activities, pursuant to section 225.28(b)(7)(i).

Board of Governors of the Federal Reserve System, February 24, 2012.

Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. 2012–4815 Filed 2–28–12; 8:45 am] BILLING CODE 6210–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-0382; 30day 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, email 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: Evaluation of Pregnancy Prevention Approaches: Follow-Up Data Collection—Revision— OMB No. 0990–0382—Office of Adolescent Health.

Abstract: The Office of Adolescent Health (OAH), Office of the Assistant Secretary for Health (OASH), U.S. Department of Health and Human Services (HHS), is requesting approval by OMB on a revised data collection. OAH is overseeing and coordinating adolescent pregnancy prevention evaluation efforts as part of the Teen Pregnancy Prevention Initiative. OAH is working collaboratively with the Office of the Assistant Secretary for Planning and Evaluation (ASPE), the Centers for

ESTIMATED ANNUALIZED BURDEN TABLE

Disease Control and Prevention (CDC), and the Administration for Children and Families (ACF) on adolescent pregnancy prevention evaluation activities.

OAH is overseeing the Pregnancy Prevention Approaches Evaluation (PPA). The PPA Evaluation is a random assignment evaluation, which will expand available evidence on effective ways to reduce teen pregnancy. The evaluation will document and test a range of pregnancy prevention approaches in up to seven program sites. The findings from this evaluation will be of interest to the general public, to policy-makers, and to organizations interested in teen pregnancy prevention.

OAH is proposing a data collection activity as part of the PPA Evaluation. The proposed activity involves the collection of follow-up data from a selfadministered questionnaire, which will be analyzed to determine program effects. Through a survey instrument, respondents will be asked to answer carefully selected questions about demographics and risk and protective factors related to teen pregnancy. Respondents: The data will be collected through private, phone-administered questionnaires with study participants, i.e. adolescents assigned to a select school or community teen pregnancy prevention program or control group. Trained professional staff will administer a paper and pencil survey over the phone.

Site/program	Type of respondent			Annualized number respondents	Number of responses per respondent	Average burden hours per response (fraction of an hour)	Total burden hours (annual)
Chicago Public Schools/Health Teacher. OhioHealth/T.O.P.P.:	Participating Youth Group Youth.	and	Control	1308	1	36/60	785
6 months	Participating Youth Group Youth.	and	Control	170	1	42/60	119
18 months	Participating Youth Group Youth.	and	Control	164	1	42/60	115
Children's Hospital of Los Angeles/ Project AIM. Oklahoma Institute of Child Advo- cacy/Power Through Choices:	Participating Youth Group Youth.	and	Control	453	1	36/60	272
Immediate post-test	Participating Youth Group Youth.	and	Control	306	1	36/60	184
6 month follow-up	Participating Youth Group Youth.	and	Control	306	1	36/60	184
EngenderHealth	Participating Youth Group Youth.	and	Control	319	1	36/60	191
Live the Life Ministries/WAIT Train- ing.	Participating Youth Group Youth.	and	Control	453	1	42/60	317
Princeton Center for Leadership Training (PCLT)/TeenPEP.	Participating Youth Group Youth.	and	Control	453	1	36/60	272
Total				3,932* (2,012)			2,439* (1,286)

Site/program	Type of respondent	Annualized number respondents	Number of responses per respondent	Average burden hours per response (fraction of an hour)	Total burden hours (annual)						
Second Follow-up											
Chicago Public Schools/Health Teacher.	Participating Youth and Group Youth.	Control	1231	1	36/60	739					
OhioHealth/T.O.P.P.	Participating Youth and Group Youth.	Control	160	1	42/60	112					
Children's Hospital of Los Angeles/ Project AIM.	Participating Youth and Group Youth.	Control	427	1	36/60	256					
Oklahoma Institute of Child Advo- cacy/Power Through Choices.	Participating Youth and Group Youth.	Control	288	1	36/60	173					
Engender Health/Gender Matters	Participating Youth and Group Youth.	Control	300	1	36/60	180					
Live the Life Ministries/WAIT Train- ing.	Participating Youth and Group Youth.	Control	427	1	42/60	299					
Princeton Center for Leadership Training (PCLT)/TeenPEP.	Participating Youth and Group Youth.	Control	427	1	36/60	256					
Total			3,260			2,015					

ESTIMATED ANNUALIZED BURDEN TABLE—Continued

* Includes estimates for Chicago and Oklahoma (n = 1920; hours = 1153), which were included in a previous submission (approval received September 27, 2011).

Keith A. Tucker,

Office of the Secretary, Paperwork Reduction Act Clearance Officer. [FR Doc. 2012–4830 Filed 2–28–12; 8:45 am]

BILLING CODE 4150-30-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Notice of Committee Meetings, President's Committee for People With Intellectual Disabilities (PCPID)

AGENCY: President's Committee for People with Intellectual Disabilities, ACF, HHS.

ACTION: Notice of Committee Meetings.

DATES: Friday, April 6, 2012, from 1 p.m. to 2:30 p.m. EST, via audio conferencing. Thursday, May 17, 2012, from 8 a.m. to 5 p.m.; and Friday, May 18, 2012 from 8:30 a.m. to 5 p.m. EST, face-to-face meeting. All meetings will be open to the public.

Details for public access to the April 6th Committee Conference Call are cited below:

Toll Free Dial-In Number: 888–989–0724.

Pass Code: 1939592.

ADDRESSES: The May 17th-18th PCPID Meeting will be held in Conference Room 505–A of the Hubert H. Humphrey Building, U.S. Department of Health and Human Services, 200 Independence Avenue SW., Washington, DC 20201. Individuals who would like to participate via conference call may do so by dialing 888–989– 0724, pass code: 1939592. Individuals whose full participation in the meeting will require special accommodations (e.g., sign language interpreting services, assistive listening devices, materials in alternative format such as large print or Braille) should notify PCPID Executive Administrative Assistant, Genevieve Swift, via email at

Edith.Swift@acf.hhs.gov, or via telephone at 202-619-0634. Special accommodations needed for the April 6th Committee Conference Call, must be received no later than Friday, March 30, 2012. Special accommodations needed for the May 17th–18th PCPID Meeting, must be received no later than Monday, May 7, 2012. PCPID will attempt to meet requests for accommodations made after that date, but cannot guarantee ability to grant requests received after this deadline. All meeting sites are barrier free, consistent with the Americans with Disabilities Act (ADA), and the Federal Advisory Committee Act (FACA).

Agenda: Discussion plans for developing the PCPID 2012 Report to the President.

Additional Information: For further information, please contact Laverdia Taylor Roach, Senior Advisor, President's Committee for People with Intellectual Disabilities, The Aerospace Center, Second Floor West, 370 L'Enfant Promenade SW., Washington, DC 20447. Telephone: 202–619–0634. Fax: 202– 205–9519. Email: Laverdia.Roach@acf.hhs.gov.

SUPPLEMENTARY INFORMATION: PCPID

acts in an advisory capacity to the President and the Secretary of Health and Human Services, through the Administration on Developmental Disabilities, on a broad range of topics relating to programs, services, and supports for persons with intellectual disabilities. The PCPID Executive Order stipulates that the Committee shall: (1) Provide such advice concerning intellectual disabilities as the President or the Secretary of Health and Human Services may request; and (2) provide advice to the President concerning the following for people with intellectual disabilities: (a) Expansion of educational opportunities; (b) promotion of homeownership; (c) assurance of workplace integration; (d) improvement of transportation options; (e) expansion of full access to community living; and (f) increasing access to assistive and universally designed technologies.

Dated: February 22, 2012.

Jamie Kendall,

Deputy Commissioner, Administration on Developmental Disabilities. [FR Doc. 2012–4829 Filed 2–28–12; 8:45 am]

BILLING CODE 4184-01-P