

issues are important to clinical and public health, we expect good participation by most states. This mechanism will assure the best response rate of all the options we considered.

The CDC LRN Coordinator will email a letter to the Laboratory Director of the LRN Reference Laboratories, (i.e., 50 State Public Health Laboratories, the New York City Public Health Laboratory and the Los Angeles County Public Health Laboratory). These 52 LRN Reference Laboratory Directors will be asked to then email the sentinel laboratories, which include hospital and independent laboratories, in their states, and provide a hyperlink to access the survey tool on-line. SurveyMonkey® will host the online survey and be used as the information collection instrument and responses will be collected and maintained by ASM.

We anticipate that approximately 4,200 sentinel laboratories will be

contacted and asked to complete the survey on-line. ASM anticipates achieving an 80% response rate with their information collections, or 3,360 out of approximately 4,200 aggregate responses for each of the five different surveys.

In addition, the ASM will also recruit, by emailing a letter containing the SurveyMonkey® hyperlinks for the five surveys to each of their ClinMicroNet and DivCNet listervs inviting ~828 and ~1470 subscribers (comprised of laboratory directors as well as medical technologists in a 99%:1% and 60%:40%), respectively, to take each of the five SurveyMonkey® surveys. Moreover, the ASM will email the same letter containing the SurveyMonkey® hyperlinks for the 5 surveys to ~1453 ASM Clinical Microbiology Issues Update newsletter subscribers, which include microbiology supervisors, laboratory directors, laboratory

managers, and medical technologists in a 25 percent:25 percent: 25 percent: 25 percent ratio, to invite them to participate.

For burden calculations, respondents will include microbiology supervisors, laboratory directors, laboratory managers, and medical technologists. According to ASM, the burden hours per respondent who will be invited to participate in each of the BCC baseline and post-dissemination surveys will not exceed 35 minutes and each of the BSI, UT and CDI baseline surveys will be 20 minutes. This time frame was specified based on ASM's previous experiences conducting laboratory surveys. Each survey was pilot tested with 9 or fewer respondents before dissemination.

The total estimated annualized burden hours for this collection is 17,225. There are no costs to respondents 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 hrs.)
Microbiology Supervisors .....	BCC-baseline .....	2,463	1	35/60
	BCC-post .....	2,463	1	35/60
	BSI-baseline .....	2,463	1	20/60
	UT-baseline .....	2,463	1	20/60
	CDI-baseline .....	2,463	1	20/60
Laboratory Directors .....	BCC-baseline .....	3,115	1	35/60
	BCC-post .....	3,115	1	20/60
	BSI-baseline .....	3,115	1	20/60
	UT-baseline .....	3,115	1	20/60
	CDI-baseline .....	3,115	1	20/60
Laboratory Managers .....	BCC-baseline .....	1,413	1	35/60
	BCC-post .....	1,413	1	35/60
	BSI-baseline .....	1,413	1	20/60
	UT-baseline .....	1,413	1	20/60
	CDI-baseline .....	1,413	1	20/60
Medical Technologists .....	BCC-baseline .....	960	1	35/60
	BCC-post .....	960	1	20/60
	BSI-baseline .....	960	1	20/60
	UT-baseline .....	960	1	20/60
	CDI-baseline .....	960	1	20/60

**LeRoy A. Richardson,**  
 Chief, Information Collection Review Office,  
 Office of Scientific Integrity, Office of the  
 Associate Director for Science, Office of the  
 Director, Centers for Disease Control and  
 Prevention.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Community Living**

**Agency Information Collection Activities; Proposed Collection; Comment Request; Small Business Innovation Research Program—Phase II**

**AGENCY:** National Institute on Disability, Independent Living and Rehabilitation, Administration for Community Living (ACL), HHS.

**ACTION:** Notice.

**SUMMARY:** The Administration for Community Living (ACL), National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) is announcing an opportunity for public comment on the proposed collection of certain information. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on

the information collection requirements relating to the Small Business Innovation Research Program (SBIR)—Phase II.

**DATES:** Submit written or electronic comments on the collection of information by October 5, 2015.

**ADDRESSES:** Submit electronic comments on the collection of information to: [Brian.Bard@acl.hhs.gov](mailto:Brian.Bard@acl.hhs.gov).

**FOR FURTHER INFORMATION CONTACT:** Brian Bard at 202–254–7345 or [Brian.Bard@acl.hhs.gov](mailto:Brian.Bard@acl.hhs.gov).

**SUPPLEMENTARY INFORMATION:** Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency request or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL/NIDILRR is publishing notice of the proposed collection of information set forth in this document. With respect to the following collection of information, ACL/NIDILRR invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of ACL/NIDILRR’s functions, including whether the information will have practical utility; (2) the accuracy of ACL/NIDILRR’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 respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology. ACL/NIDILRR proposes to use this set of data collection tools to be used as a grant application package for the information used to apply for new grants under the SBIR program (Phase II).

Public Law 106–554, the “Small Business Reauthorization Act of 2000, H.R. 5567” (the “Act”) was enacted on December 21, 2000. The Act requires certain agencies, including the

Department of Health and Human Services (HHS) to establish a Small Business Innovation Research (SBIR) program by reserving a statutory percentage of their extramural research and development budgets to be awarded to small business concerns for research or research and development (R/R&D) through a uniform, highly competitive, three-phase process each fiscal year. The Act further requires the Small Business Administration (SBA) to issue policy directives for the general conduct of the SBIR programs within the Federal Government. The purpose of this program is to stimulate technological innovation in the private sector, strengthen the role of small business in meeting Federal research and research and development needs, increase the commercial application of Department of Education (ED) supported research results, and improve the return on investment from Federally-funded research for economic and social benefits to the Nation.

Awards are made on the basis of competitively reviewed applications. The Department is requesting approval of this grant application package for the information used to apply for new grants under the Small Business Innovation Research (SBIR) Phase II program. Phase I is intended to determine, insofar as possible, the scientific or technical merit and feasibility of ideas. Phase II is intended to expand on the results of and to further pursue the development of a Phase I project. Phase II is the principal research and research and development effort. It requires a more comprehensive application, outlining the effort in detail including the commercial potential. Phase II applications must be Phase I grantees with findings that appear sufficiently promising as a result of Phase I. Applications are evaluated based on published criteria by panels of experts.

ACL/NIDILRR estimates the burden of this collection of information as 240 hours for project staff, 320 for reviewers, and 1,080 hours for individuals. Total burden is 1,640 hours per year.

Dated: July 31, 2015.

**Kathy Greenlee,**

*Administrator and Assistant Secretary for Aging.*

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**BILLING CODE 4154–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA–2013–D–1009]

#### Use of Nanomaterials in Food for Animals; Guidance for Industry; Availability

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the availability of guidance for industry #220 entitled “Use of Nanomaterials in Food for Animals.” The guidance describes FDA’s current thinking regarding the use of nanomaterials or the application of nanotechnology in food for animals. It is intended to assist industry and other stakeholders in identifying potential issues related to the safety or regulatory status of food for animals containing nanomaterials or otherwise involving the application of nanotechnology.

**DATES:** Submit either electronic or written comments on Agency guidances at any time.

**ADDRESSES:** Submit written requests for single copies of the guidance to the Policy and Regulations Staff (HFV–6), Center for Veterinary Medicine, Food and Drug Administration, 7519 Standish Pl., Rockville, MD 20855. Send one self-addressed adhesive label to assist that office in processing your requests. See the **SUPPLEMENTARY INFORMATION** section for electronic access to the guidance document.

Submit electronic comments on the guidance to <http://www.regulations.gov>. Submit written comments to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.

**FOR FURTHER INFORMATION CONTACT:** Dragan Momcilovic, Center for Veterinary Medicine (HFV–226), Food and Drug Administration, 7519 Standish Pl., Rockville, MD 20855, 240–453–6856, [dragan.momcilovic@fda.hhs.gov](mailto:dragan.momcilovic@fda.hhs.gov).

#### **SUPPLEMENTARY INFORMATION:**

##### **I. Background**

In the **Federal Register** of June 27, 2014 (79 FR 36530), FDA published the notice of availability for a draft guidance #220 entitled “Use of Nanomaterials in Food for Animals” giving interested persons until September 10, 2014, to comment on the draft guidance. FDA received several comments on the draft guidance and those comments were