

Board of Governors of the Federal Reserve System, February 1, 2017.

Yao Chin Chao,

Assistant Secretary of the Board.

[FR Doc. 2017-02578 Filed 2-7-17; 8:45 am]

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FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than March 3, 2017.

A. Federal Reserve Bank of San Francisco (Gerald C. Tsai, Director, Applications and Enforcement) 101 Market Street, San Francisco, California 94105-1579:

1. *Pacific Premier Bancorp, Irvine, California*; to acquire Heritage Oaks Bancorp, and thereby indirectly acquire Heritage Oaks Bank, both Paso Robles, California.

Board of Governors of the Federal Reserve System, February 2, 2017.

Yao-Chin Chao,

Assistant Secretary of the Board.

[FR Doc. 2017-02581 Filed 2-7-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-17-0881]

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 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. 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

Data Calls for the Laboratory Response Network (OMB Control Number 0920-0881, Expires 4/30/2017)—Revision—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) is submitting a request for a three year revision for OMB Control No. 0920-0881, an existing collection conducted by Laboratory Response Network (LRN), National Center for Emerging and Zoonotic Infectious Diseases (NCEZID).

The Department of Health and Human Services established LRN in accordance with Presidential Decision Directive 39, which outlined national anti-terrorism policies and assigned specific missions to Federal departments and agencies. The LRN's mission is to maintain an integrated national and international network of laboratories that can respond to acts of biological, chemical, or radiological terrorism and other public health emergencies. Federal, state and local public health laboratories voluntarily join the LRN.

The LRN Program Office maintains a database of information for each member laboratory that includes contact information as well as staff and equipment inventories. However, semiannually or during emergency response, the LRN Program Office may conduct a Special Data Call to obtain additional information from LRN Member Laboratories in regards to biological or chemical terrorism preparedness.

LRN has used the "Data Calls for the Laboratory Response Network" generic mechanism (OMB Control No. 0920-0881) twice during the last three years. Once in 2014, LRN surveyed its members to ascertain which, if any, labs would be willing to test clinical specimens for Ebola virus. The information gathered led to an emergency deployment of a new Ebola assay for LRN members. It is critical for the LRN to know which labs have equipment to support an agent specific assay during an emergency. In 2015, LRN surveyed members via broadcast email asking how many facilities had a specific version of an instrument. The information was used to help the LRN program office determine if new procedures should be written and made available to members to support the instrument in question.

Special Data calls may be conducted via queries that are distributed by broadcast emails or by survey tools (*i.e.* Survey Monkey).

The only cost to respondents is their time to respond to the data call. Authorizing legislation comes from Section 301 of the Public Health Service Act.

ESTIMATED ANNUALIZED BURDEN HOURS

| Type of respondents | Form name | Number of respondents | Number of responses per respondent | Average burden per response (in hours) |
|-----------------------------------|-------------------------|-----------------------|------------------------------------|--|
| Public Health laboratorians | Special Data Call | 136 | 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. 2017-02564 Filed 2-7-17; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-17-0995]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following request for reinstatement with change 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. 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

National Network of Sexually Transmitted Diseases Clinical Prevention Training Centers (NNPTC): Evaluation (OMB Control No. 0920-0995, Expiration 10/31/2016)—Reinstatement with Change—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC), Division of STD Prevention (DSTDP) requests a three-year approval for this reinstatement with change to the previously OMB approved information collection project entitled, “*Health Professional Application for Training (HPAT) OMB #0920-0995 exp. 10/31/2016*”. The revision request consists of changing the title to “*National Network of Sexually Transmitted Disease Clinical Prevention Training Centers (NNPTC): Evaluation*”, abbreviating the Health Professional Application for Training HPAT form; now called the “NNPTC HPAT”. This request also contains the following changes: Elimination of 18 demographic items from the HPAT, addition of 5 demographic items to the HPAT, and addition of 98 evaluation questions to be used in 14 post-course and 90-day follow-up evaluation instruments to monitor and evaluate program outcomes.

The Prevention Training Centers (PTCs) offer classroom, web-based, and experiential training, clinical consultation, and capacity building assistance to maintain and enhance the capacity of health care professionals to screen for, diagnose, treat, manage, and prevent STDs. Previously, there has not been a systematic evaluation of the outcomes of the NNPTC program. The

CDC’s Funding Opportunity Announcement PS 14-1407, National Network of Sexually Transmitted Diseases Clinical Prevention Training Centers (NNPTC) requires the collection of demographic information on trainees and the collection of national evaluation outcomes. Therefore, the 14 new evaluation forms were needed and the previously approved HPAT registration form was shortened to decrease the burden on respondents. This evaluation will provide the CDC with information to assess the performance of their grantees, and will provide the NNPTC with information to improve program processes and operations in order to improve the quality of STD prevention and treatment, a key public health and evaluation activity promoted by the CDC and DSTDP.

The NNPTC HPAT will serve as the standard application and registration form for all NNPTC trainings collecting demographic information such as race, gender, work contact information, profession, functional role, work setting, programmatic focus, and at-risk populations served. NNPTC HPAT data will be used to plan and organize trainings, and determine whether NNPTC trainings are reaching the designated priority audiences: STD experts and primary care providers who serve adolescents, young adults, pregnant women, and men who have sex with men. Evaluation instruments will be used to assess satisfaction with the training, and measure participant changes in knowledge, skills, intentions to change clinical practices, and actual changes in clinical practices.

Data will be collected up to three times annually from 4,500 healthcare professionals who provide STD screening, diagnosis, and treatment or provide services to populations at risk of STD and receive NNPTC training or technical assistance. This is a decrease from the originally approved 7,400 due to a decrease in the number of PTCs and therefore number of healthcare professionals trained. All 4,500 healthcare professionals will complete the NNPTC HPAT registration and all will be asked via two emails to voluntarily complete one evaluation within several days after training (Post-Course Evaluation) and a second