about additional data collection activities to support this study.

DATES: Comments due August 26, 2024. The Office of Management and Budget (OMB) must make a decision about the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function. You can also obtain copies of the proposed collection of information by emailing *OPREinfocollection@acf.hhs.gov.* Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: Core components are the essential functions, principles, and elements that are judged as being necessary to produce positive outcomes. Fatherhood programs usually offer workshops and case management services for fathers to provide, for example, parenting strategies to strengthen their relationships with their children, help finding a steady job, skills to enhance their relationships, and support dealing with other life or family challenges they might experience. Five Fatherhood FIRE grant recipients are partnering with the Fatherhood TIES study team to participate in an implementation and impact study. The implementation study will examine how the core components are implemented and what fathers think of them. The impact study will rigorously evaluate whether promising core components bring about positive outcomes for fathers and their families which may include understanding effects of program engagement, economic stability, father-child relationship quality and co-parenting relationship quality.

Initial study (Phase 1) materials, including consent to participate in the study, additional baseline information from program participants, and initial implementation study data were approved and are in use by the study team. We are now requesting approval of Phase 2 data collection materials including semi-structured interviews, focus groups, and the participatory research methods of photo voice and audio journaling. Audio journaling and photo voice are participatory research methods that the study team will use with up to 60 fathers in total to generate information about how fathers are applying knowledge and skills gained through their participation in the fatherhood program.

Respondents: Fathers enrolled in the Fatherhood TIES study, co-parents of fathers enrolled, and program staff involved in supporting and implementing the Fatherhood TIES study.

Annual Burden Estimates

Data collection time frames vary by instrument. Instruments with a star (*) will be fielded in the first year. The follow-up survey is anticipated to continue into early 2027. Therefore, this request is for two and a half years of approval and annual burden estimates reflect this timeframe (total burden/2.5).

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Staff Interview (including consent) *	50	2	1	100	40
Co-Parent Interview (including consent) *	4	1	1	4	2
Father focus group (including consent) *	80	1	1	80	32
Photo Voice (collection + focus group + debrief) *	5	1	3.25	16	7
Audio Journaling (collection + debrief) *	55	1	1	55	22
Nine-month Follow-up survey	1369	1	0.75	1027	411
Photo Voice Training *	5	1	2	10	4
Audio Journaling Training *	55	1	0.5	28	11
Estimated Annual Burden Total					529

Authority: Section 413 of the Social Security Act, as amended by the fiscal year 2017 Consolidated Appropriations Act, 2017 (Pub. L. 115–31).

Mary C. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2024–16431 Filed 7–25–24; 8:45 am]

BILLING CODE 4184–73–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meeting of the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis, and STD Prevention and Treatment

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the Centers for Disease Control and Prevention (CDC)/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHAC) has scheduled a public meeting. Information about CHAC and the meeting can be found on the CHAC website at *https://www.cdc.gov/faca/committees/chachspt.html* and the meeting website at *https://targethiv.org/events/chac.*

DATES: October 21, 2024, 9 a.m. to 5 p.m. eastern time (ET) and October 22, 2024, 9 a.m. to 3 p.m. ET.

ADDRESSES: This meeting will be hybrid, held both virtually through Zoom and in-person at 5600 Fishers Lane in Rockville, Maryland, 20857. Advance registration is required to attend. Please visit the meeting website to register. Registration will open in August. The in-person registration deadline is

Monday, October 14, 2024, at 5 p.m. ET; registration for virtual attendance will remain open. Prior to the meeting, each individual registrant will receive a registration confirmation along with an access link to the virtual meeting location.

FOR FURTHER INFORMATION CONTACT: Breana Alsworth, Public Health Analyst, HIV/AIDS Bureau, HRSA, 5600 Fishers Lane, Rockville, Maryland 20857; (301) 443–1134; or *CHACAdvisoryComm@hrsa.gov.*

SUPPLEMENTARY INFORMATION: CHAC provides advice and recommendations to the Secretary of HHS on policy, program development, and other matters of significance concerning the activities under section 222 of the Public Health Service Act, 42 U.S.C. 217a.

The purpose of CHAC is to advise the Secretary of HHS, CDC Director, and HRSA Administrator regarding objectives, strategies, policies, and priorities for the prevention and treatment of HIV, viral hepatitis, and other STDs, including surveillance, epidemiologic, behavioral, health services, and laboratory research, identification of policy issues related to professional education, patient healthcare delivery, and prevention services; agency policies regarding health care delivery, research and training; strategic issues influencing the ability of CDC and HRSA to fulfill their missions' programmatic efforts to prevent and treat HIV, viral hepatitis, and other STDs; and support to CDC and HRSA in their development of responses to emerging health needs related to these issues.

During the October 21–22, 2024, meeting, CHAC will discuss issues related to re-engaging people with HIV out of care (including data-to-care strategies and overcoming barriers to care), the use of long-acting injectables for HIV care and treatment and increasing access to mental health services for people with HIV and STDs. Agenda items are subject to change as priorities dictate. Please refer to the CHAC meeting information page listed above for any updated meeting information.

Members of the public will have the opportunity to provide comments. Public participants may also submit written statements as further described below. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement or make oral comments to CHAC should be sent via the meeting website at *https://targethiv.org/events/chac* after registration has opened. Requests for oral comment must be received by October 11, 2024, at 5:00 p.m. ET to be considered. Written comments may be submitted to Breana Alsworth (*CHACAdvisoryComm@hrsa.gov*) prior to and up to 10 business days after the meeting. Visit the meeting information page for additional details: *https://targethiv.org/events/chac.*

Individuals who plan to attend and need special assistance or another reasonable accommodation should notify Breana Alsworth (*CHACAdvisoryComm@hrsa.gov*) at least 10 business days prior to the meeting. Since this meeting occurs in a Federal Government building, attendees must go through a security check to enter the building. Non-U.S. Citizen attendees must notify HRSA of their planned attendance at least 20 business days prior to the meeting to facilitate their entry into the building. All attendees are required to present government-issued identification prior to entry.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2024–16504 Filed 7–25–24; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Advisory Council on Alzheimer's Research, Care, and Services; Meeting

AGENCY: Assistant Secretary for Planning and Evaluation, HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces the public meeting of the Advisory Council on Alzheimer's Research, Care, and Services (Advisory Council). The Advisory Council provides advice on how to prevent or reduce the burden of Alzheimer's disease and related dementias (ADRD) on people with the disease and their caregivers. During the meeting, the Advisory Council subcommittees will present their recommendations for adoption by the full Advisory Council. Each subcommittee will discuss new developments in their area. The meeting will also include presentations on late-breaking findings from recent research conferences, an update on the CMMI GUIDE Model, and updates from federal agencies.

DATES: The meeting will be August 5, 2024, from 9:30 a.m. to 4:30 p.m.

ADDRESSES: The meeting will be a hybrid of in-person and virtual. The meeting will be held in the Great Hall of the Hubert H. Humphrey Building, 200 Independence Avenue SW, Washington, DC 20201. It will also stream live at *www.hhs.gov/live.*

Comments: Time is allocated on the agenda to hear public comments from 4 p.m. to 4:30 p.m. on Monday, August 5. The time for oral comments will be limited to two (2) minutes per individual. To provide a public comment, please register by emailing your name to *napa@hhs.gov* by Wednesday, July 31. Registered commenters will receive both a dial-in number and a link to join the meeting virtually; individuals will have the choice to either join virtually via the link, or to call in only by using the dial-in number. *Note:* There may be a 30–45 second delay in the livestream video presentation of the conference. For this reason, if you have pre-registered to submit a public comment, it is important to connect to the meeting by 3:45 p.m. to ensure that you do not miss your name and allotted time when called. If you miss your name and allotted time to speak, you may not be able to make your public comment. Public commenters will not be admitted to the virtual meeting before 3:30 p.m. but are encouraged to watch the meeting at *www.hhs.gov/live.* Should you have questions during the session, please email *napa@hhs.gov* and someone will respond to your message as quickly as possible.

To ensure accuracy, please submit a written copy of oral comments for the record by emailing *napa@hhs.gov* by Wednesday, August 7, 2024. These comments will be shared on the website and reflected in the meeting minutes.

In lieu of oral comments, formal written comments may be submitted for the record by Wednesday, August 7, 2024, to Helen Lamont, Ph.D., OASPE, 200 Independence Avenue SW, Room 424E, Washington, DC 20201. Comments may also be sent to *napa@hhs.gov.* Those submitting written comments should identify themselves and any relevant organizational affiliations.

FOR FURTHER INFORMATION CONTACT: Helen Lamont, 202–260–6075, *helen.lamont@hhs.gov. Note:* The meeting will be available to the public live at *www.hhs.gov/live.*

SUPPLEMENTARY INFORMATION: Notice of these meetings is given under the Federal Advisory Committee Act (5 U.S.C. app. 2, section 10(a)(1) and (a)(2)). Topics of the Meeting: Alzheimer's disease-related dementias, clinical care, long term care support services, research, risk reduction,