

promising practices for the integration of HIV services into primary care.

Proposed data collection closely aligns with (1) core HIV indicators established by HHS (see <http://blog.aids.gov/2012/08/secretary-sebelius-approves-indicators-for-monitoring-hhs-funded-hiv-services.html>), (2) measures endorsed by the National Quality Forum (NQF) (see [http://www.qualityforum.org/News\\_And\\_Resources/Press\\_Releases/2013/NQF\\_Endorses\\_Infectious\\_Disease\\_Measures.aspx](http://www.qualityforum.org/News_And_Resources/Press_Releases/2013/NQF_Endorses_Infectious_Disease_Measures.aspx)), (3) performance measures used by the Ryan White HIV/AIDS Program (<http://hab.hrsa.gov/deliverhivaidscore/habperformmeasures.html>), and (4) the

Health Center Program's Uniform Data System (UDS) (see <http://bphc.hrsa.gov/healthcenterdatastatistics/index.html#whatisuds>). Specifically, HRSA/BPHC proposes submission of bi-annual progress reports (five total) by participating health centers to include aggregate, HIV-related, patient data (quantitative), and other information regarding implementation of approved work plans (narrative).

**Likely Respondents:** Health Center Program grantees receiving supplemental awards under the P4C project (22 total).

**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 name                 | Number of respondents | Number of responses per respondent | Total responses | Average burden per response (in hours) | Total burden hours |
|---------------------------|-----------------------|------------------------------------|-----------------|--|--------------------|
| P4C Progress Report ..... | 22                    | 2                                  | 44              | 28                                     | 1232               |
| Total .....               | 22                    | 2                                  | 44              | 28                                     | 1232               |

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.

Dated: October 15, 2014.

**Jackie Painter,**

*Acting Director, Division of Policy and Information Coordination.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following virtual committee meeting.

**Name:** Centers for Disease Control and Prevention (CDC)/Health Resources and Services Administration (HRSA) Advisory Committee on HIV, Viral

Hepatitis and STD Prevention and Treatment.

**Date and Time:** 10:00 a.m.–4:30 p.m., November 19, 2014; 10:00 a.m.–12:30 p.m., November 20, 2014.

**Place:** This meeting is accessible via audio conference call and Adobe Connect Pro.

**Status:** This meeting is open to the public. The available lines will accommodate approximately 120 people.

**Purpose:** This Committee is charged with advising the Director, CDC, and the Administrator, HRSA, regarding activities related to prevention and control of HIV/AIDS, Viral Hepatitis and other STDs, the support of health care services to persons living with HIV/AIDS, and education of health professionals and the public about HIV/AIDS, Viral Hepatitis and other STDs.

**Agenda:** Agenda items include: (1) CDC and HRSA Program Updates; (2) Youth and HIV; (3) HIV Community Health Workforce for Engagement in Care; and (4) CHAC Workgroup Updates. Agenda items are subject to change as priorities dictate.

Join the meeting by:

1. (Audio Portion) Calling the Toll free Phone Number 1-888-942-8515 and providing the Participant Pass Code 2015, and

2. (Visual Portion) Connecting to the Advisory Committee Adobe Connect Pro Meeting using the following URL: [https://hrsa.connectsolutions.com/cdchrsa\\_advcm/](https://hrsa.connectsolutions.com/cdchrsa_advcm/) (copy and paste the

link into your browser if it does not work directly). Participants should call and connect 15 minutes prior to the meeting in order for logistics to be set up.

Call (301) 443-9684 or send an email to [sgordon@hrsa.gov](mailto:sgordon@hrsa.gov) if you have any questions, or send an email to [JSalaveria@hrsa.gov](mailto:JSalaveria@hrsa.gov) if you are having trouble connecting to the meeting site.

**Public Comment:** Persons who desire to make an oral statement, may request it at the time of the public comment period. Public participation and ability to comment will be limited to space and time as it permits.

#### FOR FURTHER INFORMATION CONTACT:

Shelley B. Gordon, Health Resources and Services Administration, HIV/AIDS Bureau, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443-9684.

Dated: October 15, 2014.

**Jackie Painter,**

*Acting Director, Division of Policy and Information Coordination.*

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