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, Fax: 202–395–6974, Attn: Desk Officer for the Administration, for Children and Families.

Dated: June 22, 2011.

Steven M. Hanmer,
OPRE Reports Clearance Officer.

[FR Doc. 2011–16478 Filed 6–29–11; 8:45 am]
BILLING CODE 4184–09–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection
Activities: Proposed Collection: Comment Request

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Correction.

SUMMARY: The Health Resources and Services Administration published an Agency Information Collection document in the Federal Register of June 20, 2011 (FR Doc. 2011–15194), on page 35900, regarding Bureau of Primary Health Care (BPHC) Uniform Data System (OMB No. 0915–0193). The Uniform Data System (UDS) contains the annual reporting requirements for the cluster of primary care grantees funded by the Health Resources and Services Administration (HRSA) under the Health Center Program as authorized under section 330 of the Public Health Service Act, as amended. “FQHC Look-Alikes” are health centers that have been determined by HRSA to meet the requirements of the Health Center Program but which do not receive a grant. The UDS includes reporting requirements for grantees of the following primary care programs: Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care.

On page 35900, second column, second paragraph, correct the fifth sentence to read as follows:

These new measures are included in the UDS data collection request in order to allow advance time for health centers and FQHC Look-Alikes to change data collection systems.

On page 35900, please correct the burden table as follows:

<table>
<thead>
<tr>
<th>Type of report</th>
<th>Number of respondents</th>
<th>Responses per respondent</th>
<th>Hours per response</th>
<th>Total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal report</td>
<td>1,287</td>
<td>1</td>
<td>82</td>
<td>105,534</td>
</tr>
<tr>
<td>Grant report</td>
<td>328</td>
<td>1</td>
<td>18</td>
<td>5,904</td>
</tr>
<tr>
<td>Total</td>
<td>1,615</td>
<td></td>
<td></td>
<td>111,438</td>
</tr>
</tbody>
</table>

Dated: June 23, 2011.

Reva Harris,
Acting Director, Division of Policy and Information Coordination.

[FR Doc. 2011–16478 Filed 6–29–11; 8:45 am]
BILLING CODE 4184–09–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Child Health and Human Development; Revision to Proposed Collection; Comment Request; Formative Research Methodology Studies for the National Children’s Study

SUMMARY: In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institute of Child Health and Human Development (NICHD), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval. This proposed information collection was previously published in the Federal Register on April 27, 2011, pages 23608–23609, and allowed 60 days for public comment. Two written comments and two verbal comments were received. The verbal comments expressed support for the broad scope of the study. The written comments were identical and questioned the cost and utility of the study specifically and of federally funded biomedical research overall. The purpose of this notice is to allow an additional 30 days for public comment.

Proposed Collection:
Title: Formative Research Studies for the National Children’s Study (NCS)
Type of Information Collection Request: RENEWAL of OMB Clearance 0925–0590, Expiration June 30, 2011

(a) Purpose.—It is the purpose of this section to authorize the National Institute of Child Health and Human Development to conduct a national longitudinal study of environmental influences (including physical, chemical, biological, and psychosocial) on children’s health and development.

(b) In General.—The Director of the National Institute of Child Health and Human Development shall establish a consortium of representatives from appropriate Federal agencies (including the Centers for Disease Control and Prevention, the Environmental Protection Agency) to—
1. plan, develop, and implement a prospective cohort study, from birth to adulthood, to evaluate the effects of both chronic and intermittent exposures on child health and human development; and
2. investigate basic mechanisms of developmental disorders and environmental factors, both risk and protective, that influence health and developmental processes.

(c) Requirement.—The study under subsection (b) shall—
1. incorporate behavioral, emotional, educational, and contextual consequences to enable a complete assessment of the physical, chemical, biological, and psychosocial
environmental influences on children’s well-being:
(2) gather data on environmental influences and outcomes on diverse populations of children, which may include the consideration of prenatal exposures; and
(3) consider health disparities among children, which may include the consideration of prenatal exposures.

To fulfill the requirements of the Children’s Health Act, the results of formative research and pilot tests will be used to maximize the efficiency of NCS procedures, materials, and methods for outreach, engagement of stakeholders, recruitment and retention of Study subjects, and to ensure scientifically robust data collection methodologies for the National Children’s Study (NCS) Vanguard and Main Studies. With this submission, the NCS seeks to obtain OMB’s generic approval to conduct survey and instrument design and administration, focus groups, cognitive interviews, and health and social service provider information collection surrounding outreach, engagement, recruitment, consent and questionnaire design, and retention activities.

The results from formative research and pilot tests proposed will inform the feasibility (scientific robustness), acceptability (burden to participants and study logistics) and cost of NCS Vanguard and Main Study recruitment, retention, study visit measures and study logistics.

Frequency of Response: Annual [As needed on an on-going and concurrent basis].

Affected Public: Members of the public, researchers, practitioners, and other health professionals.

### Table 1—Estimated Annual Reporting Burden Summary

<table>
<thead>
<tr>
<th>Data collection activity</th>
<th>Type of respondent</th>
<th>Estimated number of respondents</th>
<th>Estimated number of responses per respondent</th>
<th>Average burden hours per response</th>
<th>Estimated total annual burden hours requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small, focused survey and instrument design and administration.</td>
<td>NCS participants ..............................</td>
<td>4,000</td>
<td>2</td>
<td>1</td>
<td>8,000</td>
</tr>
<tr>
<td></td>
<td>Members of NCS target population (not NCS participants).</td>
<td>4,000</td>
<td>2</td>
<td>1</td>
<td>8,000</td>
</tr>
<tr>
<td></td>
<td>Health and Social Service Providers</td>
<td>2,000</td>
<td>1</td>
<td>1</td>
<td>2,000</td>
</tr>
<tr>
<td></td>
<td>Community Stakeholders</td>
<td>2,000</td>
<td>1</td>
<td>1</td>
<td>2,000</td>
</tr>
<tr>
<td>Focus groups ........................................</td>
<td>NCS participants ..............................</td>
<td>2,000</td>
<td>1</td>
<td>2</td>
<td>2,000</td>
</tr>
<tr>
<td></td>
<td>Members of NCS target population (not NCS participants).</td>
<td>2,000</td>
<td>1</td>
<td>2</td>
<td>2,000</td>
</tr>
<tr>
<td></td>
<td>Health and Social Service Providers</td>
<td>2,000</td>
<td>1</td>
<td>2</td>
<td>2,000</td>
</tr>
<tr>
<td></td>
<td>Community Stakeholders</td>
<td>2,000</td>
<td>1</td>
<td>2</td>
<td>2,000</td>
</tr>
<tr>
<td>Cognitive interviews ..................................</td>
<td>NCS participants ..............................</td>
<td>500</td>
<td>1</td>
<td>2</td>
<td>1,000</td>
</tr>
<tr>
<td></td>
<td>Members of NCS target population (not NCS participants).</td>
<td>500</td>
<td>1</td>
<td>2</td>
<td>1,000</td>
</tr>
<tr>
<td>Total ................................................................</td>
<td>................................................................</td>
<td>21,000</td>
<td></td>
<td>30,000 hrs</td>
<td></td>
</tr>
</tbody>
</table>

**Request for comments:** Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points:
(1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility;
(2) the accuracy of the agency’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
(3) ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Sarah L. Glavin, Deputy Director, Office of Science Policy, Analysis and Communication, National Institute of Child Health and Human Development, 31 Center Drive Room 2A18, Bethesda, Maryland 20892, or call non-toll free number (301) 496-1877 or E-mail your request, including your address to glavins@mail.nih.gov.

**Comments due date:** Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.
DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Mental Health; Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of a joint conference call of the Interagency Autism Coordinating Committee (IACC) Subcommittee on Safety and the IACC Services Subcommittee.

The IACC Subcommittee on Safety and Services Subcommittee will be having a joint conference call on Monday, July 11, 2011. The two subcommittees plan to discuss issues related to seclusion and restraint and autism spectrum disorder (ASD).

Name of Committee: Interagency Autism Coordinating Committee (IACC).

Type of Meeting: Subcommittee on Safety and Services Subcommittee Joint, Conference Call.

Date: July 11, 2011.

Time: 2 p.m. to 4 p.m. Eastern Time.

Agenda: The Services and Safety Subcommittees of the IACC will meet jointly to discuss issues related to seclusion and restraint and autism spectrum disorder (ASD).

Place: No in-person meeting; conference call only.


Access code: 3061094.

Contact Person: Ms. Lina Perez, Office of Autism Research Coordination, National Institute of Mental Health, NIH, 6001 Executive Boulevard, NSC, Room 8185a, Rockville, MD 20852, Phone: 301–443–6040, E-mail: IACCPublicInquiries@mail.nih.gov.

Please Note: The conference call will be accessible to the public through a conference call-in number and access code. Members of the public who participate using the conference call phone number will be able to listen to the meeting but will not be heard. If you experience any technical problems with the conference call or webinar, please e-mail IACCtechSupport@acclaroresearch.com or call the IACC Technical Support Help Line at 443–680–0098.

Individuals who participate by using this electronic service and who need special assistance, such as captioning of the conference call or other reasonable accommodations, should submit a request to the Contact Person listed on this notice at least 7 days prior to the meeting.

This notice is being published less than 15 days prior to the meeting due to the urgent need to discuss issues related to seclusion and restraint and autism spectrum disorder (ASD) prior to the next IACC full committee meeting, which will take place on July 19, 2011.

Schedule subject to change. Information about the IACC is available on the Web site: http://www.iacc.hhs.gov.

Dated: June 23, 2011.

Jennifer S. Spaeth,
Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–16460 Filed 6–29–11; 8:45 am]
BILLING CODE 4140–01–P