systems that include timely access to comprehensive appropriate services and supports.'' The Traumatic Brain Injury Act of 2008 (Pub. L. 110–206) provided for the expansion and improvement of traumatic brain injury programs, including funding for HRSA's State Grants for Demonstration Projects Regarding Traumatic Brain Injury. These state grants were reauthorized by the Traumatic Brain Injury Reauthorization Act of 2014 (Pub. L. 113–196) and again by the Traumatic Brain Injury Reauthorization Act of 2018 (Pub. L. 115–377).

While conducting a review of all previous statewide TBI needs and resources assessments, the HRSA determined that four common barriers to accessing care continued to emerge across states and territories. These barriers include: (1) A lack of information of services and supports with little or no assistance in accessing them (information and referral services); (2) a shortage of health professionals who may encounter individuals with TBI but lack relevant training to identify or treat the resulting symptoms, including physicians, nurses, school staff, coaches, athletic trainers, social workers, psychologists, childcare providers, domestic violence/homeless/emergency shelter staff, law enforcement, and assisted living facility personnel (professional training); (3) the absence of a TBI diagnosis, or the assignment of an incorrect diagnosis (screening); and (4) critical TBI services are spread across numerous agencies resulting in services being difficult for families to identify and navigate (resource facilitation).

The proposed performance measures assess progress toward surmounting the aforementioned barriers, while accounting for the varied approaches used across state grantees and are consistent with the TBI State Partnership Program's purpose and ACL's mission.

The proposed data collection tools may be found on the ACL website for review at *https://www.acl.gov/about-acl/public-input.*

Comments in Response to the 60-Day Federal Register Notice

Federal Register November 13, 2017 vol. 82, Number 217; pp. 52305–52306. For the complete extensive summary of comments and responses, please visit the ACL website for review. *https://www.acl.gov/about-acl/public-input.*

Summary of Comment Count

(1) Twenty-three (23) individuals provided written comments in response to the proposed new TBI Performance Measures instrument.

(2) Commenters provided feedback on specific reporting instrument questions as well as general suggestions and recommendations for ACL about what grantees should report.

(3) 268 separate comments were made about one or more specific survey questions.

(4) 102 separate comments asked for a definition, further guidance or clarification with regard to terminology used.

(5) 81 comments made a general recommendation, not specific to a particular question.

Estimated Program Burden

These revisions based on public comments caused a change in the annual reporting burden estimates; there is a program change decrease of −1,008 annual burden hours from the 60-day FRN. In addition, the 60-day FRN respondent estimate was based on the highest number of possible awards anticipated; there is an adjustment decrease of −18 respondents.

Adjusted number of respondents	Number of responses (per respondent)	Average burden hours (per response)	Total burden hours
27	2	8	432

60-day FRN number of respondents	Number of responses (per respondent)	Average burden hours (per response)	Total burden hours
45	2	16	1,440

Dated: September 23, 2019.

Mary Lazare,

Principal Deputy Administrator.

[FR Doc. 2019–21906 Filed 10–7–19; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2018–N–3728]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Collection of Conflict of Interest Information for Participation in Food and Drug Administration Non-Employee Fellowship and Traineeship Programs

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

DATES: Fax written comments on the collection of information by November 7, 2019.

ADDRESSES: To ensure that comments on the information collection are received, OMB recommends that written comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, Fax: 202–395–7285, or emailed to *oira_submission@omb.eop.gov.* All comments should be identified with the OMB control number 0910–NEW and title ''Collection of Conflict of Interest Information for Participation in Food and Drug Administration Non-Employee Fellowship and Traineeship Programs.'' Also include the FDA docket number

found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Amber Sanford, Office of Operations, Food and Drug Administration, Three White Flint North, 10A–12M, 11601 Landsdown St., North Bethesda, MD 20852, 301–796–8867, *PRAStaff@fda.hhs.gov.*

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

Collection of Conflict of Interest Information for Participation in Food and Drug Administration Non-Employee Fellowship and Traineeship Programs

OMB Control Number 0910–NEW

In compliance with 44 U.S.C. 3507, FDA will submit to the Office of Management and Budget a request to review and approve a new collection of information: ''Collection of Conflict of Interest Information for Participation in FDA Non-Employee Fellowship and Traineeship Programs.'' Section 742 (b) of the Food, Drug and Cosmetic Act (21 U.S.C. 379l) allows FDA to conduct and support intramural training programs through fellowship and traineeship programs. These new forms provide the FDA with information about financial investments and relationships from non-employee scientists who participate in FDA fellowship and traineeship programs. Participants in FDA fellowship and traineeship programs will be asked for certain information about financial interests and current relationships: (1) Description of the financial interest; (2) the type of financial interest (*e.g.* stocks, bonds, stock options); (3) if the financial interest is an employee benefit from prior employment; (4) value of financial interest; (5) who owns the financial interest (*e.g.* self, spouse, minor children); (6) employment relationship with an FDA significantly regulated organization (SRO); (7) and service as a consultant to an FDA SRO, and/or proprietary interest(s) in one of more product(s) regulated by FDA, including patent, trademark, copyright, or licensing agreement. The purpose of the financial information is for FDA to determine if there is a conflict of interest between the Fellow's or Trainee's financial and relationship interests and their activities at FDA. The collection of information is mandatory to participate in FDA's fellowship and traineeship programs.

In the **Federal Register** of October 22, 2018 (83 FR 53257), FDA published a 60-day notice requesting public comment on the proposed collection of information. Although two comments were received, they were not responsive to the four collection of information topics solicited.

FDA estimates the burden of this collection of information as follows:

TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN [1]

Activity	No. of respondents	No. of responses per respondent	Total annual responses	Average burden per response	Total hours
Collection Form—Report of Financial Interests and Other Relationships for Non-Employee Scientists at FDA					
Oak Ridge Institute for Science and Education Fellowship	500	1	500	1	500
Traineeship Program	500	1	500	1	500
Reagan-Udall Fellowship at FDA	50	1	50	1	50
Total					1050

[1] There are no capital costs or operating and maintenance costs associated with this collection of information

Dated: October 2, 2019.

Lowell J. Schiller,

Principal Associate Commissioner for Policy.

[FR Doc. 2019–21839 Filed 10–7–19; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Proposed Changes to the Scholarships for Disadvantaged Students Program

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

ACTION: Notice.

SUMMARY: On May 22, 2019, HRSA published a 30-day notice in the **Federal Register** soliciting feedback on a range of issues pertaining to the Scholarships for Disadvantaged Students (SDS) Program to assist the agency in updating certain SDS policies. HRSA requested feedback on adjusting funding allocations to respond to projected workforce shortages, transitioning data collection from 1 year of data to a 3-year average to demonstrate eligibility, and increasing the maximum scholarship award from $30,000 to $40,000. As a result of HRSA's comprehensive review of existing policies, and taking into consideration the comments received, HRSA is issuing this final notice.

ADDRESSES: Further information on SDS Program is available at *https://bhw.hrsa.gov/loansscholarships/schoolbasedloans/sds.*

FOR FURTHER INFORMATION CONTACT: Denise Sorrell, SDS Project Officer, Division of Health Careers and Financial Support, Bureau of Health Workforce, HRSA, 5600 Fishers Lane, Room 15N78, Rockville, Maryland 20857, phone (301) 443–2909, or email *SDSProgram@HRSA.gov.*

SUPPLEMENTARY INFORMATION: SDS Program is authorized by Public Health Service Act (PHS Act) section 737 and administered by HRSA. On May 22, 2019, through a **Federal Register** Notice (Volume 84, Number 99, pp. 23571–23572), HRSA solicited input on proposed SDS policy changes. HRSA received comments on the proposed funding allocation and 3-year data requirement in response to the solicitation for feedback.

Comments on the Proposed Changes to the SDS Program

HRSA received four comments from two nursing associations, one physician assistant association, and one primary care physician assistant program.

Funding Allocation

Summary of Comments

Commenters provided a variety of input on funding allocations among health profession disciplines. One commenter suggested that funding allocated to schools of nursing should be reduced or eliminated. Others expressed concerns that reductions in