obtaining a User ID. Such providers can also access DIRS under e-filing on the Commission's main webpage or on the PSHSB Web page.

When this disaster data collection system is activated in response to a crisis, all contacts in DIRS will be sent an e-mail letting them know the disaster area and the communications providers that are requested to provide data on the status of their communications equipment.

Federal Communications Commission.

#### Derek K. Poarch,

Bureau Chief, Public Safety and Homeland Security Bureau.

[FR Doc. E7–18296 Filed 9–14–07; 8:45 am] BILLING CODE 6712–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Agency for Healthcare Research and Quality, Department of Health and Human Services.

**ACTION:** Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) re-authorize the information collection project "AHRQ Grants Reporting System (GRS)." In accordance with the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)), AHRQ invites the public to comment on this proposed information collection.

**DATES:** Comments on this notice must be received by November 16, 2007.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850, or by e-mail at doris.lefkowitz@ahrq.hhs.gov.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from AHRQ's Reports Clearance Officer. FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ, Reports Clearance Officer, (301) 427–1477. SUPPLEMENTARY INFORMATION:

#### **Proposed Project**

"AHRQ Grants Reporting System (GRS)"

AHRQ has identified the need to establish a systematic method for its grantees to report project progress and important preliminary findings for grants funded by the Agency. The proposed system will address the shortfalls in the current reporting process and establish a consistent and comprehensive grants reporting solution for AHRQ. Currently, AHRQ receives grants continuation applications on an annual basis from all grantees. The progress report, which represents a portion of the annual continuation application, is inadequate because it is too infrequent and does not necessarily capture the information that AHRQ requires to respond to internal and external inquiries.

The reporting system will also provide a centralized repository of grants research information that can be used to support initiatives within the Agency's research plans for the future and to support activities such as performance monitoring, budgeting, knowledge transfer as well as strategic planning.

AHRQ currently conduct quarterly conference calls with some grantees. The content, frequency, and focus of these calls vary. In some grant programs, the number of participants on these calls may be so large as to prohibit quarterly updates from all participants in order to avoid creating an extremely lengthy conference call and to allow the Agency to address other important issues during these calls.

The GRS will support the timely collection of important information related to the life cycle of a grant. This information includes: significant changes in project goals, methods, study design, sample or subjects, interventions, evaluation, dissemination, training, key personnel, key preliminary findings; significant problems and resolutions; publications and presentations; tools and products; and new collaborations/partnerships with AHRQ grantees or others conducting related research. Collecting

this information in a systematic manner will:

- Promote the transfer of critical information more frequently and efficiently which will enhance the Agency's ability to support research designed to improve the outcomes and quality of health care, reduce its costs, and broaden access to effective services.
- Increase the efficiency of the Agency in responding to ad-hoc information requests, Freedom of Information Act requests, and producing responses related to federally mandated programs and regulations.
- Establish a consistent approach throughout the Agency for information collection about grant progress and a systematic basis for oversight and for facilitating potential collaboration with or among grantees.
- Decrease the inconvenience and burden on grantees of unanticipated adhoc requests for information by the Agency in response to particular (onetime) internal and external requests for information.

This project was previously approved by OMB on 11/10/2004. The OMB control number is 0935–0122 and will expire on 11/30/2007.

#### **Data Confidentiality Provisions**

Confidential commercial information will be protected in accordance with 18 U.S.C. 1905. Information about Principal Investigators will be maintained in accordance with the Privacy Act, 5 U.S.C. 552a. Also, individuals and organizations will be assured of the confidentiality of their data under Section 934(c) of the Healthcare Research and Quality Act of 1999. The submitted reports will be printed and included in the official file for each grant. All of these files will be retained according to existing agency policies and procedures and archived as required.

The data will be collected using a Web based reporting interface developed specifically for the purpose of collecting information quarterly. To reduce burden and to the extent possible, these forms will be prepopulated with reoccurring information needed to specifically identify the institution, project, principal investigator, and other similar information.

#### ESTIMATED ANNUAL RESPONDENT BURDEN

Survey	Number of respondents *	Estimated time per respondent in minutes	Estimated total burden hours
1st Quarter	500	10	83.33

#### ESTIMATED ANNUAL RESPONDENT BURDEN—Continued

Survey	Number of respondents *	Estimated time per respondent in minutes	Estimated total burden hours
2nd Quarter	500 500	10 10	83.33 83.33
Annual Total	1500		250

<sup>\*</sup>The estimate for number of respondents for the initial implementation is 100 per quarter. The estimate included in the table assumes wider implementation by the Agency.

### **Estimated Annual Costs to the Federal Government**

The annual cost to the government is \$100,000 for licensing, support and maintenance.

#### **Request for Comments**

In accordance with the above-cited Paperwork Reduction Act legislation, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) 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 upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

#### Carolyn M. Clancy,

Director.

[FR Doc. 07–4577 Filed 9–14–07; 8:45 am] BILLING CODE 4160–90–M

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Healthcare Research and Quality

#### **Notice of Meetings**

In accordance with section 10(d) of the Federal Advisory Committee Act as amended (5 U.S.C., Appendix 2), the Agency for Healthcare Research and Quality (AHRQ) announces meetings of scientific peer review groups. The subcommittees listed below are part of the Agency's Health Services Research Initial Review Group Committee.

The subcommittee meetings will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C. 552b (c)(6). Grant applications are to be reviewed and discussed at these meetings. These discussions are likely to involve information concerning individuals associated with the applications, including assessments of their personal qualifications to conduct their proposed projects. This information is exempt from mandatory disclosure under the above-cited statutes.

1. Name of Subcommittee: Health Systems Research.

Date: October 18, 2007 (Open from 8 a.m. to 8:15 a.m. on October 18 and closed for remainder of the meeting).

Place: Agency for Healthcare Research and Quality (AHRQ), John Eisenberg Conference Center, 540 Gaither Road, Rockville, Maryland 20850.

2. Name of Šubcommittee: Health Care Research Training.

Date: October 18–19, 2007 (Open from 9 a.m. to 9:15 a.m. on October 18 and closed for remainder of the meeting).

Place: Agency for Healthcare Research and Quality (AHRQ), John Eisenberg Conference Center, 540 Gaither Road, Rockville, Maryland 20850.

3. Name of Subcommittee: Health Care Quality and Effectiveness Research.

Date: October 24, 2007 (Open from 8 a.m. to 8:15 a.m. on October 24 and closed for remainder of the meeting).

Place: Agency for Healthcare Research and Quality (AHRQ), John Eisenberg Conference Center, 540 Gaither Road, Rockville, Maryland 20850.

4. Name of Subcommittee: Health Care Technology and Decision Sciences.

Date: October 25–26, 2007 (Open from 8 a.m. to 8:15 a.m. on October 25 and closed for remainder of the meeting).

Place: Agency for Healthcare Research and Quality (AHRQ), John Eisenberg Conference Center, 540 Gaither Road, Rockville, Maryland 20850. Contact Person: Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of the meetings should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Extramural Research, Education and Priority Populations, AHRQ, 540 Gaither Road, Suite 2000, Rockville, Maryland 20850, Telephone (301) 427–1554.

Agenda items for these meetings are subject to change as priorities dictate.

#### Carolyn M. Clancy,

Director.

[FR Doc. 07–4576 Filed 9–14–07; 8:45 am]

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day-07-07AD]

# Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

#### **Proposed Project**

Formative Research to Inform an HIV Testing Social Marketing Campaign for African American Heterosexual Men—New collection—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Coordinating Center for Infectious Diseases (CCID), Centers for Disease Control and Prevention (CDC).