Concept Summary for CCER Certification, as well as earlier versions of other concept papers used during the standards development effort, on the NIOSH Web site: http://www.cdc.gov/ niosh/npptl, Respirator Standards Development; Other Respirator Standards. The Technical Concept Summary for CCER Certification will be used as the basis for discussion at the public meeting.

The meetings will be open to the public, limited only by the space available. The meeting rooms will accommodate approximately 80 people. Please confirm your attendance to these meetings by completing the appropriate registration form and submitting it to NPPTL Event Management. There is an individual registration form for each meeting. You may register electronically by accessing the on-line registration link at *http://www.cdc.gov/niosh*, or you can download an Adobe .PDF form and send it by e-mail to *npptlevents@cdc.gov* or fax it to 304–225–2003.

Status: Hotel reservations should be made directly with the hotel. A special group rate of \$239 per night has been negotiated for meeting guests at the

Marriott Key Bridge in Arlington, Virginia. The cut-off date is August 28, 2006. Contact the Marriott at (703–524– 6400/800–228–9290).

A rate of \$119 per night for meeting guests has been negotiated for the Golden Hotel in Golden, Colorado. The cut-off date is September 1, 2006, and the Golden Hotel can be reached at (303–279–0100/800–233–7214).

The NIOSH Public Meeting must be referenced to receive these rates.

Dated: August 23, 2006.

James D. Seligman,

Chief Information Officer, Centers for Disease Control and Prevention.

[FR Doc. 06–7280 Filed 8–30–06; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Evaluation of the Head Start Oral Health Initiative.

ANNUAL BURDEN ESTIMATES

OMB No: New Collection.

Description: The purpose of this evaluation is to examine the implementation of the Head Start Oral Health Initiative (OHI). The Office of Head Start has funded 52 programs for OHI to improve the oral-health services to young children, from birth to five, and pregnant women. The funded programs will develop, implement, and disseminate culturally sensitive, innovative, and empirically based best practices for oral health in Head Start. The evaluation will examine information on approaches taken by the 52 individual programs and the implementation of the approaches, including challenges faced, as well as facilitating factors, and create a uniform method for collecting administrative information across all sites.

Respondents: Head Start directors, staff, and teachers who are implementing OHI; community organizations that have partnered with Head Start programs implementing OHI; and parents or guardians of children who attend Head Start programs where OHI is being implemented.

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Head Start Directors: Telephone Interview Head Start Staff: Program Recordkeeping System Head Start Directors: Site Visit Interview Head Start Staff: Site Visit Interview Head Start Community Partner: Interview Head Start Parent: Focus Group	52 52 16 48 80 160	1 184 1 1 1	1.5 1.08 1.5 1.5 1	78 10,333 24 72 80 240

Estimated Total Annual Burden Hours: 10,827.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: infocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Attn: Desk Officer for ACF, *E-mail address:*

Katherine_T._Astrich@omb.eop.gov.

Dated: August 28, 2006.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 06–7366 Filed 8–30–06; 8:45 am] BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Office of Planning, Research and Evaluation; Grant to the Institute for American Values

AGENCY: Office of Planning, Research and Evaluation, ACF, HHS. **ACTION:** Award announcement.

C.F.D.A. Number: 93.647.

SUMMARY: Notice is hereby given that the Office of Planning, Research and Evaluation will award grant funds without competition to the Institute for American Values. This grant is being awarded for an unsolicited proposal entitled, "Gendered Parenting and Its Implications for Child Well-Being and Couple Relationships," that conforms to the applicable program objectives, is within the legislative authorities and proposes activities that may be lawfully supported through grant mechanisms. The study is unique and relevant to ACF's interest in increasing child wellbeing and supporting healthy marriage. The resulting products can be expected to benefit policymakers and others interested in family policy.

The Institute for American Values is a nonprofit, nonpartisan research and education organization conducting interdisciplinary research concerning issues of civil society.

The grant will support an 18-month project at a cost of \$96,000 in Federal support. The project is also being supported through non-Federal funding sources.

FOR FURTHER INFORMATION CONTACT:

Richard Jakopic, Office of Planning, Research and Evaluation, Administration for Children and Families, 370 L'Enfant Promenade, SW., Washington, DC 20447; phone: 202– 205–5930.

Dated: August 25, 2006.

Naomi Goldstein,

Director, Office of Planning, Research and Evaluation.

[FR Doc. 06–7367 Filed 8–30–06; 8:45 am] BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Children's Bureau Proposed Research Priorities for Fiscal Years 2006–2008

AGENCY: Administration on Children, Youth and Families (ACYF), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS). **ACTION:** Response to Notice of Proposed Child Abuse and Neglect Research Priorities for Fiscal Years 2006–2008.

SUMMARY: The Children's Bureau solicited comments from the public on the Proposed Research Priorities for Fiscal Years 2006–2008 in Volume 71, Number 23 of the **Federal Register** on February 3, 2006. Comments were due by April 4, 2006. All comments received by the deadline were reviewed and given consideration in the preparation of this notice.

Summary of Public Comments

Section 104 (a)(4) of the Child Abuse Prevention and Treatment Act (CAPTA), as amended by the Keeping Children and Families Safe Act of 2003, Public Law (Pub. L.). 108–36, requires the Secretary of the U.S. Department of Health and Human Services (HHS) to publish proposed priorities for research activities for public comment and to maintain an official record of such public comment. In response to this requirement, proposed priorities were published in February 2006 for public comment and the responses received are detailed in this document.

The Children's Bureau received over a dozen written responses from a variety of sources; State protection and advocacy systems; community agencies for children and families; national, State and local associations and non-profit organizations; universities; hospitals; children's medical centers; mental health services agencies; agencies serving children with disabilities; and private citizens.

Legislative Topics

One response commented on the proposed research topic of the causes of child abuse and neglect. The commenter noted this issue as a high priority, suggested that understanding the cause of child abuse and neglect is central to understanding the dynamics of the issues as a whole, and necessary for designing effective prevention and intervention services. In contradiction to this comment, another set of comments received ranked causes of abuse and neglect as a low priority and suggested that there has been a wealth of research conducted in this area.

A comment was received in response to the proposed research topic on the socio-economic distinctions and consequences of child abuse and neglect. The commenter suggested issues surrounding cultural and socioeconomic distinctions be studied in more depth given the recent studies on overrepresentation of children of color in the child welfare and juvenile justice systems. The commenter suggested that a longitudinal study be conducted on this issue, and determination of how culture, ethnicity and race play into the identification, assessment, prevention and treatment and the consequences faced by families of color as a result of involvement with the child protection system.

A number of comments were received in response to the proposed research priority on the identification of successful early intervention services or other needed services; these responses supported the Children's Bureau's attention to this area.

The evaluation and dissemination of best practices was mentioned in a number of responses. One response supported proposed research on Statelevel strategies to improve child protection systems under this topic area. Another commenter noted that attention to "what works" in child protection and child welfare services has reached a "new low," and greater support is needed in establishing a body of evidence about effective services.

A number of comments were received in response to paragraphs (1) through (14), under the heading of the evaluation and dissemination of best practices consistent with the goals of achieving improvements in child protective services systems of the States in accordance with CAPTA [Section 106(a), Grant to States for Child Abuse and Neglect Prevention and Treatment Program].

A comment was received encouraging that priority be given to paragraph (ii): *Creating and improving the use of multidisciplinary teams and interagency protocol to enhance investigation, and improving legal preparation and representation.*

Another comment was received encouraging that priority be given to paragraph (iv): *Enhancing the general child protective system by developing, improving and implementing risk and safety assessment tools and protocols.* This response specifically requested research on differential response in *child protective services.*

One comment was received related to paragraph (x): Developing, implementing or operating programs to assist in obtaining or coordinating necessary services for families of disabled infants with life-threatening conditions. The comment received related to this paragraph noted the lack of mention given to issues related to persons with disabilities, specifically parents with disabilities or to children with disabilities (beyond this mention of disabled infants). Additional attention to this response can be found below in the field-initiated research area.

One comment was received in response to paragraph (xi): Developing and delivering information to improve public education relating to the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect. This commenter noted that mandated reporters often experience confusion as to their responsibility to report suspected child abuse or neglect, even after receiving training in this area. Due to the severity of child abuse and neglect and the consequences at stake, the commenter suggested additional research be conducted to explore better ways to develop and deliver training and information to mandated reporters and the public.

A comment was received encouraging that priority be given to paragraph (xii): Developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.

One response was a comment encouraging that priority be given to paragraph (xiii): *Supporting and*