information on the number of clients and immediate household members tested for COVID–19, the number of clients newly diagnosed (or presumed positive) with COVID–19, the cumulative number of clients with COVID–19, the number of clients who received services in each RWHAP service category (identified in Policy Clarification Notice 16–02 RWHAP Services: Eligible Individuals and Allowable Uses of Funds), and the types of services provided using telehealth technology in the CDR. The information obtained in this module will assist HRSA in understanding how CARES Act RWHAP funding is being used to support RWHAP clients and immediate household members and ensure that HRSA is compliant with federal reporting requirements.

Likely Respondents: All RWHAP providers (e.g., recipients or subrecipients) who receive CARES Act RWHAP funding.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information; processing and maintaining information; and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

<table>
<thead>
<tr>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Total responses</th>
<th>Average burden per response (in hours)</th>
<th>Total burden hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDR Module</td>
<td>2,045</td>
<td>12</td>
<td>24,540</td>
<td>3.2</td>
<td>78,528</td>
</tr>
<tr>
<td>Total</td>
<td>2,045</td>
<td></td>
<td>24,540</td>
<td></td>
<td>78,528</td>
</tr>
</tbody>
</table>

HRSA specifically requests comments on (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.

Maria G. Button,
Director, Executive Secretariat.

[FR Doc. 2020–25219 Filed 11–13–20; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the National Vaccine Advisory Committee

AGENCY: Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) is hereby giving notice that the National Vaccine Advisory Committee (NVAC) will hold a virtual meeting. The meeting will be open to the public and public comment will be heard during the meeting.

DATES: The meeting will be held December 4, 2020. The confirmed meeting times and agenda will be posted on the NVAC website at http://www.hhs.gov/nvpo/nvac/meetings/index.html as soon as they become available.

ADDRESSES: Instructions regarding attending this meeting will be posted online at: http://www.hhs.gov/nvpo/nvac/meetings/index.html at least one week prior to the meeting. Pre-registration is required for those who wish to attend the meeting or participate in public comment. Please register at http://www.hhs.gov/nvpo/nvac/meetings/index.html.


SUPPLEMENTARY INFORMATION: Pursuant to Section 2101 of the Public Health Service Act (42 U.S.C. 300aa–1), the Secretary of HHS was mandated to establish the National Vaccine Program to achieve optimal prevention of human infectious diseases through immunization and to achieve optimal prevention against adverse reactions to vaccines. The NVAC was established to provide advice and make recommendations to the Director of the National Vaccine Program on matters related to the Program’s responsibilities. The Assistant Secretary for Health serves as Director of the National Vaccine Program.

During this NVAC meeting, NVAC will hear presentations to support the recent charge from Admiral Brett P. Giroir, MD, the Assistant Secretary for Health and Director of the National Vaccine Program, and respond to the following question: The FDA standards for approval and licensure of vaccines for COVID–19 addresses safety and effectiveness and encourages inclusion of minorities, the elderly, pregnant women, and people with medical comorbidities in clinical trials. In particular, for COVID–19 vaccines, I am interested in the approach the nation should take in regard to vaccination of children, given that there will be relatively little data on children from some of the early clinical trials? As context, the case fatality rate for children under age 18 is .02%, What is the appropriate approach, and timing, of generating the needed data and proceeding to potential childhood vaccination as we move forward? The NVAC will also review a draft report of the response to the full charge. Please note that agenda items are subject to change, as priorities dictate. Information on the final meeting agenda will be posted prior to the meeting on the NVAC website: http://www.hhs.gov/nvpo/nvac/index.html.

Members of the public will have the opportunity to provide comment at the NVAC meeting during the public comment period designated on the agenda. Public comments made during the meeting will be limited to three
Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the Muscular Dystrophy Coordinating Committee (MDCC).

The meeting will be open to the public. Individuals who plan to participate and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

Name of Committee: Muscular Dystrophy Coordinating Committee.

Date: December 16, 2020.

Time: 1:00 p.m. to 4:00 p.m.

Agenda: The purpose of this meeting is to bring together committee members, representing government agencies, patient advocacy groups, other voluntary health organizations, and patients and their families to update one another on progress relevant to the Action Plan for the Muscular Dystrophies and to coordinate activities and discuss gaps and opportunities leading to better understanding of the muscular dystrophies, advances in treatments, and improvements in patients’ and their families’ lives. The agenda for this meeting is available on the MDCC website: https://www.mdcc.nih.gov/

Meetings_Events/december-16-2020.

Registration: To register, please go to: https://roseliaassociates.zoomgov.com/webinar/register/WN_ztxgOE-mQPKTSwC3XWyk1w.

Webcast Live: https://videocast.nih.gov/

Place: National Institutes of Health, Neuroscience Center, 6001 Executive Blvd., Bethesda, MD 20892, (Virtual Meeting).

Contact Person: Glen Nuckolls, Ph.D., Program Director, National Institute of Neurological Disorders and Stroke (NINDS), NIH, 6001 Executive Blvd., Rm 2203, Bethesda, MD 20892, 301–496–5876, MDCC@nih.gov.

Any interested person may file written comments with the committee by forwarding written comments to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

More information can be found on the Muscular Dystrophy Coordinating Committee home page: https://mdcc.nih.gov/.