

will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than February 22, 2013.

A. Federal Reserve Bank of Richmond (Adam M. Drimer, Assistant Vice President) 701 East Byrd Street, Richmond, Virginia 23261-4528:

1. *Bay-Vanguard, MHC*, and *BV Financial, Inc.*, both in Sparrow Point, Maryland; to acquire 100 percent of the voting shares of Vigilant Federal Savings Bank, Essex, Maryland.

Board of Governors of the Federal Reserve System, January 23, 2013.

Michael J. Lewandowski,

Assistant Secretary of the Board.

[FR Doc. 2013-01675 Filed 1-25-13; 8:45 am]

BILLING CODE 6210-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: HHS-EGOV-18380-60D]

Agency Information Collection Activities; Proposed Collection; Public Comment Request

AGENCY: Electronic Government Office; Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Electronic Government Office (EGOV), Department

of Health and Human Services, announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). The ICR is for extending the use of the approved information collection assigned OMB control number 4040-0001, which expires on March 31, 2013. The ICR also requests categorizing the form as a common form, meaning HHS will only request approval for its own use of the form rather than aggregating the burden estimate across all Federal Agencies as was done for previous actions on this OMB control number. Prior to submitting that ICR to OMB, EGOV seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on the ICR must be received on or before March 29, 2013.

ADDRESSES: Submit your comments to *Information.CollectionClearance@hhs.gov* or by calling (202) 690-6162.

FOR FURTHER INFORMATION CONTACT: Information Collection Clearance staff, *Information.CollectionClearance@hhs.gov* or (202) 690-6162.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the document identifier HHS-EGOV-18380-60D for reference.

Information Collection Request Title: SF-424 Research & Related (R&R).

OMB No.: 4040-0001.

Abstract: The SF-424 Research & Related Information Collection is an information collection comprised of a set of standardized forms used for grant applications to research-based agencies.

Need and Proposed Use of the Information: The SF-424 R&R is used by the public to apply for Federal financial assistance in the forms of grants. These forms are submitted to the Federal grant-making research-based agencies for evaluation and review.

Likely Respondents: Organizations and institutions seeking research-based grants.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions, to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information, to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information, and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

HHS estimates that the SF-424 Research and Related form will take 1 hour to complete. We expect that 128,378 respondents will use this form.

Once OMB approves the use of this common form, federal agencies may request OMB approval to use this common form without having to publish notices and request public comments for 60 and 30 days. Each agency must account for the burden associated with their use of the common form.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
SF-424 Research and Related Application for Federal Assistance	128,378	1	1	128,378
Total	128,378	1	1	128,378

EGOV specifically requests comments on (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.

Keith A. Tucker,

Information Collection Clearance Officer.

[FR Doc. 2013-01622 Filed 1-25-13; 8:45 am]

BILLING CODE 4151-AE-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities; Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project:

“Evaluating the Knowledge and Educational Needs of Students of Health Professions on Patient-Centered Outcomes Research.” In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3521, AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by March 29, 2013.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by email at doris.lefkowitz@AHRQ.hhs.gov.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427–1477, or by email at doris.lefkowitz@AHRQ.hhs.gov.

SUPPLEMENTARY INFORMATION:

Proposed Project

Evaluating the Knowledge and Educational Needs of Students of Health Professions on Patient-Centered Outcomes Research

AHRQ’s Effective Health Care Program, which was authorized by Section 1013 of the Medicare Prescription Drug, Improvement and Modernization Act of 2003, 42 U.S.C. 299b–7, is the Federal Government’s first program to conduct patient-centered outcomes research (PCOR) and share the findings with the public. PCOR is research that assesses the benefits and harms of preventive, diagnostic, therapeutic, palliative or health delivery system interventions. This research helps clinicians, patients and other caregivers make decisions about health care choices by highlighting comparisons and outcomes that matter to people, such as survival, function, symptoms, and health related quality of life. The Program funds individual researchers, research centers, and academic organizations to work together with the Agency to produce effectiveness and comparative effectiveness research.

The Effective Health Care Program also translates research findings into a variety of products for diverse stakeholders. These products include summary guides for clinicians, patients/consumers, and policy-makers, continuing education modules and

faculty slide sets for clinicians, patient decision aids, and audio and video podcasts.

Most of the PCOR materials and translation products that are currently available are designed to help practicing clinicians, consumers/patients, and policymakers in making important decisions about health care. AHRQ recognizes the importance of insuring that clinicians in training are also exposed to PCOR and that they fully understand their role and value in shared clinical decision making. AHRQ and the Effective Health Care Program have started developing some tools, such as faculty slide sets based on comparative effectiveness reviews of the literature, to reach this audience through traditional clinical curricula. However, exposure to PCOR may occur and even be more effective in more non-traditional extracurricular settings, such as special interest projects created and sponsored by student groups or even Web-based events involving social media.

This evaluation study addresses AHRQ’s need for a report to inform strategic planning for dissemination and educational activities targeted to clinicians in training. The evaluation is intended to assess students’ and faculties’ needs and preferences for integrating PCOR into the health professions’ curricula, learning environment, and other training opportunities through a series of structured interviews with selected faculty members and an online survey directed at students in the health professions. The outcome will be a roadmap, which will include a set of recommendations for strategies and tools for educational and dissemination activities, along with a suggested approach and timeline for implementation of the recommendations. The recommendations will inform AHRQ’s strategic plan for future efforts which will engage and develop information and materials for the health professions student audience.

The goals of this project are to:

- (1) Understand the extent to which PCOR is currently integrated into the curriculum and how it is disseminated to students in the health professions.
- (2) Understand health professions students’ attitudes toward and knowledge of PCOR.
- (3) Explore differences in health professions student experiences with PCOR by health profession.
- (4) Identify informational and training needs and preferences of health professions students in primary care-oriented training programs.

This study is being conducted by AHRQ through its contractor, James Bell Associates, pursuant to (1) 42 U.S.C. 299b–7, (2) AHRQ’s authority to conduct and support research on healthcare and on systems for the delivery of such care, including activities with respect to the quality, effectiveness, efficiency, appropriateness and value of healthcare services, 42 U.S.C. 299a(1), and (3) AHRQ’s authority to support the synthesis and dissemination of available scientific evidence for use by patients, consumers, practitioners, providers, purchasers, policy makers, and educators, 42 U.S.C. 299(b)(2).

Method of Collection

To achieve these goals the following data collections will be implemented:

(1) Student Survey. The purpose of the survey is to assess health professions students’ attitudes toward and knowledge of PCOR, the extent to which they value PCOR, what they would like to know, and how they would prefer to receive this information now and as they move into clinical practice.

(2) Faculty Interview. The faculty interview will focus on gaining an understanding of where PCOR fits into the current curriculum for each health professions field; how both the philosophy and substantive findings of PCOR information are disseminated to instructors and subsequently to students; and perceived gaps and suggested strategies for filling these gaps.

Data will be gathered through structured interviews of faculty in health professions programs and a broad web-based survey of a cross-section of health professions students. The outcome from the project will be used immediately and directly by AHRQ’s Office of Communications and Knowledge Transfer (OCKT) staff to guide strategic planning for addressing the educational needs of health professions students. Subsequent activities may include, but are not limited to, modifying specific information about PCOR and developing novel approaches to providing information on PCOR as determined by the student survey responses. This information will also help guide the determination of the AHRQ OCKT resource needs.

Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annualized burden hours for the respondents’ time to participate in this research. Faculty interviews will be conducted with 24 faculty members and

will last about one hour. The student survey will include 1,800 students and takes 10 minutes to complete. The total

burden is estimated to be 324 hours annually. Exhibit 2 shows the estimated annualized cost burden associated with

the respondents' time to participate in this research. The total cost burden is estimated to be \$4,790 annually.

EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Hours per response	Total
Faculty Interview	24	1	1	24
Student Survey	1,800	1	10/60	300
Total	1,824	Na	Na	324

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hourly wage rate *	Total cost burden
Faculty Interview	24	24	\$47.70	\$1,145
Student Survey	1,800	300	12.15	3,645
Total	1,824	324	Na	4,790

* Based on the mean wages for Health Specialties Teachers, Postsecondary (25-1071; 47.70/hour) and Teacher Assistants (25-9041; \$12.15/hour. Many of the students will be teaching and research assistants, making this the best occupational code for them), National Compensation Survey: Occupational wages in the United States May 2011, "U.S. Department of Labor, Bureau of Labor Statistics." http://www.bls.gov/oes/current/oes_nat.htm#25-0000.

Estimated Annual Costs to the Federal Government

Exhibit 3 shows the total and annualized cost to the Federal

Government for conducting this research. The total cost to the Federal Government is \$683,335. The total annualized cost is estimated to be

approximately \$341,667. The total annual costs include the questionnaire development, administration, analysis, and study management.

EXHIBIT 3—ESTIMATED TOTAL AND ANNUALIZED COST

Cost component	Total cost	Annualized cost
Project Development	\$144,707	\$72,353
Data Collection Activities	283,667	141,833
Data Processing and Analysis	135,523	67,762
Publication of Results	9,012	4,506
Project Management	65,722	32,861
Overhead	44,704	22,352
Total	683,335	341,667

Request for Comments

In accordance with the Paperwork Reduction Act, 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 health care research and health care 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: January 16, 2013.
Carolyn M. Clancy,
 Director.
 [FR Doc. 2013-01342 Filed 1-25-13; 8:45 am]
BILLING CODE 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.
ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project: "Applying Novel Methods To Better