

TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN <sup>1</sup>

21 CFR Section	Number of respondents	Number of responses per respondent	Total annual responses	Average burden per response	Total hours
201.25(d) .....	2	1	2	24	48

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

Dated: July 13, 2016.

**Leslie Kux,**

*Associate Commissioner for Policy.*

[FR Doc. 2016–17044 Filed 7–18–16; 8:45 am]

**BILLING CODE 4164–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA–2016–N–0001]

#### Pediatric Clinical Investigator Training Workshop; Correction

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice; Correction.

**SUMMARY:** The Food and Drug Administration (FDA) is correcting a notice that appeared in the **Federal Register** on June 16, 2016 (81 FR 39271). The document announced a “Pediatric Clinical Investigator Training” workshop and contained an incorrect Web link for registration and an incorrect Web link for more information on the workshop. This document corrects those errors.

#### FOR FURTHER INFORMATION CONTACT:

Terrie L. Crescenzi, Office of Pediatric Therapeutics, Food and Drug Administration, 10903 New Hampshire Ave., Silver Spring, MD 20993–0002, [terrie.crescenzi@fda.hhs.gov](mailto:terrie.crescenzi@fda.hhs.gov) or Betsy Sanford, Office of Pediatric Therapeutics, Food and Drug Administration, 10903 New Hampshire Ave., Silver Spring, MD 20993–0002, [elizabeth.sanford@fda.hhs.gov](mailto:elizabeth.sanford@fda.hhs.gov).

**SUPPLEMENTARY INFORMATION:** In the **Federal Register** of Thursday, June 16, 2016, in FR Doc. 2016–14230, on page 39272, the following corrections are made:

1. On page 39272, in the first column, in the first paragraph under the “Workshop Attendance and Participation” heading, the first sentence is corrected to read “If you wish to attend this workshop, visit <https://www.eventbrite.com/e/pediatric-clinical-investigator-training-workshop-tickets-19708166657>.”

2. On page 39272, in the first column, in the second paragraph under the “Workshop Attendance and

Participation” heading, the first sentence is corrected to read “Registration information, the agenda, and additional background materials can be found at <http://www.fda.gov/NewsEvents/MeetingsConferencesWorkshops/ucm506658.htm>.”

Dated: July 13, 2016.

**Leslie Kux,**

*Associate Commissioner for Policy.*

[FR Doc. 2016–17015 Filed 7–18–16; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Agency Information Collection Activities: Proposed Collection: Public Comment Request—Scholarships for Disadvantaged Students Program

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement for opportunity for public comment on proposed data collection projects (Section 3506(c) (2) (A) of the Paperwork Reduction Act of 1995), the Health Resources and Services Administration (HRSA) announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

**DATES:** Comments on this ICR should be received no later than September 19, 2016.

**ADDRESSES:** Submit your comments to [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or mail the HRSA Information Collection Clearance Officer, Room 10–29, 5600 Fishers Lane, Rockville, MD 20857.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov)

or call the HRSA Information Collection Clearance Officer at (301) 443–1984.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the information request collection title for reference.

*Information Collection Request Title:* Scholarships for Disadvantaged Students (SDS) Program.

OMB No. 0915–0149—Revision.

**Abstract:** The program specific form for the SDS program has been revised to reflect a change in the order of the fields only. Fields K (Public or Non Profit Institution) and H (Point of Contact) have been moved to fields A and B respectively. Now Field A is Public or Non Profit Institution and Field B is Point of Contact. All other fields remained in sequence but were renamed with the appropriate letter order.

*Need and Proposed Use of the Information:* The purpose of the SDS Program is to provide funds to eligible schools to provide scholarships to full-time, financially needy students from disadvantaged backgrounds enrolled in health professions programs. To qualify for participation in the SDS program, a school must be carrying out a program for recruiting and retaining students from disadvantaged backgrounds, including students who are members of racial and ethnic minority groups (section 737(d)(1)(B) of the Public Health Service (PHS) Act). A school must meet the eligibility criteria to demonstrate that the program has achieved success based on the number and/or percentage of disadvantaged students who graduate from the school. In awarding SDS funds to eligible schools, funding points must be given to schools based on the proportion of graduating students going into primary care, the proportion of underrepresented minority students, and the proportion of graduates working in medically underserved communities (section 737(c) of the PHS Act).

*Likely Respondents:* The respondents are institutions that will be applying to the SDS program every four years.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time

needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing

and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the

information. The total annual burden hours estimated for this Information Collection Request are summarized in the table below.

#### TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form	Number of respondents	Number of responses per respondent	Total responses	Hours per response	Total hour burden
Application .....	323	1	323	13	4,199
Total .....	323	1	323	13	4,199

HRSA specifically requests comments on (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.

**Jason E. Bennett,**

*Director, Division of the Executive Secretariat.*

[FR Doc. 2016-17031 Filed 7-18-16; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Rural Health Care Coordination Network Partnership

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Health Resources and Services Administration (HRSA) has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from

the public during the review and approval period.

**DATES:** Comments on this ICR should be received no later than August 18, 2016.

**ADDRESSES:** Submit your comments, including the ICR title, to the desk officer for HRSA, either by email to [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) or by fax to 202-395-5806.

**FOR FURTHER INFORMATION CONTACT:** To request a copy of the clearance requests submitted to OMB for review, email the HRSA Information Collection Clearance Officer at [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or call (301) 443-1984.

#### SUPPLEMENTARY INFORMATION:

*Information Collection Request Title:* Rural Health Care Coordination Network Partnership Program Performance Improvement Measurement System.

OMB No. 0915-xxxx-New.

*Abstract:* The Rural Health Care Coordination Network Partnership (Care Coordination) Program is authorized under section 330A(f) of the Public Health Service Act (42 U.S.C. 254(c)(f)), as amended, to "support the development of formal, mature rural health networks that focus on care coordination activities for the following chronic conditions: diabetes, congestive heart failure and chronic obstructive pulmonary disease." This authority permits the Federal Office of Rural Health Policy (FORHP) to support grants for eligible entities to promote, through planning and implementation, the development of integrated health care networks that have combined the functions of the entities participating in the networks to: (i) Achieve efficiencies; (ii) expand access to, coordinate, and improve the quality of essential health

care services; and (iii) strengthen the rural health care system as a whole.

*Need and Proposed Use of the Information:* For this program, performance measures were drafted to provide data to the program and to enable HRSA to provide aggregate program data required by Congress under the Government Performance and Results Act (GPRA) of 1993. These measures cover the principal topic areas of interest to FORHP, including: (a) Access to care; (b) population demographics; (c) staffing; (d) sustainability; (e) health information technology; (f) quality improvement; (g) care coordination; and (h) clinical measures. Several measures will be used for the Outreach Program. All measures will speak to FORHP's progress toward meeting the goals.

*Likely Respondents:* The respondents would be recipients of the Care Coordination program funding.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.