

before the start of the meeting. If you require a paper copy of the entire document, please call Penelope Beattie on 202–452–3982. The documentation will not be available to the public until about 20 minutes before the start of the meeting.

2. This meeting will be recorded for the benefit of those unable to attend. The webcast recording and a transcript of the meeting will be available after the meeting on the Board's website <http://www.federalreserve.gov/aboutthefed/boardmeetings/>.

**FOR MORE INFORMATION PLEASE CONTACT:** Michelle Smith, Director, or Dave Skidmore, Assistant to the Board, Office of Board Members at 202–452–2955.

**SUPPLEMENTARY INFORMATION:** You may access the Board's website at [www.federalreserve.gov](http://www.federalreserve.gov) for an electronic announcement. (The website also includes procedural and other information about the open meeting.)

Dated: January 23, 2020

**Ann Misback,**

*Secretary of the Board.*

[FR Doc. 2020–01468 Filed 1–23–20; 4:15 pm]

**BILLING CODE 6210–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Agency for Healthcare Research and Quality

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Agency for Healthcare Research and Quality, HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project “Evaluation of Patient-Centered Outcomes Research Trust Fund—Training Program.”

This proposed information collection was previously published in the **Federal Register** on December 13th, 2019 and allowed 60 days for public comment. AHRQ did not receive comments from members of the public. The purpose of this notice is to allow an additional 30 days for public comment.

**DATES:** Comments on this notice must be received by 30 days after date of publication.

**ADDRESSES:** Written comments should be submitted to: AHRQ's OMB Desk Officer by fax at (202) 395–6974

(attention: AHRQ's desk officer) or by email at [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) (attention: AHRQ's desk officer).

#### SUPPLEMENTARY INFORMATION:

##### Proposed Project

##### *Evaluation of Patient-Centered Outcomes Research Trust Fund—Training Program*

AHRQ Authorization To Provide Researcher Training in Comparative Effectiveness Research/Patient-Centered Outcomes Research (CER/PCOR) Methods

Section 6301(b) of the Patient Protection and Affordable Care Act, Public Law 111–148 (the “Affordable Care Act”), enacted section 937(e) of the Public Health Service Act (“PHS Act”), which authorizes AHRQ to build capacity for comparative effectiveness research (CER) by establishing grant programs that provide training for researchers in methods used to conduct research. It also notes that, “[at] a minimum, such training shall be in methods that meet the methodological standards adopted [by the Patient Centered Outcomes Research Institute (PCORI)] under section 1181(d)(9) of the Social Security Act.” In addition, section 937(a) of the PHS Act charges AHRQ with disseminating patient-centered outcomes research (PCOR) and CER findings into practice. AHRQ's PCOR Trust Fund Training Program (PCORTF–TP) invests in training grants that build researchers' skills and enhance research capacity in these practice areas.

PCOR is research that assesses the benefits and harms of preventive, diagnostic, therapeutic, palliative, or health delivery system interventions. This research helps clinicians, patients, and caregivers make decisions about health care choices by highlighting comparisons and outcomes that matter to people, such as survival, function, symptoms, and health-related quality of life. The AHRQ PCORTF–TP supports individuals and academic institutions to train researchers and clinicians in CER methods applied within the context of CER/PCOR via mentored career development award mechanisms for emerging independent investigators, as well as targeted skill development and applied experiences via research grant mechanisms for independent researchers. PCORTF–TP grants support training for recent graduates, mid-career professionals, and established professionals in research and clinical settings. The program prioritizes

expanding capacity in underserved and predominantly minority communities.

AHRQ recognizes the importance of ensuring that its training activities are useful, well implemented, and effective in achieving their intended goals. Therefore, the PCORTF–TP evaluation reflects AHRQ's commitment to ensuring responsible stewardship. The PCORTF–TP evaluation comprises analysis of grantee progress reports, a bibliometric analysis of grantee publications, key informant interviews with AHRQ program staff responsible for managing PCORTF–TP grants, focused discussions with the PCORTF–TP evaluation Stakeholder Working Group, and surveys of grantees and mentors.

The purpose of this evaluation is to assess the outputs, outcomes, and impact of AHRQ's PCORTF–TP. The evaluation will address the following questions:

- What is the nature of PCORTF–TP activities for scholar/investigator development?
- Which activities for PCORTF–TP scholars/investigators have the greatest influence on intended outcomes (e.g., PCOR careers)?
- How have PCORTF–TP and partner institutions developed the capacity for PCOR training and mentoring, and in what ways is this sustainable?
- What do mentors and mentees perceive to be the most important ways that the program has contributed to the field of CER/PCOR?

This evaluation is being conducted by AHRQ through its contractor, AFYA, Inc., pursuant to AHRQ's authority to carry out the activities described in section 937 of the PHS Act. 42 U.S.C. 299b–37.

#### Method of Collection

To achieve the goals of this project, the evaluator will survey PCORTF–TP awardees, scholars, and mentors. Online surveys: K Awardee Survey/K12 Scholar Survey and K Awardee/K12 Scholar Primary Mentor Survey will be used to: (1) Collect non-identifying demographic information; and (2) ask respondents about their training activities and outcomes. Key informant interviews: Key Informant Interview Guide will be used to collect qualitative data about program processes, outcomes, and lessons learned from K12 scholar program directors.

AHRQ will use the information collected through this Information Collection Request to assess progress toward achieving the PCORTF–TP aims. The information collected will facilitate program planning. Results will indicate whether grantees are conducting

activities relevant to CER/PCOR training and whether those activities are increasing CER/PCOR capacity. Two surveys, each tailored for four respective PCORTF-TP respondent groups as well as key informant interviews will yield data on training activities, trainees' career plans, trainees' research and clinical activities relevant to CER/PCOR, and primary mentor experiences. The

surveys are designed to capture primarily quantitative data with some qualitative data. The interview guide is designed to collect qualitative data.

#### Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annualized burden hours for the respondents' time to participate in this evaluation. The survey will be completed by approximately 288

awardees, scholars, principal investigators (PI), and mentors. The surveys will each require approximately 30 minutes to complete. The key informant interview will be conducted with approximately 13 PIs. These interviews are expected to take one hour each. The total hour burden is expected to be 150.5 hours for this participant data collection effort.

#### EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
K Awardee/K12 Scholar* Survey .....	147	1	0.5	73.5
K Awardee/K12 Primary Mentor Survey .....	128	1	0.5	64
Key Informant Interview Guide for K12 Program Directors .....	13	1	1	13
<b>Total</b> .....	<b>288</b>	.....	.....	<b>150.5</b>

\*K Awardee/K12 Scholar survey = K01/K08/K99/K18 Awardees and K12 Scholars.

Exhibit 2 shows the estimated annualized cost burden based on the respondents' time to participate in this

project. The total cost burden is estimated to be \$11,134.34.

#### EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate*	Total cost burden
K Awardee/K12 Scholar Survey .....	147	73.5	*\$74.43	\$5,434.59
K Awardee/K12 Primary Mentor Survey .....	128	64	*74.43	4,732.16
Key Informant Interview Guide for K12 Program Directors .....	13	13	*74.43	967.59
<b>Total</b> .....	<b>288</b>	<b>150.5</b>	.....	<b>11,134.34</b>

\* Average hourly wage (\$73.94) based on the average annual salary for three categories of Health Specialties Teachers, Postsecondary (25–1071; Scientific Research and Development Services—\$178,090; General Medical and Surgical Hospitals—\$153,790; and Colleges, Universities, and Professional Schools—\$126,890). *Data Source:* National Occupational Employment and Wage Estimates in the United States, May 2018, "U.S. Department of Labor, Bureau of Labor Statistics" (available at [http://www.bls.gov/oes/current/naics4\\_621400.htm](http://www.bls.gov/oes/current/naics4_621400.htm)).

#### Request for Comments

In accordance with the Paperwork Reduction Act, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ's health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) 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 upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent

request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: January 21, 2020.

**Virginia L. Mackay-Smith,**  
Associate Director.

[FR Doc. 2020–01261 Filed 1–24–20; 8:45 am]

**BILLING CODE 4160–90–P**

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

##### Administration for Children and Families

##### Submission for OMB Review; Domestic Victims of Human Trafficking Program Data (New Collection)

**AGENCY:** Office on Trafficking in Persons, Administration for Children and Families, HHS.

**ACTION:** Request for public comment.

**SUMMARY:** The Office on Trafficking in Persons (OTIP), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS) is proposing to collect data for the Domestic Victims of Human Trafficking Program (DVHT). The DVHT Program is inclusive of three distinct programs: The Domestic Victims of Human Trafficking and Services Outreach Program, Demonstration Grants to Strengthen the Response to Victims of Human Trafficking in Native Communities Program, and the Strengthen the Health Care Response for Victims of Human Trafficking Program grants. The data collection instruments are intended to collect information for all three DVHT programs.

**DATES:** Comments due within 30 days of publication. 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