

EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS

Form Name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
Semi-structured interview	9	9	60/60	81
Training participant questionnaire	240	10	20/60	800
Total	249	NA	NA	881

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate	Total cost burden
Semi-structured interview	9	81	\$32.64	\$2,644
Training participant questionnaire	240	800	32.64	26,112
Total	249	881	NA	28,756

* Based upon the mean of the average wages for all health professionals (29-0000) for the training participant questionnaire and for executives, administrators, and managers for the organizational leader questionnaire presented in the National Compensation Survey: Occupational Wages in the United States, May, 2008, U.S. Department of Labor, Bureau of Labor Statistics. http://www.bls.gov/oes/current/oes_nat.htm#b29-0000.

Estimated Annual Costs to the Federal Government

Exhibit 3 shows the total cost for this one year project; since the project is for only one year these are also the annualized costs. The total cost to the government for this activity is estimated to be \$181,521 to conduct the one-time questionnaire and conduct nine site visits, as well as to analyze and present all results. This amount includes costs for developing the data collection tools (\$24,889); collecting the data (\$108,667); and analyzing the data (\$35,061) and reporting the findings (\$12,903).

EXHIBIT 3—ESTIMATED TOTAL AND ANNUALIZED COST

Cost component	Total cost
Project Development	\$24,889
Data Collection Activities	108,667
Data Processing and Analysis	35,061
Publication of Results	12,903
Total	181,521

Request for Comments

In accordance with the above-cited Paperwork Reduction Act legislation, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ healthcare research and healthcare information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) 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 upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: June 22, 2010.

Carolyn M. Clancy,
Director.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Availability of Draft Policy Document for Comment

AGENCY: Health Resources and Services Administration (HRSA), HHS.

ACTION: The Federal Tort Claims Act (FTCA) Policy Manual was developed to serve as the primary policy source for information on FTCA for Health Center Program grantees funded under section 330 of the Public Health Service (PHS) Act ("section 330"). The Policy Manual is currently posted on the Internet at <http://bphc.hrsa.gov/draftsforcomment/ftcamanual/>.

DATES: Comments must be received by August 6, 2010.

ADDRESSES: Comments should be submitted to OPPDGeneral@hrsa.gov by close of business on August 6, 2010.

SUMMARY: HRSA believes that community input is valuable to the development of policies and policy documents related to the implementation of HRSA programs, including the Health Center Program. Therefore, we are requesting comments on the FTCA Policy Manual referenced above. Comments will be reviewed and analyzed, and a summary and general response to comments will be published as soon as possible after the comment submission deadline.

BACKGROUND: HRSA administers the Health Center Program, which supports more than 1,100 organizations operating almost 8,000 health care delivery sites, including community health centers, migrant health centers, health care for the homeless centers, and public housing primary care centers. Health centers serve medically underserved communities delivering preventive and primary care services to patients regardless of their ability to pay.

Health Center Program grantees funded under section 330 of the PHS Act, including Community Health Centers, Migrant Health Centers, Health Care for the Homeless Health Centers, and Public Housing Primary Care Health Centers, have access to medical malpractice coverage under the Federal Tort Claims Act (FTCA). FTCA, enacted in 1946, is the legal mechanism for compensating people who have suffered personal injury due to the negligent or wrongful action of employees of the

U.S. Government. Under section 224 of the PHS Act, as amended by the Federally Supported Health Centers Assistance Act (FSHCAA) of 1992 and 1995, a section 330-funded health center, as well as its officers, directors, employees, and certain contractors, may be considered deemed to be Federal employees for the purpose of medical malpractice coverage under the FTCA. As such, they are immune from personal liability for claims of medical malpractice arising from their deemed employment, contract for services, or duties as an officer or director of the deemed health center. FSHCAA requires health centers to apply for deemed status in order for FTCA coverage to be effective.

HRSA has issued numerous Program Information Notices (PINs) and Program Assistance Letters (PALs) related to the Health Center FTCA Medical Malpractice Program. HRSA consolidated these PINs and PALs to create this FTCA Policy Manual. It is intended to convey guidance regarding existing policy and current processes, and to serve as the principal policy resource on FTCA matters for Health Center Program grantees and related stakeholders. It will be updated as new policy and program guidance are issued.

FOR FURTHER INFORMATION CONTACT: For questions regarding this notice, please contact the HRSA Bureau of Primary Health Care, Office of Quality and Data, at 301-594-0818.

Dated: June 24, 2010.

Mary K. Wakefield,
Administrator.

[FR Doc. 2010-15971 Filed 6-30-10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Notice of Meeting

In accordance with section 10(d) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2), announcement is made of a Health Care Policy and Research Special Emphasis Panel (SEP) meeting.

A Special Emphasis Panel is a group of experts in fields related to health care research who are invited by the Agency for Healthcare Research and Quality (AHRQ), and agree to be available, to conduct on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the Panel do not attend regularly-scheduled meetings and do not serve for

fixed terms or a long period of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

Substantial segments of the upcoming SEP meeting listed below will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C. 552b(c)(6). Grant applications for the ARRA Limited Competition: AHRQ CE Delivery Systems (RO1) applications are to be reviewed and discussed at this meeting. These discussions are likely to reveal personal information concerning individuals associated with the applications. This information is exempt from mandatory disclosure under the above-cited statutes.

SEP Meeting on: ARRA Limited Competition: AI-JRQ CE Delivery Systems (RO1).

Date: July 22, 2010 (Open on July 22 from 8 a.m. to 8:15 a.m. and closed for the remainder of the meeting).

Place: Doubletree Bethesda Hotel & Executive Meeting Center, 8120 Wisconsin Avenue, Conference Room TBD, Bethesda, Maryland 20852.

Contact Person: Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of this meeting should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Extramural Research, Education and Priority Populations, AHRQ, 540 Gaither Road, Room 2038, Rockville, Maryland 20850, Telephone (301) 427-1554.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: June 23, 2010.

Carolyn M. Clancy,
Director.

[FR Doc. 2010-15791 Filed 6-30-10; 8:45 am]

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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), HHS.

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, July 23, 2010, from 8:30 a.m. to 2:30 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, Coordinator of the Advisory Council, at the Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, Maryland 20850, (301) 427-1456. For press-related information, please contact Karen Migdal at (301) 427-1855.

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 March 26, 2010. 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 was established in accordance with Section 921 (now 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, July 23, 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.