

ESTIMATED ANNUALIZED BURDEN HOURS

Respondent type	Form name	Number of participants	Number of responses per participant	Average burden per response (in hours)	Total burden (in hours)
Community-based Organization Representatives-Adults.	Community-based Organization Needs Assessment.	130	1	15/60	33
Health Department Representatives-Adults.	Health Department Needs Assessment.	70	1	15/60	18
Total	51

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC-2021-0094; NIOSH 248-H]

World Trade Center Health Program Scientific/Technical Advisory Committee (WTCHP STAC)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of meeting.

SUMMARY: In accordance with the Federal Advisory Committee Act, the CDC announces the following virtual meeting for the World Trade Center Health Program Scientific/Technical Advisory Committee (WTCHP STAC). A notice of this WTCHP STAC meeting has also been posted on the committee website at: https://www.cdc.gov/wtc/stac_meeting.html.

DATES: The meeting will be held on September 28, 2021 from 11:00 a.m. to 4:00 p.m., EDT, and on September 29, 2021 from 11:00 a.m. to 4:00 p.m., EDT.

Written comments received by September 21, 2021 will be provided to the STAC prior to the meeting.

ADDRESSES: You may submit comments, identified by Docket No. CDC-2021-0094; NIOSH 248-H by mail. CDC does not accept comments by email.

- *Federal eRulemaking Portal:* <https://www.regulations.gov>. Follow the instructions for submitting comments.

- *Mail:* Docket number CDC-2021-0094; NIOSH 248-H, c/o Sherri Diana, NIOSH Docket Office, National Institute for Occupational Safety and Health, 1090 Tusculum Avenue, MS C-34, Cincinnati, Ohio 45226.

Instructions: All submissions received must include the Agency name and Docket Number. Written public comments received by September 21, 2021, will be provided to the WTCHP STAC prior to the meeting. Docket number CDC-2021-0094; NIOSH 248-H will close September 29, 2021.

FOR FURTHER INFORMATION CONTACT:

Tania Carreón-Valencia, Ph.D., Designated Federal Officer, World Trade Center Health Program, National Institute for Occupational Safety and Health, CDC, 1600 Clifton Road, NE, MS R-12, Atlanta, GA 30329-4027, Telephone: (513) 841-4515; Email: wtc-stac@cdc.gov.

SUPPLEMENTARY INFORMATION:

Background: The WTCHP STAC was established by Title I of the James Zadroga 9/11 Health and Compensation Act of 2010, Public Law 111-347 (January 2, 2011), amended by Public Law 114-113 (Dec. 18, 2015) and Public Law 116-59 (Sept. 27, 2019), adding Title XXXIII to the Public Health Service (PHS) Act (codified at 42 U.S.C. 300mm to 300mm-61).

Purpose: The purpose of the WTCHP STAC is to review scientific and medical evidence and to make recommendations to the Administrator of the World Trade Center (WTC) Health Program regarding additional WTC Health Program eligibility criteria, potential additions to the List of WTC-Related Health Conditions, and research regarding certain health conditions related to the September 11, 2001, terrorist attacks.

Title XXXIII of the PHS Act established the WTC Health Program within the Department of Health and Human Services (HHS). The WTC Health Program provides medical monitoring and treatment benefits to eligible firefighters and related personnel, law enforcement officers, and rescue, recovery, and cleanup workers who responded to the September 11, 2001, terrorist attacks in New York City, at the Pentagon, and in Shanksville, Pennsylvania (responders), and to eligible persons who were

present in the dust or dust cloud on September 11, 2001 or who worked, resided, or attended school, childcare, or adult daycare in the New York City disaster area (survivors). Certain specific activities of the Administrator of the WTC Health Program are reserved to the Secretary, HHS, to delegate at his discretion; other duties not explicitly reserved to the Secretary, HHS, are assigned to the Director of the National Institute for Occupational Safety and Health (NIOSH). The administration of the WTCHP STAC is left to the Director of NIOSH in his role as Administrator. CDC and NIOSH provide funding, staffing, and administrative support services for the WTCHP STAC. The charter was reissued on May 12, 2021 and will expire on May 12, 2023.

Matters to be Considered: The agenda will include an overview of the Program's research activities in the past 10 years and discussion of the Administrator's request that the STAC provide a recommendation regarding whether to add uterine cancer to the List of health conditions eligible for coverage by the WTC Health Program. A white paper on scientific considerations developed to assist the Committee in their deliberations is available on the WTC Health Program website at https://www.cdc.gov/wtc/stac_meeting.html. An agenda is also posted on the WTC Health Program website at https://www.cdc.gov/wtc/stac_meeting.html.

Agenda items are subject to change as priorities dictate. *Meeting Information:* This is a virtual meeting conducted via Zoom. The public is welcome to follow the proceedings via live webcast on the World Wide Web. No registration is required. The webcast link for September 28-29, 2021 is <https://www.ustream.tv/channel/QyXBRzYjVCS>. For additional information please visit the WTC Health Program website at https://www.cdc.gov/wtc/stac_meeting.html.

Public Participation

Interested parties may participate in this activity by submitting written views, opinions, recommendations, and

data. You may submit comments on any topic related to this activity. Comments received, including attachments and other supporting materials, are part of the public record and subject to public disclosure. Do not include any information in your comment or supporting materials that you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/near duplicate examples of a mass-mail campaign. CDC will carefully consider all comments submitted into the docket. CDC does not accept comment by email.

Oral Public Comment: The public is welcome to participate, via Zoom, during the public comment periods on September 28, 2021, from 11:30 a.m. to 12:00 p.m., EDT, and on September 29, 2021, from 12:10 p.m. to 12:40 p.m., EDT. Please note that the public comment periods end at the times indicated above. Each commenter will be provided up to five minutes for comment. A limited number of time slots are available and will be assigned on a first come-first served basis. Members of the public who wish to address the WTCHP STAC during the oral public comment sessions must sign up by providing their name and desired date for commenting to Mia Wallace, Committee Management Specialist, via email: MWallace@cdc.gov, or the addresses section provided in this notice by September 21, 2021.

Written Public Comment: Written comments will also be accepted from those unable to attend the public session per the instructions provided in the addresses section above. Written comments received in advance of the meeting will be included in the official record of the meeting. Written comments received by September 21, 2021 will be provided to the STAC prior to the meeting. The docket will close on September 29, 2021.

Policy on Redaction of Committee Meeting Transcripts (Public Comment): Transcripts will be prepared and posted to <http://www.regulations.gov> within 60 days after the meeting. If a person making a comment gives their name, no attempt will be made to redact that name. NIOSH will take reasonable steps to ensure that individuals making public comments are aware that their comments (including their name, if

provided) will appear in a transcript of the meeting posted on a public website. Such reasonable steps include a statement read at the start of the meeting stating that transcripts will be posted, and names of speakers will not be redacted. If individuals in making a statement reveal personal information (e.g., medical information) about themselves, that information will not usually be redacted. The CDC Freedom of Information Act coordinator will, however, review such revelations in accordance with the Freedom of Information Act and, if deemed appropriate, will redact such information. Disclosures of information concerning third party medical information will be redacted.

The Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Strategic Business Initiatives Unit, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Solicitation of Nominations for Membership on the Lead Exposure and Prevention Advisory Committee (LEPAC)

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: The Centers for Disease Control and Prevention (CDC) is soliciting nominations for membership on the LEPAC. The LEPAC is composed of 15 members that are Federal and non-Federal experts in fields associated with lead screening, the prevention of lead exposure, and services for individuals and communities affected by lead exposure. Nominations are being sought for individuals with expertise in the fields of epidemiology, toxicology, mental health, pediatrics, early childhood education, special education, diet and nutrition, and environmental

health. Members may be invited to serve for three-year terms. Selection of members is based on candidates' qualifications to contribute to the accomplishment of LEPAC objectives.

DATES: Nominations for membership on the LEPAC must be received no later than November 1, 2021. Packages received after this time will not be considered for the current membership cycle.

ADDRESSES: All nominations should be emailed to LEPAC@cdc.gov.

FOR FURTHER INFORMATION CONTACT: Paul Allwood, Ph.D., M.P.H., Designated Federal Officer, National Center for Environmental Health, CDC, 4770 Buford Highway NE, Atlanta, GA 30329-4018, Telephone: (770) 488-6774, PAllwood@cdc.gov.

SUPPLEMENTARY INFORMATION: The members of this committee are selected by the Secretary of the U.S. Department of Health and Human Services (HHS). The committee's objective is to advise the Secretary, HHS and the Director, Centers for Disease Control and Prevention/Administrator, Agency for Toxic Substances and Disease Registry on a range of activities to include: (1) Review of Federal programs and services available to individuals and communities exposed to lead; (2) review of the current research on lead exposure to identify additional research needs; (3) review of and identification of best practices, or the need for best practices regarding lead screening and the prevention of lead exposure; (4) identification of effective services, including services relating to healthcare, education, and nutrition for individuals and communities affected by lead exposure and lead poisoning, including in consultation with, as appropriate, the lead exposure registry as established in Public Law 114-322 Section 2203(b) (42 U.S.C. 300j-27); and (5) undertaking of any other review or activities that the Secretary determines to be appropriate.

Annually as determined necessary by the Secretary or as required by Congress, the committee shall submit a report to include: (1) An evaluation of the effectiveness of the Federal programs and services available to individuals and communities exposed to lead; (2) an evaluation of additional lead exposure research needs; (3) an assessment of any effective screening methods or best practices used or developed to prevent or screen for lead exposure; (4) input and recommendations for improved access to effective services relating to health care, education, or nutrition for individuals and communities impacted by lead exposure; and (5) any other recommendations for communities