

Enrollment for the study will be performed at the agency level. A random sample of Iowa law enforcement agencies, stratified on size of department (small, medium, and large) and type of department (Sheriff's Departments and City/Police Departments) will be drawn using a publicly available database. Recruitment packets will be sent to the leadership of these agencies inviting them to participate in the study. After agency leadership have agreed to participate in the study, survey packets will be mailed to a contact person in the agency. These packets will then be distributed to all sworn officers. Study packets will consist of an introduction letter and paper-and-pencil survey. The questionnaire provides information on

the following categories: Socio-demographics, occupation, driving behaviors, attitudes & knowledge of policies, and details of prior motor-vehicle crashes.

The sample size is estimated to be 162 agencies, with approximately 2,467 police and sheriff patrol officers. This estimate is derived using a publicly available database of all U.S. law enforcement agencies. Pilot test data demonstrated that respondents should take approximately 20 minutes to complete the survey, resulting in an annualized burden estimate of 822 hours. Participation in the study is completely voluntary.

Distribution of the surveys will also utilize the time of first-line supervisors of the participating law enforcement

agencies. The surveys will be mailed to the leadership of each participating law enforcement agency. They will be asked to distribute the surveys to all sworn officers in their agencies. Depending on the level of involvement of each agency, additional work activities delineated to the leadership could include: Collection of the surveys, verbal and/or written reminders to the officers, re-distribution of surveys, and e-mail/phone communication with NIOSH. One-hundred and sixty-two agencies have been invited to participate in the study. We estimate that on average, leadership at each agency will contribute a total of one burden hour for a total of 162 burden hours. There is no cost to respondents except their time.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Police & sheriff's patrol officers .....	2,467	1	20/60	822
First-Line Supervisors/Managers of Police & Detectives .....	162	1	1	162
Total .....				984

Dated: February 1, 2011.

**Carol E. Walker,**

*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-11-11BZ]

#### Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Carol E. Walker, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov).

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection 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 on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

#### Proposed Project

Quantitative Survey of Physician Practices in Laboratory Test Ordering and Interpretation-NEW-the Office of Surveillance, Epidemiology, and Laboratory Services (OSELS), the Centers for Disease Control and Prevention (CDC)

#### Background and Brief Description

The purpose of this request is to obtain OMB clearance to perform the "Quantitative Survey of Physician Practices in Laboratory Test Ordering and Interpretation", a national systematic study investigating how the rapid evolution of laboratory medicine

is affecting primary care practice. This will be a new collection. The survey will be funded in full by the Office of Surveillance, Epidemiology, and Laboratory Services (OSELS) of the Centers for Disease Control and Prevention (CDC).

This proposed survey follows a series of qualitative focus groups with primary care physicians that identified common concerns and problems with laboratory test ordering and test interpretation. This survey will quantify the prevalence and impact of the issues identified within the focus groups. Understanding the relative importance of physician issues in the effective and efficient use of laboratory medicine in diagnosis will guide future efforts of the CDC to improve primary care practice and improve health outcomes of the American public. The proposed survey covers basic physician demographic characteristics (year of birth, gender, years in practice, physician specialty, professional memberships, practice size and practice setting), practice-related questions including number and type of patients seen weekly. The majority of the questions request information about physician decision making processes involved in test ordering and interpretation.

The effective use of laboratory testing is an important component of the diagnostic process within physician

practices. The field of laboratory medicine is undergoing rapid change with the continuing introduction of new tests, increased focus on evidence-based medicine, the deployment of Electronic Health Records, and the wide availability to physicians of electronic information resources, interactive diagnostic tools, and computerized

order entry systems. To date, no systematic study has been conducted to investigate how physicians are incorporating these laboratory testing innovations into their day-to-day practices. This survey seeks to provide insight into how physicians integrate laboratory medicine into their routines,

and how they manage any challenges they encounter.

The survey will be conducted in 2011, following OMB approval, in a national representative sample of primary care physicians. The table below reports the combined total number of respondents for the 2011 survey. There are no costs to respondents except their time.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs)	Total burden (in hrs)
Family Practice Physicians and Internal Medicine Generalists.	Laboratory Practices .....	1600	1	14/60	373
Total .....	.....	.....	.....	.....	373

Dated: February 1, 2011.

**Carol E. Walker,**

*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB review; comment request

*Title:* Social Services Block Grant (SSBG) Post-expenditure Report.

*OMB No.:* 0970-0234.

*Description:*

*Content Changes:*

The 60-day **Federal Register** Notice published on October 22, 2010 (**Federal Register** Vol. 75, No. 204, pages 65352-65353) proposed to continue the use of the current post-expenditure reporting form with one change. The proposed change was a modification of the column titled, Expenditures of All Other Federal, State, and Local Funds of Part A of the form. States would have been required to report the same information as on the current OMB-approved post expenditure reporting form in a slightly different format.

The column currently requires States to provide data on the total amount of Federal, State, and local funds spent in providing each service. The proposed modification would have separated this column into two subcolumns. One subcolumn would have required States to report expenditures of Federal funds used to support each service. The second subcolumn would have required States to report expenditures of State and local funds used to support each

service. The instructions for the post-expenditure reporting form would have been revised to reflect this modification.

Based on feedback from several States, it was decided not to proceed with this proposed change. Therefore, the current request seeks approval to continue using the current OMB approved post-expenditure reporting form (OMB No. 09700834)

*Description:*

*Purpose:* To request approval to: (1) Extend the collection of post-expenditure data using the current OMB approved post-expenditure reporting form (OMB No. 0970-0234) past the current expiration date of July 31, 2011; (2) request that States voluntarily use the post-expenditure reporting form to estimate expenditures and recipients, by service category, as part of the required annual intended use plan.

The Social Services Block Grant program (SSBG) provides funds to assist States in delivering critical services to vulnerable older adults; persons with disabilities; at-risk adolescents and young adults; and children and families. Funds are allocated to the States in proportion to their populations. States have substantial discretion in their use of funds and may determine what services will be provided, who will be eligible, and how funds will be distributed among the various services. State or local SSBG agencies (i.e., county, city, regional offices) may provide the services or may purchase them from qualified agencies, organizations, or individuals. States report as recipients of SSBG-funded services any individuals who receive a service funded, in whole or in part, by SSBG.

States are required to report their annual SSBG expenditures in a postexpenditure report, using the current OMB approved post-

expenditure reporting form. The current form includes a yearly total of adults and children served and annual expenditures in each of 29 service categories. The annual report is to be submitted within six months of the end of the period covered by the report, and must address: (1) The number of individuals (including number of children and number of adults) who receive services paid for, in whole or in part, with Federal funds under the SSBG; (2) The amount of SSBG funds spent in providing each service; (3) The total amount of Federal, State, and local funds spent in providing each service, including SSBG funds; and (4) The method(s) by which each service is provided, showing separately the services provided by public and private agencies. These reporting requirements can be found at 45 CFR 96.74.

This request seeks approval to continue the use of the current postexpenditure reporting form with no changes. Information collected in the postexpenditure reports submitted by States is analyzed and described in an annual report on SSBG expenditures and recipients produced by the Office of community Services (OCS), Administration for children and Families (ACF). The information contained in this report is used for program planning and management. The data establish how SSBG funding is used for the provision of services in each State to each of many specific populations of needy individuals.

Federal regulation and reporting requirements for the SSBG also require each State to develop and submit an annual intended use plan that describes how the State plans to administer its SSBG funds for the coming year. This report is to be submitted 30 days prior to the start of the fiscal year (June 1 if