Respondents	Number of respondents	Number of responses/respondent	Average bur- den/response (in hours)	Total bur- den (in hours)
Young men aged 15–25 who are in the target population and surveyed during the intervention	2,400	1	0.167	400
Total				3,400

3. Antivirals Usage in Nursing Homes. The Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases. Centers for Disease Control and Prevention, is proposing a study to determine how often rapid testing and antivirals are used to control influenza A outbreaks in nursing homes. Outbreaks of influenza A in nursing homes may result in the hospitalization of up to 25% of ill residents and the death of up to 30% of those who are hospitalized. The rapid diagnosis of influenza A and the timely administration of currently available antiviral medications, amantadine and rimantadine, can lessen the impact of these outbreaks. However, it is unknown how often laboratory tests for the rapid diagnosis of influenza A are utilized and how frequently antivirals are used to control nursing home outbreaks of influenza A.

For this study, a sample of nursing homes will be selected randomly from one state within each of nine influenza surveillance regions. The survey will be mailed to infection control personnel in the randomly selected nursing homes. The results will be used to identify where educational efforts should be directed to lessen the impact of influenza A on elderly institutionalized persons.

4. Evaluation of NCIPC
recommendations on bicycle helmet
use—New—The National Center for
Injury Prevention and Control's (NCIPC)
Division of Unintentional Injury
Prevention (DUIP) intends to conduct a
survey of 1,300 persons from its mailing
lists and lists of recipients of
recommendations on the use of bicycle
helmets in preventing head injuries that
was published in the Morbidity and
Mortality Weekly Report of February 17,
1995.

The purpose of this survey is to determine:

- I. The penetration of the recommendations distribution,
- II. The usefulness of the bicycle helmet recommendations,
- III. How to improve the recommendation's content and format,
- IV. Potential future DUIP bicycle helmet promotional activities,
- V. Information needs and access points of DUIP's "customers"

Results from this research will be used to (1) assist DUIP in producing an updated version of the helmet recommendations; (2) identify new helmet promotion programmatic directions; and (3) develop future materials that meet the needs of DUIP "customers."

The study will be done by telephone. The estimate of burden is as follows: The total cost to respondents is \$0.00.

Respondent	Number of respondents	Number of responses/ respondent	Average burden/re- sponse (in hours)	Total bur- den (in hours)
Individual	1,300	1	.33	429

Dated: April 6, 1998.

Kathy Cahill,

Associate Director for Policy Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–9475 Filed 4–9–98; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Summary Data Component (SDC) of the National Child Abuse and Neglect Data System (NCANDS).

OMB No.: 0980-0229.

Description: This information collection implements the provision of the Child [Abuse Prevention and Treatment Act (42 U.S.C. 5101 et seq.), as amended by Public Law 104–235, requiring that State agencies receiving the State child abuse and neglect grant

annually provide, elements include the number of children reported for child abuse and substantiated, unsubstantiated or determined to be false; the number of deaths resulting from child abuse or neglect; the number of children responsible for child protective service (CPS) functions. The new voluntary Summary Data Component of the National Child Abuse and Neglect Data System. The information collect will be used to understand better the experiences of children and families served by CPS agencies, and to help guide policy and program development at the National, State and local levels. etc.

Respondents: State, Local or Tribal Govt.

Διινια	RURDEN	ESTIMATES

Instrument	Number of respondents	Number of responses per re- spondent	Average burden hours per response	Total bur- den hours
SDC	56	1	60	3,360

Estimated Total Annual Burden Hours: 3,360.

Additional Information: Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW., Washington, DC 20503, Attn: Ms. Laura Oliven.

Dated: April 6, 1998.

Bob Sargis,

Acting Reports Clearance Officer. [FR Doc. 98–9536 Filed 4–9–98; 8:45 am] BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-1728]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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.

Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Home Health Agency Cost Report and Supporting Regulations in 42 CFR 413.20, 413.24 and 413.106; Form No.: HCFA-1728 (OMB No. 0938-0022); Use: The HCFA 1728 is the form used by Home Health Agencies to report their health care costs to determine the amount reimbursable for services furnished to Medicare beneficiaries. Frequency: Annually; Affected Public: Business or other for profit, Not for profit institutions, and State, Local or Tribal Gov.; Number of Respondents: 8,950; Total Annual Responses: 8,950; Total Annual Hours Requested: 1,575,200.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access HCFA's Web Site address at http://www.hcfa.gov/ regs/prdact95.htm, or E-mail your request, including your address, phone number, OMB number, and HCFA document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards, Attention: Louis Blank, Room C2-26-17, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: April 1, 1998.

John P. Burke III,

HCFA Reports Clearance Officer, HCFA Office of Information Services, Information Technology Investment Management Group, Division of HCFA Enterprise Standards. [FR Doc. 98–9455 Filed 4–9–98; 8:45 am] BILLING CODE 4120–03–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-2088, HCFA-2540, and HCFA-2552]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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

1. Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Outpatient Rehabilitation Cost Report and Supporting Regulations in 42 CFR 413.20 and 413.24 Form No.: HCFA-2088 (0938–0037); Use: This form is used by Outpatient Rehabilitation Facilities to report their health care costs to determine the amount reimbursable for services furnished to Medicare beneficiaries. In addition, the