Instrument	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Section 3: Selection of Proposed Home Visiting Model(s) and Explanation of How the Model(s) Meet the Needs of Targeted Community(ies)	56	1	56	30	1,680
Section 4: Implementation Plan for Proposed State Home Visiting Program	56	1	56	60	3,360
Section 5: Plan for Meeting Legislatively-Mandated Benchmarks	56	1	56	60	3,360
Section 6: Plan for Administration of State Home Visiting Program	56	1	56	40	2,240
Section 7: Plan for Continuous Quality Improvement	56	1	56	20	1,120
Section 8: Technical Assistance Needs	56	1	56	1	56
Total	56				15,176

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by e-mail to *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974. Please direct all correspondence to the ''attention of the desk officer for HRSA.''

Dated: July 19, 2011.

Reva Harris,

Acting Director, Division of Policy and Information Coordination.

[FR Doc. 2011–18596 Filed 7–21–11; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Generic Clearance for Partners and Customer Satisfaction Surveys

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 Center for Scientific Review (CSR), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget for review and approval.

Proposed Collection: Title: Generic Clearance for Voluntary Partners and Customers Satisfaction Surveys: *Extension.*

The information collected in these surveys will be used by the Center for Scientific Review management and personnel: (1) To assess the quality of the modified operations and processes now used by CSR to review grant applications; (2) To assess the quality of service provided by CSR to our customers; (3) To enable identification of the most promising biomedical research that will have the greatest impact on improving public health by using a peer review process that is fair, unbiased from outside influence, timely, and (4) To develop new modes of operation based on customer need and customer feedback about the efficacy of implemented modifications. These surveys, which will be both quantitative and qualitative, are designed to assess the quality of services we provide to our major external customers. Customers include the research scientists who submit applications for grant funding to NIH. Those grant applications are reviewed and ranked by the grant scientific peer review study groups' members and chairs. These surveys will almost certainly lead to quality improvement activities that will enhance and/or streamline CSR's operations. Our partners include current grant scientific peer review study groups' members and chairs.

Frequency of Response: On occasion.

Affected Public: Scientific peer review study groups' members and chairs, grant applicants, other members of the research community.

Type of Respondents: Adult scientific professionals.

ESTIMATES OF ANNUALIZED HOUR BURDEN

[totals rounded off to the nearest hour]

Type of respondent	Number of respondents	Frequency of response	Average time per response (hr)	Total annual hour burden
Adult scientific professionals (via Mail/Telephone/Internet)	5000	1	0.25	1250
Adult scientific professional (via focus groups)	75	1	1	188
Total	5075	1		1438

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points:

(1) 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) 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) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to 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 George Chacko, PhD. Center for Scientific Review, NIH, Room 3030, 6701 Rockledge Drive, Bethesda, MD 20892–7776, or call non-toll-free number 301–435–1133 or e-mail your request, including your address to: *chackoge@csr.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 publication of the notice.

Dated: July 18, 2011.

George Chacko,

Director of Planning, Analysis, and Evaluation, Center for Scientific Review, National Institutes of Health.

[FR Doc. 2011–18617 Filed 7–21–11; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Cancer Institute Special Emphasis Panel, Childhood Cancer Survivor Study.

Date: July 28, 2011.

Time: 12 p.m. to 3 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6116 Executive Boulevard, Room 706, Rockville, MD 20852, (Teleconference).

Contact Person: Marvin L. Salin, PhD, Scientific Review Officer, Special Review and Logistics Branch, Division of Extramural Activities, National Cancer Institute, NIH, 6116 Executive Boulevard, Room 7073, Bethesda, MD 20892–8329, 301–496–0694, *msalin@mail.nih.gov.*

This notice is being published less than 15 days prior to the meeting due to scheduling conflicts.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: July 18, 2011.

Anna P. Snouffer,

Deputy Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2011–18566 Filed 7–21–11; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Announcement of Requirements and Registration for Using Public Data for Cancer Prevention and Control: From Innovation to Impact Developer Challenge

AGENCY: National Cancer Institute, National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Cancer Institute (NCI), Division of Cancer Control and Population Sciences (DCCPS), is announcing the launch of the *Using Public Data for Cancer Prevention and Control: From Innovation to Impact Developer Challenge.* This Challenge is sponsored by the NCI and is presented as part of the Office of the National Coordinator for Health Information Technology's Investing in Innovation (i2) program. This contest addresses the NCI DCCPS mission to disseminate information towards the prevention, early detection, diagnosis, and treatment and control of cancer. Specifically, the contest supports the detection, diagnosis, prevention, and treatment of cancer through the demonstration of new methods for the dissemination of information to the general public concerning the prevention, early detection, diagnosis, and treatment and control of cancer.

DATES: Important dates concerning the two phases of the Challenge include the following:

Phase I

Submission Period Begins: 12:01 a.m., EDT, July 20, 2011.

Submission Period for Initial Entries Ends: 11:59 p.m., EDT, August 26, 2011.

Judging Process for Finalists Begins: 12:01 a.m., EDT, August 27, 2011.

Judging Process for Finalists Ends: 11:59 p.m., EDT, September 1, 2011.

Finalist(s) notified: September 2, 2011.

Finalist Demos at Health 2.0 Conference: September 25–27, 2011.

Phase II

Final Submission Period Begins: 12:01 a.m., EDT, October 3, 2011.

Final Submission Period Ends: 11:59 p.m., EST, November 18, 2011.

Final Judging Process Begins: 12:01 a.m., EST, November 19, 2011.

Final Judging Process Ends: 11:59 p.m., EST, November 25, 2011.

Winner(s) notified: November 30, 2011.

Award Presentation at Hawaii International Conference on System Sciences (HICSS) Symposium: January 4, 2012.

FOR FURTHER INFORMATION CONTACT: Abdul R. Shaikh, PhD, MHSc, Program Director, Health Communication and Informatics Research Branch, BRP, DCCPS, National Cancer Institute, Phone: 301–594–6690.

SUPPLEMENTARY INFORMATION:

Subject of Challenge Competition

Entrants are asked to develop software applications (apps) that utilize the wide array of health-related data made available by the NCI DCCPS and other Federal agencies for innovative consumer health apps; these apps should potentially integrate with existing technology platforms and address targets comprising DCCPS priority areas on the continuum of cancer prevention and control: *http://cancercontrol.cancer.gov/od/index.html.* Entrants are required to address challenges faced by consumers, clinicians, or researchers such as behavior risk reduction for prevention/survivorship (*e.g.,* nutrition, physical activity, smoking cessation), early detection and screening, informed decision-making, and adherence to treatment regimens.

Eligibility Rules for Participating in the Competition

To be eligible to win a prize under this challenge, an individual or entity shall have complied with all the requirements under this section.

An individual or entity shall not be deemed ineligible because the individual or entity used Federal facilities or consulted with Federal employees during a competition if the facilities and employees are made available to all individuals and entities participating in the competition on an equitable basis.

This Challenge is open to any Contestant, defined as (1) an individual or team of U.S. citizens or permanent residents of the United States who are 13 years of age and over (with the permission of a parent/guardian if under 18 years of age), or (2) an entity