questionnaire (OMB 0923–0016) to get readers' opinions and evaluations. The survey will be inserted and mailed in each public health assessment. In addition, electronic surveys will be sent to clients and partners requesting ATSDR health consultations and exposure investigations within one month following delivery of product or service. The survey collects information on (a) affiliation of users, (b) timeliness and effectiveness of these products, and (c) practical utility of these products.

The reader evaluation surveys provide important feedback that enables ATSDR staff to maintain the utility, integrity and standards of its products. Gathering client feedback ensures that appropriate

information is included in these documents and assists in maintaining medical and scientific usefulness. The information will be used to maintain customer satisfaction with these products. There is no cost to respondents.

The estimate annual burden is 172 hours.

Respondents	Number of respondents	Responses per respondent	Avg. burden response (in hrs.)	Total burden (in hrs.)
ATSDR clients and partners	300	1	0.25	75
Librarians	180	1	0.12	22
Individuals completing questionnaires	200	1	0.25	50
Individuals who received but did not complete questionnaires	100	1	0.25	25

Dated: October 30, 2000.

### Kathy Cahill,

Associate Director for Policy, Planning, and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 00–28363 Filed 11–03–00; 8:45 am]

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[30DAY-06-01]

# Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

## **Proposed Project**

Jail STD Prevalence Monitoring System—New—National Center for HIV, STD, and TB Prevention (NCHSTP)

Proposes a 3-year clearance for data collection of the standardized record

layout for the Jail STD Prevalence Monitoring System. This system consists of test data compiled for persons entering corrections facilities. The standard data elements were created in response to the need to systematically assess morbidity in persons entering corrections facilities who are at high risk for STDs and who often do not seek medical care in mainstream medical settings.

Use of these standard data elements will improve surveillance of STDs by allowing for systematic assessment of a high risk population, taking advantage of already computerized data. States that compile data from corrections facilities are encouraged to participate in the system. The estimated annualized burden is 1248 hours.

Respondents	Number of respondents	Average Num- ber of forms/ respondent	Number of responses/ respondent	Average bur- den/response (in hrs.)
State/local health departments	65	16	1	1.2

Dated: October 30, 2000.

### Kathy Cahill,

Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 00–28436 Filed 11–03–00; 8:45 am]

BILLING CODE 4163-18-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Administration for Children and Families

# Proposed Information Collection Activity; Comment Request

Proposed Projects

Title: Case Plan Section 422,471(a)(16), 475(5)(A) of the Social Security Act.

OMB No.: 0980-0140.

Description: Under section 471(a)(16) of title IV-E of the Social Security Act (the Act), in order for States to be eligible for payments they must have an approved State plan which provides for the development of a case plan (as defined in section 475(1)) for each child receiving foster care maintenance payments, and provides a case review system which meets the requirements in section 475(5) and 475(6). Through the meeting of these requirements, the State also complies, in part, with title IV-B, section 422(b)(10) of the Act (as of 4/1/96), which assures certain protections for children in foster care.

Respondents: State governments.

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Instrument	Number of respondents	Number of responses per respondents	Average bur- den hours per response	Total burden hours
Case Plan	714,056	1	2.62	1,870,827
Estimated Total Annual Burden Hours:				1,870,827

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: October 30, 2000.

## **Bob Sargis**,

Reports Clearance Officer.
[FR Doc. 00–28317 Filed 11–3–00; 8:45 am]
BILLING CODE 4184–01–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

Neurological Devices Panel of the Medical Devices Advisory Committee; Notice of Meeting

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). At least one portion of the meeting will be closed to the public.

Name of Committee: Neurological Devices Panel of the Medical Devices Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on November 16, 2000, 9:30 a.m. to 7 p.m.

Location: Quality Suites Hotel, Potomac Rooms II and III, Three Research Ct., Rockville, MD.

Contact Person: Janet L. Scudiero, Center for Devices and Radiological Health (HFZ–410), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 301–594–1184, ext. 176, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 12513. Please call the Information Line or access the Internet (http://www.fda.gov/cdrh/panelmtg.html for up-to-date information on this meeting.

Agenda: The committee will discuss and make recommendations on: (1) The design of clinical trials for devices to prevent stroke, to treat stroke, and to provide neurological protection after stroke; and (2) the design of clinical studies for temperature control devices to provide neurological protection.

Procedure: On November 16, 2000, from 10 a.m. to 7 p.m., the meeting is open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by November 9, 2000. On November 16, 2000, oral presentations from the public will be scheduled between approximately 11 a.m. and 11:30 a.m. for the discussion of the design of clinical studies for devices to prevent stroke, to treat stroke, and to provide neurological protection after stroke, and between approximately 4:30 p.m. and 5 p.m. for the discussion of the design of clinical studies for temperature control devices to provide neurological protection. Time allotted for each presentation may be limited. Those desiring to make formal oral

presentations should notify the contact person before November 9, 2000, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Closed Committee Deliberations: On November 16, 2000, from 9:30 a.m. to 10 a.m., the meeting will be closed to permit FDA to present to the committee trade secret and/or confidential commercial information (5 U.S.C. 552b(c)(4)) regarding pending issues and

applications.

FDA regrets that it was unable to publish this notice 15 days prior to the November 16, 2000, Neurological Devices Panel of the Medical Devices Advisory Committee meeting. Because the agency believes there is some urgency to bring these issues to public discussion and qualified members of the Neurological Devices Panel of the Medical Devices Advisory Committee were available at this time, the Commissioner of Food and Drugs concluded that it was in the public interest to hold this meeting even if there was not sufficient time for the customary 15-day public notice.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: October 31, 2000.

### Linda A. Suydam,

Senior Associate Commissioner. [FR Doc. 00–28445 Filed 11–1–00; 4:34 pm] BILLING CODE 4160–01–F

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **National Institutes of Health**

## National Center for Research Resources; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), 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.