

This document is intended to describe the priority activities to occur during fiscal years 2011 and 2012 of implementation so that all sectors and segments of the Nation are working collectively and leveraging resources to achieve the same outcomes. The activities include responsible entities, timelines and measures. The target audience for the BIP is the Nation (individuals, families, communities including all sectors and governments, states and the Federal Government). It also outlines a framework for evaluation of impact of the NHSS.

This document is submitted for public consideration and comment for a period of 30 calendar days at <http://www.phe.gov/preparedness/planning/authority/nhss/comments/>. The Office of the Assistant Secretary of Preparedness and Response (ASPR) within the Department of Health and Human Services (HHS) is submitting this document for public consideration as the lead agency in a broad interagency process to draft the guidance.

DATES: The public is encouraged to submit written comments on this proposed document. Comments may be submitted to HHS/ASPR in electronic form at the HHS/ASPR e-mail address and URL shown below. All comments should be submitted by August 25, 2010. All written comments received in response to this notice will be available for review by request. This document is available in hard-copy for all those that request it from the Federal point of contact.

FOR FURTHER INFORMATION CONTACT: Lisa Kaplowitz, Deputy Assistant Secretary, Office of Policy and Planning, Office of the Assistant Secretary for Preparedness and Response, U.S. Department of Health and Human Services, 200 Independence Avenue, SW., Washington, DC 20201; phone: 202-205-2882; <http://www.phe.gov/preparedness/planning/authority/nhss/comments/>; e-mail address: nhss@hhs.gov.

SUPPLEMENTARY INFORMATION: The *National Health Security Strategy (2009)* can be found at: <http://www.phe.gov/preparedness/planning/authority/nhss/Pages/default.aspx>.

Dated: July 16, 2010.

Nicole Lurie,

Assistant Secretary for Preparedness and Response.

[FR Doc. 2010-18332 Filed 7-23-10; 8:45 am]

BILLING CODE 4150-37-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget (OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, e-mail paperwork@hrsa.gov or call the HRSA Reports Clearance Office on (301) 443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: Children's Hospital Graduate Medical Education (CHGME) Payment Program Annual Report (OMB No. 0915-0313)—Extension

The CHGME Payment Program was enacted by Public Law 106-129 to provide Federal support for graduate medical education (GME) to freestanding children's hospitals, similar to Medicare GME support received by other, non-children's hospitals. The legislation indicates that eligible children's hospitals will receive payments for both direct and indirect

medical education. Direct payments are designed to offset the expenses associated with operating approved graduate medical residency training programs and indirect payments are designed to compensate hospitals for expenses associated with the treatment of more severely ill patients and the additional costs relating to teaching residents in such programs.

The CHGME Payment Program was reauthorized for a period of five years in October 2006 by Public Law 109-307. The reauthorizing legislation requires that participating children's hospitals provide information about their residency training programs in an annual report that will be an addendum to the hospitals' annual applications for funds.

Data are required to be collected on the (1) types of training programs that the hospital provided for residents such as general pediatrics, internal medicine/pediatrics, and pediatric subspecialties including both medical subspecialties certified and non-medical subspecialties; (2) the number of training positions for residents, the number of such positions recruited to fill, and the number of positions filled; (3) the types of training that the hospital provided for residents related to the health care needs of different populations such as children who are underserved for reasons of family income or geographic location, including rural and urban areas; (4) changes in residency training including changes in curricula, training experiences, and types of training programs, and benefits that have resulted from such changes and changes for purposes of training residents in the measurement and improvement and the quality and safety of patient care; and (5) the numbers of residents (disaggregated by specialty and subspecialty) who completed training in the academic year and care for children within the borders of the service area of the hospital or within the borders of the State in which the hospital is located.

Form name	Number of respondents	Responses per respondent	Total number of responses	Hours per response	Total burden hours
Screening Instrument (HRSA 100-1)	56	1	56	9.2	515.2
Annual Report: Hospital and Program-Level Information (HRSA 100-2 and 3)	56	1	56	78.7	4407.2
Total	56	56	87.9	4922.4

Written comments and recommendations concerning the proposed information collection should

be sent within 30 days of this notice to the desk officer for HRSA, either by e-mail to OIRA_submission@omb.eop.gov

or by fax to 202-395-6974. Please direct all correspondence to the "attention of the desk officer for HRSA."

Dated: July 20, 2010.
Sahira Rafiullah,
*Director, Division of Policy and Information
 Coordination.*
 [FR Doc. 2010-18146 Filed 7-23-10; 8:45 am]
BILLING CODE 4165-15-P

**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Administration for Children and
 Families**

**Submission for OMB Review;
 Comment Request**

Title: Guidance for Tribal TANF.
OMB No.: 0970-0157
Description: 42 U.S.C. 612 (Section 412 of the Social Security Act) requires each Indian Tribe that elects to administer and operate a Temporary Assistance for Needy Families (TANF)

program to submit a TANF Tribal Plan. The TANF Tribal Plan is a mandatory statement submitted to the Secretary by the Indian Tribe, which consists of an outline of how the Indian Tribes TANF program will be administered and operated. It is used by the Secretary to determine whether the plan is approvable and to determine that the Indian Tribe is eligible to receive a TANF assistance grant. It is also made available to the public.

Respondents: Indian Tribes applying to operate a TANF program.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Request for State Data Needed to Determine the Amount of a Tribal Family Assistance Grant	20	1	68	1,360

Estimated Total Annual Burden Hours: 1,360.
Additional Information:
 Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, *Attn:* ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. *E-mail address:* infocollection@acf.hhs.gov.

OMB Comment:
 OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of

Management and Budget, Paperwork Reduction Project, *Fax:* 202-395-7285,
E-mail:
OIRA_SUBMISSION@OMB.EOP.GOV,
Attn: Desk Officer for the Administration for Children and Families.

Dated: July 21, 2010.
Robert Sargis,
Reports Clearance Officer.
 [FR Doc. 2010-18170 Filed 7-23-10; 8:45 am]
BILLING CODE 4184-01-P

OMB No.: 0970-0173.

Description: 42 U.S.C. 612 (Section 412 of the Social Security Act) gives federally recognized Indian Tribes the opportunity to apply to operate a Tribal Temporary Assistance for Needy Families (TANF) program. The Act specifies that the Secretary shall use State-submitted data to determine the amount of the grant to the Tribe. This form (letter) is used to request those data from the States. ACF is proposing to extend this information collection without change.

Respondents: States that have Indian Tribes applying to operate a TANF program.

**DEPARTMENT OF HEALTH AND
 HUMAN SERVICES**

**Administration for Children and
 Families**

**Submission for OMB Review;
 Comment Request**

Title: Request for State Data Needed to Determine Amount of a Tribal Family Assistance Grant.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Request for State Data Needed to Determine the Amount of Tribal Family Assistance Grant	4	1	42	168

Estimated Total Annual Burden Hours: 168.
Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information

Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, *Attn:* ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. *E-mail address:* infocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it