

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Health Statistics: Notice of Sample Size Changes

AGENCY: Centers for Disease Control and Prevention, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, has provided statistics on the health of the American people for almost 50 years. Two of its preeminent surveys, the National Health Interview Survey and the National Health and Nutrition Examination Survey are at the half century mark. The quality of NCHS' statistical program is of critical concern to the Center. Data on sample design, data quality and estimation techniques are discussed in detail in NCHS reports and in the proposed data collections that are published in the **Federal Register** and submitted to the Office of

Management and Budget (OMB) for review and approval.

The timelines for preparing and submitting requests for OMB approval under the Paperwork Reduction Act and for the Federal Government's budget process often are not synchronized. Thus it is possible that a survey may receive OMB approval for collection of data from a certain number of respondents before the necessary resources have been appropriated in the federal budget. In all cases, the design of the survey allows for changes to the number of respondents without jeopardizing the representativeness of the weighted survey results. In addition, information on final sample sizes is included with each data release.

Over the last decade NCHS has made a number of program changes to stay within existing resources, including changes to survey design and sample size, in order to continue carrying out its mission and maintain its program quality. Three surveys have had or may have sample size reductions take place in FY 2009 and FY 2010. They are the National Health Interview Survey, the National Hospital Discharge Survey and

the National Health and Nutrition Examination Survey.

The National Health Interview Survey

The National Health Interview Survey (NHIS) is an in-person household-based survey. The sample design that was in place from 1995 through 2005 called for a sample of 39,000 households and 100,000 individuals. However, in 2002, 2003, and 2004, the sample was reduced on average to approximately 36,000 households and approximately 93,000 individuals.

The sample design implemented in 2006 called for a permanent one-eighth reduction in sample size. However, from 2006–2008, existing resources necessitated a further reduction in sample size down to about 29,000 households and about 76,000 individuals (see table below). The present plan is to reduce the 2009 NHIS to a sample size of about 17,000 households and 43,600 sample persons. All attempts will be made to reinstate the original sample design; however, final decisions on the implementation of the 2010 survey are contingent on available resources.

TABLE 1—COUNTS OF INTERVIEWED PERSONS AND HOUSEHOLDS IN THE 2000–2010 NHIS

| Year | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 expected | 2009 with a 50% cut | 2010 with a 50% cut |
|----------------------|---------|---------|--------|--------|--------|--------|--------|--------|------------------|---------------------------|---------------------------|
| No. of persons | 100,618 | 100,761 | 93,386 | 92,148 | 94,460 | 98,649 | 75,716 | 75,764 | 75,500 | 43,589 | 43,589 |
| No. of households | 38,633 | 38,932 | 36,161 | 35,921 | 36,579 | 38,509 | 29,204 | 29,266 | 29,000 | 16,848 | 16,848 |

The National Hospital Discharge Survey

The National Hospital Discharge Survey (NHDS) is an establishment-based survey of inpatients discharged from a nationally-representative sample of hospitals. It has been fielded continuously since 1965 with a planned redesign for 2010 pending the results of pretesting the new design elements. With existing resources, it was decided to reduce the sample size by approximately one-half for both hospitals and patients for 2008. Present plans are to finish data collection for the 2008 survey but not to field the 2009 survey. Decisions on the 2010 survey and the implementation of the redesign are contingent on available resources and the results of the pretest.

The National Health and Nutrition Examination Survey

The National Health and Nutrition Examination Survey (NHANES), a nationally-representative survey involving both an interview and physical examination, was first fielded

50 years ago (1959) as the National Health Examination Survey. Until 1999 NHANES was fielded periodically but is now in the field continuously. Specifically, the design now allows for nationally-representative data to be publicly released every two years. The current NHANES was designed to be collected over the four-year period 2007–2010. Data collection for 2007 and 2008 has been completed. With existing resources, NCHS is maintaining sample size and content for 2009; however capital improvements for FY2009 have been reduced. Final decisions on the implementation of the 2010 survey are contingent on available resources.

For Questions Contact: Jennifer H. Madans, PhD, Associate Director for Science, National Center for Health Statistics, 3311 Toledo Road, Room 7207, Hyattsville, MD 20782, e-mail: JMadans@cdc.gov.

Dated: February 9, 2009.

James D. Seligman,
Chief Information Officer, Centers for Disease Control and Prevention.

[FR Doc. E9–3797 Filed 2–20–09; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Court Improvement Program.
OMB No.: 0970–0245.

Description: The Court Improvement Program provides grants to State court systems to conduct assessments of their foster care and adoption laws and judicial processes and to develop and implement a plan for system improvement. ACF proposes to collect information from the States about this program (applications, program reports) by way of a Program Instruction, which

(1) describes the requirements for States under the reauthorization of the Court Improvement Program; (2) outlines the programmatic and fiscal provisions and reporting requirements of the program; (3) specifies the application submittal and approval procedures for the program for Fiscal Years 2007 through

2011; and (4) identifies technical resources for use by State courts during the course of the program. This Program Instruction contains information collection requirements pursuant to receiving a grant award that are found in Public Law 103–66, as amended by Public Law 105–89, Public Law 107–

133, Public Law 109–239, and Public Law 109–288. The agency will use the information received to ensure compliance with the statute and provide training and technical assistance to the grantees.

Respondents: State Courts.

ANNUAL BURDEN ESTIMATES

| Instrument | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|-----------------------------|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Application | 52 | 1 | 40 | 2,080 |
| Annual program report | 52 | 1 | 36 | 1,872 |

Estimated Total Annual Burden Hours: 3,952

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, *Attn:* ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. *E-mail address:* infocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning 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. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, *Fax:* 202–395–6974, *Attn:* Desk Officer for the Administration for Children and Families.

Dated: February 18, 2009.

Janean Chambers,

Reports Clearance Officer.

[FR Doc. E9–3760 Filed 2–20–09; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2009–N–0664]

Allergenic Products Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

Name of Committee: Allergenic Products Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on March 18, 2009, from 8 a.m. to approximately 12:30 p.m.

Location: Food and Drug Administration, Center for Drug Evaluation and Research, Advisory Committee Conference Room, rm. 1066, 5630 Fishers Lane, Rockville, MD.

Contact Person: Gail Dapolito or Jane Brown, Food and Drug Administration (HFM–71), 1401 Rockville Pike, Rockville, MD 20852, 301–827–0314, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 3014512388. Please call the Information Line for up-to-date information on this meeting. A notice in the **Federal Register** about last minute modifications that impact a previously announced advisory committee meeting cannot always be published quickly enough to provide timely notice. Therefore, you should always check the agency's Web site and call the appropriate advisory committee hot line/phone line to learn about possible modifications before coming to the meeting.

Agenda: On March 18, 2009, the committee will discuss (1) a proposed change of potency assay for short ragweed pollen and cat allergen extracts from radial immunodiffusion assay to an enzyme-linked immunosorbent assay and (2) structured product labeling. The committee will also receive an update on research programs in the Laboratory of Immunobiochemistry, Division of Bacterial, Parasitic and Allergenic

Products, Office of Vaccines Research and Review, Center for Biologics Evaluation and Research, FDA.

FDA intends to make background material available to the public no later than 2 business days before the meeting. If FDA is unable to post the background material on its Web site prior to the meeting, the background material will be made publicly available at the location of the advisory committee meeting, and the background material will be posted on FDA's Web site after the meeting. Background material is available at <http://www.fda.gov/ohrms/dockets/ac/acmenu.htm>, click on the year 2009 and scroll down to the appropriate advisory committee link.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person on or before March 11, 2009. Oral presentations from the public will be scheduled between approximately 10:45 a.m. and 11:45 a.m. Those desiring to make formal oral presentations should notify the contact person and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation on or before March 3, 2009. Time allotted for each presentation may be limited. If the number of registrants requesting to speak is greater than can be reasonably accommodated during the scheduled open public hearing session, FDA may conduct a lottery to determine the speakers for the scheduled open public hearing session. The contact person will notify interested persons regarding their request to speak by March 4, 2009.

Persons attending FDA's advisory committee meetings are advised that the