### EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

<table>
<thead>
<tr>
<th>Form</th>
<th>Number of respondents</th>
<th>Total burden hours</th>
<th>Average hourly wage rate*</th>
<th>Total cost burden</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certification for Initial Listing Form</td>
<td>15</td>
<td>270</td>
<td>33.51</td>
<td>9,048</td>
</tr>
<tr>
<td>Certification for Continued Listing Form</td>
<td>24</td>
<td>192</td>
<td>33.51</td>
<td>6,434</td>
</tr>
<tr>
<td>Two Bona Fide Contracts Requirement Form</td>
<td>40</td>
<td>40</td>
<td>33.51</td>
<td>$1,340</td>
</tr>
<tr>
<td>Disclosure Statement Form</td>
<td>7</td>
<td>21</td>
<td>33.51</td>
<td>704</td>
</tr>
<tr>
<td>Information Form</td>
<td>80</td>
<td>240</td>
<td>33.51</td>
<td>8,042</td>
</tr>
<tr>
<td>Patient Safety Confidentiality Complaint Form</td>
<td>2</td>
<td>1</td>
<td>33.51</td>
<td>34</td>
</tr>
<tr>
<td>Common Formats</td>
<td>750</td>
<td>75,000</td>
<td>33.51</td>
<td>2,513,250</td>
</tr>
<tr>
<td>Total</td>
<td>918</td>
<td>75,764</td>
<td>NA</td>
<td>2,538,852</td>
</tr>
</tbody>
</table>


**Estimated Annual Costs to the Federal Government**

**AHRQ**

The total cost to the Federal Government for the PSO forms and Common Formats is $1,737,390 per year, including project management and support for the review and administration of the PSO forms and the development and maintenance of the Common Formats.

**OCR**

Through an interagency agreement (IAA), OCR provides management for and support of the enforcement of the confidentiality protections of the Patient Safety Act and the Patient Safety Rule. The cost of this IAA is approximately $300,000 annually.

**Request for Comments**

In accordance with the Paperwork Reduction Act, comments on AHRQ’s information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ healthcare research and healthcare information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ’s estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency’s subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

**Dated:** June 10, 2011.

Carolyn M. Clancy,
Director.

[FR Doc. 2011–15578 Filed 6–23–11; 8:45 am]

**BILLING CODE 4160–90–M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Docket Number: NIOSH–243]

**Manual Materials Handling (MMH) Workshop**

**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 public meeting.

**SUMMARY:** The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) in partnership with the University of Cincinnati, Department of Environmental Health, will be holding a two-day Manual Materials Handling (MMH) Workshop. The Workshop is a National Occupational Research Agenda (NORA) activity organized by the Wholesale and Retail Trade Sector and the Transportation, Warehouse and Utilities Sector. The MMH Workshop goal is to stimulate through roundtable discussions the wider adoption of current, effective MMH equipment, and the development of the next generation of MMH equipment for the purposes of reducing both worker fatigue from overexertion and strains/sprains, as well as improving overall efficiency. The purpose of MMH Workshop is to develop cost effective engineering solutions for manual materials handling jobs in Retail, Wholesale and Warehouse industries.

**DATES:** The public meeting will be held 8 a.m. to 5 p.m., Eastern Daylight Time, October 11 through 12, 2011.

**Place:** Hyatt Regency Cincinnati, 151 West Fifth Street, Cincinnati, Ohio 45202, telephone (513) 579–1234.

**SUPPLEMENTARY INFORMATION:**

Status: Attendance is limited only by the space available. The meeting room accommodates 225 people. If interested in attending the meeting, please contact the NIOSH Docket Office at nioshdocket@cdc.gov or telephone (513) 579–8611. Priority for attendance will be given to the Loss Prevention/Safety representatives from businesses within the Retail, Wholesale and Warehouse industries. Other requests to attend the meeting will then be accommodated on a first-come basis. Registration and information on the Workshop can be found at the University of Cincinnati Web site http://www.eh.uc.edu/MMHWorkshop.

Attendees: Industry/safety/loss prevention representatives from the Retail, Wholesale and Warehouse industries who believe there should be a better way of moving materials and containers in their businesses.

Manufacturers/vendors of MMH equipment who desire to partner with one or more Retail, Wholesale and Warehouse industries to explore/develop the next generation of MMH-assisted equipment.

Practitioners/researchers who seek to partner with businesses in implementing and evaluating MMH engineering solutions to lifting jobs in the Retail, Wholesale and Warehouse industries.

The public, insurance experts, Workers’ Compensation representatives, and government representatives who are interested in reducing the injuries associated with manual lifting in jobs found in the Retail, Wholesale and Warehouse industries.

Dated: June 10, 2011.

Carolyn M. Clancy,
Director.

[FR Doc. 2011–15578 Filed 6–23–11; 8:45 am]

**BILLING CODE 4160–90–M**
FOR FURTHER INFORMATION CONTACT:
Vern Anderson, NIOSH, MS–C14, Robert A. Taft Laboratories, 4676 Columbia Parkway, Cincinnati, Ohio 45236, telephone (513)533–8319, E-mail: vanderson@cdc.gov.

Dated: June 15, 2011.
Tanya Popovic,
Deputy Associate Director for Science, Centers for Disease Control and Prevention. [FR Doc. 2011–15840 Filed 6–23–11; 8:45 am]
BILLING CODE 4163–19–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Development of Best Practices for Community Health Needs Assessment and Implementation Strategy; Public Forum

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of public meeting.

SUMMARY: The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS), will hold a public forum from July 11–13, 2011 on processes relating to community health needs assessment (CHNA) and implementation strategy/plan development and execution. CDC is developing best practices designed to support state and local health departments to meet public health accreditation standards, and by other entities who may wish to utilize them in their community health planning processes. This notice announces the public forum.

DATES: The public forum will be held on: Monday, July 11, 2011, from 1 to 5:30 p.m. EST, Tuesday, July 12, 2011, from 8 a.m. to 5 p.m. EST, and Wednesday, July 13, 2011, from 8 a.m. to 4 p.m. EST.

ADDRESS: The public forum will be held at the Emory Conference Center Hotel, 1615 Clifton Road, Atlanta, GA 30329. Please visit the Emory Conference Center Hotel Web site for additional information and directions to the facility: http://www.emoryconferencecenter.com/map-directions/.

Registration: HHS/CDC is working with the National Network of Public Health Institutes (NNPHI) to manage online registration and provide logistical support. Participants are encouraged to preregister for the public forum. On-line registration and a draft agenda are available at: http://www.regonline.com/2011CHNAPublicForum. As space is limited, registration is limited to the first 200 registrants. CDC and NNPHI will make every effort to accommodate persons with physical disabilities or special needs. If you require special accommodations due to a disability, please contact Anooj Pattnaik, Project Coordinator for NNPHI, at (504) 301–9847 or via e-mail at apattnaik@nnphi.org at least 7 days in advance of the meeting.

FOR FURTHER INFORMATION CONTACT: Simeon Niles, Office of Prevention Through Healthcare, Office of the Associate Director for Policy, Centers for Disease Control and Prevention, 1600 Clifton Road, NE., Atlanta, Georgia 30333; phone: (404) 639–7522.

SUPPLEMENTARY INFORMATION: As the principal Federal public health authority, HHS/CDC intends to develop best practices in CHNA and implementation strategy development and execution for improved community health outcomes. These best practices are intended to support community health planning and implementation activities, including national public health accreditation activities wherein state and local health departments must conduct “community health assessments” and develop community health improvement plans. Currently, there is considerable variation in CHNA processes, and many available tools lack standards to support their use in fulfilling regulatory and accreditation requirements. In addition, development of best practices in CHNA may assist charitable hospital organizations to conduct a CHNA and adopt an implementation strategy, as required by Section 9007(a) of the Affordable Care Act (ACA) (Pub. L. 111–148). Additional information regarding the CHNA requirement is available at http://www.irs.gov. Proceedings from this public forum will be compiled in a report to serve as input to the best practices guidelines which CDC intends to publish later this year.

Agenda: The meeting will include presentations related to national public health accreditation standards, current practices in CHNA, implementation strategy/plan development and execution, and the best practices development process. The meeting will consist of panel presentations. Participants attending the public forum will be invited to provide comment at the end of each panel discussion. NNPHI will make every effort to make available to the public the final agenda and panelists’ presentations two business days before the meeting. The final agenda and panelists’ presentations will be available at HTTP://WWW.REGONLINE.COM/2011CHNAPUBLICFORUM. The agenda is subject to change without notice. If NNPHI is unable to post the presentations on the registration Web site prior to the meeting, the material will be made publicly available at the location of the meeting.

Procedure: Oral comments from the public will be scheduled during public comment periods at the end of each panel discussion. Each commenter will be limited to 3–5 minutes. If the number of participants requesting to comment is greater than can be reasonably accommodated, NNPHI may conduct a lottery to determine the speakers for the scheduled public comment sessions. Individuals interested in making formal comments may submit their comments to the Office of Prevention through Healthcare mailbox at: http://www.cdc.gov/policy/opth. Comments must be submitted by 5 p.m. on July 20, 2011 and include “Best Practices Guidelines” in the subject line.

Dated: June 16, 2011.
Tanya Popovic,
Deputy Associate Director for Science, Centers for Disease Control and Prevention. [FR Doc. 2011–15839 Filed 6–23–11; 8:45 am]
BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Interagency Committee on Smoking and Health, (ICSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned committee:

Time and Date: 9 a.m.–4:30 p.m., July 28, 2011.