under grants and cooperative agreements.

In addition to allowing for uniformity of information collection, these formats will support systematic electronic collection and submission of information. These formats will provide interim and final performance progress information as required by OMB Circulars A–102 and 2 CFR 215.

The SF-PPR consists of a cover page and six optional formats. The Cover Page contains identifying data elements and a section for a performance narrative. Use of the cover page is required, and programs may require their respondents to submit only this page and/or attach a performance narrative. Alternatively, programs may opt to require the cover page and one or more of the six optional formats: Performance Measures, Program Indicators, Benchmark Evaluations, Table of Activity Results, Activity-Based Expenditures, and Program/Project Management.

The SF-PPR has been successfully piloted at the Administration for Children and Families (ACF). All discretionary programs (starting with FY09 awards) are to submit the SF-PPR to the ACF Office of Grants Management. Program offices with expiring data collections are required to migrate to the SF-PPR format. Additionally, a number of program offices have voluntarily migrated their collections to the SF-PPR format in anticipation of government-wide standardization. ACF, with its Online Data Collection tool (OLDC), has provided program offices with the capability to collect SF-PPR data electronically.

ACF and the Grants Center of Excellence (CoE) is sponsoring this collection on behalf of the Grants Policy Committee, other Federal grant-making agencies, and the CoE partners.

CoE Partners are Defined as:

Corporation for National and Community Service.
Denali Commission.
Department of State.
DHHS/Administration on Aging.
DHHS/Centers for Medicare Services.
DHHS/Health Research and Services Administration.
DHHS/Indian Health Services.
DHHS/Office of Public Health Services.
DOT/Federal Air Administration.
DOT/Federal Highway Administration.
DOT/Federal Motor Carrier Safety Administration.
DOT/Federal Railroad Administration.
DOT/Federal Transport Administration.
DOT/Pipeline and Hazardous Materials Safety Administration.
Environmental Protection Agency.
Institute of Museum and Library Services.
Social Security Administration.
Department of the Treasury.
USDA/Food Safety and Inspection Service.
Veterans Administration.

The revised burden estimates are based on grant projects and awards for ACF and its CoE partners for FY2008 as reported by internal ACF reporting systems and USASpending.gov.

Respondents: Federal government grantees.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Performance progress report (SF-PPR)	131,281	1	0.42	55,138.02
Cover Page Continuation (SF-PPR–2)	86	1	0.33	28.38
Performance Measures (SF-PPR-A)	430	1	0.75	322.50
Program Indicators (SF-PPR-B)	8,961	1	3	26,883
Benchmark Evaluations (SF-PPR-C)	248	1	1.50	372
Table of Activity Results (SF-PPR-D)	4,238	1	0.75	3,178.50
Activity Based Expenditures (SF-PPR-E)	2,616	1	0.33	863.28
Program/Project Management (SF-PPR-F)	45	1	0.50	22.50

Estimated Total Annual Burden Hours: 86,808.18

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: infocollection@acf.hhs.gov. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) 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) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: March 25, 2009.

Janean Chambers,

Reports Clearance Officer.

[FR Doc. E9–7021 Filed 3–27–09; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2008–N–0286]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Survey to Evaluate FDA's Food Defense Awareness Initiative ALERT

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

DATES: Fax written comments on the collection of information by April 29, 2009.

ADDRESSES: To ensure that comments on the information collection are received, OMB recommends that written comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, FAX: 202–395–6974, or e-mailed to *oira_submission@omb.eop.gov*. All comments should be identified with the OMB control number 0910–NEW and title ''Survey to Evaluate FDA's Food Defense Awareness Initiative ALERT.'' Also include the FDA docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Jonna Capezzuto, Office of Information Management (HFA–710), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–796–3794.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

Survey to Evaluate FDA's Food Defense Awareness Initiative ALERT

In July 2006, FDA announced its Food Defense Awareness Initiative, called ALERT (the letters stand for the five key components of the initiative: assure, look, employees, report, and threat). The ALERT initiative is intended to raise the awareness of State and local government agencies and the food industry regarding food defense issues. ALERT identifies five key points that industry and businesses can use to decrease the risk of intentional food contamination at their facility. The ALERT Web-based training module and more information on ALERT are available at *www.cfsan.fda.gov/~dms/defterr.html*.

Under section 903(b)(2) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 393(b)(2)), FDA is authorized to conduct research relating to foods and to conduct educational and public information programs relating to the safety of the nation's food supply. Under this authority, FDA is planning to conduct a survey of first line supervisors working in a range of capacities in the food industry about their awareness and perceptions of the agency's ALERT initiative and the ALERT initiative informational materials. The purpose of the survey is to help FDA evaluate ALERT informational materials and to gauge whether the materials succeed in informing food industry supervisory employees about the risk of intentional food contamination and in motivating them to engage in protective behaviors. The survey results will be used to assess how knowledge and awareness, threat perceptions, attitudes, norms, benefits and barriers affect the implementation of the ALERT initiative.

The data will be collected using a Web-based questionnaire. The survey will employ a stratified sampling design. Using industry networks and listings, we will randomly sample from databases of seven industry groups (growers, packers, processors, warehouses, transporters, retailers, and food service operators). We will stratify within groups by organization size (small, medium, and large) based on number of employees on the payroll, for a total random sample of 2,500 organizations. Participation in the survey is voluntary. Cognitive interviews and a pre-test will be conducted prior to fielding the survey.

In the **Federal Register** of May 22, 2008 (73 FR 29759), FDA published a 60-day notice requesting public comment on the information collection provisions. No comments were received.

FDA estimates the burden of this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN[1]

Activity	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
Cognitive Interviews	7	1	7	1	7
Telephone Interview - Pre-test Invitation	28	1	28	0.10	3
Completed Pre-test	14	1	14	0.25	4
Telephone Interview - Survey Invitation	5,000	1	5,000	0.10	500
Completed Survey	2,500	1	2,500	0.25	625
Total					1,139

[1]There are no capital costs or operating and maintenance costs associated with this collection of information.

In the 60-day notice published on May 22, 2008, FDA estimated the total burden hours to be 94 hours. FDA has made several changes to its burden estimate, reflected in table 1 of this document. The agency reduced the number of cognitive interviews from 10 to 7, added hours for 28 telephone pre-test invitations, increased the number of pre-tests from 10 to 14, added 5,000 survey invitations, and increased the number of completed surveys from 200 to 2,500. The total burden hours are estimated to be 1,138.3 (rounded to 1,139).

Cognitive interviews will be conducted with seven participants. We estimate that the cognitive interviews will take 60 minutes (1 hour) to complete for a total of 7 hours. An invitation to take a pre-test will be extended to 28 food-defense decision-makers; we estimate that it will take respondents 6 minutes (0.10 hours) to respond to the invitation and make arrangements to complete the pretest, for a total of 2.8 hours (rounded to 3). Fourteen respondents will complete the pre-test; we estimate that it will take respondents 15 minutes (0.25 hour) to complete the pretest for a total of 3.5 hours (rounded to 4). An invitation to take the survey will be extended to 5,000 food defense decision-makers; we estimate that it will take 6 minutes (0.10 hours) to respond to the invitation and make arrangements to complete the survey, for a total of 500 hours. Twenty-five hundred respondents will complete the survey. We estimate that it will take a respondent 15 minutes (0.25 hours) to complete the entire survey, for a total of 625 hours. Thus, the total estimated burden is 1,138.3 hours (rounded to 1,139).

FDA's burden estimate is based on prior experience with surveys that are similar to this proposed survey.

Dated: March 23, 2009.

Jeffrey Shuren,

Associate Commissioner for Policy and Planning.

[FR Doc. E9–7002 Filed 3–27–09; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget (OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301) 443–1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: Maternal and Child Health Bureau Performance Measures for Discretionary Grants (OMB No. 0915–0298): Revision

The Maternal and Child Health Bureau (MCHB) intends to continue to collect performance data for Special Projects of Regional and National Significance (SPRANS), Community Integrated Service Systems (CISS), and other grant programs administered by MCHB.

The Health Resources and Services Administration (HRSA) proposes to continue using reporting requirements for SPRANS projects, CISS projects, and other grant programs administered by MCHB, including national performance measures, previously approved by OMB, and in accordance with the ''Government Performance and Results Act (GPRA) of 1993'' (Pub. L. 103–62). This Act requires the establishment of measurable goals for Federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures for MCHB discretionary grants were initially approved in January 2003. Approval from OMB is being sought to continue the use of these measures. Some of these measures are specific to certain types of programs, and will not apply to all grantees. Furthermore, these measures are based primarily on existing data, thereby minimizing the response burden consistent with program administration and management needs. Through the experience of utilizing these measures, we are enhancing them to better reflect program goals.

The estimated response burden is as follows:

Form	Number of respondents	Responses per respondent	Total responses	Burden hours per response	Total burden hours
Grant Report	898	1	898	6	5,388

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by e-mail to OIRA *submission@omb.eop.gov* or by fax to 202–395–6974. Please direct all correspondence to the ''attention of the desk officer for HRSA.''

Dated: March 18, 2009.

Alexandra Huttinger,

Director, Division of Policy Review and Coordination.

[FR Doc. E9–6910 Filed 3–27–09; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Generic Clearance to Conduct Voluntary Customer/Partner Surveys

SUMMARY: In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 to provide opportunity for public comment on proposed data collection projects, the National Library of Medicine (NLM), 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.

Proposed Collection: *Title:* Generic Clearance to Conduct Voluntary Customer/Partner Surveys; *Type of Information Collection Request:* Extension of currently approved collection [OMB No. 0925–0476, expiration date 07/31/2009], *Form Number:* NA; *Need and Use of Information Collection:* Executive Order 12962 directed agencies that provide significant services directly to the public to survey customers to determine the kind and quality of services they want and their level of satisfaction with existing services. Additionally, since 1994, the NLM has been a ''Federal Reinvention Laboratory'' with a goal of improving its methods of delivering information to the public. An essential strategy in accomplishing reinvention goals is the ability to periodically receive input and feedback from customers about the design and quality of the services they receive.

The NLM provides significant services directly to the public including health providers, researchers, universities, other federal agencies, state and local governments, and to others through a range of mechanisms, including publications, technical assistance, and Web sites. These services are primarily focused on health and medical information dissemination activities. The purpose of this submission is to obtain OMB's generic approval to continue to conduct satisfaction surveys of NLM's customers. The NLM will use the information provided by individuals and institutions to identify strengths and weaknesses in current services and to make improvements where feasible. The ability to periodically survey NLM's customers is essential to continually update and upgrade methods of providing high quality service. *Frequency of Response:* Annually or biennially. *Affected Public:* Individuals or households; businesses or other for profit; State or local governments; Federal agencies; non-profit institutions; small businesses or organizations. *Type of Respondents:* Organizations, medical researchers, physicians and other health care providers, librarians, students, and the general public. The annual reporting burden is as follows: