

A major goal of the 2011 survey is to be fully responsive to respondents' needs for information and technical assistance. CDC will again provide customized benchmark reports to respondents and document progress since 2009 on their quality

improvement efforts. National and state reports will use de-identified data to describe incremental changes in practices and care processes over time at the facility, state, and national levels.

Participation in the survey is voluntary, and responses may be

submitted by mail or through a web-based system. There are no costs to respondents other than their time. The total estimated annualized burden hours are 1,686.

ESTIMATED ANNUALIZED BURDEN HOURS

| Type of respondents | Form name | Number of respondents | Number of responses per respondent | Average burden per response (in hours) |
|---------------------|--|-----------------------|------------------------------------|--|
| Hospitals | Telephone Screening Interview for Hospitals. | 3,897 | 1 | 5/60 |
| Birth Centers | 2011 mPINC Survey for Hospitals | 2,568 | 1 | 30/60 |
| | Telephone Screening Interview for Birth Centers. | 192 | 1 | 5/60 |
| | 2011 mPINC Survey for Birth Centers | 122 | 1 | 30/60 |

Dated: September 17, 2010.

Maryam I. Daneshvar,

Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. To request more information on the proposed project or

to obtain a copy of the data collection plans and draft instruments, email paperwork@hrsa.gov or call the HRSA Reports Clearance Officer at (301) 443-1129.

Comments are invited on: (a) The proposed collection of information for the proper performance of the functions of the Agency; (b) the accuracy of the Agency's estimate of the burden of the proposed collection 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 on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Health Center Controlled Networks Progress Reports (OMB No. 0915-0315)—Revision

The Health Resources and Services Administration (HRSA) collects network outcome measures, conducts evaluation of those measures, and has an electronic reporting system for the following types of grantees: Health Information Technology Planning Grants, Electronic Health Record Implementation Health

Center Controlled Networks, Health Information Technology Innovations for Health Center Controlled Networks, and High Impact Electronic Health Records Implementation for Health Center Controlled Networks and Large Multi Site Health Centers. In order to help carry out its mission, HRSA created a set of performance measures that grantees use to evaluate the effectiveness of their service programs and monitor their progress through the use of performance reporting data.

Grantees report to HRSA on their grants to accomplish the following goals: increase access to needed data and services; improve quality, efficiency and effectiveness of network services; and enhance ability to track and monitor patient outcomes. Grantees submit their Progress Reports in a mid-year report and an accumulative annual progress report each fiscal year of the grant. These grants are on three year project periods. For HRSA grantees, there is no increase in burden. The hours per response has not changed. The number of grantees increased from 40 to 109.

The annual estimate of burden is as follows:

| Application | Number of respondents | Responses per respondent | Total responses | Hours per response | Total burden hours |
|--|-----------------------|--------------------------|-----------------|--------------------|--------------------|
| Planning | 5 | 2 | 10 | 10 | 100 |
| Electronic Health Records Implementation | 54 | 2 | 108 | 18 | 1,944 |
| Innovations Category 1 | 0 | 2 | 0 | 0 | 0 |
| Innovations Category 2 | 29 | 2 | 58 | 18 | 1,044 |
| High Impact | 21 | 2 | 42 | 18 | 7,208 |
| Total | 109 | - | 80 | - | 3,808 |

E-mail comments to paperwork@hrsa.gov or mail the HRSA Reports Clearance Officer, Room 10-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: September 16, 2010.

Sahira Rafiullah,

Director, Division of Policy and Information Coordination.

[FR Doc. 2010-23894 Filed 9-23-10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Child Care and Development Fund Plan for States/Territories for FFY 2012-2013 (ACF-118).

OMB No.: 0970-0114.

Description: The Child Care and Development Fund (CCDF) Plan (the Plan) for States and Territories is required from each CCDF Lead agency in accordance with Section 658E of the Child Care and Development Block Grant Act of 1990, as amended (Pub. L. 101-508, Pub. L. 104-193, and 42 U.S.C. 9858). The implementing regulations for the statutorily required Plan are set forth

at 45 CFR 98.10 through 98.18. The Plan, submitted on the ACF-118, is required biennially, and remains in effect for two years. The Plan provides ACF and the public with a description of, and assurance about, the States or the Territories child care program. The ACF-118 is currently approved through April 30, 2012, making it available to States and Territories needing to submit Plan Amendments through the end of the FY 2011 Plan Period. However, on July 1, 2011, States and Territories will be required to submit their FY 2012-2013 Plans for approval by September 30, 2011. Consistent with the statute and regulations, ACF requests extension of the ACF-118 with minor corrections and modifications. The Tribal Plan (ACF-118a) is not affected by this notice.

Respondents: State and Territorial CCDF Lead Agencies.

ANNUAL BURDEN ESTIMATES

| Instrument | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|---------------|-----------------------|------------------------------------|-----------------------------------|--------------------|
| ACF-118 | 56 | 0.50 | 162.50 | 4,550 |

Estimated Total Annual Burden Hours: 4,550.

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 shall 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: September 20, 2010.

Robert Sargis,

Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA-2010-N-0250]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Premarket Approval of Medical Devices

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 October 25, 2010.

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: 202-395-7285, or e-mailed to oir_submission@omb.eop.gov. All comments should be identified with the OMB control number 0910-0231. Also include the FDA docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Daniel Gittleson, Office of Information Management, Food and Drug Administration, 1350 Piccard Dr., PI50-400B, Rockville, MD 20850, 301-796-5156, Daniel.Gittleson@fda.hhs.gov.

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.