

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 (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 notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than April 30, 2013.

A. Federal Reserve Bank of St. Louis (Yvonne Sparks, Community Development Officer) P.O. Box 442, St. Louis, Missouri 63166-2034:

1. *Ronald D. Absher*, Carmi, Illinois; to retain voting shares of Southern Illinois Bancorp, Inc., and thereby indirectly retain voting shares of The First National Bank of Carmi, both in Carmi, Illinois.

B. Federal Reserve Bank of Kansas City (Dennis Denney, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198-0001:

1. *Timothy H. Hume, Leslie J. Hume, James H. Hume, and Kay L. Hume*, all of Walsh, Colorado; and Samuel A. Hume, Fort Worth, Texas; to acquire voting shares of FarmBank Holding, Inc., and thereby indirectly acquire voting shares of First FarmBank, both in Greeley, Colorado.

Board of Governors of the Federal Reserve System, April 10, 2013.

Michael J. Lewandowski,

Assistant Secretary of the Board.

[FR Doc. 2013-08754 Filed 4-12-13; 8:45 am]

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FEDERAL RESERVE SYSTEM**Formations of, Acquisitions by, and Mergers of Bank Holding Companies**

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the

assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than May 10, 2013.

A. Federal Reserve Bank of Atlanta (Chapelle Davis, Assistant Vice President) 1000 Peachtree Street, NE., Atlanta, Georgia 30309:

1. *1st United Bancorp*, Boca Raton, Florida; to merge with Enterprise Bancorp, Inc., Palm Beach Gardens, Florida, and thereby indirectly acquire Enterprise Bank of Florida, North Palm Beach, Florida.

Board of Governors of the Federal Reserve System, April 10, 2013.

Michael J. Lewandowski,

Assistant Secretary of the Board.

[FR Doc. 2013-08753 Filed 4-12-13; 8:45 am]

BILLING CODE 6210-01-P

GOVERNMENT ACCOUNTABILITY OFFICE**Advisory Council on the Standards for Internal Control in the Federal Government; Meeting**

AGENCY: U.S. Government Accountability Office.

ACTION: Advisory Council on the Standards for Internal Control in the Federal Government; Notice of Meeting.

SUMMARY: The US Government Accountability Office (GAO) is initiating efforts to revise the Standards for Internal Control in the Federal Government "Green Book" under our authority in 31 U.S.C. 3512 (c), (d) (commonly known as the Federal Managers' Financial Integrity Act). As part of the revision process, GAO has

established and is holding its inaugural meeting with the Green Book Advisory Council (GBAC). The Comptroller General has established the GBAC to provide input and recommendations to the Comptroller General on revisions to the "Green Book." The purpose of the meeting is to discuss proposed revisions to the "Green Book."

DATES: The meeting will be held May 20, 2013, from 9:00 a.m. to 3:00 p.m.

ADDRESSES: The meeting will be held at the US Government Accountability Office, 441 G St. NW., Washington, DC 20548 in the 7th floor Staats Briefing Room, Room 7C13.

FOR FURTHER INFORMATION CONTACT: For information on the Green Book Advisory Council and the Standards for Internal Control in the Federal Government please contact Kristen Kociolek, Assistant Director, Financial Management and Assurance telephone 202-512-2989, 441 G Street NW., Washington, DC 20548-0001.

SUPPLEMENTARY INFORMATION: Members of the public will be provided and opportunity to address the Council with a brief (five-minute) presentation in the afternoon on matters directly related to the proposed update and revision. Any interested person who plans to attend the meeting as an observer must contact Kristen Kociolek, Assistant Director, 202-512-2989, prior to May 16, 2013. A form of picture identification must be presented to the GAO Security Desk on the day of the meeting to obtain access to the GAO building. Please enter the building at the G Street entrance.

Authority: 31 U.S.C. 3512 (c), (d).

James Dalkin,

Director, Financial Management and Assurance.

[FR Doc. 2013-08621 Filed 4-12-13; 8:45 am]

BILLING CODE 1610-02-M

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, 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 the proposed

information collection project: "Evaluating the Knowledge and Educational Needs of Students of Health Professions on Patient-Centered Outcomes Research." In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501–3521, AHRQ invites the public to comment on this proposed information collection.

This proposed information collection was previously published in the **Federal Register** on January 28th, 2013 and allowed 60 days for public comment. No substantive comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

DATES: Comments on this notice must be received by May 15, 2013.

ADDRESSES: Written comments should be submitted to: AHRQ's OMB Desk Officer by fax at (202) 395–6974 (attention: AHRQ's desk officer) or by email at OIRA_submission@omb.eop.gov (attention: AHRQ's desk officer).

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

Evaluating the Knowledge and Educational Needs of Students of Health Professions on Patient-Centered Outcomes Research AHRQ's Effective Health Care Program, which was authorized by Section 1013 of the Medicare Prescription Drug, Improvement and Modernization Act of 2003, 42 U.S.C. 299b-7, is the Federal Government's first program to conduct patient-centered outcomes research (PCOR) and share the findings with the public. PCOR is research that assesses the benefits and harms of preventive, diagnostic, therapeutic, palliative or health delivery system interventions. This research helps clinicians, patients and other caregivers make decisions about health care choices by highlighting comparisons and outcomes that matter to people, such as survival, function, symptoms, and health related quality of life. The Program funds individual researchers, research centers, and academic organizations to work together with the Agency to produce effectiveness and comparative effectiveness research.

The Effective Health Care Program also translates research findings into a variety of products for diverse

stakeholders. These products include summary guides for clinicians, patients/consumers, and policy-makers, continuing education modules and faculty slide sets for clinicians, patient decision aids, and audio and video podcasts.

Most of the PCOR materials and translation products that are currently available are designed to help practicing clinicians, consumers/patients, and policymakers in making important decisions about health care. AHRQ recognizes the importance of insuring that clinicians in training are also exposed to PCOR and that they fully understand their role and value in shared clinical decision making. AHRQ and the Effective Health Care Program have started developing some tools, such as faculty slide sets based on comparative effectiveness reviews of the literature, to reach this audience through traditional clinical curricula. However, exposure to PCOR may occur and even be more effective in more non-traditional extracurricular settings, such as special interest projects created and sponsored by student groups or even Web-based events involving social media.

This evaluation study addresses AHRQ's need for a report to inform strategic planning for dissemination and educational activities targeted to clinicians in training. The evaluation is intended to assess students' and faculties' needs and preferences for integrating PCOR into the health professions' curricula, learning environment, and other training opportunities through a series of structured interviews with selected faculty members and an online survey directed at students in the health professions. The outcome will be a roadmap, which will include a set of recommendations for strategies and tools for educational and dissemination activities, along with a suggested approach and timeline for implementation of the recommendations. The recommendations will inform AHRQ's strategic plan for future efforts which will engage and develop information and materials for the health professions student audience.

The goals of this project are to:

- (1) Understand the extent to which PCOR is currently integrated into the curriculum and how it is disseminated to students in the health professions.
- (2) Understand health professions students' attitudes toward and knowledge of PCOR.
- (3) Explore differences in health professions student experiences with PCOR by health profession.

(4) Identify informational and training needs and preferences of health professions students in primary care-oriented training programs.

This study is being conducted by AHRQ through its contractor, James Bell Associates, pursuant to (1) 42 U.S.C. 299b–7, (2) AHRQ's 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, 42 U.S.C. 299a(a)(1), and (3) AHRQ's authority to support the synthesis and dissemination of available scientific evidence for use by patients, consumers, practitioners, providers, purchasers, policy makers, and educators, 42 U.S.C. 299(b)(2).

Method of Collection

To achieve these goals the following data collections will be implemented:

(1) *Student Survey.* The purpose of the survey is to assess health professions students' attitudes toward and knowledge of PCOR, the extent to which they value PCOR, what they would like to know, and how they would prefer to receive this information now and as they move into clinical practice.

(2) *Faculty Interview.* The faculty interview will focus on gaining an understanding of where PCOR fits into the current curriculum for each health professions field; how both the philosophy and substantive findings of PCOR information are disseminated to instructors and subsequently to students; and perceived gaps and suggested strategies for filling these gaps.

Data will be gathered through structured interviews of faculty in health professions programs and a broad web-based survey of a cross-section of health professions students. The outcome from the project will be used immediately and directly by AHRQ's Office of Communications and Knowledge Transfer (OCKT) staff to guide strategic planning for addressing the educational needs of health professions students. Subsequent activities may include, but are not limited to, modifying specific information about PCOR and developing novel approaches to providing information on PCOR as determined by the student survey responses. This information will also help guide the determination of the AHRQ OCKT resource needs.

Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annualized burden hours for the respondents' time to participate in this research. Faculty interviews will be

conducted with 24 faculty members and will last about one hour. The student survey will include 1,800 students and takes 10 minutes to complete. The total burden is estimated to be 324 hours annually.

Exhibit 2 shows the estimated annualized cost burden associated with the respondents' time to participate in this research. The total cost burden is estimated to be \$4,790 annually.

EXHIBIT 1—ESTIMATED ANNUALIZED BURDEN HOURS

| Form name | Number of respondents | Number of responses per respondent | Hours per response | Total burden hours |
|-------------------------|-----------------------|------------------------------------|--------------------|--------------------|
| Faculty Interview | 24 | 1 | 1 | 24 |
| Student Survey | 1,800 | 1 | 10/60 | 300 |
| Total | 1,824 | na | na | 324 |

EXHIBIT 2—ESTIMATED ANNUALIZED COST BURDEN

| Form name | Number of respondents | Total burden | Average hourly wage rate* | Total cost burden |
|-------------------------|-----------------------|--------------|---------------------------|-------------------|
| Faculty Interview | 24 | 24 | \$47.70 | \$1,145 |
| Student Survey | 1,800 | 300 | 12.15 | 3,645 |
| Total | 1,824 | 324 | na | 4,790 |

*Based on the mean wages for Health Specialties Teachers, Postsecondary (25-1071; \$47.70/hour) and Teacher Assistants (25-9041; \$12.15/hour. Many of the students will be teaching and research assistants, making this the best occupational code for them), National Compensation Survey: Occupational wages in the United States May 2011, "U.S. Department of Labor, Bureau of Labor Statistics." http://www.bls.gov/oes/current/oes_nat.htm#25-0000.

Estimated Annual Costs to the Federal Government

Exhibit 3 shows the total and annualized cost to the federal

government for conducting this research. The total cost to the Federal Government is \$683,335. The total annualized cost is estimated to be

approximately \$341,667. The total annual costs include the questionnaire development, administration, analysis, and study management.

EXHIBIT 3—ESTIMATED TOTAL AND ANNUALIZED COST

| Cost component | Total cost | Annualized cost |
|------------------------------------|------------|-----------------|
| Project Development | \$144,707 | \$72,353 |
| Data Collection Activities | 283,667 | 141,833 |
| Data Processing and Analysis | 135,523 | 67,762 |
| Publication of Results | 9,012 | 4,506 |
| Project Management | 65,722 | 32,861 |
| Overhead | 44,704 | 22,352 |
| Total | 683,335 | 341,667 |

Request for Comments

In accordance with the Paperwork Reduction Act, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) 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 upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency's subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: March 25, 2013.

Carolyn M. Clancy,
Director.

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