

accessible to individuals with disabilities.

**DATES:** *Effective date:* November 6, 2012.

*Meeting date:* The meeting will be held on Tuesday, November 27, 2012, starting at 9:00 a.m. eastern standard time and ending no later than 3:30 p.m.

**FOR FURTHER INFORMATION CONTACT:** Ken Sandler, Designated Federal Officer, Office of Federal High-Performance Green Buildings, Office of Government-wide Policy, General Services Administration, 1275 First Street NE., Room 633D, Washington, DC 20417, telephone 202-219-1121 (note: this is not a toll-free number). Additional information about the Committee is available online at <http://www.gsa.gov/portal/content/121999>.

**SUPPLEMENTARY INFORMATION:**

*Procedures for Providing Public Comments:* Contact Ken Sandler at 202-219-1121 to register to attend and to comment during the meeting's public comment period. Registered speakers/organizations will be allowed a maximum of 5 minutes each and will need to provide written copies of their presentations. Requests to comment at the meeting must be received by 5:00 p.m. eastern standard time on Wednesday, November 21, 2012. Written comments may be provided to Mr. Sandler at [ken.sandler@gsa.gov](mailto:ken.sandler@gsa.gov) until Friday, November 23, 2012.

*Availability of Materials for the Meeting:* Please contact Mr. Sandler at the email address above to register to attend this meeting and obtain meeting materials. Materials may also be accessed online at <http://www.gsa.gov/portal/content/121999>. To attend this meeting, please submit your full name, organization, email address, and phone number to Ken Sandler by 5:00 p.m. eastern standard time on Wednesday, November 21, 2012.

*Background:* The Green Building Advisory Committee provides advice to GSA as specified in Public Law 110-140, as a mandatory Federal advisory committee. Under this authority, the Committee will advise GSA on the rapid transformation of the Federal building portfolio to sustainable technologies and practices. The Committee's focus is primarily on reviewing strategic plans, products and activities of the Office of Federal High-Performance Green Buildings and providing advice regarding how the Office can most effectively accomplish its mission.

*Agenda:*

- Introductions & plans for today's meeting.
- Green Building Certification System Review update.

- Facilities Management Institute ([www.FMI.gov](http://www.FMI.gov)).
- Knowledge Network.
- 30 minute public comment period for individuals pre-registered per instructions above. Each individual will be able to speak for no more than 5 minutes.
- Lunch.
- Business Case for Federal Green Building.
- 15 minute public comment period for individuals pre-registered per instructions above. Each individual will be able to speak for no more than 5 minutes.
- Closing comments.

*Meeting Access:* The Committee will convene its meeting at: US Access Board Conference Room, 1331 F Street NW., Suite 800, Washington, DC 20004. Persons attending meetings in the Access Board's conference space are requested to refrain from using perfume, cologne, and other fragrances (see <http://www.access-board.gov/about/policies/fragrance.htm> for more information).

Dated: November 1, 2012.

**Janet Dobbs,**

*Deputy Associate Administrator, Office of Asset and Transportation Management, General Services Administration.*

[FR Doc. 2012-27103 Filed 11-5-12; 8:45 am]

**BILLING CODE 6820-27-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**HIT Policy and Standards Committees; Workgroup Application Database**

**AGENCY:** Office of the National Coordinator for Health Information Technology, HHS.

**ACTION:** Notice of New ONC HIT FACA Workgroup Application Database.

The Office of the National Coordinator (ONC) has launched a new Health Information Technology Federal Advisory Committee Workgroup Application Database.

*Name of Committees:* HIT Standards Committee and HIT Policy Committee.

*General Function of the Committees:* The HITSC is charged to provide recommendations to the National Coordinator on standards, implementation specifications, and certification criteria for the electronic exchange and use of health information for purposes of adoption, consistent with the implementation of the Federal Health IT Strategic Plan, and in accordance with policies developed by the HIT Policy Committee. The HITPC is charged to provide recommendations

to the National Coordinator on a policy framework for the development and adoption of a nationwide health information technology infrastructure that permits the electronic exchange and use of health information as is consistent with the Federal Health IT Strategic Plan and that includes recommendations on the areas in which standards, implementation specifications, and certification criteria are needed.

*Contact Person:* MacKenzie Robertson, Office of the National Coordinator, HHS, 355 E Street SW., Washington, DC 20201, 202-205-8089, Fax: 202-260-1276, email: [mackenzie.robertson@hhs.gov](mailto:mackenzie.robertson@hhs.gov).

*Background:* As part of ongoing efforts to recruit highly qualified workgroup members, ONC has developed an online database system to allow anyone with an interest in contributing and expertise in the numerous aspects of HIT to submit their information for future consideration for HIT FACA workgroup membership. Whenever a new workgroup is formed, or as current workgroups experience turnover, ONC will turn to this resource first to fill out each group's membership.

*How to Apply:* If you wish to be considered for future workgroups, please register on ONC's Workgroup Application Database, <http://onc-faca.altaruminstitute.net/apply>. Thank you for your interest in the HIT Policy and HIT Standards Committees. For more information on the Committees and workgroups, please visit the ONC FACA Web site, [www.healthit.gov/faca](http://www.healthit.gov/faca).

Dated: October 10, 2012.

**MacKenzie Robertson,**

*FACA Program Lead, Office of Policy and Planning, Office of the National Coordinator for Health Information Technology.*

[FR Doc. 2012-27084 Filed 11-5-12; 8:45 am]

**BILLING CODE 4150-45-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60 Day-13-0841]

**Proposed Data Collections Submitted for Public Comment and Recommendations**

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic

summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-7570 or send comments to Ron Otten, 1600 Clifton Road, MS D-74, Atlanta, GA 30333 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov).

*Comments are invited on:* (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

### Proposed Project

Management Information System for Comprehensive Cancer Control Programs—Revision (OMB No. 0920-0841, exp. 1/31/2013)—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

#### *Background and Brief Description*

From 2007–2012, the Centers for Disease Control and Prevention (CDC) provided funding to all 50 states, the District of Columbia, seven tribes/tribal organizations, and seven territories/U.S. Pacific Island jurisdictions through the National Cancer Prevention and Control Program (CDC Funding Opportunity Announcement (FOA) DP07-703). Since 2010, the 65 awardees have used an electronic management information system to submit semi-annual progress reports to CDC (“Management Information System for Comprehensive Cancer Control Programs,” OMB No. 0920-0841, exp. 1/31/2013). The progress reports satisfied federal reporting requirements and allowed CDC to provide targeted technical assistance to awardees while monitoring their activities and progress. The electronic MIS also provided CDC with the capacity to respond in a timely manner to requests for information from the Department of Health and Human

Services (HHS), Congress, and other sources.

In June 2012, CDC initiated a new five-year funding cycle (“Cancer Prevention and Control Program for State, Territorial and Tribal Organizations,” CDC FOA DP12-1205). New cooperative agreements were established with all 65 states, territories, and jurisdictions. In addition to maintaining established core cancer prevention and control activities, the new cooperative agreements reflect increased emphasis on awardee-based policy and environmental approaches to improving health outcomes. New performance measures have been developed to monitor these outcomes and are being incorporated into the MIS. Each state- or territory-based program director will continue to submit semi-annual progress reports to CDC.

CDC issued a related but distinct funding opportunity for states and territories that are poised to accelerate the development of their policy and environmental approaches to cancer control (“Demonstrating the Capacity of Comprehensive Cancer Control Programs to Implement Policy and Environmental Cancer Control Interventions,” FOA DP10-1017). Additional cooperative agreements, which are specific to demonstration program objectives, were awarded to 13 of the 65 states, jurisdictions and territories. Demonstration program activities will be aligned with the existing comprehensive cancer control program in a manner that minimizes duplication, capitalizes on existing activities, and fosters rapid implementation, and will be facilitated by a state- or territory-based policy task force coordinator. However, because demonstration program activities are funded under discrete cooperative agreements, CDC will require separate semi-annual progress reports to monitor the activities and resources which are specific to demonstration program objectives.

*CDC plans to request OMB approval of modifications to the MIS-based reporting system including:* (1) Minor changes to core MIS data elements for all 65 awardees, and (2) separate data collection and progress reporting for demonstration program awardees, and (3) revised burden estimates based on a modified method for estimating respondent burden.

In the initial OMB approval for MIS-based reporting, total respondent burden was based on a long-term average burden per response. CDC acknowledges that response burden actually varies over the award period, with time commitments for data entry and training being greatest during the first six to twelve months of the award period. After initial population of the MIS has been completed, ongoing maintenance of the system is limited to entering changes, progress information, and new activities, and the burden per response decreases substantially. The revised method for estimating respondent burden distinguishes between these phases.

For the 65 state- and territory-based cancer prevention and control programs, CDC estimates the initial burden of populating the MIS at four hours per response. Some of the information entered into the MIS during the previous cooperative agreement period will be downloaded to minimize respondent burden in the new funding period, but awardees will be responsible for verifying this information and entering new objectives. After completing these steps, the estimated burden for ongoing system maintenance and semi-annual reporting is three hours per response.

For the 13 states and territories that are also participating in the demonstration program, the initial burden of populating the MIS is estimated to be six hours per response. Awardees will be responsible for entering information about the new objectives, staff, and other resources for demonstration program activities, which is not available from existing sources. Thereafter, the estimated burden for ongoing system maintenance and semi-annual reporting is estimated at three hours per response.

OMB approval will be requested for three years. CDC will use the information collection to identify training and technical assistance needs, monitor compliance with cooperative agreement requirements, evaluate progress made in achieving program-specific goals, and obtain information needed to respond to Congressional and other inquiries regarding program activities and effectiveness. Data will be collected electronically twice per year. There are no costs to respondents other than their time.

## ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Burden per response (in hr)	Total burden (in hr)
Program Director for State- or Territory-Based Cancer Prevention and Control Program.	Data Elements for All CPC Programs: Initial MIS Population.	22	1	4	88
	Data Elements for All CPC Programs: Semi-annual Reporting.	65	2	3	390
State- or Territory-Based Policy Task Force Coordinator.	Data Elements for CPC Demonstration Program: Initial MIS Population.	5	1	6	30
	Data Elements for CPC Demonstration Program: Semi-annual Reporting.	13	2	3	78
Total .....	.....	.....	.....	.....	586

Dated: October 29, 2012.

**Ron A. Otten,**

Director, Office of Scientific Integrity (OSI), Office of the Associate Director for Science (OADS), Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2012-27047 Filed 11-5-12; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Partnerships To Advance the National Occupational Research Agenda (NORA)**

**AGENCY:** The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice of public meeting.

**SUMMARY:** The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces the following public meeting: "Partnerships to Advance the National Occupational Research Agenda (NORA)".

*Public Meeting Time and Date:* 10 a.m.–3:30 p.m. EST, January 30, 2013.

*Place:* Patriots Plaza, 395 E Street SW., Conference Room 9000, Washington, DC 20201.

*Purpose of the Meeting:* The National Occupational Research Agenda (NORA) has been structured to engage partners with each other and/or with NIOSH to advance NORA priorities. The NORA Liaison Committee continues to be an opportunity for representatives from organizations with national scope to learn about NORA progress and to

suggest possible partnerships based on their organization's mission and contacts. This opportunity is now structured as a public meeting via the Internet to attract participation by a larger number of organizations and to further enhance the success of NORA. Some of the types of organizations of national scope that are especially encouraged to participate are employers, unions, trade associations, labor associations, professional associations, and foundations. Others are welcome.

This meeting will include updates from NIOSH leadership on NORA as well as updates from approximately half of the NORA Sector Councils on their progress, priorities, and implementation plans to date, likely including the NORA Agriculture, Forestry and Fishing; Healthcare; Mining; Oil and Gas Extraction; and Transportation, Warehousing and Utilities Sector Councils. An update will also be given on planning for the evaluation of the second decade of NORA. An additional NIOSH Program that is working on several NORA priorities may also provide an update. After each update, there will be time to discuss partnership opportunities.

*Status:* The meeting is open to the public, limited only by the capacities of the conference call and conference room facilities. There is limited space available in the meeting room (capacity 34). Therefore, information to allow participation in the meeting through the Internet (to see the slides) and a teleconference call (capacity 50) will be provided to registered participants. Participants are encouraged to consider attending by this method. Each participant is requested to register for the free meeting by sending an email to [noracoordinator@cdc.gov](mailto:noracoordinator@cdc.gov) containing the participant's name, organization name, contact telephone number on the day of the meeting, and preference for

participation in-person or by Web meeting (requirements include: computer, Internet connection, and telephone, preferably with 'mute' capability). An email confirming registration will include the details needed to participate in the Web meeting. Non-US citizens are encouraged to participate in the Web meeting. Non-US citizens who do not register to attend in person on or before January 7, 2013, will not be granted access to the meeting site and will not be able to attend the meeting in-person due to mandatory security clearance procedures at the Patriots Plaza facility.

*Background:* NORA is a partnership program to stimulate innovative research in occupational safety and health leading to improved workplace practices. Unveiled in 1996, NORA has become a research framework for the nation. Diverse parties collaborate to identify the most critical issues in workplace safety and health. Partners then work together to develop goals and objectives for addressing those needs and to move the research results into practice. The NIOSH role is facilitator of the process. For more information about NORA, see <http://www.cdc.gov/niosh/nora/about.html>.

Since 2006, NORA has been structured according to industrial sectors. Ten major sector groups have been defined using the North American Industrial Classification System (NAICS). After receiving public input through the Web and town hall meetings, ten NORA Sector Councils defined sector-specific strategic plans for conducting research and moving the results into widespread practice. To view the National Sector Agendas, see <http://www.cdc.gov/niosh/nora/>.

**FOR FURTHER INFORMATION CONTACT:** Sidney C. Soderholm, Ph.D., NORA Coordinator, Email