Graduate Medical Education (THCGME) sites to post available opportunities and update site profiles. The HWC provides a central platform to connect participants, including but not limited to those in the NHSC, Nurse Corps, STAR, PS, Nursing Training, and THCGME programs with facilities that are approved for performance of their service obligation. The HWC has become a resource that connects any health care professional or student interested in providing primary care services in underserved communities with facilities in need of health care providers. The HWC also allows users to create a profile, search for approved sites, find job and training opportunities, and connect with other clinicians who are similarly interested in working with underserved populations. The HWC is searchable by Site POCs. Individuals can use the HWC's search capability with Google

A 60-day notice published in the **Federal Register** on May 30, 2023, 88 FR 34506–07. There were no public comments.

Need and Proposed Use of the Information: Information will be collected from users in the following two ways:

(1) Account Creation: For job seekers, creating an account is optional. To create an account the user must enter their first name, last name, and email address. Those mandatory fields will be used to send an automated email allowing the user to validate their login credentials. In addition, for job seekers participating in the programs listed above, their HWC account will be linked to their existing program file in the Bureau of Health Workforce Management Information Systems Solution database and allow an initial import of existing data at the request of the user.

(2) Profile Completion: Users may fill out a profile, but this function will be optional and includes fields such as location, discipline, specialty, and languages spoken. The information collected, if published by the user, can be searched by approved Site POCs seeking potential candidates for health care job opportunities at their site. Job seekers also can set their security and privacy settings on their accounts to make their profiles searchable by other end users or private at any time. In addition, all information collected through the HWC will be stored within existing secure the Bureau of Health Workforce Management Information

Systems Solution databases and will be used internally for report generation on an as-needed basis.

Likely Respondents: Potential users include individuals searching for a health care job opportunity at a NHSC, Nurse Corps, STAR, PS, Nursing Training, or THCGME approved health care facility and health care facility POCs searching for potential candidates to fill open health care job opportunities at their sites.

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
Account Creation	5,008 4,164	1 1	5,008 4,164	0.08 1.00	400.64 4,164.00
Total	5,008 ¹		5,008		4,564.64

¹ The 4,164 respondents who complete their profiles are a subset of the 5,008 respondents who create accounts.

Maria G. Button,

Director, Executive Secretariat.
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BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Solicitation of Nominations for Membership To Serve on the Advisory Commission on Childhood Vaccines

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS). **ACTION:** Request for nominations.

SUMMARY: HRSA is seeking nominations of qualified candidates for consideration

for appointment as members of the Advisory Commission on Childhood Vaccines (ACCV). ACCV advises the Secretary of HHS (the Secretary) on issues related to the implementation of the National Vaccine Injury Compensation Program (VICP).

DATES: Written nominations for membership on the ACCV will be received on a continuous basis.

ADDRESSES: Nomination packages must be submitted to the Director, Division of Injury Compensation Programs, Health Systems Bureau, HRSA, 5600 Fishers Lane, Room 08N146B, Rockville, Maryland 20857. Electronic nomination packages can be submitted by email to ACCV@hrsa.gov.

FOR FURTHER INFORMATION CONTACT: Pita Gomez, Principal Staff Liaison, Division of Injury Compensation Programs,

Health Systems Bureau, HRSA at 1–800–338–2382 or email at ACCV@ hrsa.gov. A copy of the ACCV charter and list of the current membership may be obtained by accessing the ACCV website at https://www.hrsa.gov/advisory-committees/vaccines/index.html.

SUPPLEMENTARY INFORMATION: ACCV was established by title XXI of the Public Health Service Act and advises the Secretary on issues related to implementation of the VICP. ACCV meets four times per year and at the call of the Chair.

Nominations: HRSA is requesting nominations for voting members to serve as Special Government Employees (SGEs) on the ACCV to fill open positions. The Secretary appoints ACCV members with the expertise needed to

fulfill the duties of the Advisory Committee. The membership requirements are set forth in section 2119 of the Public Health Service Act.

ACCV consists of nine voting members appointed by the Secretary as follows: (1) three health professionals, who are not employees of the United States government, and who have expertise in the health care of children, the epidemiology, etiology, and prevention of childhood diseases, and the adverse reactions associated with vaccines, of whom at least two shall be pediatricians; (2) three members from the general public, of whom at least two shall be legal representatives (parents or guardians) of children who have suffered a vaccine-related injury or death; and (3) three attorneys, of whom at least one shall be an attorney whose specialty includes representation of persons who have suffered a vaccinerelated injury or death, and of whom one shall be an attorney whose specialty includes representation of vaccine manufacturers. In addition, the Director of the National Institutes of Health, the Assistant Secretary for Health, the Director of the Centers for Disease Control and Prevention, and the Commissioner of the Food and Drug Administration (or the designees of such officials) serve as nonvoting ex officio members.

HHS will consider nominations of all qualified individuals to ensure the ACCV includes the areas of subject matter expertise noted above. As indicated above, at least two of the three ACCV members of the general public must be legal representatives (parents or guardians) of children who have suffered a vaccine-related injury or death. Because those members must be the legal representatives of children who have suffered a vaccine-related injury or death, to be considered for appointment to the ACCV in that category, there must have been a finding (i.e., a decision) by the U.S. Court of Federal Claims or a civil court that a VICP-covered vaccine caused, or was presumed to have caused, the represented child's injury or death. Additionally, based on a recommendation made by ACCV, the Secretary will consider having a health professional with expertise in obstetrics as one of the members of the general public. Interested applicants may selfnominate or be nominated by another individual or organization.

Individuals selected for appointment to ACCV will be invited to serve for 3

years. Members are appointed as SGEs and receive a stipend and reimbursement for per diem and travel expenses incurred for attending ACCV meetings and/or conducting other business on behalf of ACCV, as authorized by 5 U.S.C. 5703 for persons employed intermittently in government service.

The following information must be included in the package of materials submitted for each individual nominated for consideration: (1) a letter of nomination stating the name, affiliation, and contact information for the nominee, the basis for the nomination (i.e., what specific attributes, perspectives, and/or skills does the individual possess that would benefit the workings of the ACCV) and the nominee's field(s) of expertise; (2) the name, address, daytime telephone number, and email address at which the nominator can be contacted; and (3) a current copy of the nominee's curriculum vitae or resume. Nomination packages may be submitted directly by the individual being nominated or by the person/organization recommending the candidate. Nomination packages will be collected and retained to create a pool of possible future ACCV voting members. When a vacancy occurs, nomination packages from the appropriate category will be reviewed and nominees may be contacted at that

HHS endeavors to ensure that ACCV's membership is balanced in terms of points of view represented and that individuals from a broad representation of geographic areas, gender, and ethnic and minority groups, as well as individuals with disabilities, are considered for membership.

Appointments shall be made without discrimination on the basis of age, disability, race, ethnicity, gender, sexual orientation, national origin, or cultural, religious, or socioeconomic status.

Individuals who are selected to be considered for appointment will be required to provide detailed information regarding their financial holdings, consultancies, and research grants or contracts. Disclosure of this information is required for HRSA ethics officials to determine whether there is a potential conflict of interest between the SGE's public duties as a member of ACCV and their private interests, including an appearance of a loss of impartiality as defined by federal laws and regulations, and to identify any required remedial

action needed to address the potential conflict.

Authority: Under the authorities that established the ACCV, the Federal Advisory Committee Act of October 6, 1972, (Pub. L. 92–463, as amended) and the National Childhood Vaccine Injury Act (Pub. L. 99–660, as amended), HRSA is requesting nominations for voting members of ACCV.

Maria G. Button,

Director, Executive Secretariat.
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BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Notice of Award of President's Emergency Plan for AIDS Relief (PEPFAR) Funding To Strengthen Health Workforce Efforts in the Democratic Republic of Congo (DRC)

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice of award.

SUMMARY: HRSA will award \$2 million in PEPFAR funding for work in DRC to strengthen pre-service education primarily focusing on nursing and midwifery competencies through student clinical rotations and community health work.

FOR FURTHER INFORMATION CONTACT: Carla Haddad, Director, Office of Global Health, HRSA, *chaddad@hrsa.gov* and (301) 443–4551.

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: Johns Hopkins Program for International Education in Gynecology and Obstetrics (JHPIEGO) Global Reach II Program UH6OA45170.

Amount of Awards: Two awards, \$400,000 for Q4 FY2023 and \$1,600,000 for Q1–Q4 FY 2024, totaling \$2,000,000.

Project Period: July 1, 2023–September 30, 2024.

CFDA Number: 93.266.

Award Instrument: Cooperative Agreement Supplement.

Authority: Public Law 108–25 (the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003) [22 U.S.C. 7601 et seq.], Public Law 110–293 and Public Law 113–56.