each incident. The NTSIP coordinator may be a federal employee assigned to the state or an employee of the state health department. State, but not federal, NTSIP coordinators will incur recordkeeping burden during two phases.

During the first phase, the NTSIP coordinators will rapidly collect and enter data from a variety of existing data sources. Examples of existing data sources include, but are not limited to, reports from the media, the National Response Center, the U.S. Department of Transportation Hazardous Materials Information Reporting System, and state environmental protection agencies. Approximately 65% of the information

is expected to be obtained from existing data sources.

The second phase of the information collection will require the NTSIP coordinators to alert other entities of the incident when appropriate and to request additional information to complete the remaining unanswered data fields. Approximately 35% of the information is expected to be obtained from calling, emailing, or faxing additional types of respondents by the NTSIP coordinators.

These additional respondents will incur reporting burden and include, but are not limited to, the on-scene commander of the incident, emergency government services (e.g., state

divisions of emergency management, local emergency planning committees, fire or Hazmat units, police, and emergency medical services), the responsible party (i.e., the "spiller"), other state and local government agencies, hospitals and local poison control centers.

The NTSIP coordinator will enter data directly into an ATSDR internet-based data system. NTSIP materials, including a public use data set, annual report, and published articles will be made available on the ATSDR NTSIP Web page at http://www.atsdr.cdc.gov/ntsip/.

There are no costs to respondents besides their time. The total burden hours requested is 1,821.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Avg. burden per response (in hrs.)	Total burden (in hrs.)
State NTSIP Coordinators	NTSIP State Data Collection Form	3	426	1	1,278
On-scene commanders	NTSIP State Data Collection Form	110	1	30/60	55
Emergency government services	NTSIP State Data Collection Form	810	1	30/60	405
Responsible party	NTSIP State Data Collection Form	15	1	30/60	8
Other state and local governments	NTSIP State Data Collection Form	60	1	30/60	30
Hospitals	NTSIP State Data Collection Form	10	1	30/60	5
Poison Control Centers	NTSIP State Data Collection Form	80	1	30/60	40
Total					1,821

LeRoy Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2013–30671 Filed 12–24–13; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Institute for Occupational Safety and Health Personal; Notice of public meeting in Endicott, New York

AGENCY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of public meeting.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announces a public meeting to present results from a study of former workers of the International Business Machine

(IBM) facility in Endicott, New York. This meeting is being held to present study results to stakeholders and members of the public and to offer the opportunity for comments.

Meeting Time and Date: January 23, 2014, 6:30 p.m.—8:30 p.m. EST, or after the last public commenter has spoken, whichever occurs first.

ADDRESSES: First United Methodist Church, 53 McKinley Ave, Basement, Endicott, NY 13760.

FOR FURTHER INFORMATION CONTACT:

Sharon Silver, M.S., NIOSH Division of Surveillance, Hazard Evaluations and Field Studies, 4676 Columbia Parkway MS–R15, Cincinnati, Ohio 45226. (513) 841–4313 or (513) 841–4203.

SUPPLEMENTARY INFORMATION:

I. Background

- In 2009, NIOSH began a study to examine potential health outcomes among former IBM workers in Endicott, New York.
- The study occurred as a result of a request made by the New York State Department of Health, Congressional representatives from New York, and community stakeholders.
- After listening to community and former workers' concerns, NIOSH set goals to evaluate the following:

- overall causes of death among former workers,
- $\ ^{\bigcirc}$ testicular cancer diagnosis among former workers, and
- birth defects among children of former workers.
- The study included 34,494 people who worked at the IMB-Endicott facility for at least 90 days between January 1, 1969 and December 31, 2001.
- The assessment of the causes of death and testicular cancer diagnoses among former workers is complete. The assessment of birth defects among children of former workers is still in process.

II. Public Meeting

NIOSH will hold a public meeting to present information on the results of a study that included former workers from the IBM-Endicott facility.

- A 60 minute presentation will be given by a NIOSH Official.
- Upon completion of the presentation, members of the public will be provided the opportunity to comment or ask questions. This opportunity will be on a first come, first served basis.
- The meeting will end at 8:30PM EST or after the last public commenter has spoken, whichever occurs first.

Dated: December 19, 2013.

John Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2013–30905 Filed 12–24–13; 8:45 am]

BILLING CODE 4163-19-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[CDC-2013-0021; NIOSH 245-A]

Notice of Request for Comments on Chapters 6 and 8 of the NIOSH document titled: "Criteria for a Recommended Standard: Occupational Exposure to Diacetyl and 2,3-pentanedione"

AGENCY: National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Request for Comments.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) is inviting comments on Chapter 6 and a new section of Chapter 8 of the draft document, "Criteria for a Recommended Standard: Occupational Exposure to Diacetyl and 2,3pentanedione." To view the notice and related materials, visit http:// www.regulations.gov and enter CDC-2013-0021 in the search field and click "Search." Public Comment Period: Comments must be received by February 10, 2014.

Status: Comments are being sought from individuals including scientists and representatives from various government agencies, industry, labor, and other stakeholders, and also the public.

Instrument

Refugee Suicide Report Form (RSR)

ADDRESSES: You may submit comments, identified by CDC–2013–0021 and Docket Number NIOSH 245–A by either of the following two methods:

Federal rulemaking portal: http://www.regulations.gov. Follow the instructions for submitting comments.

Mail: NIOSH Docket Office, Robert A. Taft Laboratories, 4676 Columbia Parkway, MS–C34, Cincinnati, Ohio 45226.

Instructions: All information received in response to this notice must include the agency name and docket number [CDC-2013-0021; NIOSH 245-A]. All relevant comments received, including any personal information provided, will be posted without change to http:// www.regulations.gov. All electronic comments should be formatted as Microsoft Word. Please make reference to CDC-2013-0021 and Docket Number NIOSH 245–A. To access the docket, read background documents or read comments, go to http:// www.regulations.gov. To access any prior background documents or previous comments received please go to NIOSH Docket 245 (http:// www.cdc.gov/niosh/docket/archive/ docket245.html). All information received in response to this notice will be available for public examination and copying at the NIOSH Docket Office, 4676 Columbia Parkway, Cincinnati, Ohio 45226.

FOR MORE INFORMATION CONTACT:

Lauralynn Taylor McKernan, ScD CIH NIOSH, 4676 Columbia Parkway C–14, Cincinnati, OH 45226, telephone (513) 533–8542, Fax (513) 533–8588, email *LMcKernan@cdc.gov*.

Dated: December 19, 2013.

John Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2013–30900 Filed 12–24–13; 8:45 am]

Number of respondents

BILLING CODE 4163-19-P

ANNUAL BURDEN ESTIMATES

Number of respondents	responses per respondent	per response	hours
 100 or more	1	0.5	50
information collection described above.		Reports Clearan	

Number of

Estimated Total Annual Burden Hours:

In compliance with the requirements of Section 506(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 Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447,

Attn: ACF Reports Clearance Officer. Email address: *infocollection@ acf.hhs.gov*. 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

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects: To establish a systematic method of reporting suicides and suicide attempts by refugees.

Title: Refugee Suicide Report Form (RSR).

OMB No.: 0970-NEW.

Description

Pursuant to section 412(b)(4) of the Immigration and Nationality Act, the Administration for Children and Families' Office of Refugee Resettlement (ORR), as the designee for the Secretary of Health and Human Services, is authorized to identify and monitor refugees with certain medical conditions that affect the public health and require treatment.

The intent of this collection activity is to allow ORR to systematically gather information on suicides and suicide attempts among refugee populations resettled in the U.S. Data will be collected on individuals who have made suicide attempts or completed a suicide. The data will be analyzed to identify trends and factors related to suicidal behavior. In addition, the data will be used to plan, implement, and evaluate suicide prevention and intervention activities, in collaboration with local, state, and national government agencies and organizations serving the refugee population.

Respondents: State Governments.

Average

Total burden