130.17), we issued a temporary permit to Bongards Creameries, 250 Lake Drive East, Chanhassen, MN 55317, to market test products that deviate from the standards of identity for cheese products under §§ 133.167, 133.169, 133.170, and 133.173 (21 CFR 133.167, 133.169, 133.170, and 133.173) (85 FR 80118, December 11, 2020). We issued the permit to facilitate market testing of products that deviate from the requirements of the standard of identity for cheese products issued under section 401 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 341). The permit covers limited interstate marketing tests of cheese products.

The test products deviate from the standards of identity for cheese products under §§ 133.167, 133.169, 133.170, and 133.173. For the purpose of this permit, natamycin, which is not permitted under the standards of identity for these cheese products, would be added as a mold inhibitor in the standardized cheeses. The inhibitor would be incorporated into blended and processed cheese just prior to pasteurization and further cast into slices (or packaging into loaves or other final forms as in the case of pasteurized process cheese spread). Natamycin, which is stable under typical thermal processing conditions for pasteurized cheeses, would be added directly to cheese blends just prior to pasteurization, as is done with other mold inhibitors such as sorbic acid, sodium propionate, and their approved variants. The final concentration of natamycin would not exceed 20 parts per million and would be effective at producing process and blended slices with a shelf life of up to 150 days before seeing mold growth.

The test products meet all the requirements of the standard with the exception of this deviation.

On December 22, 2022, the applicant asked us to extend the temporary permit so the applicant could have more time to market test the cheese products and gain additional consumer acceptance in support of the petition to amend the standard for cheese products. We find that it is in the interest of consumers to extend the permit for continued market testing of the cheese products to gain additional information on consumer expectations and acceptance. Therefore, under § 130.17(i), we are extending the temporary permit granted to Bongards Creameries for temporary marketing of a maximum of 100 million pounds (45,359,237 kilograms) of cheese products to provide continued market testing of the specified amount of product for the applicant on an annual basis. The new expiration date of the permit will be either the effective date of a final rule amending the standard of identity for cheese products that may result from the petition or 30 days after denial of the petition. All other conditions and terms of this permit remain the same.

In addition, we invite interested persons to participate in the market test under the conditions of the permit, except for the designated area of distribution. Any person who wishes to participate in the extended market test must notify, in writing, the Branch Chief, Product Evaluation Labeling Branch, Division of Food Labeling and Standards, Office of Nutrition and Food Labeling, Center for Food Safety and Applied Nutrition, via *FDAFoodsProgramTMP@fda.hhs.gov.* The notification must describe the test products and the area of distribution, specify and justify the amount requested, and include the labeling that will be used for the test product (*i.e.,* a draft label for each size of container and each brand of product to be market tested) (see § 130.17(c)). The information panels on the labels of the test products must bear nutrition labeling in accordance with 21 CFR 101.9. Each of the ingredients used in the food must be declared on the label as required by 21 CFR part 101.

Dated: May 10, 2023.

Lauren K. Roth,

Associate Commissioner for Policy.

[FR Doc. 2023–10438 Filed 5–16–23; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS–0990-new]

Agency Information Collection Request; 60-Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with the requirement of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment.

DATES: Comments on the ICR must be received on or before July 17, 2023.

ADDRESSES: Submit your comments to *Sherrette.Funn@hhs.gov* or by calling (202) 264–0041 and *PRA@HHS.GOV.*

FOR FURTHER INFORMATION CONTACT: When submitting comments or requesting information, please include the document identifier 0990–New–60D and project title for reference, to Sherrette A. Funn, email: *Sherrette.Funn@hhs.gov, PRA@HHS.GOV* or call (202) 264–0041 the Reports Clearance Officer.

SUPPLEMENTARY INFORMATION: Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (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.

Title of the Collection: Critical Infrastructure Protection Healthcare and Public Health (HPH) Partnership Data Collection.

Type of Collection: NEW.

OMB No.: 0990–new.

Abstract: The Administration for Strategic Preparedness and Response's (ASPR) Office of Critical Infrastructure Protection (CIP) serves as the (HPH) Sector Risk Management Agency (SRMA) designee on behalf of the Department of Health and Human Services (HHS) as codified by the 2021 National Defense Authorization Act (NDAA), supporting the HPH Sector to prepare for future threats, manage risks, coordinate effective response, and recover from human-caused and naturally occurring threats and hazards.

CIP promotes resilience of the nation's health critical infrastructure by working directly with public and private sector partners to establish risk assessment tools, foster information sharing, provide technical resources and assistance, and lead programs to prepare for, respond to, and recover from human-caused and naturally occurring threats and hazards. CIP specifically manages the (HPH) Sector Critical Infrastructure Protection Partnership (HPH Partnership), a coordinating body of more than 300 private sector organizations and federal and state, tribal, local, and territorial (STLT) government entities. CIP relies on a strong partnership federal and STLT government entities through the Government Coordinating Council (GCC) and with critical infrastructure owners and operators through the private Sector Coordinating Council (SCC). Together, the councils of the HPH Partnership form a private-public network that promotes situational awareness, coordination, capacity-

building, and preparedness and response capabilities by fostering a shared understanding of Sector risks, needs, and opportunities.

SRMAs are expected to determine the extent to which their respective sectors are implementing infrastructure protection frameworks and guidance (*e.g.,* cybersecurity). Per the 2013 National Infrastructure Protection Plan (NIPP), they ''serve as a day-to-day Federal interface for the dynamic prioritization and coordination of sector-specific activities and carry out incident management responsibilities''. CIP's success as the SRMA depends heavily on routine and ad hoc data to inform its programs and activities in the HPH Sector.

CIP plans to collect data bi-annually to understand the impact of the HPH Partnership's work on HPH Sector resilience. Using survey-based data collection tools, CIP will measure the performance of the HPH Partnership as a program and use the resulting information to assess the Office's responsiveness to its statutory responsibilities, including those articulated in Section 2009(b) in the 2021 NDAA. The data will additionally support CIP's ability to improve programmatic operations and inform decision-making. CIP will also collect data under urgent circumstances to guide emergency response activities and after-action reporting for the HPH Sector.

ANNUALIZED BURDEN HOUR TABLE

Forms (if necessary)	Respondents (if necessary)	Number of respondents	Number of responses per respondents	Average burden per response	Total burden hours
HPH Partnership Bi-Annual Survey Collection (Fall).	HPH Partnership Members	308	1	15/60	77
HPH Partnership Bi-Annual Survey Collection (Spring).	HPH Partnership Members	308	1	15/60	77
Ad hoc Information Collections	HPH Partnership Members	308	1	1	308
Total	.....	.....	3	.....	462

Sherrette A. Funn,

Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.

[FR Doc. 2023–10490 Filed 5–16–23; 8:45 am]

BILLING CODE 4150–37–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the Advisory Committee on Blood and Tissue Safety and Availability

AGENCY: Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The U.S. Department of Health and Human Services is hereby giving notice that the Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) will hold a meeting. The meeting will be open to the public via webcast. The committee will discuss and vote on a recommendation related to surge capacity for blood and blood products.

DATES: The meeting will take place on July 6–7, 2023 from approximately 10 a.m.–3 p.m. Eastern Time (ET) each day. Meeting times are tentative and subject to change. The confirmed times and agenda items for the meeting will be posted on the ACBTSA web page at *https://www.hhs.gov/oidp/advisory-committee/blood-tissue-safety-availability/meetings/2023-07-06/index.html* when this information becomes available.

FOR FURTHER INFORMATION CONTACT: James Berger, Designated Federal Officer for the ACBTSA; Office of Infectious Disease and HIV/AIDS Policy, Office of the Assistant Secretary for Health, Department of Health and Human Services, Tower Building, 1101 Wootton Parkway, Rockville, MD 20852. Email: *ACBTSA@hhs.gov.* Phone: 202–795–7608.

SUPPLEMENTARY INFORMATION: On the day of the meeting, please go to *https://www.hhs.gov/live/index.html* to view the meeting. The public will have an opportunity to present their views to the ACBTSA by submitting a written public comment. Comments should be pertinent to the meeting discussion. Persons who wish to provide written public comment should review instructions at *https://www.hhs.gov/oidp/advisory-committee/blood-tissue-safety-availability/meetings/2023-07-06/index.html* and respond by midnight June 28, 2023, ET. Written public comments will be accessible to the public on the ACBTSA web page prior to the meeting.

Background and Authority: The ACBTSA is a discretionary Federal advisory committee and is governed by the provisions of the Federal Advisory Committee Act (FACA), Public Law 92–463, as amended (5 U.S.C. app), which sets forth standards for the formation and use of advisory committees. The ACBTSA functions to provide advice to the Secretary through the Assistant Secretary for Health on a range of policy issues to include: (1) Identification of public health issues through surveillance of blood and tissue safety issues with national survey and data tools; (2) identification of public health issues that affect availability of blood, blood products, and tissues; (3) broad public health, ethical, and legal issues related to the safety of blood, blood products, and tissues; (4) the impact of various economic factors (*e.g.,* product cost and supply) on safety and availability of blood, blood products, and tissues; (5) risk communications related to blood transfusion and tissue transplantation; and (6) identification of infectious disease transmission issues for blood, organs, blood stem cells and tissues. The Committee has met regularly since its establishment in 1997.

Dated: May 2, 2023.

James J. Berger,

Designated Federal Officer, Advisory Committee on Blood and Tissue Safety and Availability, Office of Infectious Disease and HIV/AIDS Policy.

[FR Doc. 2023–10499 Filed 5–16–23; 8:45 am]

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