wide efforts, the output measures track the kinds of added value to be derived from involvement of the National Organizations and its local affiliates in the community-wide efforts which should help drive the outcome measure.

ESTIMATED ANNUALIZED BURDEN TABLE

Forms	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
National Organizations Measures Instrument.	Cooperative Agreement Recipients—National Organizations.	10	4	2	80

Seleda Perryman,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

[FR Doc. 2010–25586 Filed 10–8–10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS–0990–New; 30-day notice]

Agency Information Collection Request. 30-Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection 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.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to *Sherette.funncoleman@hhs.gov,* or call the Reports Clearance Office on (202) 690–5683. Send written comments and recommendations for the proposed information collections within 30 days of this notice directly to the OS OMB Desk Officer; faxed to OMB at 202–395–5806.

Proposed Project: Regional Extension Center (REC) Cooperative Agreement Program OMB No. 0990–NEW–Office of the National Coordinator for Health Information Technology

Abstract: The REC Cooperative Agreement program has been targeted as the Department of Health and Human Services' (HHS) high priority programs and is supportive of HHS Strategic Goal 1: Health Care, objective 1.3: Improve health care quality, safety, cost, and value. Each Regional Center is required to plan and implement the outreach, education and technical assistance necessary to meet the objective of assisting providers in its geographic service area to achieve meaningful use of electronic health records (EHR). Each Center is required to report data on a monthly basis, throughout the 24-month duration of the first project period, including the number of providers registered via signed agreements with the REC, the number of providers who have purchased and are using an ONC-certified HER, with e-prescribing and quality reporting functionalities, and the number of providers who have become meaningful users of EHR, in a certification process determined by the Center for Medicaid and Medicare Services (CMS). The tool provides a data hub and central location for program participants to collect this data. Additionally it allows for the synergy of grantee business processes and technology to increase transparency, portability, and accuracy of ONC-monthly and ARRA-quarterly reporting requirements.

ESTIMATED ANNUALIZED BURDEN TABLE

Forms	Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
CRM Tool	Regional Extension Center	60	12	1.5	1080
CRM Tool	Community College Consortia	84	20	1.5	2,520
Total					3600

Seleda Perryman,

Office of the Secretary, Paperwork Reduction Act Clearance Officer.

[FR Doc. 2010–25587 Filed 10–8–10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Proposed Collection; Comment Request; National Evaluation of the Clinical and Translational Science Awards (CTSA) Initiative

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 Center for Research Resources (NCRR), 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: The National Evaluation of the Clinical and

Translational Science Awards (CTSA) Initiative. *Type of Information Collection Request:* New. *Need and Use of Information Collection:* The CTSA Initiative is directed at transforming the way biomedical research is conducted nationwide by reducing the time it takes for basic science or laboratory discoveries to become treatments for patients, and for those treatments in turn to be incorporated and disseminated throughout community practice. The primary purpose of this data collection is to provide information about the process and early outcomes associated with 46 awardees participating in the first four cohorts of CTSA awards, in order to fulfill the congressional expectations for external program evaluation. NIH will use the results to understand the extent to which the CTSA Initiative is bringing about transformational changes in clinical and translational science among academic medical centers and their research partners, increasing the efficiency of the research process, and enhancing the capacity of the field to conduct clinical and translational research. All information collected will be used to provide analytical and policy support to NCRR, assisting NIH in making decisions about current CTSA programming, future funding, and other initiatives to improve clinical and translational science. It may also provide information for NIH's Government Performance and Results Act (GPRA) report. *Frequency of Response:* Biennial. *Affected Public:* Individuals. *Type of Respondents:* Scientific researchers. The annual reporting burden is as follows*: Estimated Number of Respondents:* 3,563; *Estimated Number of Responses per Respondent:* 1; *Average Burden Hours Per Response:* 0.13; *Estimated Total Annual Burden Hours Requested:* 451.5. The annualized cost to respondents is estimated at $14,056. There are no capital or start-up costs, and no maintenance or service cost components to report.

Respondent type	Estimated number of respondents	Estimated number of hours per respondent type	Frequency of response	Estimated total annual burden hours requested
Users survey	500	.25	.5	62.5
Nonusers survey	500	.08	.5	20
Trainees/scholars survey	1,213	.33	.5	200
Mentors survey	1,350	.25	.5	169
Total	.....	.....	.....	451.5

Request for Comments: Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate 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) Evaluate 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) Enhance the quality, utility, and clarity of the information to be collected; and (4) 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 Patricia Newman, Program Analyst, Office of Science Policy, National Center for Research Resources, 6701 Democracy Boulevard, MSC 4874, Bethesda, Maryland 20892–4874, or e-mail your request, including your address to *pnewman@mail.nih.gov.*

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: October 4, 2010.

Patricia Newman,

Program Analyst, Office of Science Policy, NCRR, National Institutes of Health.

[FR Doc. 2010–25589 Filed 10–8–10; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; the Atherosclerosis Risk in Communities Study (ARIC)

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 Heart, Lung, and Blood Institute (NHLBI), 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: The Atherosclerosis Risk in Communities Study (ARIC). *Type of Information Collection Request:* Revision of a currently approved collection (OMB NO. 0925–0281). *Need and Use of Information Collection:* ARIC will conduct a clinical examination of the cohort over a 24-month period (May 2011 to April 2013). In addition, this project involves biennual follow-up by telephone of participants in the ARIC study, review of their medical records, and interviews with doctors and family to identify disease occurrence. Interviewers will contact doctors and hospitals to ascertain participants' cardiovascular events. Information gathered will be used to further describe the risk factors, occurrence rates, and consequences of cardiovascular disease in middle aged and older men and women. *Frequency of Response:* The participants will be contacted bi-annually for follow-up. A subset of the cohort may choose to volunteer for the clinical examination; these individually will be contacted once in a 3 year period. *Affected Public:* Individuals or households; Businesses or other for profit; Small businesses or organizations. *Type of Respondents:* Individuals or households; doctors and staff of hospitals and nursing homes. The annual reporting burden is as follows: *Estimated Number of Respondents:* 12,673; *Estimated Number of Responses per Respondent:* 2.7; *Average Burden Hours Per Response:* 0.5916; and *Estimated Total Annual Burden Hours Requested:* 20,434. The annualized cost to respondents is estimated at $355,882, assuming