of the draft supporting statement is available at *www.regulations.gov* (see Docket ID IHS_FRDOC_001).

SUPPLENTARY INFORMATION: The IHS Office of Information Technology is submitting the proposed information collection to OMB for review, as required by the Paperwork Reduction Act of 1995. This notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques of other forms of information technology, *e.g.,* permitting electronic submission of responses.

Proposed Collection: Title: 0917–XXXX, ''Information Security Ticketing and Incident Reporting.''

Type of Information Collection Request: This is a new information request for a three year approval of this new information collection, 0917–XXXX.

Form(s) and Form number(s): Incident Reporting Form, Form F07–02b.

Title of Proposal: Information Security Ticketing and Incident Reporting

OMB Control Number: To be assigned.

Need and Use of Information Collection: The Indian Health Service (IHS) uses secure information technology (IT) to improve health care quality, enhance access to specialty care, reduce medical errors, and modernize administrative functions consistent with the Department of Health and Human Services (HHS) enterprise initiatives.

IHS is responsible for maintaining an information security program that provides protection for information collected or maintained by or on behalf of the Agency, and protection for information systems used or operated by the Agency or by another organization on behalf of the Agency.

Members of Affected Public: IHS staff, including federal and non-federal employees (contractors, Tribal employees, etc.).

Status of the Proposed Information Collection: New request.

Type of Respondents: Individuals.

The table below provides: Types of data collection instruments, estimation to number of respondents, number of responses per respondent, annual number of responses, average burden hour per response, and total annual burden hours.

Data collection instrument(s)	Estimated number of respondents	Responses per respondent	Annual number of responses	Average burden hour per response *	Total annual burden hours
IHS Federal and Non-Federal Staff	1700	1	1700	15	425
Total	1700	1	1700	15	425

* For ease of understanding, average burden hours are provided in actual minutes. There are no direct costs, to respondents to report.

For Comments: Submit comments, requests for more information on the collection, or requests to obtain a copy of the data collection instrument and instruction to CDR. Steven Miller, by one of the following methods:

- *Mail:* CDR. Steven Miller, Indian Health Service, 5600 Fishers Lane, STOP 07E30, Rockville, MD 20857.
- *Phone:* (301) 443–2452.
- *Email: steven.miller@ihs.gov*.

Comment Due Date: Your comments regarding this information collection are best assured of having full effect if received within 60 days of the date of this publication.

Dated: November 17, 2017.

Michael D. Weahkee,

Assistant Surgeon General, U.S. Public Health Service, Acting Director, Indian Health Service.

[FR Doc. 2017–25814 Filed 11–29–17; 8:45 am]

BILLING CODE 4165–16–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Request for Public Comment: 30-Day Notice for Extension of Fast Track Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery: IHS Customer Service Satisfaction and Similar Surveys

AGENCY: Indian Health Service, HHS.

ACTION: Notice and request for comments. Request for extension of approval.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, the Indian Health Service (IHS) is submitting to the Office of Management and Budget (OMB) a request for an extension of a previously approved collection of information titled, ''Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery: IHS Customer Service Satisfaction and Similar Surveys'' (OMB Control Number 0917–0036), which expires July 30, 2018. This proposed information collection project was recently published in the **Federal Register** on September 27, 2017, and allowed 60 days for public comment. The IHS received no comments regarding this collection. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB.

A copy of the supporting statement is available at *www.regulations.gov* (see Docket ID IHS_FRDOC_001).

DATES: January 2, 2018. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication.

Direct Your Comments to OMB: Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.

FOR FURTHER INFORMATION CONTACT: To request additional information, please contact Evonne Bennett-Barnes by one of the following methods:

- *Mail:* Evonne Bennett-Barnes, Information Collection Clearance

Officer, Indian Health Service, 5600 Fishers Lane, Rockville, MD 20857.

- *Phone:* 301–443–4750.
- *Email: Evonne.Bennett-Barnes@ihs.gov.*
- *Fax:* 301–443–4750.

SUPPLEMENTARY INFORMATION: *Title:* OMB Control No. 0917–0036, Fast Track Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery: IHS Customer Service Satisfaction and Similar Surveys.

Abstract: The IHS will be engaging in information collection activities that will garner qualitative customer and stakeholder feedback in an efficient, timely manner, in accordance with the Administration's commitment to improving service delivery within Federal Agencies. Qualitative feedback is information that provides useful insights on perceptions and opinions, but are not statistical surveys that yield quantitative results that can be generalized to the population of study. This feedback will provide insight into customer or stakeholder perceptions, opinions, experiences and expectations, and provide an early warning of issues with service. Also, the collection of qualitative feedback will assist IHS to focus its attention on areas where communication, training, or changes in operations might improve delivery of products or services. These collections will allow for ongoing, collaborative and actionable communications between the Agency and its customers and stakeholders. Furthermore, the collection activity will allow feedback to contribute directly to the improvement of program management.

Feedback or information collected under this generic clearance will provide useful information, but it will not yield data that can be generalized to the overall population. This type of generic clearance for qualitative collection will not be used for quantitative information collections that are designed to yield reliably actionable results, such as monitoring trends over time or documenting program performance. Such data uses require more rigorous designs that address: the target population to which generalizations will be made, sampling frame, sample design (including stratification and clustering), precision requirements or power calculations that justify the proposed sample size, the expected response rate, methods for assessing potential non-response bias, protocols for data collection, and any testing procedures that were or will be undertaken prior fielding the study. Depending on the degree of influence the results are likely to have, such collections may still be eligible for submission for other generic mechanisms that are designed to yield quantitative results. Below are the IHS projected average estimates for the next three years: [1]

Current Actions: Extension of approval for a collection of information.

Type of Review: Extension.

Affected Public: Individuals and households, businesses and organizations, and Tribal Government.

Average expected annual number of activities: 100.

Respondents: 105,000.

Annual responses: 105,000.

Frequency of response: Once per request.

Average minutes per response: 10.

Burden hours: 17,500.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Dated: November 17, 2017.

Michael D. Weahkee,

Assistant Surgeon General, U.S. Public Health Service, Acting Director, Indian Health Service.

[FR Doc. 2017–25815 Filed 11–29–17; 8:45 am]

BILLING CODE 4165–16–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Cancer Institute Special Emphasis Panel; NCI SPORE I Review.

Date: January 25–26, 2018.

Time: 4:00 p.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: Cambria Hotel & Suite Rockville, 1 Helen Heneghan Way, Rockville, MD 20850.

Contact Person: David G. Ransom, Ph.D., Scientific Review Officer, Research Program Review Branch, Division of Extramural Activities, National Cancer Institute, NIH, 9609 Medical Center Drive, Room 7W124, Bethesda, MD 20892–9750, 240–276–6351, *david.ransom@nih.gov*.

Name of Committee: National Cancer Institute Initial Review Group; Subcommittee F—Institutional Training and Education.

Date: February 26–27, 2018.

Time: 7:00 p.m. to 4:00 p.m.

Agenda: To review and evaluate grant applications.

Place: Bethesda Marriott Suites, 6711 Democracy Boulevard, Bethesda, MD 20817.

Contact Person: Timothy C. Meeker, MD, Scientific Review Officer, Resources and Training Review Branch, Division of Extramural Activities, National Cancer Institute, NIH, 9609 Medical Center Drive, Room 7W642, Bethesda, MD 20892–9750, 240–276–6464, *meekert@mail.nih.gov*.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: November 24, 2017.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–25785 Filed 11–29–17; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Drug Abuse; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant

[1] The 60-day notice included the following estimate of the aggregate burden hours for this generic clearance for IHS federal-wide:

Average expected annual number of activities: 100.

Average number of respondents per activity: 1,050.

Annual responses: 105,000.

Frequency of response: Once per request.

Average minutes per response: 10.

Burden hours: 17,500.