testing as our health care delivery

systems moves toward managed care. The cost to the respondents is \$0.

Respondents	No. of respondents	No. of re- sponses/re- spondent (in hrs.)	Total bur- den (in hrs.)
PPM Certified Laboratories	1,178	1	1 1.178
Total			1,176

Dated: May 14, 1997.

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97-13142 Filed 5-19-97; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 96N-0402]

Agency Information Collection Activities; Announcement of OMB Approval

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a collection of information entitled, "Blood Establishment and Product Listing," has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. This document announces the OMB approval number.

FOR FURTHER INFORMATION CONTACT: Margaret R. Wolff, Office of Information Resources Management (HFA–250), Food and Drug Administration, 5600 Fishers Lane, rm. 16B–19, Rockville, MD 20857, 301–827–1223.

SUPPLEMENTARY INFORMATION: In the Federal Register of March 13, 1997 (62) FR 11898), the agency announced that the proposed information collection had been submitted to OMB for review and clearance under section 3507 of the Paperwork Reduction Act of 1995 (44) U.S.C. 3507). OMB has now approved the information collection and has assigned OMB control number 0910- $005\overline{2}$. The approval expires on April 30, 2000. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Dated: May 13, 1997.

William K. Hubbard,

Associate Commissioner for Policy Coordination.

[FR Doc. 97–13152 Filed 5–19–97; 8:45 am] BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Council; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), announcement is made of the following National Advisory body scheduled to meet during the month of June, 1997.

Name: Advisory Commission on Childhood Vaccines (ACCV).

Date and Time: June 11, 1997; 9 a.m.—5 p.m.; June 12, 1997; 9 a.m.—12 noon.

Place: Parklawn Building, Conference Room G, 5600 Fishers Lane, Rockville, Maryland 20857.

The meeting is open to the public. The full Commission will meet on Wednesday, June 11 from 9 a.m. to 5 p.m. and Thursday, June 12 from 9 a.m. to 12

Agenda: Agenda items will include, but not be limited to: a report from the ACCV Subcommittee on Vaccine Safety, a review of section 314 activities and an update on new vaccines for licensure, and routine Program reports

Public comment will be permitted before lunch and at the end of the Commission meeting on June 11, and before adjournment of the meeting on June 12. Oral presentations will be limited to 5 minutes per public speaker.

Persons interested in providing an oral presentation should submit a written request, along with a copy of their presentation to: Ms. Melissa Palmer, Principal Staff Liaison, Division of Vaccine Injury Compensation, Bureau of Health Professions, Health Resources and Services Administration, Room 8A-35, 5600 Fishers Lane, Rockville, MD 20857, Telephone (301) 443-6593. Requests should contain the name, address, telephone number, and any business or professional affiliation of the person desiring to make an oral presentation. Groups having similar interests are requested to combine their comments and present them through a single representative. The allocation of time

may be adjusted to accommodate the level of expressed interest. The Division of Vaccine Injury Compensation Program will notify each presenter by mail or telephone of their assigned presentation time. Persons who do not file an advance request for presentation, but desire to make an oral statement, may sign-up in Conference Room G on June 11–12. These persons will be allocated time as time permits.

Anyone requiring information regarding the Commission should contact Ms. Palmer.

Agenda Items are subject to change as priorities dictate.

Dated: May 14, 1997.

J. Henry Montes,

Director, Office of Policy and Information Coordination, Health Resources and Services Administration.

[FR Doc. 97–13154 Filed 5–19–97; 8:45 am] BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Statement of Organization, Functions and Delegations of Authority

This notice amends Part R of the Statement of Organization Functions and Delegations of Authority of the Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA) as most recently amended at 60 FR 56605, November 6, 1995 and the Office of the Administrator as last amended (61 FR 65062-65 dated December 10, 1996). This notice is to revise the functional statement for the Office of the Administrator. We are also announcing several significant administrative actions: Three centers will operate from the Immediate Office of the Administrator: the Center for Managed Care, the Center for Quality, and the Center for Public Health Practice. In addition, to further strengthen certain important aspects of the Agency's activities, three senior advisors will report to the Administrator: Senior Advisor for International Health, Senior Advisor for Special Initiatives, and Senior Advisor for Women's Health. Although not part of the formal

organizational structure, these centers and advisors provide a flexible, interim mechanism for HRSA to focus significant projects and crosscutting efforts. Should we find that permanent organizational structures are necessary, we will establish such structures in future notices. Finally, we are changing the title of the officials who manage our four program bureaus from "Bureau Director" to "Associate Administrator" to reflect their status as a critical part of the corporate HRSA organization.

Section RA-00, Mission

The Health Resources and Services Administration (HRSA) directs national health programs which improve the health of the Nation by assuring quality health care to underserved, vulnerable and special-need populations and by promoting appropriate health professions workforce capacity and practice, particularly in primary care and public health.

Make the following changes:

Section RA-10 Organization

The Office of the Administrator is headed by the Administrator, Health Resources and Services Administration (OA) who reports directly to the Secretary. The OA includes the following components:

- (1) Office of the Administrator (R);
- (2) Office of Equal Opportunity and Civil Rights (RA2);
- (3) Office of Planning, Evaluation and Legislation (RA5);
- (4) Office of Communications (RA6);
- (5) Office of Minority Health (RA9); and
- (6) AIDS Program Office (RAA)

A. Amend the functional statement for the Immediate Office of the Administrator.

Immediate Office of the Administrator (RA)

Leads and directs programs and activities of the Agency and advises the Office of the Secretary of Health and Human Services on policy matters concerning them; (2) provides consultation and assistance to senior Agency officials and others on clinical and health professional issues; (3) serves as the Agency's focal point on efforts to strengthen the practice of public health as it pertains to the HRSA mission; (4) establishes and maintains communications with health organizations in the public and private sectors to support the mission of HRSA; (5) coordinates the Agency's international health activities; and (6) manages the Agency's women's health activities.

Office of Equal Opportunity and Civil Rights (RA2)

Directs, coordinates, develops, and administers the Agency's equal opportunity, and civil rights activities. Specifically: (1) Provides advice, counsel, and recommendations to Agency personnel, including the field offices on equal opportunity and civil rights and represents HRSA in all EEO areas; (2) administers affirmative action programs designed to ensure equality of opportunity in employment; (3) manages the civil service complaints system and prepares final Agency decisions; (4) manages the complaints system for Commissioned Corps personnel under provisions of Public Health Service Personnel Instruction 6 and issues proposed dispositions; (5) develops and directs implementation of the requirements of Section 504 of the Rehabilitation Act of 1973, Title VI of the Civil Rights Act of 1964, the Age Discrimination Act of 1975 and the Americans With Disabilities Act, as they apply to recipients of HRSA funds; (6) provides technical assistance and guidance to the Agency on developing education and training programs regarding equal opportunity and civil rights; (7) promotes the awarding of contracts under Section 8(a) of the Small Business Act which pertains to minorities and women; (8) approves settlement agreements and attorney fees; and (9) applies all applicable laws, guidelines, rules and regulations in accordance with those of the Office of Equal Employment Opportunity and Civil Rights at the Department.

Office of Planning, Evaluation and Legislation (RA5)

Serves as the Administrator's primary staff element and principal source of advice on program planning, program evaluation, and legislative affairs; (2) develops the long-range program plan for the Agency; (3) develops the Agency's strategic plan encompassing its long-range goals, objectives and priorities; (4) directs all activities within the Agency which compare the costs of the Agency's programs with their benefits; (5) develops and implements a comprehensive evaluation program; (6) conducts policy analyses and develops policy positions in programmatic areas for HRSA; (7) directs the legislative affairs of the Agency, including the development of legislative proposals and a legislative program; (8) develops and coordinates the Agency's health services research plan; (9) directs performance measurement activities, including technical assistance and standards development and assessment;

(10) coordinates the program data activities across the Agency, including the design and management of program tracking and surveillance; and (11) directs and coordinates disease prevention and health promotion activities across the Agency.

Office of Communications (RA6)

Provides leadership and general policy and program direction for, and conducts and coordinates communications and public affairs activities of the Agency; (2) serves as focal point for coordination of Agency communications activities with those of other health agencies within the Department of Health and Human Services and with field, State, local, voluntary and professional organizations; (3) develops and implements national communications initiatives to inform and educate the public, health care professionals, policy makers and the media; (4) researches, writes and prepares speeches and audiovisual presentations for the Administrator; (5) provides communication and public affairs expertise and staff advice and support to the Administrator in program and policy formulations and execution consistent with policy direction established by the Assistant Secretary for Public Affairs; (6) develops and implements policies and procedures related to external media relations and internal employee communications including those for the development, review, processing, quality control, and dissemination of Agency communications materials, including exhibits and those disseminated electronically; (7) serves as Communications and Public Affairs Officer for the Agency including establishment and maintenance of productive relationships with communications media; and (8) coordinates the implementation of the Freedom of Information Act for the Agency.

Office of Minority Health (RA9)

Serves as the principal advisor and coordinator to the agency for special needs of minority and disadvantaged populations, including advice on committee membership; (2) establishes short-term and long-range objectives for health activities addressing minority and disadvantaged populations; (3) participates in the organization and the planning of specific activities to meet minority health needs and collaborates with the Agency budget officials to assure an appropriate share of funds is devoted to minority health programs; (4) consults with public and private sector

agencies and organizations to assure minority health issues are addressed; (5) participates in the focus of activities and objectives in assuring equity in access to resources and health careers for minorities and the disadvantaged; (6) establishes and manages an agencywide data collection system for minority health activities and initiatives including White House initiatives, Historically Black Colleges and Universities, Educational Excellence for Hispanic Americans, and Departmental initiatives; (7) reviews inter/intra-Agency agreements related to racial/ ethnic minority and disadvantaged populations; (8) participates in the formulation of HRSA's goals, policies, legislative proposals, priorities, and strategies, as they affect professional organizations and institutions of higher education (medical, public health, etc.) involved in or concerned with the delivery of health services to minorities and disadvantaged populations; and (9) links HRSA minority and disadvantaged program efforts to potential partners at the Federal, State and local levels and provides agencywide expertise on the development of culturally appropriate programs and materials.

AIDS Program Office (RAA)

Coordinates all AIDS-related activities within the Agency; (2) advises the Administrator on policy, clinical, and educational issues pertaining to the administration of HRSA's AIDS program; (3) keeps the Administrator informed of any difficulties arising within or outside HRSA that might adversely affect the Agency's ability to carry out its AIDS responsibilities; (4) coordinates the formulation of an overall strategy and policy for the HRSA AIDS programs; (5) working with the Office of Planning, Evaluation and Legislation, coordinates the preparation of HRSA's AIDS-related programmatic, budgetary and legislative proposals; (6) monitors and analyzes AIDS-related policy and legislative developments for their impact on HRSA's AIDS activities; (7) reviews AIDS-related program activities to determine their consistency with established policies; (8) coordinates HRSA's comments on AIDSrelated reports, position papers, legislative proposals including requests from other agencies; (9) represents the Agency and the Department at AIDSrelated meetings, conferences, task forces etc.; (10) plans and carries out special AIDS-related assignments for the Administrator.

2. Abolish the Office of Public Health Affairs (RA8), and incorporate its functions into the Immediate Office of the Administrator (RA).

3. Amend the functional statement for the Office of Management and Program Support; abolish the Office of Policy and Information Coordination (RA3) and reestablish it as the Division of Policy, Review and Coordination (RS7) by inserting its functional statement after the Office of Information Resources Management (RS6) in the Office of Management and Program Support.

Office of Management and Program Support (RS)

Provides agencywide leadership, program direction, and coordination to all phases of management; (2) provides management expertise and staff advice and support to the Administrator in program and policy formulation and execution; (3) plans, directs, and coordinates the Agency's activities in the areas of administrative management, financial management, human resources management, debt management, information resources management, grants and contracts management, procurement, real and personal property accountability and management, and administrative services; (4) directs and coordinates the development of policy and regulations; (5) oversees the development of annual operating objectives and coordinates HRSA work planning and appraisals; (6) serves as the Agency's focal point for field programs and activities except those field functions of the Division of Federal Occupational Health; (7) administers the Agency's Executive Secretariat and Committee Management functions; (8) coordinates the Department's tort claims panel and associated activities; and (9) administers the Agency's internal controls and integrity activities.

Division of Policy Review and Coordination (RS7)

Advises the Administrator and other key Agency officials on policy issues and assists in the identification and resolution of policy issues and problems; (2) establishes and maintains review and tracking mechanisms and systems that provide agencywide coordination and clearance of policies, regulations and guidelines; (3) contributes to the analysis, development and implementation of agencywide programs and policies through coordination with relevant Agency program components and other related sources; (4) plans, organizes and directs the Agency's Executive Secretariat with primary responsibility for preparation and management of written policy and other routine communications to and from the Administrator; (5) coordinates the preparation of proposed rules and regulations relating to Agency programs

and coordinates Agency review and comment on other Department regulations that may affect the Agency's programs; and (6) oversees and coordinates the committee management system of the Agency.

4. Amend the Office of Field Coordination by establishing the HRSA

Field structure.

Office of Field Coordination (RS5)

Serves as the Agency's focal point for Field programs and activities. Specifically: (1) oversees and manages HRSA activities in the field; (2) advises the Administrator on appropriate resource allocation for field activities; (3) at the direction of the Administrator, assists in the implementation and evaluation of HRSA programs in the field through coordination of activities, and assessing the effectiveness of programs to identify opportunities for improving policies and service delivery systems; (4) develops and implements activities in the field designed to improve customer service and relationships; (5) at the direction of the Administrator, develops and coordinates the field implementation of special program initiatives which involve multiple HRSA field components and/or multiple HRSA programs; (6) serves as field liaison to the Administrator, Associate Administrators, State and local health officials as well as private and professional organizations; (7) acts as liaison to provide administrative and financial support services to HRSA field components; and (8) exercises line management authority as delegated.

5. Under Part R, Health Resources and Services Administration, establish a new chapter HRSA Field Offices RSD, to read as follows:

Section RSD-00 Mission—The HRSA Field Offices support HRSA's mission by providing direct support to HRSA's program operations and carrying out crosscutting priorities and activities.

crosscutting priorities and activities. Section RSD-10 Organization. The Health Resources and Services Administration Field Offices consist of:

 HRSA Field Offices (RSDI—RSDX). The ten HRSA Field Offices will be organizationally configured in 5 clusters.

Section RSD-20 Functions. The Field Offices carry out the following responsibilities: administer HRSA field health programs and activities to assure a coordinated field effort in support of national health policies and State and local needs within the region; (2) assess regional health requirements, assuring integration of HRSA health programs, and addressing crosscutting program issues and initiatives to achieve

program goals; (3) provide a HRSA focal point for responding to the needs of State and local governments, community agencies, and others involved in the planning or provision of general health; (4) support intergovernmental activities and respond to health issues of State and local concerns; (5) administer health activities and programs to provide for prevention of health problems; and (6) assure access to and quality of general health services.

Section R-30 Delegations of Authority. All delegations and redelegations of authority which were in effect immediately prior to the effective date hereof, have been continued in effect in them or their successors pending further redelegation.

This reorganization is effective upon date of signature.

Dated: May 15, 1997.

Claude Earl Fox,

Administrator.

[FR Doc. 97-13153 Filed 5-19-97; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Dental Research; Notice of a Meeting of the National Advisory Dental Research Council

Pursuant to Pub. L. 92–463, notice is hereby given of a meeting of the National Advisory Dental Research Council, National Institute of Dental Research, on June 10–11, 1997. The meeting of the full Council will be open to the public on June 11 from 8:30 a.m. to approximately 2:30 p.m., Conference Room 6, Sixth Floor, Building 31, National Institutes of Health, Bethesda, Maryland, for general discussion and program presentations. Attendance by the public will be limited to space available.

In accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. and sec. 10(d) of Pub. L. 92-463, the meeting of the Council will be closed to the public on June 10, 1:00 p.m. until recess, for the review, discussion and evaluation of individual grant applications. These applications and information concerning individuals associated with the discussions could reveal confidential trade secrets or commercial property such as patentable material, and personal applications and reports, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Dr. Dushanka V. Kleinman, Executive Secretary, National Advisory Dental Research Council, and Deputy Director, National Institute of Dental Research, National Institutes of Health, Building 31, Room 2C39, Bethesda, Maryland 20892, (telephone (301) 496-9469) will furnish a roster of committee members, a summary of the meeting, and other information pertaining to the meeting upon request. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact the Executive Secretary listed above in advance of the meeting.

(Catalog of Federal Domestic Assistance Program No. 93.121, Oral Diseases and Disorders Research)

Dated: May 14, 1997.

LaVeen Ponds,

Acting Committee Management Officer, NIH. [FR Doc. 97–13213 Filed 5–19–97; 8:45 am] BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Dental Research; Notice of Closed Meeting of the National Institute of Dental Research Special Grants Review Committee

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting:

Name of Committee: National Institute of Dental Research Special Grants Review Committee.

Date: June 12-13, 1997.

Time: 8:30 a.m. to Adjournment.

Place: Gaithersburg Hilton Hotel, 620 Perry

Parkway, Gaithersburg, Maryland 20814. Contact Person: Dr. William Gartland, Scientific Review Administrator, NIDR Special Grants Review Committee, Natcher Building, Room 4AN–38E, Bethesda, MD 20892, (301) 594–2372.

Purpose/Agenda: To review and evaluate grant applications and/or contract proposals.

The meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy. (Catalog of Federal Domestic Assistance Program No. 93.121, Dental Research Institute; National Institutes of Health, HHS)

Dated: May 14, 1997.

LaVeen Ponds,

Acting Committee Management Officer, NIH. [FR Doc. 97–13212 Filed 5–19–97; 8:45 am] BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Dental Research; Notice of Meeting of Board of Scientific Counselors

Pursuant to Public Law 92-463. notice is hereby given of a meeting of the Board of Scientific Counselors, National Institute of Dental Research, on June 5-6, 1997, in Building 30, Trendley Dean Conference Room, National Institutes of Health, Bethesda, Maryland. The meeting will be open to the public from 9:00 a.m. to 5:00 p.m. on June 5 for the Craniofacial and Skeletal Diseases Branch and the Molecular Structural Biology Unit presentations and from 8:30 a.m. to 10:30 a.m. on June 6 for a tour of the facilities and poster presentations. Attendance by the public will be limited to space available.

In accordance with the provisions set forth in sec. 552b(c)(6), Title 5, U.S.C. and sec. 10(d) of Public Law 92-463, the meeting will be closed to the public from 5:00 p.m. until recess on June 5 and from 10:30 a.m. until adjournment on June 6 for the review, discussion, and evaluation of individual programs and projects conducted by the National Institute of Dental Research (NIDR) including consideration of personnel qualifications and performance, the competence of individual investigators, and similar items, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Mr. Brent Jaquet, Director, Office of Planning, Evaluation, and Communications, NIDR, NIH, Building 31, Room 2C34, Bethesda, Maryland 20892 (telephone: 301–496–6705; e-mail: JaquetB@OD31.nidr.nih.gov) will provide a summary of the meeting, roster of committee members and substantive program information. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact the Executive Secretary listed above in advance of the meeting.

(Catalog of Federal Domestic Assistance Program No. 93.121, Oral Diseases and Disorders Research)