

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention****Notice of Closed Meeting**

Pursuant to 5 U.S.C. 1009(d), 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., as amended, and the Determination of the Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, CDC, pursuant to Public Law 92-463. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP)-RFA-OH-22-002, NIOSH Centers for Agricultural Safety and Health.

*Date:* March 14, 2024.

*Time:* 1 p.m.–5 p.m., EDT.

*Place:* Video-Assisted Meeting.

*Agenda:* To review and evaluate grant applications.

**FOR FURTHER INFORMATION CONTACT:** Marilyn Ridenour, B.S.N., M.P.H., Scientific Review Officer, Office of Extramural Programs, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, 1095 Willowdale Road, Morgantown, West Virginia 26505. Telephone: (304) 285-5879; Email: [MRidenour@cdc.gov](mailto:MRidenour@cdc.gov).

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

**Kalwant Smagh,**

*Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.*

[FR Doc. 2023-26042 Filed 11-24-23; 8:45 am]

**BILLING CODE 4163-18-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention****Board of Scientific Counselors, National Center for Injury Prevention and Control; Notice of Charter Renewal**

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

**ACTION:** Notice of charter renewal.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), announces the renewal of the charter of the Board of Scientific Counselors, National Center for Injury Prevention and Control (BSC, NCIPC).

**FOR FURTHER INFORMATION CONTACT:** Christopher Harper, Ph.D., Designated Federal Officer, Board of Scientific Counselors, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, Department of Health and Human Services, 1600 Clifton Road NE, Mailstop S106-9, Atlanta, Georgia 30329-4029. Telephone: (404) 718-8330; Email: [CRHarper1@cdc.gov](mailto:CRHarper1@cdc.gov).

**SUPPLEMENTARY INFORMATION:** CDC is providing notice under 5 U.S.C. 1001-1014 of the renewal of the charter of the Board of Scientific Counselors, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, Department of Health and Human Services. This charter has been renewed for a two-year period through November 5, 2025.

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

**Kalwant Smagh,**

*Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention**

[30Day-24-23HC]

**Agency Forms Undergoing Paperwork Reduction Act Review**

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled "Food safety knowledge, attitude, and practices survey of correctional workers" to the Office of Management and Budget (OMB) for review and approval. CDC previously published a "Proposed Data Collection Submitted for Public Comment and Recommendations" notice on August 7, 2023 to obtain comments from the public and affected agencies. CDC received one comment related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639-7570. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting

“Currently under 30-day Review—Open for Public Comments” or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

**Proposed Project**

Food safety knowledge, attitude, and practices survey of correctional workers—New—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

In 2017, an analysis of Foodborne Disease Outbreak Surveillance System (FDOSS) epidemiology data demonstrated a disproportionately high burden of foodborne outbreaks and outbreak-associated illnesses in correctional settings compared to other settings (Marlow et al., Am J Public Health 2017). The CDC is developing training programs to reduce foodborne illness in correctional facilities. However, CDC has little understanding of current training and overall food safety culture among individuals working in correctional settings. This survey will allow for the collection of baseline knowledge, attitudes, and

practices (KAP) of correctional staff working in a variety of U.S. correctional facilities (including federal, state, tribal, local and private facilities). The survey will assess overall food infrastructure, food safety training, and the receptiveness of correctional staff to being a part of food safety at their facilities. The plan will be to repeat the survey two years later to support interim evaluation of CDC programs.

CDC requests OMB approval for an estimated 2,500 annual burden hours to conduct a KAP survey of correctional workers. There is no cost to respondents other than their time to participate.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Correctional workers .....	KAP survey of correctional workers .....	5,000	1	0.5

**Jeffrey M. Zirger,**

*Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.*

[FR Doc. 2023–26084 Filed 11–24–23; 8:45 am]

**BILLING CODE 4163–18–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Request for Information: Temporary Assistance for Needy Families (TANF) Implementation of Sections 302 and 304 of the Fiscal Responsibility Act of 2023**

**AGENCY:** Office of Family Assistance, Administration for Children and Families, U.S. Department of Health and Human Services.

**ACTION:** Request for information (RFI).

**SUMMARY:** The Administration for Children and Families (ACF), in the U.S. Department of Health and Human Services (HHS), invites public comments on the possibilities for design and implementation of the new pilot program and work outcomes measures of the Fiscal Responsibility Act of 2023 (FRA), in the Temporary Assistance for Needy Families (TANF) program. The FRA requires HHS to carry out a pilot program for up to five states to promote accountability by measuring employment and earnings outcomes as

well as additional indicators of family stability and well-being for TANF recipients. In addition, it requires all states to report the information necessary to calculate certain statutory work outcomes measures. ACF seeks input from partners to help understand some of the options, opportunities, and potential challenges associated with the development and implementation of the pilot program and the reporting of new statutory work outcomes measures applicable to all states.

**DATES:** Comments are due January 11, 2024.

**ADDRESSES:** Submit responses to [TANFquestions@acf.hhs.gov](mailto:TANFquestions@acf.hhs.gov). Please include “TANF FRA” in the subject line of the email.

**Guidance for Submitting Comments**

- To ensure that your comments are clearly understood and properly contextualized, please identify the specific question or section of this notice that your comments address, as well as your experience or role that informs your response.
- You are encouraged to comment on any issues or concerns you believe are relevant or appropriate for our consideration and to submit written data, facts, and views addressing this subject, including but not limited to the questions below.
- You do not need to answer all questions listed—only the question(s) for which you have relevant information. The written RFI response should address ONLY the topics for

which the respondent has knowledge or expertise.

- Wherever possible, please provide credible data and specific examples to support your views. If you cite academic or other studies, they should be publicly available to be considered.
- All submissions are public records and may be published on [www.regulations.gov](http://www.regulations.gov). Do NOT submit sensitive, confidential, or personally identifiable information.

**SUPPLEMENTARY INFORMATION:**

**1.0 Background**

*1.1 Pilot Program*

Section 302 of the FRA authorizes a pilot program under which HHS may select up to five states to test alternative performance metrics in the TANF program. Section 302 of the FRA provides that for the duration of the pilot projects, the work participation requirements shall not apply to the pilot states and instead, participating states will comply with agreed upon performance measures and benchmarks. In lieu of the work participation rate (WPR), state performance will be measured by (A) the percentage of work-eligible individuals who are employed during the 2nd quarter after exiting the TANF program; (B) the level of earnings of those individuals in the 2nd and 4th quarters after exit; and (C) other indicators of family stability and well-being as established by HHS. States that fail to meet agreed upon performance benchmarks for these measures will be required to enter into a plan with HHS