS)” are to ascertain the effectiveness of, and to assess the differences and the consistency of, the delivery of ATSDR activities and respondent perceptions across sites and

over time. ATSDR will use the ACAS to: (1) Determine how effectively it’s site teams engage community members; (2) discover how well ATSDR provides effective, clear, and consistent communication and information on how to promote healthy and safe environments; (3) understand whether the agency’s activities are helping the communities address environmental issues; and (4) improve ATSDR’s activities to make a greater impact within the communities served.

Recruitment will occur at communities where ATSDR and state or local agencies have implemented site activities to address environmental issues. For each engaged community, the ACAS will be used to assess a set of effectiveness indicators for ATSDR site-specific activities about the respondents’ involvement, knowledge, satisfaction, observations, and opinions about ATSDR’s community engagement and educational outreach efforts to inform communities. The indicators will measure ATSDR effectiveness in the following respondent areas: (1) Their involvement with the site activities; (2) how they received, and prefer to receive, ATSDR information; (3) their knowledge and understanding of ATSDR site activities and how to reduce hazardous exposures; (4) their observations and opinions of ATSDR’s role in community preparedness; (5) their self-evaluation on their risk of exposure to possible environmental hazards; (6) their demographic profile; (7) their environmental concerns; and (8) any additional feedback.

ATSDR is seeking a three-year Paperwork Reduction Act clearance for this new ICR. ATSDR anticipates that approximately six to seven sites will be engaged for feedback per year (or about 20 sites over the next three years). Each year, ATSDR will recruit approximately 167 individuals per year, aged 18 and older, to participate in the ACAS where ATSDR is holding public community meetings. Therefore, respondents will

include approximately 24 to 28 community members and agency stakeholders per meeting (6 to 7 meetings per year). The community members may include, but are not limited to, the general public, community leaders, faith-based leaders, and business leaders. The agency stakeholders may include, but are not limited to, state and local environmental health department employees, such as environmental health assessors, toxicologists, and departmental officials. The mix of respondents will be approximately 75 percent community members (n=125 per year) and 25 percent agency stakeholders (n=42 per year).

Trained ATSDR contractors will have a table set up at the entrance of the community meeting where community meeting attendees will pick up a fact sheet which explains what ATSDR does, and the purpose of ATSDR’s site activities and the survey.

At the end of ATSDR public community meetings, there will be an announcement to ask interested attendees to take the survey. All interested attendees will sign in and provide their contact information, their preferred mode for taking the survey (in-person, online or over the phone), and whether they are a community member or an agency stakeholder.

The ACAS will preferably be self-administered right after the public community meetings. If this is not a convenient time for the respondent, the ACAS may be completed online or by phone. We estimate that approximately 80 percent of respondents will choose the self-administered ACAS, 15 percent will choose the online ACAS, and 5 percent will choose the telephone ACAS.

There are no costs to the respondents other than their time. The total annual time burden requested is 94 hours per year.

Estimated Annualized Burden Hours

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Avg. burden per response (in hrs.)
Community Members	Sign In Sheet	125	1	3/60
	Hardcopy ACAS	100	1	30/60
	Online ACAS	19	1	30/60
	Telephone ACAS	6	1	30/60
Agency Stakeholders	Sign In Sheet	42	1	3/60
	Hardcopy ACAS	34	1	30/60
	Online ACAS	6	1	30/60
	Telephone ACAS	2	1	30/60

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.

[FR Doc. 2016-31554 Filed 12-28-16; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-17-17HO; Docket No. CDC-2016-
0118]

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 efforts to reduce public
burden and maximize the utility of
government information, invites the
general public and other Federal
agencies to take this opportunity to
comment on proposed and/or
continuing information collections, as
required by the Paperwork Reduction
Act of 1995. This notice invites
comment on a proposed information
collection entitled “Test Predictability
of Falls Screening Tools.” CDC will use
the information collected to evaluate
current screening tools and potentially
design a new screening tool for health
care practitioners to identify
community-dwelling adults 65 and
older at risk for falls.

DATES: Written comments must be
received on or before February 27, 2017.

ADDRESSES: You may submit comments,
identified by Docket No. CDC-2016-
0118 by any of the following methods:

- *Federal eRulemaking Portal:*
Regulations.gov. Follow the instructions
for submitting comments.
- *Mail:* Leroy A. Richardson,
Information Collection Review Office,
Centers for Disease Control and
Prevention, 1600 Clifton Road NE., MS-
D74, Atlanta, Georgia 30329.

Instructions: All submissions received
must include the agency name and
Docket Number. All relevant comments
received will be posted without change
to *Regulations.gov*, including any
personal information provided. For
access to the docket to read background
documents or comments received, go to
Regulations.gov.

Please note: All public comment
should be submitted through the
Federal eRulemaking portal
(*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 the Information
Collection Review Office, Centers for
Disease Control and Prevention, 1600
Clifton Road NE., MS-D74, Atlanta,
Georgia 30329; phone: 404-639-7570;
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 OMB for approval. To
comply with this requirement, we are
publishing this notice of a proposed
data collection as described below.

Comments are invited 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)
ways to enhance the quality, utility, and
clarity of the information to be
collected; (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; and (e) estimates of capital
or start-up costs and costs of operation,
maintenance, and purchase of services
to provide information. Burden means
the total time, effort, or financial
resources expended by persons to
generate, maintain, retain, disclose or
provide information to or for a Federal
agency. This includes the time needed
to review instructions; to develop,
acquire, install and utilize technology
and systems for the purpose of
collecting, validating and verifying
information, processing and
maintaining information, and disclosing
and providing information; to train
personnel and to be able to respond to
a collection of information, to search

data sources, to complete and review
the collection of information; and to
transmit or otherwise disclose the
information.

Proposed Project

Test Predictability of Falls Screening
Tools—New—National Center for Injury
Prevention and Control (NCIPC),
Centers for Disease Control and
Prevention (CDC).

Background and Brief Description

NCIPC seeks to request a two-year
OMB approval for the “Test
Predictability of Falls Screening Tools”
information collection project. Falls are
the leading cause of fatal and nonfatal
injuries among older adults in the U.S.
and represent a significant burden to the
healthcare system. Research
demonstrates that clinical interventions
can reduce fall risk, and the American
and British Geriatrics Societies (AGS/
BGS) have developed a clinical practice
guideline to manage fall risk among
their older adult patients. Based on
these guidelines, the CDC developed a
falls prevention initiative called
STEADI (Stopping Elderly Accidents,
Deaths, and Injuries). STEADI includes
a suite of materials (available at
www.cdc.gov/STEADI) that help health
care practitioners implement these
clinical guidelines.

The first step in clinical falls
prevention is for health care
practitioners to administer a fall risk
screening. The screening identifies
whether adults 65 and older are at
“increased risk” for a fall. The initial
screening step is critical because it
identifies who will receive the
assessments and follow-up care, which
has the potential to place a large burden
on health care practitioners and the
healthcare system. While medical
organizations such as the American
Geriatrics Society recommend that
adults 65 and older be screened
annually for fall risk, and although there
are a number of tools used to screen
older adults for fall risk, there is
currently no standard for fall risk
screening across care settings.

The CDC proposes to conduct a new
data collection in order to develop a set
of brief screening questions that are
clinically-useful for quickly sorting
patients into risk levels for falls. The
goals of this study are to: (1) Test the
ability of existing falls screening tools to
predict falls in the subsequent year; (2)
design an effective and parsimonious
screening tool for health care
practitioners to identify community-
dwelling adults 65 and older at risk for
falls; and (3) assess how responses to
questions change over time and how