For press inquiries, please contact the HHS Press Room at *https://www.hhs.gov/press-room/index.html* or 202–690–6343.

FDA welcomes the attendance of the public at its advisory committee meetings and will make every effort to accommodate persons with disabilities. If you require accommodations due to a disability, please contact Evella Washington *CDRH_MDAC@fda.hhs.gov* (see **FOR FURTHER INFORMATION CONTACT**) at least 7 days in advance of the meeting.

FDA is committed to the orderly conduct of its advisory committee meetings. Please visit our website at *https://www.fda.gov/AdvisoryCommittees/AboutAdvisoryCommittees/ucm111462.htm* for procedures on public conduct during advisory committee meetings.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. 1001 *et seq.*). This meeting notice also serves as notice that, pursuant to 21 CFR 10.19, the requirements in 21 CFR 14.22(b), (f), and (g) relating to the location of advisory committee meetings are hereby waived to allow for this meeting to take place using an online meeting platform in conjunction with the physical meeting room (see **ADDRESSES**). This waiver is in the interest of allowing greater transparency and opportunities for public participation, in addition to convenience for advisory committee members, speakers, and guest speakers. The conditions for issuance of a waiver under 21 CFR 10.19 are met.

Grace R. Graham,

Deputy Commissioner for Policy, Legislation, and International Affairs.

[FR Doc. 2026–16245 Filed 8–7–26; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Transforming Pediatrics for Early Childhood Program Performance Measures

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

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, HRSA submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30-day comment period for this notice has closed.

DATES: Comments on this ICR should be received no later than September 9, 2026.

ADDRESSES: Written 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.* Find this particular information collection by selecting ''Currently under Review—Open for Public Comments'' or by using the search function.

FOR FURTHER INFORMATION CONTACT: To request a copy of the clearance requests submitted to OMB for review, email Samantha Miller, the HRSA Information Collection Clearance Officer, at *paperwork@hrsa.gov* or call (301) 443–3983.

SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Transforming Pediatrics for Early Childhood Program Performance Measures, OMB No. 0906&xxxx—New.

Abstract: The Transforming Pediatrics for Early Childhood (TPEC) Program is authorized by 42 U.S.C. 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act), which authorizes awards for special projects of regional and national significance in maternal and child health. HRSA's Special Projects of Regional and National Significance program supports HRSA's mission to improve the health and well-being of America's mothers, children, and families. Through the TPEC Program, HRSA directly funds organizations with statewide or tribal reach to place early childhood development experts in local pediatric practices to deliver team-based care to young children and their families. All TPEC funding recipients will collect data and report standardized annual performance measures included in this ICR.

A 60-day notice published in the **Federal Register** on April 16, 2026, vol. 91, No. 73; pp. 20472–20473. There were no public comments.

Need and Proposed Use of the Information: HRSA will use the information to monitor and provide oversight to TPEC funding recipients so the recipients can successfully access, analyze, and use pediatric practice-level and state-level data to meet program goals. HRSA will also use the performance information to demonstrate program accountability and impact to young children and their families served by the TPEC-funded pediatric practices.

Likely Respondents: TPEC funding recipients.

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
Transforming Pediatrics for Early Childhood (TPEC) Program Performance Measures	10	1	10	120	1,200

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Total	10	1	10	120	1,200

Amy P. McNulty,

Deputy Director, Executive Secretariat.

[FR Doc. 2026–16227 Filed 8–7–26; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director, Notice of Charter Renewal

In accordance with Title 41 of the U.S. Code of Federal Regulations, Section 102–3.65(a), notice is hereby given that the charter for the Fogarty International Center Advisory Board (FICAB) is being renewed for an additional two-year period on August 31, 2026.

It is determined that the FICAB is in the public interest in connection with the performance of duties imposed on the National Institutes of Health by law, and that these duties can best be performed through the advice and counsel of this group.

The Public Interest Determination follows:

National Institutes of Health Fogarty International Center Advisory Board Public Interest Determination

Pursuant to 41 CFR 102–3.60(a), to establish, renew, reestablish, or merge a discretionary (agency discretion) advisory committee, an agency must first consult with the General Services Administration's Committee Management Secretariat (the Secretariat) and, as part of the consultation, provide a written public interest determination approved by the head of the agency to the Secretariat with a copy to the Office of Management and Budget. In addition, pursuant to 41 CFR 102–3.35, an agency shall follow the same consultation process and document in writing the same determination of need before creating a subcommittee under a discretionary committee that is not made up entirely of members of a parent advisory committee.

Information on the following factors for the committee is provided to the Secretariat to demonstrate that renewing the committee is in the public interest:

1. Annual budget: The annual budget for the committee is $151,338.

a. Federal personnel on a full-time equivalent (FTE) basis: Federal personnel (based on full-time equivalent (FTE) usage basis) and other Federal internal costs. The estimated annual person years of staff support are .7 at an estimated cost of $130,780.

b. Other Federal internal costs: The estimate for other Federal internal costs is 0.

c. Proposed payments to members: The estimated payment for non-Federal members is $6,400 and the estimated prorated salary for Federal members is $3,740.

d. Proposed number of members: The Board will consist of not more than 13 members appointed by the Secretary and the following nonvoting ex officio members: the Directors of 2 NIH institutes or centers with active international programs and any additional officers or employees of the United States as the Secretary determines necessary for the Board to effectively carry out its functions.

e. Reimbursable costs: The estimate for reimbursable costs, including members' travel expenses, is $10,418.

2. If applicable, the total dollar value of grants expected to be recommended during the fiscal year:

During the FY25 reporting period, FICAB reviewed 143 applications for programs, requesting $52,043,864. NIH is unable to project an amount as the number of awards made are contingent on a variety of factors, such as annual appropriations, number of applications received, NIH research priorities, etc.

3. Criteria for selecting members to ensure the committee has the necessary expertise and fairly balanced membership:

The Board shall consist of not more than 13 members appointed by the Secretary and Federal ex officio members. Non-Federal members must be eligible to serve as Special Government Employees (SGEs) and will serve as SGEs, as defined by 18 U.S.C. 202.

The Chair of the Board will be selected by the Secretary from among the appointed members, except that the Secretary may select the Director, FIC, to be the Chair.

The term of office of the Chair will be two years.

Of the 13 appointed members, 10 shall be selected from among the leading representatives of the health and scientific disciplines relevant to the activities of the FIC, particularly representatives of the biomedical and behavioral fields, such as molecular and cellular biology, neurosciences, basic physiology, epidemiology, immunology, nutrition, public health, economics, and demography. Three members shall be appointed by the Secretary from the general public and shall include leaders in the fields of health-related enterprises such as pharmaceutical or life insurance companies, voluntary organizations committed to betterment of public health, international health, and international health law.

Non-Federal members will be invited to serve for overlapping four-year terms, except that any member appointed to fill a vacancy for an unexpired term will be appointed for the remainder of that term. The Secretary shall make appointments in such a manner as to ensure that the terms of the appointed members do not all expire in the same year. An appointed member may serve 180 days after the expiration of that member's term if a successor has not taken office. A member who has been appointed for a term of four years may not be reappointed to this Board before two years from the date of expiration of that member's term of office.

Nonvoting ex officio members will include the Directors of 2 NIH institutes or centers with active international programs and any additional officers or employees of the United States as the Secretary determines necessary for the Board to effectively carry out its functions.

4. List of all other Federal advisory committees of the agency:

- Advisory Committee on Research on Women's Health
- Advisory Committee to the Director, National Institutes of Health
- Advisory Council on Parkinson's Research, Care and Services
- Aging and Neurodegeneration Integrated Review Group
- AIDS Research Advisory Committee, NIAID