

biennial collection will be \$4,719,509.02 (See Table 1 for calculations).

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TABLE 1—ESTIMATE OF BIENNIAL BURDEN FOR EEO-4 REPORT

	Hourly wage rate ²	Burden hours per government entity	Cost per government entity	Total burden hours	Total burden hour cost ³
	Number of Reporting Units = 5,687			Number of Records Submitted = 13,649	
Chief Executive	\$52.90	0.35	\$18.52	4,777.1	\$88,447.64
Legal Counsel	50.50	0.35	17.68	4,777.1	84,434.89
Computer Support Specialist (IT Professional)	29.75	0.7	20.83	9,554.2	198,965.38
Executive Administrative Staff	27.40	1.4	38.36	19,108.3	732,995.16
Human Resource Specialist	32.59	2.45	79.85	33,439.6	2,669,998.39
Payroll Clerks	22.60	1.75	39.55	23,885.4	944,667.57
Total	N/A	7	214.77	95,542	4,719,509.02

These estimates are based upon filers' use of the EEO-4 online filing system to submit reports. The EEOC has made online electronic submission much easier for respondents required to file the EEO-4 Report and as a result, more respondents are using this electronic filing method. During the 2019 EEO-4 data collection cycle, 4,988 EEO-4 filers completed and certified their submission. Of the 4,988 EEO-4 filers who submitted data in 2019, 4 percent uploaded a data file, 92 percent filed through the online application, and 4 percent submitted paper records. Electronic filing remains the most efficient, accurate, and secure means of reporting for respondents required to submit the EEO-4 report. Accordingly, the EEOC will continue to encourage EEO-4 filers to submit data through online electronic filing and will only accept paper records from filers who have secured permission to submit data via paper submission.

Dated: May 22, 2021.

For the Commission.

Charlotte A. Burrows,
Chair.

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² Occupational titles and wages are from the Bureau of Labor Statistics' National Industry-Specific Occupational Employment and Wage Estimates—NAICS 999000—Federal, State, and local Government, excluding state and local schools and hospitals and the U.S. Postal Service: https://www.bls.gov/oes/current/naics3_999000.htm#11-0000. The wages cited are median hourly wages.

³ Burden hour cost is estimated by multiplying the 'Cost per government entity' column by the 'Total burden hours' column.

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (Act) (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington DC 20551-0001, not later than June 11, 2021.

A. Federal Reserve Bank of Dallas (Karen Smith, Director, Applications) 2200 North Pearl Street, Dallas, Texas 75201-2272:

1. *Lawrence W. Pickett, Dana Doshier DeGravelle, Marilyn Pickett Worsley, Rock W. Worsley, Lauren P. Davis, Pamela J. Pickett, Benjamin Clark*

Burch, and minor children, all of Monroe, Louisiana; Amanda Doshier Arledge, West Monroe, Louisiana; Adam L. Pickett, San Francisco, California; De-Elte Copes and Lonnie L. Copes, both of Delhi, Louisiana; Charles E. Hixon, Jr. and Anne Ruth Hixon, both of Rayville, Louisiana; Bonnie R. Holley and Willie R. Holley, both of Epps, Louisiana; David Wesley Sullivan, Pioneer, Louisiana; and Joshua D. Sullivan, New Orleans, Louisiana; a group acting in concert, to retain voting shares of Capital Bancorp, Inc., and thereby indirectly retain voting shares of Commercial Capital Bank, both of Delhi, Louisiana.

B. Federal Reserve Bank of Minneapolis (Chris P. Wangen, Assistant Vice President), 90 Hennepin Avenue, Minneapolis, Minnesota 55480-0291:

1. *James T. Robertson, Ramsey, Minnesota; to retain voting shares of Rushford State Bancorp, Inc., and thereby indirectly retain voting shares of Rushford State Bank, both of Rushford, Minnesota.*

Board of Governors of the Federal Reserve System, May 24, 2021.

Michele Taylor Fennell,

Deputy Associate Secretary of the Board.

[FR Doc. 2021-11277 Filed 5-26-21; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Notice of Meeting

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Notice.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) announces a Special Emphasis Panel (SEP) meeting on “INTUIT-PC: Improving Nonsurgical Treatment of Urinary Incontinence among women in Primary Care: Dissemination and Implementation of PCOR Evidence (U18).” This SEP meeting will be closed to the public.

DATES: July 15, 2021.

ADDRESSES: Agency for Healthcare Research and Quality, (Video Assisted Review), 5600 Fishers Lane, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: Jenny Griffith, Committee Management Officer, Office of Extramural Research, Education and Priority Populations, Agency for Healthcare Research and Quality, (AHRQ), 5600 Fishers Lane, Rockville, Maryland 20857, Telephone: (301) 427-1557.

SUPPLEMENTARY INFORMATION: A Special Emphasis Panel is a group of experts in fields related to health care research who are invited by AHRQ, and agree to be available, to conduct on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the Panel do not attend regularly-scheduled meetings and do not serve for fixed terms or a long period of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

The SEP meeting referenced above will be closed to the public in accordance with the provisions set forth in 5 U.S.C. App. 2, section 10(d), 5 U.S.C. 552b(c)(4), and 5 U.S.C. 552b(c)(6). Grant applications for “INTUIT-PC: Improving Nonsurgical Treatment of Urinary Incontinence among women in Primary Care: Dissemination and Implementation of PCOR Evidence (U18)” are to be reviewed and discussed at this meeting. 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.

Agenda items for this meeting are subject to change as priorities dictate.

Dated: May 24, 2021.

Marquita Cullom,
Associate Director.

[FR Doc. 2021-11241 Filed 5-26-21; 8:45 am]

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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 (AHRQ), 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 proposed updates to the approved information collection project “Safety Program in Perinatal Care (SPPC)-II Demonstration Project.” This proposed information collection was previously published in the **Federal Register** on March 5, 2021 and allowed 60 days for public comment. The purpose of this notice is to allow an additional 30 days for public comment.

DATES: Comments on this notice must be received by June 28, 2021.

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

Safety Program in Perinatal Care (SPPC)-II Demonstration Project

The SPPC-II *Demonstration Project* has the following goals:

(1) To implement the integrated Alliance for Innovation on Maternal Health (AIM)-SPPC II program in birthing hospitals in Oklahoma and Texas in coordination with AIM and the respective state PQC (Perinatal Quality Collaborative);

(2) To assess the implementation of the integrated AIM-SPPC II program in these hospitals; and

(3) To ascertain the short- and medium-term impact of the integrated AIM-SPPC II program on hospital (*i.e.* perinatal unit) teamwork and communication, patient safety, and key maternal health outcomes.

This study is being conducted by AHRQ through its contractor, Johns

Hopkins University (JHU) and the AIM program, JHU’s subcontractor, pursuant to AHRQ’s statutory 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 and with respect to quality measurement and improvement. 42 U.S.C. 299a(a)(1) and (2).

Due to continued pandemic-related impacts on the SPPC-II study population, we propose to update the SPPC-II data collection by (1) restructuring and adding questions to the approved qualitative interview guides to be used with AIM program Team Leads and now frontline health providers in the summer/fall of 2021 to include questions to better understand the perceived implementation context; and (2) adding focus group discussions in the summer/fall of 2022 to assess perceptions of implementation and sustainability of the SPPC-II Toolkit at the hospital level. The total burden hours resulting from these proposed updates to the SPPC-II data collection is 64 hours. The total estimated annual burden hours for SPPC-II are 54,693.

Method of Collection

To achieve the goals of this project the following updates to the data collections will be implemented:

(a) Qualitative, semi-structured interviews with AIM Team Leads and frontline staff will be conducted by phone or via zoom in the summer/fall of 2021 to assess the perceived utility of the training and the perceived implementation context (including barriers, facilitators, and strategies) in the context of a reduced scope for SPPC-II. In 8 hospitals, one-hour interviews with AIM Team Leads (1 per hospital) and 30-minute interviews with frontline staff (4 per hospital) will be conducted. An interview guide developed based on the Consolidated Framework for Implementation Research framework will be used to conduct the interviews, together with a corresponding consent form. The interview guide will be supported by the SPPC-II tier level training specific handouts.

(b) Focus group discussions with AIM Team Leads and frontline staff will be conducted by phone or via zoom in the summer/fall of 2022 to assess perceptions of implementation and sustainability of the SPPC-II Toolkit at the hospital level. We will conduct one 1-hour focus groups with AIM Team Leads and frontline staff in each of the 8 hospitals. An interview guide