

health services; (3) educating stakeholders (parents, community leaders, and other constituents) about relevant evidence-based or evidence-informed strategies to reduce teen pregnancy; and (4) supporting the sustainability of the community-wide teen pregnancy prevention effort through capacity building and improved coordination of services.

CDC proposes to collect the information needed to conduct a process and intermediate outcome evaluation of these efforts. The information collection and evaluation plan will systematically document capacity building within funded communities and the extent to which communities implement multi-component, community-wide initiative activities. Respondents for the nine state and community awardees will include the project director/coordinator for each site, evaluators, and other program staff.

In addition, to gain a variety of perspectives, information will be requested from multiple community and clinical partners associated with each state or community awardee (e.g., program implementers and core advisory group members). Information collected from these respondents will include needs assessments. Finally, CDC will collect information about the training and technical assistance needs of state and community awardees, and national organizations, which have been funded to support community-wide teen pregnancy prevention (TPP) activities.

The training and technical assistance reporting forms will be submitted to CDC electronically through an interactive web-based system. The remaining information collection forms will initially be fielded in hardcopy, but respondents may submit the completed forms to CDC via electronic mail. To allow flexibility based on awardee

preferences, web-based reporting options may be implemented for all forms. Assessment and performance information will be reported to CDC annually. Training and technical assistance needs will be reported monthly so that CDC can provide immediate, targeted technical assistance as needed.

The assessment information, performance measures and training and technical assistance information to be collected are critical to understanding (1) the teen pregnancy prevention needs of each target community, (2) quality implementation practices associated with evidence-based programs and contraceptive access, and (3) the impact of implemented strategies.

OMB approval is requested for three years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 1,150.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hr)
State and Community Awardees.	State and Community Awardee Project Director/Project Coordinator Needs Assessment.	9	1	45/60
	State and Community Awardee Performance Measure Reporting Tool.	50	1	4
	State and Community Awardee Staff Needs Assessment	50	1	45/60
	State and Community Awardee Training and Technical Assistance Reporting Tool.	50	12	1
National Organization Awardees.	National Organization Awardee Training and Technical Assistance Reporting Tool.	15	12	1
Community and Clinical Partners.	Community and Clinical Partner Clinical Partner Needs Assessment.	50	1	1
	Community and Clinical Partner Program Implementation Partner Needs Assessment.	100	1	45/60

Dated: August 23, 2012.

Ron A. Otten,

Director, Office of Scientific Integrity (OSI), Office of the Associate Director for Science, Office of the Directors, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Board on Radiation and Worker Health (ABRWH or Advisory Board), National Institute for Occupational Safety and Health (NIOSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act

(Pub. L. 92-463), and pursuant to the requirements of 42 CFR 83.15(a), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned committee:

Times and Dates (All Times are Mountain Time)

8:15 a.m.–5:45 p.m., September 18, 2012.

8:15 a.m.–5:45 p.m., September 19, 2012.

8:15 a.m.–12:00 p.m., September 20, 2012.

Public Comment Times and Dates (All Times are Mountain Time)

6:00 p.m.–7:00 p.m.*, September 18, 2012.

6:00 p.m.–7:00 p.m.*, September 19, 2012.

*Please note that the public comment periods may end before the times

indicated, following the last call for comments. Members of the public who wish to provide public comments should plan to attend public comment sessions at the start times listed.

Place: Denver Marriott Tech Center, 4900 South Syracuse Street, Denver, Colorado 80237; Telephone: 303-779-1100; Fax: 303-740-2523. Audio Conference Call via FTS Conferencing: The USA toll-free, dial-in number is 1-866-659-0537 with a pass code of 9933701.

Status: Open to the public, limited only by the space available. The meeting space accommodates approximately 150 people.

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to

implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines which have been promulgated by the Department of Health and Human Services (HHS) as a final rule, advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule, advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program, and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to the CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2013.

Purpose: This Advisory Board is charged with (a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy (DOE) facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

Matters to be Discussed: The agenda for the Advisory Board meeting includes: NIOSH Program Update; Department of Labor Program Update; DOE Program Update; SEC petitions for: Oak Ridge National Laboratory, Hanford (1987–1989; petition #155), Los Alamos National Laboratory, Rocky Flats Plant, General Steel Industries (Granite City, IL), Weldon Spring Plant (Weldon Spring, MO), Mound Plant, United Nuclear Corporation (Hematite, MO), Nuclear Metals Inc. (Concord, MA), and Pantex Plant; Baker-Perkins Company (Saginaw, MI) Technical Basis Document Review; SEC Petitions Status Update; and Board Work Sessions.

Agenda items are subject to change as priorities dictate.

In the event an individual cannot attend, written comments may be submitted in accordance with the redaction policy provided below. Any written comments received will be

provided at the meeting and should be submitted to the contact person below well in advance of the meeting.

Policy on Redaction of Board Meeting Transcripts (Public Comment): (1) If a person making a comment gives his or her name, no attempt will be made to redact that name. (2) NIOSH will take reasonable steps to ensure that individuals making public comment are aware of the fact that their comments (including their name, if provided) will appear in a transcript of the meeting posted on a public Web site. Such reasonable steps include: (a) A statement read at the start of each public comment period stating that transcripts will be posted and names of speakers will not be redacted; (b) A printed copy of the statement mentioned in (a) above will be displayed on the table where individuals sign up to make public comments; (c) A statement such as outlined in (a) above will also appear with the agenda for a Board Meeting when it is posted on the NIOSH Web site; (d) A statement such as in (a) above will appear in the **Federal Register** Notice that announces Board and Subcommittee meetings. (3) If an individual in making a statement reveals personal information (e.g., medical information) about themselves that information will not usually be redacted. The NIOSH Freedom of Information Act (FOIA) coordinator will, however, review such revelations in accordance with FOIA and the Federal Advisory Committee Act (FACA) and if deemed appropriate, will redact such information. (4) All disclosures of information concerning third parties will be redacted. (5) If it comes to the attention of the Designated Federal Officer (DFO) that an individual wishes to share information with the Board but objects to doing so in a public forum, the DFO will work with that individual, in accordance with FACA, to find a way that the Board can hear such comments.

Contact Person for More Information: Theodore Katz, Executive Secretary, NIOSH, CDC, 1600 Clifton Road, Mailstop E-20, Atlanta, Georgia 30333; Telephone: (513) 533-6800, Toll Free: 1-800-CDC-INFO; email: dcas@cdc.gov.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** Notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: August 23, 2012.

Catherine Ramadei,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Mental Health Notice of Meeting

Pursuant to section 10(a) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of a meeting of the Interagency Autism Coordinating Committee (IACC) Subcommittee for Services Research and Policy.

The IACC Subcommittee for Services Research and Policy will be having a conference call on Wednesday, September 19, 2012. The Subcommittee will discuss plans for developing a 2012 IACC Strategic Plan Progress Update that will describe recent progress that has been made in the autism field as well as remaining gap areas in research. The meeting will be open to the public and accessible by webinar and conference call.

Name of Committee: Interagency Autism Coordinating Committee (IACC).

Type of meeting: Subcommittee for Services Research and Policy.

Date: September 19, 2012.

Time: 10:00 a.m. to 2:00 p.m. Eastern Time.

Agenda: The Subcommittee will discuss plans for developing a 2012 IACC Strategic Plan Progress Update that will describe recent progress that has been made in the autism field and identify remaining gap areas in research.

Webinar: <https://www2.gotomeeting.com/register/427830826>.

Conference Call: Dial: 800–369–3130, Access code: 1524980.

Cost: The conference call and webinar is free.

Contact Person: Ms. Lina Perez, Office of Autism Research Coordination, National Institute of Mental Health, NIH, 6001 Executive Boulevard, NSC, Room 6182A, Rockville, MD 20852, Phone: 301–443–6040, Email: IACCPublicInquiries@mail.nih.gov.

Please Note: The meeting will be accessible via a webinar and conference call. Members of the public who participate using the conference call phone number will be able to listen to the meeting but will not be heard. If you experience any technical problems with the conference call, please email IACCTechSupport@acclaroresearch.com or call the IACC Technical Support Help Line at 443–680–0098.

If you experience any technical problems with the Web presentation tool, please