Grantee of record: Premier Care and Learning Center, Shreveport, Louisiana.

Intended recipient of the award: Louisiana State University, Health Sciences Center, Shreveport, Louisiana.

Amount of the award: \$268,377 to ensure ongoing clinical services to the target population.

Authority: Section 2651 of the Public Health Service Act, 42 U.S.C. 300ff-51.

CFDA Number: 93.918.

Project period: July 1, 2010, to June 30, 2011. The period of support for this non-competitive one-time replacement award is from July 1, 2010, to June 30, 2011.

Justification for the Exception to Competition

Critical funding for HIV medical care and treatment services to clients in Shreveport, Louisiana, will be continued through a non-competitive replacement award to an existing grant award to the Louisiana State University, Health Sciences Center, Viral Disease Clinic. This is a non-competitive onetime replacement award because the previous grant recipient serving this population notified HRSA that it would not continue in the program after the fiscal year (FY) 2010 award was made. Louisiana State University, Health Sciences Center, Viral Disease Clinic is the best qualified grantee for this supplement, since it serves many of the former grantee's patients and is the closest Part C Program to the former grantee. Further funding beyond

June 30, 2011, for this service area will be competitively awarded during the Part C HIV Early Intervention Service competing application process for FY 2011.

FOR FURTHER INFORMATION CONTACT:

Kathleen Treat, by e-mail *ktreat@hrsa.gov,* or by phone, 301–443–7602.

Dated: November 19, 2010. **Mary K. Wakefield,** *Administrator.* [FR Doc. 2010–29865 Filed 11–26–10; 8:45 am] **BILLING CODE 4165–15–P**

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Customer and Other Partners Satisfaction Surveys

SUMMARY: In compliance with the requirement of Section 3507(A)(1)(D) of the Paperwork Reduction Act of 1995 for the opportunity for pubic comment on the proposed data collection projects, the Clinical Center (CC) of the National Institutes of Health, (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the Federal Register on September 21, 2010, pages 57470-57472 and allowed 60 days for public comments. One comment regarding the use of government resources to conduct surveys was received during the 60-day comment period. The purpose of this notice is to provide an additional 30 days for public comment.

5 CFR 1320.5 Respondents to this request for information collection should not respond unless the request displays a currently valid OMB control number.

Proposed Collection: Title: Generic Clearance for Satisfaction Surveys of Customer and Other Partners. Type of Information Collection Request: Extension (OMB Control Number: 0925– 0458). Need and Use of Information Collection: The information collected in these surveys will be used by Clinical Center personnel: (1) To evaluate the satisfaction of various Clinical Center

customers and other partners with Clinical Center services: (2) to assist with the design of modifications of these services, based on customer input; (3) to develop new services, based on customer need; and (4) to evaluate the satisfaction of various Clinical Center customers and other partners with implemented service modifications. These surveys will almost certainly lead to quality improvement activities that will enhance and/or streamline the Clinical Center's operations. The major mechanisms by which the Clinical Center will request customer input is through surveys and focus groups. The surveys will be tailored specifically to each class of customer and to that class of customer's needs. Surveys will either be collected as written documents, as faxed documents, mailed electronically or collected by telephone from customers. Information gathered from these surveys of Clinical Center customers and other partners will be presented to, and used directly by, Clinical Center management to enhance the services and operations of our organization. Frequency of Response: The participants will respond yearly. Affected Public: Individuals and households, businesses and other for profit, small businesses and organizations. Types of Respondents: These surveys are designed to assess the satisfaction of the Clinical Center's major internal and external customers with the services provided. These customers include, but are not limited to, the following groups of individuals: Clinical Center patients, family members of Clinical Center patients, visitors to the Clinical Center, NIH intramural collaborators, private physicians or organizations who refer patients to the Clinical Center, volunteers, vendors and collaborating commercial enterprises, small businesses, regulators, and other organizations. The annual reporting burden is as follows:

Customer	Number of re- spondents	Frequency of response	Average time per response	Annual hour burden			
FY 2010							
Clinical Center Patients	5000	1	.5	2500			
Family Members of Patients	2000	1	.5	1000			
Visitors to the Clinical Center	1000	1	.17	170			
NIH Intramural Collaborators	2000	1	.17	340			
Vendors and Collaborating Commercial Enterprises	2500	1	.33	833			
Professionals and Organizations Referring Patients	2000	1	.33	833			
Regulators	30	1	.33	10			
Volunteers	275	1	.5	138			
Total	14,805			5,824			

Customer	Number of re- spondents	Frequency of response	Average time per response	Annual hour burden
FY 201	1			
Clinical Center Patients	5000	1	.5	2500
Family Members of Patients	3000	1	.5	1500
Visitors to the Clinical Center	1500	1	.17	255
NIH Intramural Collaborators	1500	1	.25	375
Vendors and Collaborating Commercial Enterprises	1000	1	.25	250
Professionals and Organizations Referring Patients	3000	1	.33	1000
Regulators	30	1	.33	10
Volunteers	275	1	.33	92
Total	15,305			5,982
FY 201	2			
Clinical Center Patients	5000	1	.5	2500
Family Members of Patients	2000	1	.5	1000
Visitors to the Clinical Center	1000	1	.17	170
NIH Intramural Collaborators	1000	1	.17	170
Vendors and Collaborating Commercial Enterprises	2500	1	.25	625
Professionals and Organizations Referring Patients	3000	1	.33	1000
Regulators	25	1	.25	6
Volunteers	300	1	.25	75
Total	14,825			5,546

Estimated costs to the respondents consists of their time; time is estimated using a rate of \$10.00 per hour for patients and the public; \$30.00 for vendors, regulators, organizations and \$55.00 for health care professionals. The estimated annual costs to respondents for each year for which the generic clearance is requested is \$127,885 for 2010, \$126,895 for 2011, and \$120,730 for 2012. Estimated Capital Costs are \$7,000. Estimated Operating and Maintenance costs are \$75,000.

Requests for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the functions of the Clinical Center and the agency, including whether the information shall have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs,

OIRA_submission@omb.eop.gov or by fax to 202–395–6974, *Attention:* Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Dr. David K. Henderson, Deputy Director for Clinical Care, National Institutes of Health Clinical Center, Building 10, Room 6–1480, 10 Center Drive, Bethesda, Maryland 20892, or call nontoll free: 301–496–3515, or e-mail your request or comments, including your address to: *dkh@nih.gov*.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: November 22, 2010.

David K. Henderson,

Deputy Director for Clinical Care, CC, National Institutes of Health. [FR Doc. 2010–29953 Filed 11–26–10; 8:45 am] BILLING CODE 4140–01–P

HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Environmental Health Sciences; Notification of Request for Emergency Clearance; GuLF Study: Gulf Long-term Follow-up Study for Oil Spill Clean-Up Workers and Volunteers

In accordance with Section 3507(j) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) hereby publishes notification of request for Emergency Clearance for the information collection related to the GuLF Study: Gulf Long-term Follow-up Study for Oil Spill Clean-Up Workers and Volunteers.

This information collection is essential to the mission of NIEHS (42 U.S.C. 2851), which is to conduct and support research, training, health information dissemination, and other programs with respect to factors in the environment that affect human health, directly or indirectly. Through this mission, the NIEHS has a mandate to study the environmental impact on individuals of natural and man-made catastrophes and the long term health effects of these incidents. The Deepwater Horizon disaster, with its release of approximately 5 million barrels (~ 680,000 tons) of crude oil into the Gulf of Mexico, represents the largest oil spill in U.S. history. Given the magnitude of this spill and the scope of the potential exposures-over 100,000 persons have completed safety training in preparation for participation