

Dated: September 29, 2011.

**Daniel Holcomb,**

*Reports Clearance Officer, Centers for Disease Control and Prevention.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-11-0805]

#### Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 or send comments to Daniel Holcomb, CDC Reports Clearance Officer, 1600 Clifton Road, MS D-74, Atlanta, GA 30333 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov).

*Comments are invited 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) 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 on respondents, including through the

use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

#### Proposed Project

Racial and Ethnic Approaches to Community Health (REACH) US Evaluation—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

In 2007, the Centers for Disease Control and Prevention (CDC) launched Racial and Ethnic Approaches to Community Health across the U.S. (REACH US), a national multilevel program to reduce and eliminate health disparities in racial and ethnic minorities. Priority populations for the program are African American, American Indian, Alaska Native, Hispanic American, Asian American, and Pacific Islander citizens. Each state or community funded through the REACH US program developed a community action plan building on the application, synthesis, and dissemination of promising community public health practices in one or more priority areas: Breast and cervical cancer; cardiovascular disease; diabetes mellitus; adult/older adult immunization, hepatitis B, and/or tuberculosis; asthma; and infant mortality. The program priority areas were selected based on statistical analysis of "excess deaths," which examined differences in minority health in relation to non-minority health and identified the specific health areas that accounted for the majority of the higher

annual proportion of minority deaths in the U.S.

As part of the REACH US evaluation plan, CDC sponsored household-based risk factor surveys in 2009, 2010, and 2011 (OMB No. 0920-0805, exp. 2/28/2012). Respondents were selected based on a unique address-based sampling approach that targets specific geographic areas across the country where REACH U.S. interventions have been implemented. The risk factor survey data allow CDC to track trends in community health in the areas where REACH U.S. interventions have been launched.

CDC is requesting OMB approval to conduct two additional cycles of data collection in 2012 and 2013. Risk factor surveys will be conducted in 28 REACH U.S. communities (900 individuals per community). After households have been selected through address-based sampling, health information will be collected through a self-administered, mailed questionnaire, or through interviews conducted by telephone or in-person with members of the selected households. The surveys will help to assess the prevalence of various risk factors associated with chronic diseases, deficits in breast and cervical cancer screening and management, and deficits in adult immunizations. Survey results will also be used to assess progress towards the national goal of eliminating health disparities within minority populations.

OMB approval is requested for two years. Minor changes to the survey questions will be implemented, and adjustments will be made to the estimated number of respondents. Respondents will be adults ages 18 years and older. Participation is voluntary and there are no costs to respondents except their time.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Members of REACH U.S. communities.	Screening Interview .....	14,700	1	3/60	735
	Household Member Interview .....	10,600	1	15/60	2,650
	REACH Study Booklet self-administered questionnaire.	24,300	1	15/60	6,075
Total .....	.....	.....	.....	.....	9,460

Dated: September 29, 2011.

**Daniel Holcomb,**

*Reports Clearance Officer, Centers for Disease Control and Prevention.*

[FR Doc. 2011-25755 Filed 10-5-11; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee on Childhood Lead Poisoning Prevention (ACCLPP)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the CDC, National Center for Environmental Health (NCEH) announces the following aforementioned committee meeting:

*Dates and times:*

November 14, 2011, 8:15 a.m.–5 p.m.

November 15, 2011, 9 a.m.–5 p.m.

November 16, 2011, 9 a.m.–12 p.m.

*Place:* The Westin Atlanta North at Perimeter, Seven Concourse Parkway, Atlanta, Georgia, (770) 395-3900

*Status:* This meeting is open to the public, limited only by the space available. The meeting room accommodates approximately 100 people. Opportunities will be provided during the meeting for oral comments.

*Purpose:* The Committee provides advice and guidance to the Secretary; the Assistant Secretary for Health; and the Director, CDC, regarding new scientific knowledge and their practical implications for childhood lead poisoning prevention efforts. The committee also reviews and reports regularly on childhood lead poisoning prevention practices and recommends improvements in national childhood lead poisoning prevention efforts.

*Matters To Be Discussed:* Agenda items will include the following: Healthy Homes and Childhood Lead Poisoning Prevention State Presentation; Federal agency updates; Advisory Committee on Childhood Lead Poisoning Prevention (ACCLPP) updates; Updates and recommendations from the Educational Intervention Workgroup, Laboratory Workgroup, Consumer Product Workgroup and the Blood Lead Level of Concern Workgroup.

Agenda items are subject to change as priorities dictate.

*For Further Information Contact:* Claudine Johnson, Program Operation Assistant or Nikki Walker, Healthy Homes and Lead Poisoning Prevention Branch, Division of Environmental Emergency Health Services, NCEH, CDC, 4770 Buford Hwy, NE., Mailstop F-60, Atlanta, GA 30341, telephone (770) 488-3629, Nikki Walker (770) 488-7225 fax (770) 488-3635.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: September 29, 2011.

**Elaine L. Baker,**

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

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee to the Director (ACD), Centers for Disease Control and Prevention (CDC)—Health Disparities Subcommittee (HDS)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), CDC announces the following meeting of the aforementioned subcommittee:

*Time and Date:* 9 a.m.–4 p.m., October 26, 2011.

*Place:* CDC, Thomas R. Harkin Global Communications Center, Room 117, 1600 Clifton Road, NE., Atlanta, Georgia 30333.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 25 people. The public is welcome to participate during the public comment period, which is tentatively scheduled from 3:30 p.m. to 4 p.m. This meeting is also available by teleconference. Please dial (877) 953-5019 and enter code 5280655.

*Purpose:* The Subcommittee will provide advice to the CDC Director through the ACD on strategic and other health disparities and health equity issues and provide guidance on opportunities for CDC.

*Matters To Be Discussed:* The agenda will include the following: (1) Discussion regarding increasing minority representation in public health through CDC's Minority Undergraduate Student Program; (2) briefing and discussion on social determinants of health.

The agenda is subject to change as priorities dictate.

*Contact Person for More Information:* Leandris Liburd, Ph.D., M.P.H., M.A., Designated Federal Officer, HDS, ACD, CDC, 1600 Clifton Road, NE., Mailstop E-67, Atlanta, Georgia 30333, Telephone: (404) 498-2320, E-mail: [LEL1@cdc.gov](mailto:LEL1@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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: September 30, 2011.

**Catherine Ramadei,**

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

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee to the Director (ACD), Centers for Disease Control and Prevention (CDC)**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), CDC announces the following meeting of the aforementioned committee.

*Time and date:* 8:30 a.m.–2:30 p.m., October 27, 2011.

*Place:* CDC, 1600 Clifton Road, NE., Building 21, Rooms 1204 A/B, Atlanta, GA 30333. This meeting is also available by teleconference. Please dial (877) 930-8819 and enter code 1579739.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people. To accommodate public participation in the meeting, a conference telephone line will be available. The public is welcome to participate during the public comment period. The public comment period is tentatively scheduled for 1:40 p.m. to 1:45 p.m.

*Purpose:* The committee will provide advice to the CDC Director on strategic and other broad issues facing CDC.

*Matters To Be Discussed:* The Advisory Committee to the Director will receive updates from the Global Workgroup; State, Tribal, Local and Territorial Workgroup; Surveillance and Epidemiology Workgroup; and the Communications Workgroup, as well as an update from the CDC Director.

Agenda items are subject to change as priorities dictate.

*Contact Person for More Information:* Carmen Villar, MSW, Designated Federal Officer, Advisory Committee to the Director, CDC, 1600 Clifton Road, NE., M/S D-14, Atlanta, Georgia 30333. Telephone 404/639-7000. E-mail: [GHickman@cdc.gov](mailto:GHickman@cdc.gov). The deadline for notification of attendance is October 21, 2011. To register for this meeting, please send an e-mail to [ACDDirector@cdc.gov](mailto:ACDDirector@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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.