

comments from OVC grant recipients during this public comment period.

*Need and Proposed Use of the Information:* The information collected on OVC grant recipient activities and performance will help HRSA demonstrate, adapt, assess, and disseminate promising practices, strategies, and novel models of virtual care across the nation’s health centers. The information will support an assessment that yields:

- Increased evidence of how to optimize the use of virtual care in the Health Center Program to enhance access to care and improve clinical quality for underserved communities and special and vulnerable populations.
- Maximized impact of the new OVC grant program, as a model to be adapted, leveraged, and scaled across other HRSA funding opportunities.
- Enhanced evidence base for recommendations to promote and scale virtual care innovations focused on increasing health equity specific to Health Center Program patients.

The assessment will include descriptive analyses of the data on grant recipient activities and performance, including analyses of trends over time. The analyses will inform recommendations for performance

measures that HRSA could scale across the Health Center Program and across other grant programs like the OVC grant program.

The grant recipient activities related to implementation of novel models of virtual care, including aggregate data on patients served and the services they received, will be captured via monthly progress reports. A set of health center performance measures will be captured in a bi-annual progress report and will provide insight into health equity and virtual care. Grant recipients will collect and report performance measures based on project goals and objectives that span four key population health and clinical domain areas, including (1) Increased Access to Care and Information; (2) Improve Clinical Quality and Health Outcomes; (3) Enhance Patient Care Coordination; and (4) Promote Health Equity.

Based on comments from OVC grant recipients, the average hours of burden per response for the biannual progress report has increased to 55.9 hours from 48 hours as proposed in the 60-day **Federal Register** Notice. This new burden estimate accounts for the fact that performance measures in the biannual progress report have different levels of burden per response. For

example, some measures required significant workflow changes or had more complexity. In addition, both the biannual and monthly progress reports were revised to include updated terms and definitions based on feedback collected from OVC grant recipients during the public comment period.

*Likely Respondents:* Respondents will be the 29 health centers that received supplemental awards through the OVC grant program.

*Burden Statement:* Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
OVC Grant Monthly Progress Report .....	29	12	348	2.0	696.0
OVC Grant Bi-Annual Progress Report .....	29	2	58	55.9	3,242.2
Total .....	29	.....	406	.....	3,938.2

HRSA specifically requests comments on (1) the necessity and utility of the proposed information collection for the proper performance of the agency’s functions, (2) the accuracy of the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be collected, and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**Maria G. Button,**

*Director, Executive Secretariat.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

**Opportunity To Co-Sponsor Office of Research Integrity Events**

**AGENCY:** Office of the Secretary, HHS.

**ACTION:** Notice.

**SUMMARY:** The Office of Research Integrity (ORI) announces the opportunity for non-federal public and private sector entities to co-sponsor ORI conferences, workshops, symposia, meetings, roundtables, or other such events (collectively, “Events”). ORI co-sponsors a limited number of events with non-federal entities each year. Potential co-sponsors must have demonstrated interest and experience in the responsible conduct of research or

handling allegations of research misconduct. Potential co-sponsors must be willing to participate substantively in the co-sponsored event.

**DATES:** Expressions of interest for co-sponsorship of an ORI Event may be submitted on an ongoing basis throughout the fiscal year (October 1, 2022–September 30, 2023) or beyond.

**ADDRESSES:** Expressions of interest for co-sponsorship of an ORI Event should be sent by email to [AskORI@HHS.GOV](mailto:AskORI@HHS.GOV) with “Co-sponsorship for ORI Event” in the subject field.

**FOR FURTHER INFORMATION CONTACT:**

Tracey Randolph, Program Analyst, Office of Research Integrity, 1101 Wootton Parkway, Suite 240, Rockville, MD 20852, (240) 453–8200

**SUPPLEMENTARY INFORMATION:** ORI oversees and directs U.S. Public Health Service (PHS) research integrity

activities on behalf of the Secretary of the U.S. Department of Health and Human Services (HHS), with the exception of the regulatory research integrity activities of the Food and Drug Administration. ORI is a program office within the Office of the Assistant Secretary for Health, Office of the Secretary, HHS.

Core to ORI's mission is the support of education and outreach activities that aid PHS-funded research institutions in their efforts "to teach the responsible conduct of research, promote research integrity, prevent research misconduct, and . . . to respond effectively to allegations of research misconduct" (65 FR 30600, 30601 (May 12, 2000)). ORI Events contribute to this mission by providing education, training, and/or the opportunity for discussion related to topics such as handling allegations of research misconduct and fostering research integrity and the responsible conduct of research. ORI Events typically are moderately sized, usually accepting between 20 and 150 attendees, and convened in person or virtually for one to three days.

Co-sponsors will work with ORI staff to jointly develop an event. Both ORI and the co-sponsor must contribute substantively to the development of the event. Co-sponsors can charge registration fees to recover costs associated with the events; however, co-sponsors may not set registration fees at an amount higher than necessary to recover event-related expenses. Further, co-sponsors are solely responsible for collecting and handling any registration fees.

*Eligibility for Co-Sponsorship:* The co-sponsoring entity must have demonstrated interest and experience in fostering the responsible conduct of research or handling of research misconduct allegations. The co-sponsoring entity must participate substantively in the co-sponsored activity, and not just provide funding, logistical services, or other material support.

*Expression of Interest in Co-Sponsorship:* An entity shall provide an expression of interest that includes (1) one to two paragraphs detailing why ORI should select the entity, including the entity's leadership in and management of matters involving research integrity and the responsible conduct of research, and (2) a bulleted outline addressing the seven topics listed below. The expression of interest should be one to two pages in length, single-spaced, and at least 11-point font. An entity may submit an expression of interest individually or jointly with other entities describing their relative

contributions. The seven topics to be addressed in the outline are:

1. The entity's interest and goals in promoting research integrity and/or the responsible conduct of research
2. The entity's prior experience and current readiness to undertake the responsibilities described above
3. The type of event(s) that the entity is interested in co-sponsoring with ORI
4. Facilities available for the event(s), including the distance from the facilities to a major airport
5. Any current constraints with respect to dates or facilities
6. Whether the entity has co-sponsored an ORI Event in the past 36 months
7. Whether the entity has any cases, allegations, or other related matters pending with ORI

*Evaluation Criteria:* After engaging in exploratory discussions with potential co-sponsors who respond to this notice, HHS will apply the following considerations, as appropriate and relevant, to select the co-sponsor(s):

- Qualifications and capability to fulfill co-sponsorship responsibilities
- Suitability of the location of the proposed event in terms of the overall geographical distribution of recent or planned ORI Events
- Potential for reaching, generating, and engaging an adequate number of attendees
- Availability and description of facilities needed to support the event
- Availability of administrative support for the logistics of hosting such events

The duties of the co-sponsor will be outlined in a co-sponsorship agreement with ORI that will set forth the details of the co-sponsored event, including the requirements that any fees collected by the co-sponsor shall be limited to the amount necessary to cover the co-sponsor's event-related expenses. This co-sponsorship agreement does not represent an endorsement by ORI of an individual co-sponsor's policies, positions, or activities.

Dated: October 13, 2022.

**Wanda K. Jones,**

*Acting Director, Office of Research Integrity,  
Office of the Assistant Secretary for Health.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Proposed Collection; 60-Day Comment Request, National Institute on Drug Abuse (NIDA) Summer Research Internship Program

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** In compliance with the requirement of the Paperwork Reduction Act of 1995 to provide opportunity for public comment on proposed data collection projects, the National Institute on Drug Abuse (NIDA) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

**DATES:** Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

**FOR FURTHER INFORMATION CONTACT:** To obtain a copy of the data collection plans and instruments, submit comments in writing, or request more information on the proposed project, contact: Dr. Wilson Compton, Acting Director, Office of Research Training, Diversity, and Disparities, National Institute on Drug Abuse, 3WFFN, 11601 Landsdown St., Room 09D18, North Bethesda, Maryland, 20892 or call non-toll-free number (301) 443-6480 or Email your request, including your address, to: [Wilson.Compton@nih.gov](mailto:Wilson.Compton@nih.gov). Formal requests for additional plans and instruments must be requested in writing.

**SUPPLEMENTARY INFORMATION:** Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 requires written comments and/or suggestions from the public and affected agencies are invited to address one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of