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.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to

Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690–6162. Written comments and recommendations for the proposed information collections must be directed to the OS Paperwork Clearance Officer at the above e-mail address within 60days.

*Proposed Project:* Whistleblowers Study—OMB No. 0990—New—Office of Research Integrity (ORI).

*Abstract:* The Office of Research Integrity (ORI) proposes to do a study to determine what questions whistleblowers want answered from Research Integrity Officers (RIOs) when deciding to file an allegation of research misconduct.

To guide RIOs to be well-prepared to provide answers to the kinds of questions that complainants (whistleblowers) and potential complainants ask RIOs at different

# ESTIMATED ANNUALIZED BURDEN TABLE

stages of the research misconduct allegation resolution process is critical to the smooth and effective conduct of that process. Complainants and potential complainants need to know what is in store for them during the process employed by the institution to resolve allegations of research misconduct. They need to know the steps involved in the process, the support available to them, and the safeguards afforded them against retaliation. This study will seek to obtain information from RIOs concerning the questions complainants have and when they arise, as well as what responses RIOs provide when they do.

Forms	Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Interview About Questions Asked By Complainants and Potential Complainants.	Research Integrity Officers (RIOs) from Institutions with Research Misconduct Allega- tion or Investigation in Past 5 Years.	100	1	45/60	75
Total					75

## Seleda Perryman,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

[FR Doc. 2010–6018 Filed 3–18–10; 8:45 am] BILLING CODE 4150–31–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier OS-0990-; 30-Day Notice]

## Agency Information Collection Request; 30-Day Public Comment Request

**AGENCY:** Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to

Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690–5683. Send written comments and recommendations for the proposed information collections within 30 days of this notice directly to the OS OMB Desk Officer; faxed to OMB at 202–395– 5806.

Proposed Project: Attitudes Toward Electronic Health Information Exchange and Associated Privacy and Security Aspects—OMB No. 0990–NEW–Office of the National Coordinator for Health Information Technology.

Abstract: Electronic health information exchange promises an array of potential benefits for individuals and the U.S. health care system through improved health care quality, safety, and efficiency. At the same time, this environment also poses new challenges and opportunities for protecting health information. Health information

technology and electronic health information exchange may also provide individuals with new, more effective methods to engage with their health care providers and affect how their health information may be exchanged. Based on findings from a comprehensive literature review, little is known about individuals' attitudes toward electronic health information exchange and the extent to which they are interested in determining by whom and how their health information is exchanged. The proposed information collection will permit us to better understand individuals' attitudes toward electronic health information exchange and its associated privacy and security aspects as well as inform policy and programmatic objectives.

The Office of the National Coordinator for Health Information Technology (ONC) is proposing to conduct a nationwide survey which will use computer-assisted telephone interviews (CATI) to interview a representative sample of the general U.S. population. Data collection will take place over the course of eight weeks. The data will be analyzed using statistical methods and a draft report will be prepared. ONC will hold a Web seminar prior to the publication of the final report to convey the findings to the general public. A final report will be posted on *http://healthit.hhs.gov* which will include the results and analysis.

### ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondent	Number of responses	Number of re- sponses per respondent	Average bur- den per re- sponse (in hours)	Total burden hours
Non-Participating Household (Screened) Eligible Household (Completes Survey)	22,845 2,570	1	2/60 20/60	761 857
Total				1618

#### Seleda Perryman,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer. [FR Doc. 2010–6020 Filed 3–18–10; 8:45 am] BILLING CODE 4150–45–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier OS-0990-New]

## Agency Information Collection Request, 60-Day Public Comment Request

AGENCY: Office of the Secretary, HHS. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed information collection request for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to

Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690–6162. Written comments and recommendations for the proposed information collections must be directed to the OS Paperwork Clearance Officer at the above e-mail address within 60 days.

Proposed Project: Communities Putting Prevention to Work Cost Study Instrument—OMB No. 0990–NEW– Office of the Assistant Secretary for Planning and Evaluation.

*Abstract:* The American Recovery and Reinvestment Act of 2009 was signed into law on February 17, 2009, Public Law 11.5 ("Recovery Act"). Communities Putting Prevention to Work (CPPW) is a \$650 million program funded by the Recovery Act. The purpose of the proposed data collection is to collect quarterly cost information

## ESTIMATED ANNUALIZED BURDEN TABLE

from all community-level CPPW awardees'. This will allow HHS to receive reports on direct awardees costs associated with carrying out the selected evidence-based strategies that are required by the Funding Opportunity Announcement (FOA) and Notice of Grant Award (NGA). This requirement is in addition to the financial reporting requirements of Section 512 of the Recovery Act, set forth by the Office of Management and Budget (OMB) under the data collection instrument titled "Standard Data Elements for Reports Under Section 1512 of the American Recovery and Reinvestment Act of 2009, Public Law 111–5 (Grants, Cooperative Agreements, and Loans)."

The activity-based cost data submitted by the 35–45 grantees will provide the basis for HHS to assess the costs of the various program strategies, identify factors that impact average cost, and perform cost-effectiveness analysis of the program. Performing an assessment of the resources expended on each CPPW intervention will provide valuable information to HHS and other agencies within the Department for improving program efficiency within the various strategies of the program. There are no costs to respondents except their time to participate in the survey.

Forms	Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
CPPW Cost Study Tool CPPW Cost Study Tool CPPW Cost Study Tool	Business Manager	45 45 45	4 4 4	3 3 5	540 540 900
Total					1980