

approval under the PRA for the FDA food facility registration process (approved under OMB control number 0910-0502).

Dated: May 8, 2012.

**David Dorsey,**

*Acting Associate Commissioner for Policy and Planning.*

[FR Doc. 2012-11457 Filed 5-10-12; 8:45 am]

**BILLING CODE 4160-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Agency Information Collection Activities: Proposed Collection: Comment Request**

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or call the HRSA Reports Clearance Officer at (301) 443-1984.

Comments are invited on: (a) The proposed collection of information for the proper performance of the functions of the Agency; (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.

**Proposed Project: Maternal, Infant, and Early Childhood Home Visiting Program FY 2012 Non-Competing Continuation Progress Report (OMB No. 0915-xxxx)—[New] Activity Code: X02**

On March 23, 2010, the President signed into law the Patient Protection and Affordable Care Act (ACA). Section 2951 of the Act amended Title V of the Social Security Act by adding a new section, 511, which authorized the creation of the Maternal, Infant, and Early Childhood Home Visiting Program, ([http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111\\_cong\\_bills&docid=f:h3590enr.txt.pdf](http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_bills&docid=f:h3590enr.txt.pdf), pages 216-225). The Act responds to the diverse needs of children and families in communities at risk and provides an unprecedented opportunity for collaboration and partnership at the Federal, State, and community levels to improve health and development outcomes for at-risk children through evidence-based home visiting programs.

Under this program, \$125,000,000 was made available to States on a formula basis in both FY 2010 and 2011. This funding was awarded to support States in implementing their Updated State Plans. Additionally, a competitive funding opportunity announcement (FOA) was issued in June 2011 to allow interested States to apply for one of two possible grants: Development Grants and Expansion Grants. Development Grants are intended to support States and jurisdictions with modest evidence-based home visiting programs to expand the depth and scope of these efforts, with the intent to develop the infrastructure and capacity needed to seek an Expansion Grant in the future. Expansion Grants are intended to recognize States and jurisdictions that had already made significant progress towards a high-quality home visiting program or embedding their home visiting program into a comprehensive, high-quality early childhood system. Thirteen States were awarded Development Grants, and nine States were awarded Expansion Grants. State grantees of both competitive programs will need to complete non-competitive continuation (NCC) progress reports in order to secure the release of FY 2012 and out-year grant funds.

The MIECHV Program intends to make approximately \$125,000,000 in formula-based funds available to States and jurisdictions in FY 2012 subsequent to the completion of FY11 Progress Reports. The project period is 2 years.

The annual estimate of burden is as follows:

Instrument: A summary of the progress on the following activities	Number of respondents	Responses per respondent	Hours per response	Total burden hours
Accomplishments and Barriers .....	54	1	2	108
Program Goals and Objectives .....	54	1	8	432
Update on Evaluation Plan .....	54	1	4	216
Implementation in Targeted At-Risk Communities .....	54	1	24	1296
Progress on Benchmark Reporting .....	54	1	6	324
CQI efforts .....	54	1	4	216
Program Administration .....	54	1	4	216
<b>Total .....</b>	<b>54</b>	<b>.....</b>	<b>.....</b>	<b>2808</b>

Email comments to [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or mail the HRSA Reports Clearance Officer, Room 10-29, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: May 3, 2012.

**Reva Harris,**

*Acting Director, Division of Policy and Information Coordination.*

[FR Doc. 2012-11335 Filed 5-10-12; 8:45 am]

**BILLING CODE 4165-15-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Non-Competitive One-Year Extension With Funds for State Early Childhood Comprehensive Systems Grantees**

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice of a Non-Competitive One-Year Extension With Funds for State Early Childhood Comprehensive Systems (ECCS) (H–25) Grantees.

**SUMMARY:** The Health Resources and Services Administration (HRSA) will be issuing a non-competitive one-year extension with funds for the current grantees of the State Early Childhood Comprehensive Systems Program. Up to \$150,000 per grantee will be awarded over a one-year extended project period. The State Early Childhood Comprehensive Systems (ECCS) Grant Program ensures the healthy physical, social, and emotional development of children (birth to five years of age) by supporting statewide collaborations of early childhood service providers to

create a seamless system of early childhood services for young children and their families. Each ECCS grantee is an active member, and in some cases these grantees hold a leadership role in their early childhood multi-agency State teams. Together, such teams have developed Early Childhood Comprehensive Systems Plans that guide the development, implementation, governance, and financing of their States' early childhood service systems. The State team activities associated with these plans, and the comprehensive systems they describe, also include the identification and implementation of early childhood systems best-practice models, as well as the development of

human resources and policies to support these practices. This extension with funds will allow HRSA's Maternal and Child Health Bureau (MCHB) to align its early childhood systems-building activities with HRSA's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program, the State Advisory Councils (SACs) and other early childhood initiatives under the Administration for Children and Families (ACF), the Substance Abuse and Mental Health Services Administration's (SAMHSA) Project LAUNCH, and the Department of Education's Race to the Top (RTT).

**SUPPLEMENTARY INFORMATION:** Grantees of record and intended award amounts are:

Grantee organization name	Grant No.	State	FY2011 authorized funding level	FY2012 estimated funding level
Alabama department of public health .....	H25MC00238C0	AL	\$150,000.00	\$150,000.00
Arizona Early Childhood Development and Health Board .....	H25MC17140A0	AZ	150,000.00	150,000.00
Arkansas Department of Health .....	H25MC00265C0	AR	150,000.00	150,000.00
California Department of Public Health .....	H25MC08762B0	CA	150,000.00	150,000.00
Colorado State Department/Public Health & Environment .....	H25MC00228C0	CO	150,000.00	150,000.00
Commonwealth of the Northern Mariana Islands .....	H25MC06112B0	MP	150,000.00	150,000.00
Delaware Health & Social Services .....	H25MC00253C0	DE	150,000.00	150,000.00
District of Columbia/Department of Health .....	H25MC00241C0	DC	150,000.00	150,000.00
Florida State Department of Health .....	H25MC01320C0	FL	150,000.00	150,000.00
Georgia Department of Community Health .....	H25MC16260A0	GA	150,000.00	150,000.00
Idaho State Department of Health and Welfare .....	H25MC00245C0	ID	150,000.00	150,000.00
Illinois Department of Human Services .....	H25MC00247C0	IL	150,000.00	150,000.00
Indiana State Department of Health .....	H25MC00263C0	IN	150,000.00	150,000.00
Iowa Department of Public Health .....	H25MC00230C0	IA	150,000.00	150,000.00
Kansas State Department of Health and Environment .....	H25MC00234C0	KS	150,000.00	150,000.00
Kentucky Cabinet for Health Services .....	H25MC00255C0	KY	150,000.00	150,000.00
Louisiana State Department of Health & Hospitals .....	H25MC00271C0	LA	150,000.00	150,000.00
Maine Department of Human Services .....	H25MC00266C0	ME	150,000.00	150,000.00
Maryland Department of Health & Mental Hygiene .....	H25MC00273C0	MD	150,000.00	150,000.00
Massachusetts Department of Public Health .....	H25MC00262C0	MA	150,000.00	150,000.00
Michigan Department of Community Health .....	H25MC00252C0	MI	150,000.00	150,000.00
Minnesota Department of Health .....	H25MC00276C0	MN	150,000.00	150,000.00
Missouri Department of Health .....	H25MC01327C0	MO	150,000.00	150,000.00
Montana Department of Public Health and Human Services .....	H25MC06098B0	MT	150,000.00	150,000.00
North Carolina Department of Health and Human Services .....	H25MC00259C0	NC	150,000.00	150,000.00
Nevada Department of Human Resources .....	H25MC00229C0	NV	150,000.00	150,000.00
New Jersey State Department of Health and Senior Services .....	H25MC00248C0	NJ	150,000.00	150,000.00
New Mexico State Department of Health .....	H25MC00236C0	NM	150,000.00	150,000.00
New York State Office of Children and Family Services .....	H25MC12970A0	NY	150,000.00	150,000.00
North Dakota State Department of Health .....	H25MC00237D0	ND	150,000.00	150,000.00
Oklahoma State Department of Health .....	H25MC01323C0	OK	150,000.00	150,000.00
Oregon State Department of Human Services .....	H25MC00269C0	OR	150,000.00	150,000.00
Puerto Rico Department of Health .....	H25MC00274C0	PR	150,000.00	150,000.00
Republic of Palau Bureau of Health Services .....	H25MC00277C0	PW	150,000.00	150,000.00
State of Alaska Department of Health & Social Services .....	H25MC01326C0	AK	150,000.00	150,000.00
State of Connecticut .....	H25MC01329C0	CT	150,000.00	150,000.00
State of Hawaii Department of Health .....	H25MC00278C0	HI	150,000.00	150,000.00
State of Nebraska .....	H25MC00240C0	NE	150,000.00	150,000.00
State of New Hampshire .....	H25MC00249C0	NH	150,000.00	150,000.00
State of Ohio-Department of Health .....	H25MC01324C0	OH	150,000.00	150,000.00
State of Rhode Island Department of Health .....	H25MC00270C0	RI	150,000.00	150,000.00
State of South Carolina .....	H25MC06113B0	SC	150,000.00	150,000.00
Tennessee State Department of Health .....	H25MC00260C0	TN	150,000.00	150,000.00
Texas Health & Human Services Commission .....	H25MC03383C0	TX	150,000.00	150,000.00
University of Guam .....	H25MC18121A0	GU	150,000.00	150,000.00
Utah Department of Health .....	H25MC00268C0	UT	150,000.00	150,000.00
Vermont State Department of Health .....	H25MC00235C0	VT	150,000.00	150,000.00
Virginia State Department of Health .....	H25MC00231C0	VA	150,000.00	150,000.00
Washington State Department of Health .....	H25MC00254C0	WA	150,000.00	150,000.00
West Virginia, Department of Health and Human Services .....	H25MC01328C0	WV	150,000.00	150,000.00

Grantee organization name	Grant No.	State	FY2011 authorized funding level	FY2012 estimated funding level
Wisconsin State Department of Health & Social Services .....	H25MC00232C0	WI	150,000.00	150,000.00
Wyoming State Department of Health .....	H25MC00256C0	WY	150,000.00	150,000.00

*Amount of the Award(s):* Up to \$150,000 per grantee over a one-year project period.

*CFDA Number:* 93.110.

*Current Project Period:* 6/1/2011 through 5/31/2012.

*Period of Supplemental Funding:* 6/1/2012 through 5/31/2013.

**Authority:** Title V, Section 501(a)(3) of the Social Security Act.

#### Justification

HRSA is extending funding for the ECCS grants by one year for the following reasons. MCHB has been working with leaders within HRSA involved in early childhood service systems, as well as with other early childhood experts and leaders in the field, to align its early childhood systems-building activities with early childhood investments within HRSA, including the MIECHV program, and with other Federal Government early childhood initiatives. HRSA/MCHB is focusing on the most efficient and effective use of funds to continue promoting coordinated, comprehensive early childhood systems and services for the Nation's children and families.

HRSA's MIECHV program funds evidence-based home visiting programs in 54 States and jurisdictions. Research shows that the success of such home visiting programs is dependent upon the kind of sound infrastructure that ECCS promotes and sustains. To ensure coordinated and non-duplicative HRSA program planning, as well as future early childhood systems programming, it is crucial to sustain MCHB's current systems development efforts under ECCS for one additional year while the next early childhood systems program is developed with input from stakeholders.

#### FOR FURTHER INFORMATION CONTACT:

Audrey Yowell, Maternal and Child Health Bureau, Health Resources and Services Administration, 5600 Fishers Lane, Room 10-86, Rockville, Maryland 20857 or email [ayowell@hrsa.gov](mailto:ayowell@hrsa.gov).

Dated: May 2, 2012.

**Mary K. Wakefield,**  
Administrator.

[FR Doc. 2012-11377 Filed 5-10-12; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Neurological Disorders and Stroke Notice of Closed Meetings

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 meetings.

The meetings 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 materials, 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 Institute of Neurological Disorders and Stroke Special Emphasis Panel, Center Core Grants.

*Date:* June 28, 2012.

*Time:* 8:00 a.m. to 6:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Churchill Hotel, 1914 Connecticut Avenue NW., Washington, DC 20009.

*Contact Person:* Richard D. Crosland, Ph.D., Scientific Review Officer, Scientific Review Branch, Division of Extramural Research, NINDS/NIH/DHHS, NSC, 6001 Executive Blvd., Suite 3208, MSC 9529, Bethesda, MD 20892-9529, 301-594-0635, [Rc218u@nih.gov](mailto:Rc218u@nih.gov).

*Name of Committee:* National Institute of Neurological Disorders and Stroke Initial Review Group, Neurological Sciences and Disorders B.

*Date:* June 28, 2012.

*Time:* 8:00 a.m. to 6:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Sir Francis Drake Hotel, 450 Powell Street at Sutter, San Francisco, CA 94102.

*Contact Person:* Birgit Neuhuber, Ph.D., Scientific Review Officer, Scientific Review Branch, Division of Extramural Research, NINDS/NIH/DHHS, NSC, 6001 Executive Blvd., Suite 3208, MSC 9529, Bethesda, MD 20892-9529, [neuhuber@ninds.nih.gov](mailto:neuhuber@ninds.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.853, Clinical Research Related to Neurological Disorders; 93.854, Biological Basis Research in the Neurosciences, National Institutes of Health, HHS)

Dated: May 4, 2012.

**Anna P. Snouffer,**

*Deputy Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 2012-11506 Filed 5-10-12; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Diabetes and Digestive and Kidney Diseases Notice of Closed Meetings

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 meetings.

The meetings 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 Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, NIDDK Ancillary R01 Telephone Review.

*Date:* June 13, 2012.

*Time:* 3:00 p.m. to 5:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).

*Contact Person:* Xiaodu Guo, MD, Ph.D., Scientific Review Officer, Review Branch, DEA, NIDDK, National Institutes of Health, Room 761, 6707 Democracy Boulevard, Bethesda, MD 20892-5452, (301) 594-4719, [guox@extra.niddk.nih.gov](mailto:guox@extra.niddk.nih.gov).

*Name of Committee:* National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, NIDDK Member Conflict Telephone SEP.

*Date:* June 22, 2012.

*Time:* 10:00 a.m. to 12:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).