Environmental factors associated with foodborne illness include both food safety practices (e.g., inadequate cleaning practices) and the factors in the environment associated with those practices (e.g., worker and retail food establishment characteristics). To understand these factors, we need to continue to collect data from those who prepare food (i.e., food workers) and on the environments in which the food is prepared (i.e., retail food establishment kitchens). Thus, data collection methods for this generic package include: (1) Worker interviews/surveys, and (2) observation of kitchen environments. Both methods allow data collection on food safety practices and environmental factors associated with those practices.

For each data collection, we will collect data in approximately 80 retail

food establishments per EHS-NET site. Thus, there will be approximately 480 establishments per data collection (6 sites*80 establishments). For each data collection, we will collect interview/ survey data from 1 to 3 workers per establishment. Each respondent will respond only once. Each worker interview/survey will take approximately 30 minutes. Thus, the maximum annual burden for the interview/surveys per data collection will be 720 hours (480 establishments*3 workers*30 minutes). As we plan to conduct up to 3 data collections annually, the maximum annual worker interview/survey burden will be 2,160 hours (720 hours*3 data collections).

We expect a worker response rate of approximately 70 percent. Thus, for each data collection, we will need to

conduct a recruiting screener with approximately 2,057 worker respondents to obtain the needed number of respondents. Each respondent will respond only once. Each screener will take approximately 3 minutes. Thus, the maximum annual burden for the recruiting screeners per data collection will be 103 hours (2,057 workers*3 minutes). As we plan to conduct up to 3 data collections annually, the maximum annual burden will be 309 hours (103 hours*3 data collections). Thus, the maximum annual burden will be 2,469 hours (2,160 hours for worker interview/surveys + 309 hours for worker recruiting screener). There is no cost to the respondent other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Retail food workers	Interview/survey Recruiting screener	4,320 6,171	1 1	30/60 3/60	2,160 309
Total					2,469

Daniel Holcomb,

Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2011–15682 Filed 6–22–11; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Board on Radiation and Worker Health (ABRWH or Advisory Board), National Institute for Occupational Safety and Health (NIOSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned committee:

Time and Date: 11 a.m.-3 p.m., July

Place: Audio Conference Call via FTS Conferencing. The USA toll-free, dial-in number is 1–866–659–0537 and the pass code is 9933701.

Status: Open to the public, but without a public comment period.

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation

Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines, which have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction, which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to the CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, most recently, August 3, 2009, and will expire on August 3, 2011.

Purpose: This Advisory Board is charged with a) Providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and c) upon request by the Secretary, HHS, advising the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class.

Matters To Be Discussed: The agenda for the conference call includes: HHS Notice of Proposed Rulemaking to Amending 42 CFR Part 81 (to add Chronic Lymphocytic Leukemia as a "radiogenic cancer" for the determination of probability of causation under Subpart B of EEOICPA); NIOSH SEC Petition Evaluation for Ames Laboratory (Ames, Iowa) and General Electric Company (Evendale, Ohio); NIOSH 10-mkYear Review of Its Division of Compensation Analysis and Support (DCAS) Program: Subcommittee and Work Group Updates; DCAS SEC Petition Evaluations Update for the August 2011 Advisory Board Meeting; and Board Correspondence.

The agenda is subject to change as priorities dictate.

Because there is not a public comment period, written comments may be submitted. Any written comments received will be included in the official record of the meeting and should be submitted to the contact person below in advance of the meeting.

Contact Person for more Information: Theodore M. Katz, M.P.A., Executive Secretary, NIOSH, CDC, 1600 Clifton Road, NE., Mailstop: E–20, Atlanta, GA 30333, Telephone (513) 533–6800, Toll Free 1–800–CDC–INFO, E-mail ocas@cdc.gov.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention, and the Agency for Toxic Substances and Disease Registry.

Dated: June 16, 2011.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2011–15681 Filed 6–22–11; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Institute for Occupational Safety and Health (NIOSH); Request for Nominations To Serve on the World Trade Center Health Program Science/ Technical Advisory Committee (WTCHP-STAC)

The Centers for Disease Control and Prevention (CDC) is soliciting nominations for possible membership on the WTCHP–STAC. This committee was established by Public Law 111–347 (The James Zadroga 9/11 Health and Compensation Act of 2010), enacted on January 2, 2011, Section 3302(a). The Advisory Committee is governed by the provisions of Public Law 92–463, the Federal Advisory Committee Act, as amended (5 U.S.C. App.), which sets forth standards for the formation and use of advisory committees in the Executive Branch.

Section 3302(a)(1) of the James Zadroga 9/11 Health and Compensation Act of 2010 (the Act) establishes that the WTCHP-STAC will review scientific and medical evidence and make recommendations to the WTC Program Administrator on additional program eligibility criteria and additional health conditions for program inclusion. The committee will be consulted on other matters as related to and outlined in the Act at the discretion of the WTC Program Administrator. In accordance with Public Law 111–347, Section 3302(a)(2), the WTC Program Administrator will appoint the members of the committee and include at least:

- 4 occupational physicians, at least two of whom have experience treating WTC rescue and recovery workers;
- 1 physician with expertise in pulmonary medicine;
- 2 environmental medicine or environmental health specialists;
- 2 representatives of WTC responders;
- 2 representatives of certifiedeligible WTC survivors;
 - 1 industrial hygienist;
 - 1 toxicologist;
 - 1 epidemiologist; and, at least
 - 1 mental health professional.

For the mental health professional category, specific expertise is sought in trauma-related psychiatry or psychology and psychiatric epidemiology. Other members may be appointed at the discretion of the WTC Program Administrator.

A WTCHP-STAC member's term appointment may last four years. If a vacancy occurs, the WTC Program Administrator may appoint a new member who represents the same interest as the predecessor. WTCHP-STAC members may be appointed to successive terms. The frequency of committee meetings shall be determined by the WTC Program Administrator based on program needs. Meetings may occur up to four times a year. Members are paid the Special Government Employee rate of \$250 per day, and travel costs and per diem are included and based on the Federal Travel Regulations.

Any interested person or organization may self-nominate or nominate one or more qualified persons for membership. Nominations must include the following information:

- The nominee's contact information and current occupation or position;
- The nominee's resume or curriculum vitae, including prior or current membership on other NIOSH, CDC, HHS advisory committees or other relevant organizations, associations, and committees:
- The category of membership (occupational, pulmonary or environmental medicine physician, environmental health specialist, representative of responder or survivor beneficiary group, industrial hygienist, toxicologist, epidemiologist, or mental health) that the candidate is qualified to represent;

- A summary of the background, experience, and qualifications that demonstrates the nominee's suitability for each of the nominated membership categories;
- Articles or other documents the nominee has authored that indicate the nominee's knowledge, and experience in relevant subject categories; and
- A statement that the nominee is aware of the nomination, is willing to regularly attend and participate in WTCHP-STAC meetings, and has no known conflicts of interest that would preclude membership on WTCHP-STAC.

WTCHP-STAC members will be selected upon the basis of their relevant experience and competence in their respective categorical fields. The information received through this nomination process, in addition to other relevant sources of information, will assist the WTC Program Administrator in appointing members to serve on WTCHP-STAC. In selecting members, the WTC Program Administrator will consider individuals nominated in response to this **Federal Register** notice, as well as other qualified individuals.

NIOSH is committed to bringing greater diversity of thought, perspective and experience to its advisory committees. Nominees from all races, gender, age and persons living with disabilities are encouraged to apply. Nominees must be U.S. citizens.

Candidates invited to serve will be asked to submit the "Confidential Financial Disclosure Form for Special Government Employees Serving on Federal Advisory Committees at the Centers for Disease Control and Prevention." This form allows CDC to determine whether there is a statutory conflict between that person's public responsibilities as a Special Government Employee and private interests and activities, or the appearance of a lack of impartiality, as defined by Federal regulation. The form may be viewed and downloaded at http://www.usoge.gov/ forms/oge450 pdf/ oge450 accessible.pdf. This form should not be submitted as part of a

nomination.

Nominations should be submitted (postmarked or received) by July 7, 2011.

You may submit nominations for WTCHP-STAC, identified by NIOSH Docket No. NIOSH-229, by any of the following methods:

• Electronic submissions: You may submit nominations, including attachments, electronically to the NIOSH Docket No. NIOSH–229 located at http://www.cdc.gov/niosh/docket/. Follow the instructions for submitting