

diagnosed with Post Traumatic Stress Disorder (PTSD) and what clinicians actually implement in treatment settings. A quality improvement initiative that measures clinicians' use of evidence based treatment and promotes feedback to providers from the consumers' perspective may enhance the adoption of evidence based services. This could ultimately improve the quality of care and consumer health outcomes.

Need and Proposed Use of the Information: Quality measures of the treatment of PTSD in concordance with evidence-based methods do not currently exist and could be used to

reduce this gap. ASPE, in partnership with NIMH, has undertaken this project to pretest 3 surveys (a clinician, clinical supervisor, and consumer measure) of the delivery of evidence based psychotherapies to adults with PTSD. The current data collection is scheduled to occur only once, over a 6 month time period in summer 2014 through the winter of 2014 at a total of 6 behavioral health care sites.

Likely Respondents: Respondents are clinicians, clinician's supervisors and consumers.

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.

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Clinician (demographics questionnaire)	36	1	5/60	3
Clinician Supervisor (demographics questionnaire)	6	1	5/60	1
Clinician (clinician survey)	36	3	10/60	18
Clinician Supervisor (survey)	6	18	10/60	18
Consumer	108	1	10/60	18
Site Coordinator (Checklist)	6	1	30/60	3
Site Coordinator (Sampling)	6	1	2	12
Total				73

Darius Taylor,

Deputy, Information Collection Clearance Officer.

[FR Doc. 2014-05285 Filed 3-11-14; 8:45 am]

BILLING CODE 4150-05-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: HHS-OS-21544-60D]

Agency Information Collection Activities; Proposed Collection; Public Comment Request

AGENCY: Office of the Assistant Secretary for Health, Office of Adolescent Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit a new Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting that ICR to OMB, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on the ICR must be received on or before May 12, 2014.

ADDRESSES: Submit your comments to Information.CollectionClearance@hhs.gov or by calling (202) 690-6162.

FOR FURTHER INFORMATION CONTACT: Information Collection Clearance staff, Information.CollectionClearance@hhs.gov or (202) 690-6162.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the document identifier HHS-OS-21544-60D for reference.

Information Collection Request Title: Cost Study of Evidence-Based Teen Pregnancy Prevention Programs.

Abstract: The Office of Adolescent Health (OAH), U.S. Department of Health and Human Services (HHS) is requesting approval by OMB on a new collection. The proposed study will provide information on the cost and economic impact of selected evidence-based teen pregnancy prevention programs. This proposed information collection activity includes collecting information on (a) program costs and (b) program impacts from a subset of OAH TPP Program grantees.

Need and Proposed Use of the Information: A cost tool will collect comprehensive information on the cost of implementing of each selected program. An implementation tool will collect and summarize information on the characteristics of participating grantees. A staff time use survey will

collect information on how program staff allocate their time across program activities. An *economic evaluation form* will collect information on program impact findings needed to assess the cost-effectiveness and benefit-cost of selected programs.

Likely Respondents: A subset of up to 30 OAH TPP Program grantees will be asked to participate in the cost analysis. Of these 30 grantees, up to 15 will also be asked to participate in the economic evaluation. Study respondents will include the grant administrator or fiscal agent, the grantee's evaluator, and program staff.

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.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Cost Tool	30	1	8	240
Implementation Tool	30	1	1	30
Staff Time Use Survey	600	2	20/60	400
Economic Evaluation Form	15	1	3	45
Total				715

OS 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.

Darius Taylor,

Deputy, Information Collection Clearance Officer.

[FR Doc. 2014-05286 Filed 3-11-14; 8:45 am]

BILLING CODE 4150-30-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Meeting of the National Advisory Council for Healthcare Research and Quality

AGENCY: Agency for Healthcare Research and Quality (AHRQ).

ACTION: Notice of public meeting.

SUMMARY: In accordance with section 10(a) of the Federal Advisory Committee Act, 5 U.S.C. App. 2, this notice announces a meeting of the National Advisory Council for Healthcare Research and Quality.

DATES: The meeting will be held on Friday, April 4, 2014, from 8:30 a.m. to 3:30 p.m.

ADDRESSES: The meeting will be held at the Eisenberg Conference Center, Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, Maryland 20850.

FOR FURTHER INFORMATION CONTACT:

Jaime Zimmerman, Designated Management Official, at the Agency for Healthcare Research and Quality, 540

Gaither Road, Rockville, Maryland 20850, (301) 427-1456. For press-related information, please contact Alison Hunt at (301) 427-1244.

If sign language interpretation or other reasonable accommodation for a disability is needed, please contact the Food and Drug Administration (FDA) Office of Equal Employment Opportunity and Diversity Management on (301) 827-4840, no later than Friday, March 21, 2014. The agenda, roster, and minutes are available from Ms. Bonnie Campbell, Committee Management Officer, Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, Maryland 20850. Ms. Campbell's phone number is (301) 427-1554.

SUPPLEMENTARY INFORMATION:

I. Purpose

The National Advisory Council for Healthcare Research and Quality is authorized by Section 941 of the Public Health Service Act, 42 U.S.C. 299c. In accordance with its statutory mandate, the Council is to advise the Secretary of the Department of Health and Human Services and the Director, Agency for Healthcare Research and Quality (AHRQ), on matters related to AHRQ's conduct of its mission including providing guidance on (A) priorities for health care research, (B) the field of health care research including training needs and information dissemination on health care quality and (C) the role of the Agency in light of private sector activity and opportunities for public private partnerships.

The Council is composed of members of the public, appointed by the Secretary, and Federal ex-officio members specified in the authorizing legislation.

II. Agenda

On Friday, April 4, 2014, there will be a subcommittee meeting for the National Healthcare Quality and Disparities

Report scheduled to begin at 7:30 a.m. The subcommittee meeting is open to the public. The Council meeting will convene at 8:30 a.m., with the call to order by the Council Chair and approval of previous Council summary notes. The meeting is open to the public. The meeting will begin with the AHRQ Director presenting an update on current research, programs, and initiatives. Following the Director's Update, the agenda will include an update from the subcommittee on Strategic Direction, an update on Health Insurance Coverage Expansion and a discussion on Delivery System Reform. The final agenda will be available on the AHRQ Web site at www.AHRQ.gov no later than Friday, March 28, 2014.

Dated: February 26, 2014.

Richard Kronick,

AHRQ Director.

[FR Doc. 2014-05353 Filed 3-11-14; 8:45 am]

BILLING CODE 4160-90-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Solicitation for Nominations for Members of the U.S. Preventive Services Task Force (USPSTF)

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Solicits nominations for new members of USPSTF.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) invites nominations of individuals qualified to serve as members of the U.S. Preventive Services Task Force (USPSTF).

DATES: All nominations submitted in writing or electronically will be considered for appointment to the USPSTF. Nominations must be received by May 15th of a given year to be