to the Secretary of HHS and the U.S. Congress on policy issues related to the activities under section 851 of Title VIII of the Public Health Service Act (PHSA). The Secretary of HHS, and by delegation the Administrator of HRSA, is charged under Title VIII of the PHSA as amended, with responsibility for a wide range of activities in support of nursing education and practice which include: enhancement of the composition of the nursing workforce; improvement of the distribution and utilization of nurses to meet the health needs of the nation; expansion of the knowledge, skills, and capabilities of nurses to enhance the quality of nursing practice; development and dissemination of improved models of organization; financing and delivery of nursing services; and promotion of interdisciplinary approaches to the delivery of health services particularly in the context of public health and primary care.

During the May 16, 2018, meeting, NACNEP members will be oriented to the work of the Council and identify a topic for 2018. The NACNEP final agenda will be available on the NACNEP website three (3) days prior to the meeting at <a href="https://www.hrsa.gov/advisory-committees/nursing/index.html">https://www.hrsa.gov/advisory-committees/nursing/index.html</a>. Please note that agenda items are subject to change as priorities dictate.

Members of the public will have the opportunity to provide comments, which are part of the official Committee record. Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to make oral comments or provide written comments to the NACNEP should be sent to CDR Antoine Smith, DFO, using the contact information above, at least three (3) business days prior to the meeting.

## Amy P. McNulty,

Acting Director, Division of the Executive Secretariat.

[FR Doc. 2018–08263 Filed 4–19–18; 8:45 am] BILLING CODE 4165–15–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Advisory Committee on Children and Disasters Public Teleconference

**AGENCY:** Office of the Secretary, Department of Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** As stipulated by the Federal Advisory Committee Act, the

Department of Health and Human Services is hereby giving notice that the National Advisory Committee on Children and Disasters (NACCD) will hold a public teleconference on May 1, 2018.

**DATES:** The NACCD Teleconference is May 1, 2018, from 3:00 p.m. to 4:00 p.m. Eastern Standard Time EST.

ADDRESSES: We encourage members of the public to attend the teleconference. To register, send an email to naccd@hhs.gov with "NACCD Registration" in the subject line. Submit your comments to naccd@hhs.gov or on the NACCD Contact Form located at https://www.phe.gov/Preparedness/legal/boards/naccd/Pages/contact.aspx. For additional information, visit the NACCD website located at https://www.phe.gov/naccd.

**SUPPLEMENTARY INFORMATION:** Pursuant to the Federal Advisory Committee Act of 1972 (5 U.S.C., Appendix, as amended), and section 2811A of the Public Health Service Act (42 U.S.C. 300hh-10a), as added by section 103 of the Pandemic and All Hazards Preparedness Reauthorization Act of 2013 (Pub. L. 113-5), the HHS Secretary, in consultation with the Secretary of the U.S. Department of Homeland Security, established the NACCD. The purpose of the NACCD is to provide advice and consultation to the HHS Secretary with respect to the medical and public health needs of children in relation to disasters.

Background: The NACCD Public Teleconference on May 1, 2018, is dedicated to the presentation, deliberation, and vote on the NACCD Funding Strategies Report.

Availability of Materials: We will post all teleconference materials and any modifications to the agenda prior to May 1, 2018, on the NACCD website, located at https://www.phe.gov/naccd.

Procedures for Providing Public Input: Members of the public may attend the teleconference via a toll-free call-in phone number, which is available on the NACCD website at https://www.phe.gov/naccd.

We encourage members of the public to provide written comments that are relevant to the NACCD Teleconference prior to May 1, 2018. Send written comments by email to naccd@hhs.gov with "NACCD Public Comment" in the subject line. The NACCD Chair will respond during the meeting to comments received by April 30, 2018, during the teleconference.

Dated: April 9, 2018.

#### Robert P. Kadlec,

Assistant Secretary for Preparedness and Response.

[FR Doc. 2018–08278 Filed 4–19–18; 8:45 am] **BILLING CODE P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

Proposed Collection; 60-Day Comment Request; NIH NeuroBioBank Tissue Access Request Form, National Institute of Mental Health

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995 to provide opportunity for public comment on proposed data collection projects, the National Institute of Mental Health (NIMH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

**DATES:** Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more information on the proposed project, contact: Melba Rojas, NIMH Project Clearance Liaison, Science Policy and Evaluation Branch, Office of Science Policy, Planning and Communications, NIMH, Neuroscience Center, 6001 Executive Boulevard, MSC 9667, Bethesda, Marvland 20892, call 301-443-4335, or email your request, including your mailing address, to nimhprapubliccomments@mail.nih.gov. Formal requests for additional plans and instruments must be requested in writing.

**SUPPLEMENTARY INFORMATION:** Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 requires: Written comments and/or suggestions from the public and affected agencies are invited to address one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the

agency'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 minimizes the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Proposed Collection Title: NIH NeuroBioBank Tissue Access Request Form, 0925–0723, Expiration date 07/31/2018, EXTENSION, National Institute of Mental Health, National Institutes of Health (NIH).

Need and Use of Information
Collection: This request serves as notice
that the National Institute of Mental
Health plans to continue supporting the
research community studying
neurological, developmental, and
psychiatric disorders by coordinating
access to human post-mortem brain
tissue and related biospecimens stored
by our federation of networked brain
and tissue repositories known as the
NIH NeuroBioBank. To facilitate this
process, researchers wishing to obtain
brain tissue and biospecimens stored by

the NIH NeuroBioBank must continue completing the NIH NeuroBioBank Tissue Access Request Form. The primary use of the information collected by this instrument is to document, track, monitor, and evaluate the appropriate use of the NIH NeuroBioBank resources, as well as to notify stakeholders of updates, corrections or changes to the system.

OMB approval is requested for 3 years. There are no costs to respondents' other than their time. The total estimated annualized burden hours are 56

# ESTIMATED ANNUALIZED BURDEN HOURS

| Instrument type                             | Type of respondents | Number of respondents | Number of responses per respondent | Average<br>burden per<br>response<br>(in hours) | Total annual burden hours |
|---|---------------------|-----------------------|------------------------------------|---|---------------------------|
| NIH NeuroBioBank Tissue Access Request Form | Researchers         | 225                   | 1                                  | 15/60   | 56                        |
| Total                                       |                     | 225                   | 225                                |   | 56                        |

Dated: April 12, 2018.

#### Melba O. Rojas,

Project Clearance Liaison, National Institute of Mental Health, National Institutes of Health.

[FR Doc. 2018–08243 Filed 4–19–18; 8:45 am] BILLING CODE 4140–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

# Government-Owned Inventions; Availability for Licensing

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** The invention listed below is owned by an agency of the U.S. Government and is available for licensing.

## FOR FURTHER INFORMATION CONTACT: Dr.

Amy Petrik, 240–627–3721; amy.petrik@nih.gov. Licensing information and copies of the U.S. patent application listed below may be obtained by communicating with the indicated licensing contact at the Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases, 5601 Fishers Lane, Rockville, MD, 20852; tel. 301–496–2644. A signed Confidential Disclosure Agreement will be required to receive copies of unpublished patent applications.

#### SUPPLEMENTARY INFORMATION:

Technology description follows.

# Stabilized Influenza Hemagglutinin Stem Region Trimers and Uses Thereof

Description of Technology

An effective universal influenza vaccine would eliminate the uncertain and costly process of seasonal influenza vaccine development each year. Researchers at the National Institute of Allergy and Infectious Diseases (NIAID) are developing immunogens which elicit neutralizing antibodies to the highly conserved stem region of the influenza viral protein hemagglutinin. By targeting this highly conserved region, which is nearly identical in various strains of influenza virus, these immunogens could train the immune system to defend against a wide variety of influenza strains including pandemic strains derived from animal reservoirs.

This vaccine candidate employs a protein nanoparticle platform to display portions of the highly conserved stem region of the group 1 hemagglutinin (HA) viral surface protein in its native, trimeric conformation. Animal studies have shown that the HA stem region trimers displayed on a nanoparticle are more immunogenic compared to HA stem region trimers alone. Immunization of mice and ferrets with an H1N1 nanoparticle HA stem immunogen conferred protection from a lethal dose of H5N1 virus.

NIAID is continuing development of these vaccine candidates through

animal studies and moving toward clinical evaluation.

This technology is available for licensing for commercial development in accordance with 35 U.S.C. 209 and 37 CFR part 404, as well as for further development and evaluation under a research collaboration.

### Potential Commercial Applications

• Universal influenza vaccine

## Competitive Advantages

- Nucleic acid or recombinant proteinbased vaccine
- Increased ease of production relative to current seasonal influenza vaccines

### Development Stage

 Preclinical, animal data available *Inventors:* John R. Mascola, Jeffrey C. Boyington, Hadi M. Yassine, Peter D. Kwong, Barney S. Graham, Masaru Kanekiyo (all from NIAID).

Publications: Yassine, H.M., et al. (2015) Hemagglutinin-stem nanoparticles generate heterosubtypic influenza protection. Nature Medicine 21: 1065–1070. [PMID: 26301691]

Intellectual Property: HHS Reference Number E-066-2014 includes U.S. Patent Application No. 15/13,265 filed November 22, 2016 (Pending); Canada Patent Application No. 2,950,085 filed May 27, 2015 (Pending); China Patent Application No. 201580041202.3 filed January 24, 2017 (Pending); Europe Patent Application No. 15727824.3 filed December 23, 2016 (Pending); India