Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Purpose: This council advises and makes recommendations to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the elimination of tuberculosis. Specifically, the Council makes recommendations regarding policies, strategies, objectives, and priorities; addresses the development and application of new technologies; and reviews the extent to which progress has been made toward eliminating tuberculosis.

Matters To Be Discussed: Agenda items include issues pertaining to comprehensive assessment of available TB laboratory services; National Institutes of Health and Centers for Disease Control and Prevention integrated TB research; aberration detection response using genotyping database for outbreaks and other related tuberculosis issues. Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Margie Scott-Cseh, Coordinating Center for Infectious Diseases, Strategic Business Unit, 1600 Clifton Road, NE., M/S E–07, Atlanta, Georgia 30333, telephone (404) 639–8317. The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** Notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: December 31, 2008.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E9–88 Filed 1–7–09; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Board of Scientific Counselors, National Center for Injury Prevention and Control, (BSC, NCIPC)

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act (Pub. L.92–463), the Centers for Disease Control and Prevention (CDC) announces, the following meeting of the aforementioned committee:

Times and Dates:

- 10 a.m.–6:30 p.m., January 26, 2009. 8:30 a.m.–2:30 p.m., January 27, 2009.
- Place: CDC, 4770 Buford Hwy., NE.,
- Building 106, First Floor, Rooms 1A and 1B, Atlanta, Georgia 30341.
- Status: Open: 10 a.m.–4:30 p.m., January 26, 2009.

Closed: 4:35 p.m.–6:30 p.m., January 26, 2009.

Open: 8:30 a.m.–2:30 p.m., January 27, 2009.

Purpose: The board makes recommendations regarding policies, strategies, objectives, and priorities, and reviews progress toward injury prevention goals and provides evidence in injury prevention-related research and programs. The board provides advice on the appropriate balance of intramural and extramural research, and provides advice on the structure, progress and performance of intramural programs. The board is also designed to provide guidance on extramural scientific program matters, including the: (1) Review of extramural research concepts for funding opportunity announcements; (2) conduct of secondary peer review of extramural research grants, cooperative agreements, and contracts applications received in response to the funding opportunity announcements as it relates to the Center's programmatic balance and mission; (3) submission of secondary review recommendations to the Center Director of applications to be considered for funding support; (4) review of research portfolios, and (5) review of program proposals. The board shall provide guidance on the National Center of Injury Prevention and Control's programs and research activities by conducting scientific peer review of intramural research and programs within the National Center for Injury Prevention and Control; by ensuring adherence to Office of Management and Budget requirements for intramural peer review; and by monitoring the overall direction, focus, and success of the National Center for Injury Prevention and Control

Matters To Be Discussed: As this is the initial meeting of the Board of Scientific Counselors, they will receive an overview of the mission of the National Center for Injury Prevention and Control. The meeting will include the review, discussion, and evaluation of center grants received in response to one Fiscal Year 2009 FOA.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Dr. Gwen Cattledge, Ph.D., Executive Secretary, NCIPC, CDC, 4770 Buford Highway, NE., Mailstop F–63, Atlanta, Georgia 30341, Telephone (770) 488–4655. The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: December 24, 2008.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E9-89 Filed 1-7-09; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Subcommittee for Dose Reconstruction Reviews (SDRR), Advisory Board on Radiation and Worker Health (ABRWH), National Institute for Occupational Safety and Health (NIOSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting for the aforementioned subcommittee:

Time and Date: 9:30 a.m.–5 p.m., January 29, 2009.

Place: Cincinnati Airport Marriott, 2395 Progress Drive, Hebron, Kentucky 41018. Telephone (859) 334–4611, Fax (859) 334– 4619.

Status: Open to the public, but without a public comment period. To access by conference call, dial the following information 1 (866) 659–0537, Participant Pass Code 9933701.

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines that have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2009.

Purpose: The Advisory Board is charged with (a) Providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class. The Subcommittee for Dose Reconstruction Reviews was established to aid the Advisory Board in carrying out its duty to advise the Secretary, HHS, on dose reconstruction.

Matters To Be Discussed: The agenda for the Subcommittee meeting includes: A discussion of cases under review from the 6th, 7th, and 8th sets of individual dose reconstructions; preparation of a letter report on the first 100 dose reconstruction cases reviewed; the selection of an 11th set of dose reconstructions for review; discussion of selection criteria and review rate for 2009; and an update on site-specific dose reconstruction guidelines.

The agenda is subject to change as priorities dictate.

In the event an individual cannot attend, written comments may be submitted. Any written comments received will be provided at the meeting and should be submitted to the contact person below well in advance of the meeting.

Contact Person for More Information: Theodore Katz, Executive Secretary, NIOSH, CDC, 1600 Clifton Road, Mailstop E–20, Atlanta, GA 30333, Telephone (513) 533– 6800, Toll Free 1 (800) CDC–INFO, e-mail ocas@cdc.gov.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: December 31, 2008.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E9–90 Filed 1–7–09; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Mentoring Children of Prisoners Relationship Quality Survey.

OMB No.: 0970–0308.

Description: The Promoting Safe and Stable Families Amendments of 2001 (Pub. L. 107-133) amended Title IV-B of the Social Security Act (42 U.S.C. 629-629e) to provide funding for nonprofit agencies that recruit, screen, train, and support mentors for children with an incarcerated parent or parents. The Family and Youth Services Bureau (FYSB) of the Administration for Children and Families, United States Department of Health and Human Services, administers the Mentoring Children of Prisoners (MCP) program. The MCP program creates lasting, highquality one-to-one mentoring relationships that provide young people with caring adult role models. The quality of these relationships is an important indicator of success in mentoring programs. Previous research has shown an association between highquality mentoring relationships and positive changes in youth behavior associated with positive youth benefits, such as improved school attendance, reductions in risk behavior, and other benefits.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Relationship Quality Instrument for Mentoring Children of Prisoners Pro- gram	215	1	116	24,940

Estimated Total Annual Burden Hours: 24,940.

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: January 5, 2009.

Janean Chambers,

Reports Clearance Officer. [FR Doc. E9–96 Filed 1–7–09; 8:45 am] BILLING CODE 4184–01–P

The Relationship Quality Instrument consists of 15 rigorously field-tested questions about the relationship, plus several questions that establish context (age, gender, duration of relationship and frequency of contacts, etc.). The answers to the questions help assess how satisfied the youth (mentee) is with the relationship; whether the mentee is happy in the relationship; whether the mentee trusts the mentor; and whether the mentor has helped the mentee to cope with problems. Researchers in the field of mentoring have tested and validated the questions.

FYSB requires grantees receiving funding to provide information that can be used to evaluate outcomes for participating children. FYSB will use the information provided by the instrument to assure effective service delivery and program management and to guide the development of national monitoring and technical assistance systems. Finally, FYSB will use data from this collection for reporting program outcomes to Congress in the FY 2006 Performance Report during the budget process and as the basis for outcome evaluation of the program over the long term.

Rhodes J., Reddy R., Roffman J., and Grossman J.B. (March 2005). Promoting Successful Youth Mentoring Relationships: A Preliminary Screening Questionnaire. The Journal of Primary Prevention, 26:2, 147–167.

Respondents: Public, community- and faith-based organizations receiving funding to implement the MCP program.