

for Chronic Disease Prevention and Health Promotion (NCCDPHP); and implement a revised method of estimating burden. For the three awardees funded at the Basic level, the estimated burden for the initial data entry needed to populate the system is 6 hours. Thereafter, the estimated burden for system maintenance and annual reporting is 3 hours. For the 18 awardees funded at the Enhanced level, the estimated burden for the initial data entry needed to populate the system is 13 hours. Thereafter, the estimated burden for system maintenance and annual reporting is 9 hours. The revised

method provides a more accurate depiction of burden per respondent in comparison to the method presented in previous requests for OMB approval, which was based on a long-term average burden per response. A change in the frequency of reporting from semi-annual to annual occurred in 2013 and shall remain annual in the revised MIS. Even though reports will be submitted to CDC annually, states may enter updates into the MIS at any time.

The MIS will provide a central repository of information, such as work plans of the state oral health programs (their goals, objectives, performance milestones and indicators), as well as

state oral health performance activities including programmatic and financial information. CDC will use the information collected to monitor awardee activities and to provide any technical assistance or follow-up support that may be needed.

OMB approval is requested for three years. Participation in the progress reporting system is a condition of award for funded state oral health programs.

All information will be collected electronically and there are no costs to respondents other than their time.

The total estimated annualized burden hours are 255.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Program Awardees Basic Level .....	Initial MIS Population .....	1	1	6
	Annual Progress Report .....	3	1	3
Program Awardees Enhanced Level .....	Initial MIS Population .....	6	1	13
	Annual Progress Report .....	18	1	9

#### Leroy A. Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

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#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Centers for Disease Control and Prevention

[30Day-14-13AGS]

#### 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 (404) 639-7570 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, D.C. 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

#### Proposed Project

Prevention of Child Maltreatment through Policy Change—NEW—National Center for Injury Prevention

and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

The prevalence and consequences of child maltreatment (CM) make it a public health concern that requires early and effective prevention. Public policies can be critical in shaping every level of the social ecology, including individuals, families, and communities, and thus have the potential to play a key role in the prevention of CM. In order to protect children and youth and build an evidence-base of effective prevention strategies, evaluation of public policies are needed, including those policies currently being implemented. Policies related to family income (e.g., Temporary Assistance to Needy Families (TANF) eligibility and inroads to related services) were identified by CDC through the Division of Violence Prevention's Public Health Leadership Initiative policy analysis as those that are in need of rigorous evaluation.

CDC requests OMB approval for a period of 2 years in order to perform a data collection, which will provide data for a larger outcome evaluation that seeks to understand if county-administered policy strategies of the TANF program result in lower rates of CM and associated child welfare outcomes (e.g., time to adoption). The proposed data collection will include surveys and semi-structured interviews with state and county-level government employees and partners in Colorado to

address three primary aims: (1) To understand how a state policy allowing counties to administer TANF programs with flexibility contributes to county-level adoption of integrated welfare and child welfare service models; (2) to develop and refine an Implementation Index, which will quantify the degree of integration between welfare and child welfare services; and (3) to inform the larger outcome evaluation, which examines whether TANF policies and program supports reduce rates of CM when they are delivered in an integrated welfare and child welfare service model.

Understanding how service integration between TANF and child welfare affects CM may be very important to improving CDC's ability to devise and implement effective population-based prevention strategies.

Approximately 190 Colorado state and county employees and partners form the sample population. Specifically, state and county-level employees working in welfare and/or child welfare agencies will be invited to complete a brief survey and an hour-long semi-structured interview. Additionally, individuals employed by Allied Staff (e.g., Housing, Supplemental Nutrition Assistance Program, Medicaid, Child Care) and Partners of Child Welfare and Colorado Works will also be invited to complete an hour-long semi-structured interview.

There are no costs to respondents other than their time.

The total estimated annual burden hours are 111.

## ESTIMATED ANNUALIZED BURDEN

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs)
County Directors of Human Services .....	Survey of County TANF and Child Welfare Respondents.	9	1	15/60
	Interview of County Director of Human Services.	9	1	1
State Level Administrators .....	Survey of State Level Administrators .....	4	1	15/60
	Interview of State Level Administrator/Field Administrator.	4	1	1
Child Welfare/Colorado Works Leadership/Manager.	Survey of County TANF and Child Welfare Respondents.	18	1	15/60
	Interview of Child Welfare/Colorado Works Leadership/Manager.	18	1	1
Child Welfare Services and Colorado Works Case Manager, Caseworker, Technician, and Other Client-Serving Staff.	Survey of County TANF and Child Welfare Respondents.	27	1	15/60
	Interview of Child Welfare and Colorado Works Case Manager, Caseworker, Technician and Other Client-Serving Staff.	27	1	1
Allied Staff (e.g., Housing, Supplemental Nutrition Assistance Program, Medicaid, Child Care).	Interview of Allied Staff (e.g., Housing, Supplemental Nutrition Assistance Program, Medicaid, Child Care).	18	1	1
Partners of Child Welfare and Colorado Works.	Interview of Partners .....	14	1	1
County Data Manager .....	Survey of County TANF and Child Welfare Respondents.	5	1	15/60
	Interview of Data Managers .....	5	1	1

**Leroy A. Richardson,**  
Chief, Information Collection Review Office,  
Office of Scientific Integrity, Office of the  
Associate Director for Science, Office of the  
Director, Centers for Disease Control and  
Prevention.

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Initial Review

The meeting announced below concerns Grants for Injury Control Research Centers (Panel 2), Funding Opportunity Announcement (FOA) CE14-001, initial review.

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 aforementioned meeting:

#### Time and Date

8:30 a.m.–5:30 p.m. EST, April 15–16, 2014 (Closed)

Place: Georgian Terrace, 659 Peachtree Road NE., Room 5, Atlanta,

Georgia 30308. This meeting will also be held by teleconference.

**Status:** The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c) (4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

**Matters for Discussion:** The meeting will include the initial review, discussion, and evaluation of applications received in response to “Grants for Injury Control Research Centers, Panel 2, FOA CE14-001”.

#### Contact Person for More Information:

Donald Blackman, Ph.D., Scientific Review Officer, CDC, 4770 Buford Highway, NE., Mailstop F63, Atlanta, Georgia 30341, Telephone: (770)488-0641.

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.

**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

#### Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Initial Review

The meeting announced below concerns Pilot Interventions to Promote the Health of People with Blood Disorders, FOA DD14-003, Initial Review.

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 aforementioned meeting:

**Times and Dates:** 9:00 a.m.–6:00 p.m., April 8, 2014 (Closed); 9:00 a.m.–6:00 p.m., April 9, 2014 (Closed).

Place: Teleconference.