

with a contractor who is debarred, suspended, or proposed for debarment; and

(5) Recommending to the CG whether or not to continue current contracts with a contractor or subcontractor who is debarred, suspended, or proposed for debarment.

OGE will review for legal sufficiency:

(1) Referrals by AM to the debarment/suspension official;

(2) Recommendations by AM to the CG that GAO solicit offers from, award contracts to, or consent to subcontracts with a contractor who is listed in the EPLS debarred, suspended, or proposed for debarment;

(3) Recommendations by AM to the CG to terminate a current contract because a contractor or subcontractor was subsequently debarred, suspended, or proposed for debarment; and

(4) Notices of proposed debarment, notices of suspension, or any other communication to a contractor regarding that contractor's potential or actual suspension or debarment.

Lynn H. Gibson,

General Counsel, U.S. Government Accountability Office.

[FR Doc. 2011-25228 Filed 9-29-11; 8:45 am]

BILLING CODE 1610-02-P

OFFICE OF GOVERNMENT ETHICS

Updated OGE Senior Executive Service Performance Review Board

AGENCY: Office of Government Ethics (OGE).

ACTION: Notice.

SUMMARY: Notice is hereby given of the appointment of members of the updated OGE Senior Executive Service (SES) Performance Review Board.

DATES: *Effective Date:* September 30, 2011.

FOR FURTHER INFORMATION CONTACT:

Barbara Mullen-Roth, Deputy Director, Office of Government Ethics, Suite 500, 1201 New York Avenue, NW., Washington, DC 20005-3917; Telephone: 202-482-9300; TTY: 800-877-8339; FAX: 202-482-9237.

SUPPLEMENTARY INFORMATION: 5 U.S.C. 4314(c) requires each agency to establish, in accordance with regulations prescribed by the Office of Personnel Management at 5 CFR part 430, subpart C and 430.310 thereof in particular, one or more Senior Executive Service (SES) performance review boards. As a small executive branch agency, OGE has just one board. In order to ensure an adequate level of staffing and to avoid a constant series of

recusals, the designated members of OGE's SES Performance Review Board are being drawn, as in the past, in large measure from the ranks of other agencies. The board shall review and evaluate the initial appraisal of each OGE senior executive's performance by his or her supervisor, along with any recommendations in each instance to the appointing authority relative to the performance of the senior executive. This notice updates the membership of OGE's SES Performance Review Board as it was most recently published at 75 FR 62540 (October 12, 2010).

Approved: September 26, 2011.

Don W. Fox,

Acting Director, Office of Government Ethics.

The following officials have been appointed members of the SES Performance Review Board of the Office of Government Ethics:

Barbara Mullen-Roth [Chair], Deputy Director, Office of Government Ethics; Leigh Bradley, Director, Standards of Conduct Office, Office of General Counsel, Office of the Secretary of Defense;

Melinda Loftin, Director, Departmental Ethics Office, Department of Interior; David Maggi, Chief, Ethics Law and Program Division, Office of the Assistant General Counsel for Administration, Department of Commerce; and

Robert Shapiro, Associate Solicitor for Legal Counsel, Department of Labor.

[FR Doc. 2011-25222 Filed 9-29-11; 8:45 am]

BILLING CODE 6345-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: 4150-30; 60-day Notice]

Agency Information Collection Request; 30-Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed information collection request for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the

estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690-6162. Written comments and recommendations for the proposed information collections must be directed to the OS Paperwork Clearance Officer at the above email address within 60 days.

Proposed Project: The Office of Adolescent Health (OAH) Pregnancy Prevention Approaches Evaluation Baseline Data Collection-Transferring from ACF OMB No. 0970-0360 to OS OMB No. OS-0990-NEW.

Abstract: The Office of Adolescent Health (OAH), Office of the Assistant Secretary for Health (OASH), U.S. Department of Health and Human Services (HHS), is overseeing and coordinating adolescent pregnancy prevention evaluation efforts as part of the Teen Pregnancy Prevention Initiative. OAH is working collaboratively with the Office of the Assistant Secretary for Planning and Evaluation (ASPE), the Centers for Disease Control and Prevention (CDC), and the Administration for Children and Families (ACF) on adolescent pregnancy prevention evaluation activities.

The Evaluation of Adolescent Pregnancy Prevention Approaches (PPA) is one of these efforts. PPA is a random assignment evaluation which will expand available evidence on effective ways to reduce teen pregnancy. The evaluation will document and test a range of pregnancy prevention approaches in up to eight program sites. The findings from the evaluation will be of interest to the general public, to policy-makers, and to organizations interested in teen pregnancy prevention.

OAH proposed baseline data collection activity as part of the PPA evaluation. A core baseline data collection instrument was approved on July 26, 2010. The project has worked in recent months to secure grantees as evaluation sites, and as part of this effort the project has undertaken making revisions to the baseline instrument with each site. These revisions were undertaken because each site has unique features (e.g. target population;

curriculum; objectives) and the baseline instruments were tailored to take these

features into account. Emergency clearance of the site-specific baseline

package was approved August 17, 2011 (ICR Reference No: 201107-0970-003).

ESTIMATED ANNUALIZED BURDEN TABLE

Site/Program (and name of baseline instrument)	Annualized number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours (annual)
Chicago Public Schools/Health Teacher	1518	1	36/60	911
Children's Hospital of Los Angeles/Project AIM	467	1	42/60	327
Oklahoma Institute of Child Advocacy/Power Through Choices	360	1	36/60	216
Engender Health/Gender Matters	375	1	36/60	225
Ohio Health/T.O.P.P	200	1	42/60	140
Live the Life Ministries/WAIT Training	533	1	42/60	373
Princeton Center for Leadership Training (PCLT)/TeenPEP	533	1	36/60	320
Total	3986	2512

Keith Tucker,

Office of the Secretary, Paperwork Reduction Act Clearance Officer.

[FR Doc. 2011-25152 Filed 9-29-11; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the Advisory Committee on Minority Health

AGENCY: Office of Minority Health, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice of meeting.

SUMMARY: As stipulated by the Federal Advisory Committee Act, the Department of Health and Human Services (DHHS) is hereby giving notice that the Advisory Committee on Minority Health (ACMH) will hold a meeting. This meeting is open to the public. Preregistration is required for both public attendance and comment. Any individual who wishes to attend the meeting and/or participate in the public comment session should e-mail acmh@osophs.dhhs.gov.

DATES: The meeting will be held on Thursday, October 27, 2011 from 9 a.m. to 5 p.m. and Friday, October 28, 2011 from 9 a.m. to 1 p.m.

ADDRESSES: The meeting will be held at the Doubletree Hotel, 8120 Wisconsin Avenue, Bethesda, Maryland 20814.

FOR FURTHER INFORMATION CONTACT: Ms. Monica A. Baltimore, Tower Building, 1101 Wootton Parkway, Suite 600, Rockville, Maryland 20852. *Phone:* 240-453-2882 *Fax:* 240-453-2883.

SUPPLEMENTARY INFORMATION: In accordance with Public Law 105-392, the ACMH was established to provide advice to the Deputy Assistant Secretary for Minority Health in improving the health of each racial and ethnic

minority group and on the development of goals and specific program activities of the Office of Minority Health.

Topics to be discussed during this meeting will include the state of health care reform implementation and the engagement of communities of color; the state of the health care safety net and priority strategies for assuring health equity, and new and enhanced opportunities to improve minority health resulting from the Affordable Care Act with national and local leaders. Also, updates on the National Partnership for Action to End Health Disparities and the National Stakeholders Strategy will be provided.

Public attendance at the meeting is limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the designated contact person at least fourteen (14) business days prior to the meeting. Members of the public will have an opportunity to provide comments at the meeting. Public comments will be limited to three minutes per speaker. Individuals who would like to submit written statements should mail or fax their comments to the Office of Minority Health at least seven (7) business days prior to the meeting. Any members of the public who wish to have printed material distributed to ACMH committee members should submit their materials to the Executive Director, ACMH, Tower Building, 1101 Wootton Parkway, Suite 600, Rockville, Maryland 20852, prior to close of business October 21, 2011.

Monica A. Baltimore,

Executive Director, Advisory Committee on Minority Health, Office of Minority Health, Office of the Assistant Secretary for Health, Office of the Secretary, U.S. Department of Health and Human Services.

[FR Doc. 2011-25294 Filed 9-29-11; 8:45 am]

BILLING CODE 4150-29-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Announcement of Requirements and Registration for "Million Hearts Challenge"

AGENCY: Office of the National Coordinator for Health Information Technology, HHS.

ACTION: Notice.

Authority: 15 U.S.C. 3719.

SUMMARY: The "Million Hearts Challenge" is a multidisciplinary call to innovators and developers to create an application that activates and empowers patients to take charge of their cardiovascular disease. Winning entries have the potential to help patients combat the nation's leading cause of death through medication adherence, a healthier diet, and a more active lifestyle while promoting the goals of the Million Hearts campaign.

The statutory authority for this challenge competition is Section 105 of the America COMPETES Reauthorization Act of 2010 (Pub. L. No. 111-358).

DATES: Effective on September 26, 2011.

FOR FURTHER INFORMATION CONTACT:

Adam Wong, 202-720-2866.

Wil Yu, 202-690-5920.

SUPPLEMENTARY INFORMATION:

Subject of Challenge Competition:

This challenge encourages multidisciplinary teams to develop a user-friendly application (optimized for mobile web access) that engages sufferers of cardiovascular disease in their own care using the Million Hearts' ABCs framework (Aspirin for people at high risk, Blood pressure control, Cholesterol management, and Smoking cessation). The application should allow patients to enter relevant information about their health including age, body mass index, blood pressure, cholesterol level, smoking status, pertinent medical