

subgroup (thus, N≥20 total) [this number may change depending on available data]

- B. If no subgroup analyses reported, N≥100 total [this number may change depending on available data]

Sharon B. Arnold,
Acting Director.

[FR Doc. 2017-07158 Filed 4-10-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[CDC-2016-0067; Docket Number NIOSH 270-A]

Issuance of Final Publication

AGENCY: National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of issuance of final publication.

SUMMARY: NIOSH announces the availability of the following publication: “*NIOSH Center for Motor Vehicle Safety: Results from 2016 Midcourse Review*” [DHHS (NIOSH) Publication Number 2017-139].

DATES: The technical report was published on March 24, 2017.

ADDRESSES: This document may be obtained at the following link: <https://www.cdc.gov/niosh/docs/2017-139/>.

FOR FURTHER INFORMATION CONTACT: David Fosbroke, NIOSH Division of Safety Research, Room H-1808, 1095 Willowdale Rd., Morgantown, WV 26505. Telephone: (304) 285-6010 (not a toll free number). Email: def2@cdc.gov.

SUPPLEMENTARY INFORMATION: On August 15, 2016, NIOSH published a notice of public web meeting and request for comments on the “NIOSH Center for Motor Vehicle Safety: Midcourse Review of Strategic Plan” in the **Federal Register** [81 FR 54094]. The purpose of this midcourse review was to seek external input via public comments and invited stakeholder reviews to shape priorities for the NIOSH Center for Motor Vehicle Safety for the next 2 years and proceeding toward developing a new 10-year strategic plan. All comments received were reviewed and considered in finalizing the current document. Comments for Docket 270-A

can be found at: <https://www.regulations.gov/> Docket No. CDC-2016-0067.

Dated: April 6, 2017.

Frank Hearl,
Chief of Staff, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2017-07275 Filed 4-10-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Public Comment Request Information Collection Request Title: Rural Health Network Development Planning Performance Improvement and Measurement System Database, OMB No. 0915-0384-Extension

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on this Information Collection Request must be received no later than June 12, 2017.

ADDRESSES: Submit your comments to paperwork@hrsa.gov or mail the HRSA Information Collection Clearance Officer, Room 14N39, 5600 Fishers Lane, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email paperwork@hrsa.gov or call the HRSA Information Collection Clearance Officer at (301) 443-1984.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference, in compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995.

Information Collection Request Title: Rural Health Network Development

Planning Performance Improvement and Measurement System Database.

OMB No. 0915-0384—Extension.

Abstract: The purpose of the Rural Health Network Development Planning Program (Network Planning) is to assist in the development of an integrated health care network, specifically for entities that do not have a history of formal collaborative efforts. Health care networks can be an effective strategy to help smaller rural health care providers and health care service organizations align resources, achieve economies of scale and efficiency, and address challenges more effectively as a group than as single providers. This program promotes the planning and development of healthcare networks in order to: (1) achieve efficiencies; (2) expand access to, coordinate, and improve the quality of essential health care services; and (3) strengthen the rural health care system as a whole.

The goals of the Network Planning program are centered around approaches that will aid providers in better serving their communities given the changes taking place in health care, as providers move from focusing on the volume of services to focusing on the value of services. The Network Planning program brings together key parts of a rural health care delivery system, particularly those entities that may not have collaborated in the past under a formal relationship, to establish and improve local capacity and coordination of care. The program supports 1 year of planning with the primary goal of helping networks create a foundation for their infrastructure and focusing member efforts to address important regional or local community health needs.

Need and Proposed Use of the Information: Performance measures for the Network Planning program serve the purpose of quantifying awardee-level data that conveys the successes and challenges associated with the grant award. The approved measures encompass the following principal topic areas: network infrastructure, network collaboration, sustainability, and network assessment.

Likely Respondents: The respondents for these measures are Network Planning program award recipients.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. 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. The total annual burden hours estimated for this ICR are summarized in the table below. As no

revisions are proposed, the burden does not change.

Total Estimated Annualized Burden Hours:

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Rural Health Network Development Planning Program Performance Improvement Measurement System	21	1	21	1	21
Total	21		21		21

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Jason E. Bennett,

Director, Division of the Executive Secretariat.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Information Collection Request Title: NURSE Corps Loan Repayment Program OMB No. 0915-0140—Revision

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, HRSA has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period.

DATES: Comments on this ICR should be received no later than May 11, 2017.

ADDRESSES: Submit your comments, including the ICR Title, to the desk officer for HRSA, either by email to OIRA_submission@omb.eop.gov or by fax to 202-395-5806.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email the HRSA Information Collection Clearance Officer at paperwork@hrsa.gov or call (301) 443-1984.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the information request collection title for reference, in compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995.

Information Collection Request Title: NURSE Corps Loan Repayment Program OMB No. 0915-0140—Revision.

Abstract: The NURSE Corps Loan Repayment Program (NURSE Corps LRP) assists in the recruitment and retention of professional Registered Nurses (RNs), including advanced practice RNs (e.g., nurse practitioners, certified registered nurse anesthetists, certified nurse-midwives, clinical nurse specialists), dedicated to working at eligible health care facilities with a critical shortage of nurses (e.g., a Critical Shortage Facility) or working as nurse faculty in eligible, accredited schools of nursing, by decreasing the financial barriers associated with pursuing a nursing profession. The NURSE Corps LRP provides loan repayment assistance to these nurses to repay a portion of their qualifying educational loans in exchange for full-time service at a public or private nonprofit Critical Shortage Facility or in an eligible, accredited school of nursing.

Need and Proposed Use of the Information: The information is used to consider an applicant for a NURSE Corps LRP contract award and to monitor a participant's compliance with

the service requirements. Individuals must submit an application to participate in the program. The application asks for personal, professional, educational, and financial information required to determine the applicant's eligibility to participate in the NURSE Corps LRP. The semi-annual employment verification form asks for personal and employment information to determine if a participant is in compliance with the service requirements. The Authorization to Release Employment Information form has been revised as a self-certification within the NURSE Corps LRP application process, with applicants clicking a box. This contributes to a decrease in the overall burden by 550 hours.

Likely Respondents: Professional RNs or advanced practice RNs who are interested in participating in the NURSE Corps LRP, and official representatives at their service sites.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. 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. The total annual burden hours estimated for this ICR are summarized in the table below.

Total Estimated Annualized Burden Hours:

The estimates of reporting burden for applicants are as follows: