provides guidance and assistance to programs on the various aspects of the contracts to meet their requirements.

Remove all CAJD standard administrative codes for the Information Technology Services Office (CAJD), and replace with the following:

Information Technology Services Office (CAJRB), Office of the Director (CAJRB1), Operations Branch (CARBB), Network Technology Branch (CAJRBC), Customer Services Branch (CAJRBD).

Remove all CAJG standard administrative codes for the Management Analysis and Services Office (CAJG), and replace with the following:

Management Analysis and Services Office (CAJRC), Office of the Director (CAJRC1), Management Assessment Branch (CAJRCB), Information Services Branch (CAJRCC), Business Process Analysis Branch (CAJRCD), Federal Advisory Committee Management Branch (CAJRCE),

Remove the CAJN standard administrative code for the Management Information Systems Office (CAJN), and replace with Management Information Systems Office (CAJRD).

After the functional statement for the Management Information Systems Office (CAJRD), insert the following:

Office of the Chief Information Security Officer (CAJRE). The mission of the Office of the Chief Information Security Officer (OCISO) is to administer CDC's information security program to protect CDC's information, information systems, and information technology commensurate with the risk and magnitude of harm resulting from the unauthorized access, use, disclosure, disruption, modification, or destruction of information collected or maintained by or on behalf of the agency.

Office of the Director (CAJRE1). (1) Manages and directs the activities and functions of the Office of the Chief Information Security Officer; (2) develops and maintains a CDC-wide information security program; (3) develops and maintains information security policies, procedures and control techniques to address the responsibilities assigned to the CDC under the Federal Information Security Management Act of 2002 (FISMA) and other governing statutes, regulations, and policies; (4) coordinates the professional development and operating procedures of CDC staff substantially involved in information security responsibilities; (5) assists CDC senior management concerning their FISMA responsibilities; and (6) ensures privacy management so personally identifiable information is appropriately collected, processed, stored and protected.

Operations, Analysis and Response Branch (CAJREB). (1) Performs continuous monitoring functions including enterprise security log correlation, vulnerability and compliance scanning and risk assessments; (2) performs network monitoring, security event correlation, forensic investigations, data recovery and malware analysis; (3) develops and maintains the CDC Computer Security Incident Response Team; (4) performs cyber security incident reporting according to US–CERT reporting guidelines; (5) facilitates cyber security incident remediation; (6) coordinates with law enforcement agencies and participates in cyber security intelligence activities; (7) develops enterprise security architecture, firewall management, cyber security tool management and CDC information resource governance—security component; and (8) supports OCISO IT operations; and (9) performs security product research and development, evaluation and testing.

Policy and Planning Branch (CAJREC). (1) Coordinates compliance and audit reviews; (2) develops cyber security policies and standards; (3) conducts system security tests and evaluations and identifies, assesses, prioritizes, and monitors the progress of corrective efforts for security weaknesses found in programs and systems; (4) maintains the Security Awareness Training program and coordinates significant security responsibilities and IT security training; (5) reviews and approves security and privacy related elements of OMB business cases; (6) conducts OCISO internal audit program and contract language reviews for information security and privacy act clearance decisions; (7) coordinates critical infrastructure protection continuity operations plans, data call management, E-Authentication and security requirements of CDC information system development; (8) conducts security reviews of non-standard software for use at CDC; and (9) coordinates FISMA security milestone oversight reporting and is the Office of Inspector General and Government Accounting Office Audit Liaison.

Dated: March 5, 2012.

Thomas R. Frieden,

Director, Centers for Disease Control and Prevention.

[FR Doc. 2012–5862 Filed 3–9–12; 8:45 am]

BILLING CODE 4160–18–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Performance Measures for Community-Centered Healthy Marriage, Pathways to Responsible Fatherhood and Community-Centered Responsible Fatherhood Ex-Prisoner Reentry grant programs.

OMB No.: 0970–0365.

Description: The Office of Family Assistance (OFA), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), intends to request approval from the Office of Management and Budget (OMB) to renew OMB Form 0970–0365 for the collection of performance measures from grantees for the Community-Centered Healthy Marriage, Pathways to Responsible Fatherhood and Community-Centered Responsible Fatherhood Ex-Prisoner Reentry discretionary grant programs. The performance measure data obtained from the grantees will be used by OFA to report on the overall performance of these grant programs.

Data will be collected from all 61 Community-Centered Healthy Marriage, 53 Pathways to Responsible Fatherhood and 4 Community-Centered Responsible Fatherhood Ex-Prisoner Reentry grantees in the OFA programs. Grantees will report on program and participant outcomes in such areas as participants' improvement in knowledge skills, attitudes, and behaviors related to healthy marriage and responsible fatherhood. Grantees will be asked to input data for selected outcomes for activities funded under the grants. Grantees will extract data from program records and will report the data twice yearly through an on-line data collection tool. Training and assistance will be provided to grantees to support this data collection process.

Respondents: Office of Family Assistance Funded Community-Centered Healthy Marriage, Pathways to Responsible Fatherhood and Community-Centered Responsible Fatherhood Ex-Prisoner Reentry Grantees.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total annual burden hours
Performance measure reporting form (for private sector affected public)	103	2	0.8	165
Performance measure reporting form (for State, local, and tribal government affected public)	15	2	0.8	30
Estimated Total Annual Burden Hours				195

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. Email address: *infocollection@acf.hhs.gov.* All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2012–5835 Filed 3–9–12; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2012–N–0001]

Preparation for International Conference on Harmonization Steering Committee and Expert Working Group Meetings in Fukuoka, Japan; Regional Public Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public meeting.

The Food and Drug Administration (FDA) is announcing a public meeting entitled ''Preparation for ICH Steering Committee and Expert Working Group Meetings in Fukuoka, Japan'' to provide information and receive comments on the International Conference on Harmonization (ICH) as well as the upcoming meetings in Fukuoka, Japan. The topics to be discussed are the topics for discussion at the forthcoming ICH Steering Committee Meeting. The purpose of the meeting is to solicit public input prior to the next Steering Committee and Expert Working Group meetings in Fukuoka, Japan, scheduled on June 2 through 7, 2012, at which discussion of the topics underway and the future of ICH will continue.

DATES: *Date and Time:* The public meeting will be held on May 14, 2012, from 2 p.m. to 4 p.m.

Location: The public meeting will be held at the FDA White Oak Campus, 10903 New Hampshire Ave., Bldg. 31, Conference Center, the Great Room (rm. 1503), Silver Spring, MD 20993. Information regarding visitor parking and transportation may be accessed at: *http://www.fda.gov/AboutFDA/WorkingatFDA/BuildingsandFacilities/WhiteOakCampusInformation/ucm241740.htm;* under the heading ''Public Meetings at the White Oak Campus.'' Please note that visitors to the White Oak Campus must enter through Building 1.

Contact Person: All participants must register with Kimberly Franklin, Office of the Commissioner, Food and Drug Administration, 10903 New Hampshire Ave., Silver Spring, MD 20993–0002, FAX: 301–595–7937, email: *Kimberly.Franklin@fda.hhs.gov.*

Registration and Requests for Oral Presentations: Send registration information (including name, title, firm name, address, telephone, and fax number), written material, and requests to make oral presentations to the contact person (see *Contact Person*) by May 9, 2012.

Interested persons may present data, information, or views orally or in writing, on issues pending at the public meeting. Public oral presentations will be scheduled between approximately 3:30 p.m. and 4 p.m. Time allotted for oral presentations may be limited to 10 minutes. Those desiring to make oral presentations should notify the contact person (see *Contact Person*) by May 9, 2012, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses, telephone number, fax, and email of proposed participants, and an indication of the approximate time requested to make their presentation.

If you need special accommodations due to a disability, please contact Kimberly Franklin (see *Contact Person*) at least 7 days in advance.

Transcripts: Please be advised that as soon as a transcript is available, it will be accessible at *http://www.regulations.gov.* It may be viewed at the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD. A transcript will also be available in either hardcopy or on CD–ROM, after submission of a Freedom of Information request. Written requests are to be sent to Division of Freedom of Information (ELEM–1029), Food and Drug Administration, 12420 Parklawn Dr., Element Bldg., Rockville, MD 20857.

SUPPLEMENTARY INFORMATION: The ICH was established in 1990 as a joint regulatory/industry project to improve, through harmonization, the efficiency of the process for developing and registering new medicinal products in