

TABLE 3—ESTIMATED ANNUAL THIRD-PARTY DISCLOSURE BURDEN <sup>1</sup>

Activity; 21 CFR Section	Number of respondents	Number of disclosures per respondent	Total annual disclosures	Average burden per disclosure	Total hours
Nutrient labeling; 107.10(a) and 107.20 .....	5	13	65	8	520

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with the information collection.

We estimate compliance with our infant formula labeling requirements in 21 CFR 107.10(a) and 107.20 requires 520 hours annually.

Dated: April 15, 2021.

**Lauren K. Roth,**

*Acting Principal Associate Commissioner for Policy.*

[FR Doc. 2021-08470 Filed 4-22-21; 8:45 am]

**BILLING CODE 4164-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Health Resources and Services Administration**

**Agency Information Collection**

**Activities: Proposed Collection: Public Comment Request Information**

**Collection Request Title: Health Center Program: COVID-19 Data Collection Tools, OMB No. 0906-0062—Revision**

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement for opportunity for public comment on proposed data collection projects of the Paperwork Reduction Act of 1995, HRSA announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting the ICR to OMB, HRSA seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

**DATES:** Comments on this ICR should be received no later than June 22, 2021.

**ADDRESSES:** Submit your comments to [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or mail the HRSA Information Collection Clearance Officer, Room 14N136B, 5600 Fishers Lane, Rockville, MD 20857.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, email [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or call Lisa Wright-Solomon, the HRSA Information Collection Clearance Officer at (301) 443-1984.

**SUPPLEMENTARY INFORMATION:** When submitting comments or requesting information, please include the information request collection title for reference.

*Information Collection Request Title:* Health Center Program: COVID-19 Data Collection Tools, OMB No. 0906-0062—Revision.

*Abstract:* This information collection request was previously approved by OMB on June 11, 2020, as an emergency clearance (OMB No.: 0906-0062). HRSA is currently undertaking the standard Paperwork Reduction Act process for normal OMB approval.

During the COVID-19 public health emergency, HRSA-supported health centers and Federally Qualified Health Center Look-Alikes (look-alikes) have played a key role in providing testing and care for those affected by the virus. HRSA awarded billions of dollars in new funding to support health center awardees and look-alikes in the detection, prevention, diagnosis, and treatment of COVID-19. This funding has enabled health centers to maintain or increase their staffing levels, conduct training, provide COVID-19 treatment, and administer millions of tests for both existing and new patients. In addition, HRSA, in collaboration with Centers for Disease Control and Prevention, launched the Health Center COVID-19 Vaccine program as part of a White House initiative focused on health equity. This occurred in February 2021 to directly allocate COVID-19 vaccines to HRSA-supported health centers.

This ICR to support the implementation of COVID-19 relief funding and response activities includes forms previously submitted in the emergency information collection request clearance: (1) Health Center COVID-19 Data Collection Survey Tool, (2) Addendum to COVID-19 Data Collection Survey Tool, and (3) the Health Center COVID-19 Vaccine Program Readiness Assessment Tool. This revised information collection request includes two newly added forms: (1) Primary Care Association (PCA) COVID-19 Data Collection Survey Tool <sup>1</sup> and (2) the Health Center

COVID-19 Vaccine Program Conditions of Participation Agreement.

*Need and Proposed Use of the Information:* HRSA uses the data collected to optimize COVID-19 testing and vaccination; track health center capacity and the impact of COVID-19 on operations, patients, and staff; and better understand training and technical assistance, funding, and other health center resource needs. The data allow HRSA to assess health center capacity prior to program enrollment, supporting successful vaccine allocation strategies while providing HRSA with information on the effectiveness of vaccine distribution through this program. In addition, the data inform HRSA in resource allocation and technical assistance to health centers.

The readiness assessment supports HRSA's analysis of health center ability to successfully participate in the Health Center COVID-19 Vaccine Program. These data are critical to determine health center capacity to implement the vaccination program as well as comply with program requirements. These data are used to assess program readiness including:

- Ability to safely store the vaccine
- Availability of trained and credentialed staff and other staff capacity
- Reporting capacity
- Sufficient Personal Protective Equipment
- Plan for vaccine transport

The health center weekly survey and addendum support HRSA's ability to monitor progress towards the development and delivery of COVID-19 prevention, preparedness, and/or response activities and ensure appropriate vaccine administration as well as better understand training and technical assistance, funding, and other health center resource needs.

The Conditions of Participation Agreement governs all COVID-19 vaccination activities at all health center sites that receive COVID-19 vaccine through the HRSA Health Center

under the HHS Secretary's Public Health Emergency Authority to waive the requirements of the Paperwork Reduction Act during the Public Health Emergency for reporting on a voluntary basis.

<sup>1</sup> The bi-weekly COVID-19 PCA Survey Tool (comprised of six questions) is currently approved

COVID-19 Vaccine Program. Health Centers that sign the agreement agree to adhere to each of the stated requirements.

The PCA weekly survey increases information sharing between health centers, PCAs, and HRSA in order to better support COVID-19 emergency response efforts inclusive of testing and vaccination activities. Data collected from the survey tool is used to track and monitor issues/challenges to program

implementation and assess the need for the delivery/dissemination of targeted training and technical assistance.

*Likely Respondents:* HRSA-supported health centers, look-alikes, and PCAs.

*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.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses to form per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Condition of Participation Agreement (one-time completion for vaccine program participants only).	1,467 (Total health centers, including look-alikes, in 2019).	1	1,467	.25	366.75
Readiness Assessment Tool (one-time completion for vaccine program participants only).	1,467 (Total health centers, including look-alikes, in 2019).	1	1,467	.50	733.5
Health Center COVID-19 Data Collection Survey Tool (weekly completion of existing 20 questions).	1,389 (Total health centers in 2019).	48	66,672	1.00	66,672
Addendum to COVID-19 Data Collection Survey Tool (weekly completion for vaccine program participants only).	1,389 (Total health centers in 2019).	48	66,672	.50	33,336
PCA COVID-19 Data Collection Survey Tool (bi-weekly completion of existing six questions).	52 .....	6	312	.75	234
Total .....	5,764 .....	.....	136,590	.....	101,342.25

HRSA 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) the utility 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.

**Maria G. Button,**

*Director, Executive Secretariat.*

[FR Doc. 2021-08454 Filed 4-22-21; 8:45 am]

BILLING CODE 4165-15-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Eunice Kennedy Shriver National Institute of Child Health and Human Development; 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 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 clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Institute of Child Health and Human Development Initial Review Group Obstetrics and Maternal-Fetal Biology Subcommittee.

*Date:* June 25, 2021.

*Time:* 10:00 a.m. to 6:00 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* NICHD/NIH, 6710B Rockledge Drive, Bethesda, MD 20892 (Video-Assisted Meeting).

*Contact Person:* Luis E. Dettin, Ph.D., Scientific Review Officer, Eunice Kennedy Shriver National Institute of Child Health and Human Development, 6710B Rockledge Drive, Room 2131B, Bethesda, MD 20892, 301-827-8231, [luis.dettin@nih.gov](mailto:luis.dettin@nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.864, Population Research; 93.865, Research for Mothers and Children;

93.929, Center for Medical Rehabilitation Research; 93.209, Contraception and Infertility Loan Repayment Program, National Institutes of Health, HHS)

Dated: April 20, 2021.

**Ronald J. Livingston, Jr.,**  
*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2021-08475 Filed 4-22-21; 8:45 am]

BILLING CODE 4140-01-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institute of Diabetes and Digestive and Kidney Diseases; 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