

ESTIMATED ANNUALIZED BURDEN TABLE—Continued

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Adolescent Revised BodyWorks program comparison group participant.	Adolescent Post test Questionnaire	204	1	30/60	102
	Adolescent Session Evaluation Forms (10 forms).	204	10	3/60	102
	Adolescent Pre test Questionnaire ..	63	1	30/60	32
	Adolescent Post test Questionnaire	50	1	30/60	25
Trainers of the Revised BodyWorks program.	Facilitator Feedback Forms (10 forms).	22	10	5/60	18
Coalition leaders, members, and site coordinators.	Coalition Pre test Survey .....	86	1	20/60	29
	Coalition Post test Survey .....	72	1	30/60	36
Total Hours .....	.....	.....	.....	.....	755

Dated: February 10, 2009.

**Seleda Perryman,**

*Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.*

[FR Doc. E9-3439 Filed 2-17-09; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Statement of Organization, Functions and Delegation of Authority

Notice is hereby given that I have delegated to the Director, Office of Family Assistance, the following authority vested in me by the Secretary of Health and Human Services in the memorandums dated August 20, 1991, Delegations of Authority for Social Security Act Programs and September 16, 1997, Delegations of Authority for the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193).

#### (a) Authority Delegated.

Authority under section 116 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 to take action related to the reimbursement of the federal share of overpayments that were recovered from former recipients of the Aid to Families with Dependent Children (AFDC) program.

#### (b) Limitations.

1. This delegation of authority shall be exercised under the Department's existing policies on delegations and regulations.

2. This delegation of authority excludes the authority to hold hearings.

3. Any redelegation shall be in writing and prompt notification must be provided to all affected managers,

supervisors, and other personnel, and requires the concurrence of the Deputy Assistant Secretary for Administration.

#### (c) Effect on Existing Delegations.

As related to the authorities delegated herein, this delegation of authority supersedes all previous delegations relating to the AFDC program delegated to OFA.

I hereby affirm and ratify any actions taken by the Director, Office of Family Assistance, which involved the exercise of the authorities delegated herein prior to the effective date of this delegation.

#### (d) Effective Date.

This delegation of authority is effective upon the date of signature.

Date signed: February 5, 2009.

**Daniel C. Schneider,**

*Acting Assistant Secretary for Children and Families.*

[FR Doc. E9-3458 Filed 2-17-09; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Analysis of Comments and Implementation of the NIH Public Access Policy

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

#### Background

The National Institutes of Health (NIH) Public Access Policy requires investigators funded by the NIH to submit, or have submitted for them, an electronic version of their final, peer-reviewed manuscripts upon acceptance for publication to the National Library of Medicine's digital archive, PubMed Central, to be posted publicly within 12

months after the official date of publication. Congress required the NIH to implement this funding limitation in Division G, Title II, Section 218 of the Consolidated Appropriations Act of 2008 ("Section 218"). The Policy is intended to advance science, provide public access to the published results of NIH-funded research, and improve human health.

The current Public Access Policy is the culmination of years of effort and community interaction. Prior to passage of Section 218, the NIH undertook extraordinary public outreach concerning the issue of public access to the published results of NIH-funded research. These outreach efforts included a review of over six thousand public comments and the establishment of an independent advisory group to review NIH's implementation of a voluntary Public Access Policy. Additionally, as part of the process to implement Section 218 in a transparent and participatory manner, the NIH formally sought public input through an open meeting and a Request for Information (RFI) seeking public comment. This open meeting occurred on March 20, 2008, and was designed to ensure that a discussion of stakeholder issues could occur. The feedback from the open meeting helped define questions for an RFI, which was published on the NIH Web site on March 28, 2008 and in the **Federal Register** on March 31, 2008 (73 FR 16881-16895). The RFI was designed to seek input on the NIH Public Access Policy, as it was revised to incorporate Section 218, and the responses to frequently asked questions (FAQs) concerning it. The RFI was open for sixty days following publication in the **Federal Register**, from March 28 to May 31, 2008.