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: Enhancing Linkage of Sexually Transmitted Infection and Human Immunodeficiency Virus Surveillance Data in the Ryan White HIV/AIDS Program Evaluation, OMB No. 0906 - New

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

ACTION: Notice.

SUMMARY: In compliance with of 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. OMB may act on HRSA’s ICR only after the 30 day comment period for this Notice has closed.

DATES: Comments on this ICR should be received no later than [INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to
SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Enhancing Linkage of Sexually Transmitted Infection and Human Immunodeficiency Virus Surveillance Data in the Ryan White HIV/AIDS Program Evaluation, OMB No. 0906-xxxx – NEW

Abstract: HRSA’s Ryan White HIV/AIDS Program (RWHAP) funds and coordinates with cities, states, and local clinics/community-based organizations to deliver efficient and effective Human Immunodeficiency Virus (HIV) care, treatment, and support to low-income people with HIV. Nearly two-thirds of clients (patients) live at or below 100 percent of the Federal poverty level and approximately three-quarters of RWHAP clients are racial and ethnic minorities. Since 1990, the RWHAP has developed a comprehensive system of HIV service providers who deliver high quality direct health care and support services to over half a million people with HIV - more than 50 percent of all people with diagnosed HIV in the United States.

HRSA’s HIV/AIDS Bureau is conducting a multi-year evaluation of the Enhancing Linkage of Sexually Transmitted Infection (STI) and HIV Surveillance Data in the RWHAP (Enhancing STI Linkage) demonstration project. The Enhancing STI Linkage demonstration project is a capacity building cooperative agreement that seeks to improve linkage, re-engagement in care, and health outcomes for people with HIV in the RWHAP. Through this demonstration project, a Technical Assistance Provider is collaborating with four RWHAP Part
B jurisdictions to provide them with tailored training and technical assistance to facilitate data sharing across STI and HIV surveillance systems. A persistent barrier to addressing HIV and STI infections simultaneously and jointly is the lack of data systems linking HIV and STI surveillance data. Aside from helping to address problems around coinfection, there are substantial opportunities - particularly for the RWHAP - associated with linking HIV and STI surveillance data, including, but not limited to, identifying people with HIV currently out of care and identifying people with STIs who could be tested for HIV and promptly linked to care. This clearance request is for approval of data collection activities associated with the Enhancing STI Linkage evaluation which will occur simultaneously with the demonstration project, over a 3-year project period.

A 60-day notice published in the Federal Register on August 20, 2020, vol. 85 No. 162; pp. 51454-51455. There were no public comments.

Need and Proposed Use of the Information: This mixed methods evaluation will assess the achievement and effectiveness of the Enhancing STI Linkage demonstration project. HRSA will collect quantitative and qualitative data to inform the HRSA on how to enhance jurisdictions’ use of STI and HIV surveillance data to improve service delivery and HIV-related health outcomes. Information gleaned from the Enhancing STI Linkage evaluation may be used to enhance and coordinate health departments’ responses to HIV and STI epidemics and affect change in HIV care continuum outcomes.

Likely Respondents: Multiple respondents from four HRSA RWHAP Part B recipients, including data end-users identified by the Part B recipients within their jurisdiction.

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

Annualized Data Collection Burden – Years 2 and 3

<table>
<thead>
<tr>
<th>Type of Respondent</th>
<th>Form Name</th>
<th>No. of Respondents</th>
<th>No. Responses per Respondent*</th>
<th>Total Responses</th>
<th>Average Burden per Response (in hours)</th>
<th>Total Burden Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jurisdiction TA Recipient</td>
<td>Jurisdiction TA Recipient Semi-Structured Interview Guide</td>
<td>12</td>
<td>2</td>
<td>24</td>
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<td>24</td>
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<td>Policy Stakeholder</td>
<td>Policy Stakeholder Semi-Structured Interview Guide</td>
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<td>2</td>
<td>24</td>
<td>.50</td>
<td>12</td>
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<tr>
<td>Data End-User</td>
<td>Data End-User Survey</td>
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<td>2</td>
<td>210</td>
<td>.17</td>
<td>36</td>
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<td>Total</td>
<td></td>
<td>129</td>
<td>258</td>
<td>72</td>
<td></td>
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</tr>
</tbody>
</table>

*Note: Burden hours represent responses for both years 2 and 3; and there are 2 responses per respondent, indicating one in each year (one in year 2 and another in year 3).

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.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2020-23871 Filed: 10/27/2020 8:45 am; Publication Date: 10/28/2020]